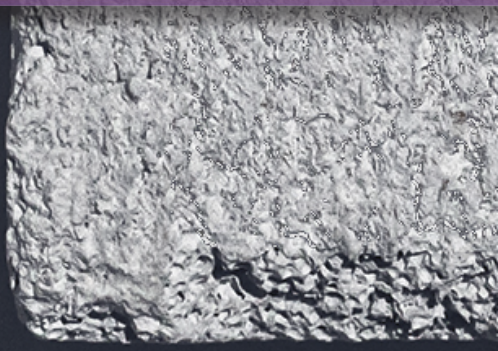
Old Age Between Personal Experience and Social Representation:

From Enlightenment Thought to Modern Attitudes



Edited by Dragica Čeč and Urška Bratož

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CONTENTS

Dragica Čeč, Urška Bratož

Introduction

The initial idea for the volume *"Old Age between Personal Experience and Social Representation: from Enlightenment Thought to Modern Attitudes"* emerged from a research project[1] that addressed many issues related to ageing in the nineteenth century. Yet, as questions opened up regarding the heterogeneity of experiences of old age, differences in the position of women and men in later life, the vulnerability of the elderly in times of crisis, and the hidden ageism embedded in various social and cultural practices, the scope of inquiry expanded and acquired an additional unifying thread—one that numerous historians have highlighted in recent years. More than a decade ago, Lynn A. Botelho wrote: *"I want to argue that we need to make age, and particularly old age, a category of analysis in the study of history,"*[2] a view already articulated earlier by S. Ottaway.[3] Today, (old) age is indeed becoming an important analytical category across various fields of the humanities.[4]

1 "Cultural-historical aspects of senescence: experiences, representations, identities", co-funded by the Slovenian Research and Innovation Agency (ARIS).

2 Botelho, Lynn A.: "Age and History as Categories of Analysis: Refiguring Old Age." *Age Culture Humanities: An Interdisciplinary Journal*, 2014, 1, 199–208.

3 Ottaway, Susannah R.: *The Decline of Life: Old Age in Eighteenth-Century England*. Cambridge: Cambridge University Press, 2004.

4 Čeč, Dragica: "Funkcije preživitka in družbena realnost preživitkarjev." *Glasnik Slovenskega etnološkega društva*, 62, 2023, 2, 31–44; Keber, Katarina: "Ostareli v Ljubljani v 19. stoletju: mortaliteta na primeru Šempetrskega predmestja." *Kronika: časopis za slovensko krajevno zgodovino*, 73, 2025, 2, 393–404; Bratož, Urška: "Podobe starosti v ljudski in uradni medicini 19. stoletja." *Glasnik Slovenskega etnološkega društva*, 62, 2023, 2, 22–30; Bratož, Urška: Epidemija in ostareli: kolera in domet oskrbe v Avstrijskem Primorju. In: *Epidemije in zdravstvo: zgodovinski pogled* (Keber, Katarina, ed.). Ljubljana: Založba ZRC, 2024, 219–232. Čeč, Dragica: "Starostniki na podeželju v 19. stoletju". *Prispevki za novejšo zgodovino,* 64, 1, 142-160.

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Questions of old age and ageing have in recent decades become one of the central research fields in the humanities and social sciences, yet the historical, sociological, literary, and iconographic dimensions of these processes remain fragmented and, in Slovene historiography, still significantly underexplored. The present volume brings these perspectives together in a multilayered narrative that reveals how diverse, contradictory, and culturally conditioned representations of old age were in the European context from the eighteenth century to the present, with particular emphasis on the territory of presentday Slovenia. The gradual increase in life expectancy toward the end of the eighteenth century also created the conditions for more heterogeneous experiences of ageing. Enlightenment thought revived the Ciceronian tradition of the "good old age of the Roman officer," which became intertwined with the emerging ideal of the grandparent. The image of loving grandparents was skilfully integrated into new ideas about childrearing. At the same time, the ageing, declining, and desiccated body was partially freed from its earlier association with sin. The contributors to this volume demonstrate that old age was never a uniform category but rather a complex interplay of biological change, social expectations, moral norms, normative frameworks (especially inheritance practices and, later, retirement), economic conditions, and cultural representations.

If nineteenth-century bourgeois society lamented the loss of the supposedly selfsufficient and solidaristic multigenerational peasant households[5]—structures that were often more utopian ideal than historical reality—and in doing so overlooked the many social problems associated with ageing, contemporary society likewise tends to indulge in similarly utopian notions of a past in which the elderly were few and supposedly did not pose significant political, economic, or social challenges. The first historians to address the history of old age came primarily from three historiographical traditions. Demographic history focused on social structure and family forms or examined institutions, particularly social ones. Equally important was the study of the development of the welfare state and the history of institutions, which was partly connected to it. Within studies of representation, research on the relationship between death and old age, magic and old age, and religion and rites of passage (including rituals of

5 Troyansky, David: *Aging in World History*. New York – London: Routledge, 2015.

the "good death")[6] occupied a central place. Anthropological and cultural interpretations of depictions of the life cycle revealed above all the ideology of intergenerational relations, yet they did not devote the same level of attention to ageing as a distinct life stage as they did to other periods of life.[7] At the same time, scholarship placed strong emphasis on the study of the fluid social and cultural markers that defined the transition into old age—biological, chronological, and functional.[8]

Under the influence of the development of gerontology,[9] particular attention has been devoted to the medical aspects of ageing in the past, to historical ideas of eternal youth and immortality, and less to the cultural representations of knowledge and experience in old age—representations closely connected to questions of authority, power, (social) status, lifestyle, and changes in occupation as work (and thus survival) adapted to the individual's physical decline.[10] With the cultural turn, increasing emphasis has been placed on sources that allow a bottom-up perspective: how people made use of the opportunities offered by social structures, institutions, cultural imaginaries, and rituals; how they perceived their own ageing and life course; how they shaped intergenerational relations and obligations; how they maintained or organised the transfer of property; and what kinds of relationships they preserved, transformed, or newly established within society. Given the plurality of relationships and the postmodern questioning of grand narratives, scholars ask how such complex narratives of old age can be understood and systematised at all. One possible approach lies in the three fields of analysis of ageing experiences promoted by contemporary

6 Thane, Pat (ed.): *The Long History of Old Age*. London: Thames & Hudson, 2005; Troyansky, Aging in World History.

7 Greyerz, Kaspar von: *Passagen und Stationen: Lebensstufen zwischen Mittelalter und Moderne*. Göttingen: Vandenhoeck & Ruprecht, 2010.

8 Thane, Pat: "Social Histories of Old Age and Aging." *Journal of Social History*, 37, 2003, 1, 93–111.

9 Higgs, Paul: Social and Cultural Gerontology and the Importance of the Ageing Body. In: *Old Age before Modernity: Case Studies and Methodological Perspectives, 500 BC–1700 AD* (Neumann, Christian Alexander, ed.). Heidelberg: Heidelberg University Publishing, 2023, 263–278.

10 Ehmer, Josef: Altersbilder im Spannungsfeld von Arbeit und Ruhestand. Historische und aktuelle Perspektiven. In: *Bilder des Alters im Wandel. Historische, interkulturelle, theoretische und aktuelle Perspektiven* (Ehmer Josef, Höffe, Otfried, eds.). Stuttgart: Wissenschaftliche Verlagsgesellschaft, 2009, 209–234; Ehmer, Josef: The "Life Stairs": Aging, Generational Relations, and Small Commodity Production in Central Europe. In: *Aging and Generational Relations over the Life Course* (Hareven, Tamara, ed.). Berlin: Walter de Gruyter, 1996, 53–74.

gerontology, which focus on inclusion (intergenerational and work relations), wellbeing (ranging from property management and mere survival to social institutions), and the status of the individual.[11] To these, analyses of collective and individual emotions must certainly be added, as they significantly shape all three criteria. To be old and poor was a fate to be feared and a state to be avoided.

Historical studies have confirmed that certain biological and physical characteristics of the ageing body have manifested between the ages of sixty and seventy for several centuries, while in some individuals—due to genetic and environmental factors and the nature of their work—these changes appeared somewhat earlier. Some contributions[12] point out that both nineteenth-century bourgeois society and contemporary society have required the elderly in the organisation of family and individual life, while they have also been valued for their economic power, experience, social networks, and the influence that followed from these. For a very long time, as bearers of memory, they played an important role in the legal and economic relations of the community as a whole. At the same time, society enveloped this age group in an entire arsenal of stereotypes that could significantly affect an individual's position within society and the community, their relationships, self-representations, and ultimately their life and often even their survival.[13] These stereotypes and cultural practices reveal deeply rooted collective fears associated with one's own decline and powerlessness, which also shape ambivalent attitudes toward intergenerational and other forms of solidarity—attitudes that, under the influence of the French Enlightenment, shifted from ideals of religious charity toward ideals of the social good.[14] They are also linked to centuries old beliefs that the sight of a damaged or deformed body could affect the health of the "healthy," to attitudes toward the ageing body, which, in the Augustinian sense, represented a symbol of worldliness, sin, and decay, and to understandings

11 Johnson, Paul: Historical Readings of Old Age and Ageing. In: *Old Age from Antiquity to Post-Modernity* (Johnson, Paul, Thane, Pat, eds.). London – New York: Routledge, 1998, 1–18.

12 F.e. Čeč, "Funkcije preživitka"; Bratož, "Podobe starosti".

13 Thane, *The Long History of Old Age*.

14 Čeč, Dragica: "Srce vsakega je treba pripraviti za dejavno udejanjanje zapovedi ljubezni do bližnjega": Začetki sistemske oskrbe revnih in pomen kulture osebne dobrodelnosti. In: *Pomisli na jutri: o zgodovini (samo)odgovornosti* (Studen, Andrej, ed.). Ljubljana: Inštitut za novejšo zgodovino, 2012, 37–70.

of the boundary between this world and the next, and of those who were perceived as closer to that boundary. From the late eighteenth century onward, the ageing process became increasingly concealed and pushed aside through the medicalisation of life, through social isolation and confinement within total institutions, through social marginalisation, and through ideas of progress and self-responsibility. At the same time, new images emerged of the "iron" elderly—those who, until their final days, actively resisted the inexorable mechanisms of biological decline.[15] The power of the elderly within the family and household peaked and waned in relation to the structure of living arrangements and was far from a fixed institution of family life.[16]

Nineteenth-century bourgeois society developed its own behavioural code, while political and economic changes highlighted the ways in which certain social groups identified with a particular period and age cohort (generation). Within this framework, specific values played a central role—values closely tied to old age and to the bourgeois understanding of it. Old age stood in a particularly strong relationship to key bourgeois ideals such as progress and a focus on work, rationality, and attitudes toward the body and health. These values could function as instruments of social control and discipline, while the bourgeoisie, in its dominant position, simultaneously created and transmitted certain stereotypical—often negative—images of old age. Enlightenment commitments to reason and empirical inquiry shaped bourgeois attitudes toward medicine, technology, and other aspects of everyday life. This produced various imaginaries of ageing that were linked to the treatment and politics of one's own and other social groups (from the perspective of dominant classes, especially in relation to workers or rural populations). In the bourgeois code, old age—particularly among the lower social strata—was often equated with poverty and labelled as "problematic," marked by a wide range of negative connotations: as a threat to social order, public health, and morality, and as a source of numerous stereotypes and forms of age-based discrimination. At the

15 Makarovič, Marija: "Kultura na vasi in njena vloga v razvoju podeželja." *Glasnik Slovenskega etnološkega društva*, 34, 1994, 4, 25; Fevert, Ute: *Emotions in History – Lost and Found*. Budapest: Central European University Press, 2011.

16 Botelho, A. Lynn: The 17th century. In: *The Long History of Old Age* (Thane, Pat, ed.). London: Thames & Hudson, 2005, 153.

same time, different—and at times diametrically opposed—imaginaries and stereotypes of ageing and the elderly could be shaped by other identities of the ageing individual. Alongside gender as a central category, family, professional, political, religious, and other identities also played a role, and contributors may well address these dimensions. In the nineteenth century, such identities could influence even more strongly than later the reevaluation of the relationships between chronological, functional, and biological understandings of old age. A distinct field is formed by the imaginaries of old age in political discourse. As tradition and heritage, old age served as an important point of identification in the construction of national identity—one of the key bourgeois identities—while at the same time it could be perceived as a major obstacle to progress. Finally, it is necessary to address what has been overlooked, concealed, or silenced—dimensions that are all the more important in the context of the social stigmatisation of old age.

Although it is generally assumed that a person retained their social status as long as they remained (professionally and functionally) active, this was not a universal rule. One notable exception were certain widows, especially wealthier ones. The diary of the Swiss woman Anna Maria Preiswerk-Iselin, analysed in Selina Bentsch's contribution, reveals how an older woman around 1800 could, despite social expectations of withdrawal into privacy, develop her own strategies for maintaining social inclusion, usefulness, and personal selffulfilment. Her notes expose the tension between the norms of bourgeois society and individual attempts to turn old age into a space of autonomy, social prestige, and proactive engagement rather than mere retreat—an issue closely connected in this period with the emerging acceptance of the idea of retirement. Similarly, individual life stories drawn from other types of sources (for example, in the context of poor relief) show the highly diverse experiences of old age among the most marginalised individuals. These cases demonstrate that old age was not a

uniform or predictable life stage but one shaped by social position, economic resources, institutional frameworks, and personal agency.[17]

The contribution by Dragica Čeč seeks to uncover the complexity of experiences of old age within one of the most marginalised, yet, due to the recording of life stories and their administrative handling, highly revealing groups. Among the recipients of poor relief—the most widespread form of assistance to the poor—in the regional centre of Ljubljana in the first half of the nineteenth century, the majority were elderly, frail, or very old individuals. As in other contexts, a strong preference to remain in an independent household (most often as lodgers) clearly emerges. At the same time, the findings confirm the hypothesis that a persistent belief continued to shape attitudes toward care: namely, that those who required care were only the *very old*, the *old and very poor*, or the *old and infirm*.[18]

The contributions also indicate that understandings of old age in the past were deeply embedded in discourses on health and the prolongation of life. As Filip Draženović shows, eighteenth-century British health manuals (and similar trends existed elsewhere)[19] treated old age as a natural and inevitable condition that could be managed primarily through moderation, self-discipline, and moral virtue—in short, through a specific lifestyle. Yet this ideal was difficult to attain for less affluent elderly people, for whom such manuals were not even intended.

The history of old age in the nineteenth century reveals yet another important dimension: old age as an economic and social burden. Not only in the Austrian Littoral, the southwestern part of the Austrian Monarchy (as shown in the contribution of Urška Bratož), but also in many other

17 Čeč, Dragica: Podobe starosti v začetku 19. stoletja. In: *Starost – izzivi historičnega raziskovanja* (Šorn, Mojca, ed.). Ljubljana: Inštitut za novejšo zgodovino, 2017, 11–33; Bratož, Urška: Staro telo: medicinski pogled 19. stoletja. In: *10. Istarski povijesni biennale: Corpus, Carnalitas – o tijelu i tjelesnosti u povijesti na jadranskom prostoru: zbornik radova s međunarodnog znanstvenog skupa, sv. 10.* (Mogorović Crljenko, Marija, Uljančić-Vekić, Elena, eds.). Poreč: Zavičajni muzej Poreštine, Pula: Sveučilište Jurja Dobrile, Filozofski fakultet, Pazin: Državni arhiv, 2023, 102–114.

18 Troyansky, David: The 18th Century. In: *The Long History of Old Age* (Thane, Pat, ed.). London: Thames & Hudson, 2005, 176.

19 Remec, Meta: "'Živeti dolgo ali živeti srečno?' Christoph Wilhelm Hufeland in njegov vpliv na dojemanje starosti in staranja v dolgem 19. stoletju." *Glasnik Slovenskega etnološkega društva*, 6, 2023, 2, 7–21; Remec, Meta: "'Kako postanemo stari?': hrepenenje po mladosti, zdravju in dolgem življenju v 19. in 20. stoletju". *Prispevki za novejšo zgodovino*, 64, 2024, 1, 161–183.

regions, old age was frequently associated with poverty and dependence on family or social institutions. Such dependence often stemmed from an inability to work and from physical frailty, which could itself be the result of long years of strenuous physical labour. All of this shaped perceptions and stereotypes of old age, yet it did not lead to systematic measures to address social deprivation in later life.[20]

Otto Gerdina, in his contribution—which offers a tool for examining ageism across historical periods—presents the forms through which ageism manifests itself via different types of stereotypical content. Although these models cannot be directly applied to the past, understanding them can serve as a useful lens for observing historical attitudes toward old age.

Visual representations of old age likewise reveal the diverse meanings that society attributed to ageing. Frail elderly figures of both sexes were a common motif in sentimental painting, yet in the oeuvre of Ivana Kobilca (especially from the 1880s and 1890s), analysed by Tomislav Vignjević, we find an exceptional series of studies of older people that, in their psychological depth and realistic treatment, differ markedly from the sentimental or anecdotal depictions characteristic of nineteenth-century Slovene art and widespread in Europe from the eighteenth century onward. Kobilca's works do not idealise old age; rather, through painted faces that reflect the stories of past lives, they present it as a profoundly human and individualised experience while preserving the dignity of the person portrayed.

Cultural narratives of old age also emerge clearly in literature. Urša Marinšek's analysis of three contemporary Slovene novels set in residential care homes shows how literary representations intertwine narratives of decline, burden, and resistance to ageing. These narratives do not merely shape fictional worlds; they also influence broader social understandings of institutional care and the position of older people in today's society.

20 Čeč, Dragica: "Donacije Janeza Nepomuka Kalistra – tržaškega 'self-made mana'- in njegove vdove Marije v meščanski kulturi darovanja." *Annales. Series historia et sociologia*, 33, 2023, 1, 101–124; Čeč, Dragica: "Revni- ostareli v času kriz: družba na dlani." *Arhivi: glasilo Arhivskega društva in arhivov Slovenije*, 43, 2020, 2, 307–329.

A common thread running through all contributions in this volume is the recognition that old age is not a biological fact but a culturally and socially constructed category that is continually reshaped over time, and that perceptions and representations of old age and ageing are plural and heterogeneous. The volume ultimately opens a space for reflecting on how past conceptions of old age have shaped contemporary understandings of ageing—and how a historical perspective can contribute to a more inclusive and less stereotypical treatment of older people in contemporary society.

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Selina Bentsch

"How I shudder at the thought of becoming a useless old woman": Strategies for Coping with Old Age and Aging Processes in the Diaries of a Swiss Woman Anna Maria Preiswerk-Iselin (1758–1840)

During the 1800s, elderly women were often expected to take on the role of grandmother, depending on their social standing and familial status.[1] The example of the wealthy Basel citizen Anna Maria Preiswerk-Iselin (1758–1840) shows that ageing women in Switzerland around 1800 were not necessarily satisfied with exclusively fulfilling this role. More specifically, the aim of this paper is to analyze the alternative strategies ageing women developed in order to remain a useful member of society and at the same time keep themselves occupied in a meaningful way. This question is addressed using Reinhard Koselleck's concept of temporality and sense of time around 1800,[2] as well as the concept of increasing autonomy from

1 Original title quotation: "Wie bebe ich vor dem Gedanken zurück, ein altes unnützes Weib zu werden". StABS, PA 511a (304-03-04), Tagebücher der Anna Maria Preiswerk-Iselin, book 23, 28 May 1826, p. 8.

2 Cf. Koselleck, Reinhart: *Vergangene Zukunft. Zur Semantik geschichtlicher Zeiten.* Frankfurt a.M.: Suhrkamp, 1979 (Theorie); see also: Jung, Theo: Zeitgeist im langen 18. Jarhundert. Dimensionen eines umstrittenes Begriffs. In: *Frühe Neue Zeiten* (Landwehr, Achim, ed.). s.l.: transcript, 2014, 319–356; Jung, Theo: "Das Neue der Neuzeit ist ihre Zeit. Reinhart Kosellecks Theorie der Verzeitlichung und ihre Kritiker". In: *Moderne: Kulturwissenschaftliches Jahrbuch*, 2011, 172–184.

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established norms and social obligations in old age.[3] To contextualize the findings, contemporary social norms and bourgeois sociability practices are taken into consideration.

The main source used for this work are the extensive diaries of Anna Maria Preiswerk-Iselin, which she wrote over a period of 44 years. She began writing at the age of 37 and continued until she was 81. The author died just a few months after her last diary entry. The 32 small-format diaries comprise around 1200 pages. They are made of paper and were written in iron gall ink, in the German Kurrent script. The ink and script were both commonly used at the time. Preiswerk-Iselin did not write in her notebooks every day, but only when events in her life seemed worth writing down. Her topics were varied and ranged from descriptions of visits and journeys, family matters, such as weddings, births, conflicts, illnesses and deaths, to political and religious criticism. Central themes for Preiswerk-Iselin were also self-reflection, her own infirmities and shortcomings and coming to terms with the grief over the loss of her children. She was also concerned with female education and noted down numerous references and reflections on literature she had read. Unsurprisingly for her time and in the Basel context, the entire diary is permeated by religious views. The diaries were passed down through the family line of Preiswerk-Iselin's daughter, Sophia Vischer-Preiswerk (1787–1859), and thus found their way into the Staatsarchiv Basel-Stadt (Basel State Archives, StABS in short), where they are now kept.[4]

Current research on the early modern period is now increasingly focusing on female writing and, in particular, female self-testimonies. Further, medical history has already dealt with the menopausal phase, but has largely

3 Cf. Rosenmayr, Leopold: Lebensalter und Kultur. Ein Versuch vergleichender Soziobiologie und Soziologie. In: *Gerontologie und Sozialgeschichte. Wege zu einer historischen Betrachtung des Alters* (Conrad, Christoph, Kondratowitz, Hans-Joachim von, eds.). Berlin: Deutsches Zentrum für Altersfragen, 1983, 54.

4 The diaries can be viewed online: https://dls.staatsarchiv.bs.ch/records/435144. There is also an online edition of the diaries which has been published under the lead of Prof. Dr. Claudia Opitz-Belakhal with research assistants Selina Bentsch and Anna Christina Münch. The online edition is based on a transcription by lic. phil. Esther Baur and research assistant Andreas Berger. It is not currently available to the public, but will be appearing on the website of the Basel State Archives (Staatsarchiv Basel-Stadt).

ignored the 'postmenopausal' woman.[5] In historical research, women already played a role as widows, for example, or regarding their educational background.[6] Old age has also been a topic of historical research for several decades and there has been a growing number of corresponding studies on the treatment and experience of ageing people in the early modern period. However, this mainly relates to English and some French sources.[7] In German-speaking countries, however, old age and especially ageing women have so far remained a marginal phenomenon. It is therefore no coincidence that Kaspar von Greyerz stated that "the history of old age has yet to be written".[8] This article addresses the mentioned gap in research on specifically female ageing in the German-speaking early modern period and endeavors to help close it.

In the following, I will firstly look at Preiswerk-Iselin's family and local context and at her as a person and diarist. This is essential to understand how she perceived herself as an aging woman and how she was regarded by others. It must also be clarified at what point she considered herself to be 'old' and how this can be linked to the common notions of old age at the time. Her changed social behavior in old age will then be examined in the context of bourgeois socializing practices. It is shown what social and economic conditions she faced in relation to her status and gender and what strategies she developed to maintain her place and status in bourgeois society in Basel. This is illustrated in particular by a project close to Preiswerk-Iselin's heart and on which she worked intensively during her later years: the construction of a small girls' school. Although she pursued

5 Schäfer, Daniel: Alte Frau = Alter Mann? Die Wahrnehmung von Matronen in der medizinischen Fachprosa des 18. Jahrhunderts, in: *Alter und Geschlecht. Repräsentationen, Geschichten und Theorien des Alter(n)s* (Hartung, Heike, ed.). Bielefeld: Transcript, 2005, 135–154, specifically p. 136.

6 Research on early modern widowhood: Moring, Beatrice; Wall, Richard: *Widows in European Economy and Society (1600-1920)*. Woodbridge: The Boydell Press, 2017; research on early modern female education: Kleinau, Elke, Opitz-Belakhal, Claudia (eds.): *Geschichte der Mädchen- und Frauenbildung*. Frankfurt a. M., New York: Campus Verlag, 1996.

7 Stearns, Peter N. (ed.): *Old Age in Preindustrial Society*. New York, London: Holmes and Meier, 1982; Botelho, Lynn, Ottaway, Susannah R., Kugler, Anne (eds.): *The History of Old Age in England 1600–1800*. London: Routledge, 2008, 2009; Thane, Pat (ed.): *A History of Old Age*. Los Angeles: J. Paul Getty Museum, 2005; Troyansky, David: *Aging in World History*. New York, London: Routledge, 2016.

8 Von Greyerz, Kaspar: *Passagen und Stationen. Lebensstufen zwischen Mittelalter und Moderne*. Göttingen: Vandenhoek & Ruprecht, 2010, 45.

the project for years, it ultimately failed. The reasons for this failure and a reconnection to female aging in Basel form the conclusion of this analysis.

This article is based on my completed but not yet published dissertation entitled *A female perspective on age(ing). Perception of and coping with ageing processes in the diaries of Anna Maria Preiswerk-Iselin (1758–1840).*[9] It touches upon several aspects of the dissertation in a condensed form. Since Preiswerk-Iselin was predominantly German-speaking, apart from some French passages, the quotations from her diaries are given in the original language. This is done to show her characteristic style of writing and specific use of words and metaphors. An English translation is provided in the footnotes, for reasons of comprehension. The only exception to this procedure is the title of this article.[10]

Anna Maria Preiswerk-Iselin: Family and person in the context of Basel

Anna Maria Preiswerk-Iselin was born as the second of nine children of the philosopher and council clerk Isaak Iselin and his wife Helena Forcart. Iselin was very concerned about his children's education. While his sons attended public schools, he tutored his daughters independently at home. His daughter and diary author Anna Maria admired her father for his efforts to educate her and her sisters, as is visible in her writings. Nevertheless, she would have liked to learn even more and often felt insufficient in higher educational matters. In the context of female education, which will be addressed in more detail later, Preiswerk-Iselin noted in her diary: "Nicht meine Bildung, meine Kenntnisse ihnen beyzubringen, den da fühle ich wohl daß mir beynahe alles fehlt".[11] Isaak Iselin taught his daughters French, for example, which was the language of education in Switzerland

9 Original Title: *Alter(n) aus weiblicher Sicht. Wahrnehmung und Bewältigung von Alterungsprozessen in den Tagebüchern der Anna Maria Preiswerk-Iselin (1758–1840)*. The dissertation was written at and accepted by the Faculty of Philosophy and History at the University of Basel, Switzerland.

10 Concepts in German research literature are also given in the original language with a translation in parentheses. Longer quotes are given in English to fit the sentence structure. The original quotes will be provided in the footnotes.

11 Translation: "Not to bring them my education, my knowledge, because I feel that I lack almost everything". StABS, PA 511a (304-03-04), Tagebücher der Anna Maria Preiswerk-Iselin, book 12, 1815, p. 12.

at the time – but Latin was exclusively reserved for boys. The family was not particularly wealthy but belonged to a circle of long-residing Basel families. This circle included families who had held citizenship for several generations. Political offices were almost exclusively held by male members of this group. It often happened that older men from Basel's upper class moved into politics after their professional careers. Preiswerk-Iselin's father as well as her sons and sons-in-law were all members of the Basel Council, the city's government.

At the age of eighteen, Preiswerk-Iselin married the twenty-one-year-old silk merchant and later ribbon manufacturer Niklaus Preiswerk. It was a marriage befitting their rank. Both spouses came from the elite Basel circle mentioned previously. As a merchant, Niklaus Preiswerk was quite wealthy. However, he had always criticized how little money his wife brought into the marriage. At least, that is what his wife complained about in her diaries: "Wenn ich's oft hart hören u fühlen mußte daß ich kein Vermögen zugebracht hätte".[12] Although the marriage began quite harmoniously, in the end it was anything but happy. In retrospect, Preiswerk-Iselin even went so far as to metaphorically describe her marriage contract as "Kaufbrief der scklaverei".[13]

At the age of 57, Preiswerk-Iselin did not consider remarrying, as was customary for her social standing. She had inherited 50% of her husband's assets in accordance with Basel law and was therefore not financially dependent on male support. The rest of the inheritance was divided between the children. Moreover, these children were already long grown up and independent. Young children were often a reason why widows or widowers remarried. In Preiswerk-Iselin's case, however, all her children were well married. Only the youngest son, Lucas, was still unmarried, though it can be assumed that he was already engaged, as he married a year after his father's death. Further, Lucas ran his father's silk company together with his older brother Dietrich.

12 Translation: "When I often had to hear and feel it hard that I had not brought a fortune with me" (*Ibid*., book 11, 10 January 1811, p. 9).

13 Translation: "Bill of sale of slavery" (*Ibid*.).
It is important to note that their prenuptial agreement did not contain any specific clauses, but merely regulated inheritance matters. This was common practice in Basel at the time.

As a widow, Preiswerk-Iselin was subject to a bailiff who administered her monetary possessions and immovable property. The bailiff usually came from the same guild as the deceased husband or father, as in the case of unmarried women. This role was often filled by a relative, which was also the case with Preiswerk-Iselin. Her son-in-law Benedikt Vischer, husband of her youngest daughter, became her appointed bailiff. However, as a widow of high standing and excellent reputation, she had an instrument of power at her disposal: she was able to apply for so-called 'Freie Mittelverwaltung'.[14] In the year 1816, a few months after Niklaus Preiswerk's death, her son-in-law (as bailiff) applied for free administration of funds for Preiswerk-Iselin, which allowed her to manage her assets largely independently. She only had to refer to him for large transactions, such as property sales. The application was also signed by her second son-in-law and her two sons, as closest male relatives.[15]

Through her four surviving children, Preiswerk-Iselin became the grandmother to fifteen grandchildren and great-grandmother of 32 great-grandchildren, although she never got to know all of them. Some were born after she had already passed. Preiswerk-Iselin deeply cared for her descendants and often welcomed her grandchildren into her home at St. Apollinaris in Alsace, France and later in her house outside the Aeschentor in Basel.[16] In the last months of her life, she was cared for by her daughters, as can be seen from daughter Susanna Paravicini's eulogy.[17]

To analyze and understand Preiswerk-Iselin's life as an aging woman in Basel, it is necessary to make some essential comments on the political, religious and social context of Basel around 1800.[18] Preiswerk-Iselin lived

14 Translation: "free administration of funds".

15 StABS, Vogtei J5, Einzelne Fälle freier Mittelverwaltung (1717-1878), entry: 24 January 1816. No document could be found that confirms the free administration of funds for Preiswerk-Iselin. However, a positive result can be inferred from her diary. She does not mention any conversations with her bailiff in which she obtains his permission for any kind of transaction. Her sons and sons-in-law only play a leading role in the sale of her country estate.

16 The Aeschentor was one of the city gates. It was quite common for wealthy citizens of Basel to either own a country house or residence outside the city for the summer months. In winter they usually resided within the city walls.

17 StABS, Leichenreden (LA), Leichenrede für Susanna Paravicini-Preiswerk, 22 May 1843, p. 14.

18 The context of Basel can only be briefly outlined in this article. Further reading on the individual topics is provided in the following footnotes.

in turbulent times, characterized by unrest and uncertainty. On a family level, Preiswerk-Iselin wanted to live close to her family members but remain independent. This is perfectly in line with Leopold Rosenmayr's principle of "Intimität auf Abstand" (intimacy at a distance).[19] Family and religion were of major importance to her. Preiswerk-Iselin's father Isaak Iselin was an Enlightenment philosopher and she herself was brought up as a Protestant. In practice, she made use of various approaches to faith and developed her own religious ideas and personal piety. Further, she had strong political opinions that she voiced in her diary. Being a woman, however, she could not participate in any official political activities.

As briefly mentioned earlier, men from long-established families shared political power in Basel. Women and people without citizenship had no opportunity to hold office. The city was governed by the Small Council and the extended Grand Council. Representatives from the city made up the majority of council members, although the countryside was far superior in terms of area and numbers of people. This fueled discontent among the rural population, which led to bloody conflicts and ultimately to the separation of the cantons of Basel-Stadt and Baselland. In addition to the internal conflicts, Basel was also affected by Napoleon's campaign across Europe. Due to its position on the map, parts of Switzerland were already in an invidious position as a buffer between the conflicting parties. Further, French troops were stationed in Basel and had to be supplied, which meant considerable financial and resource expenditure.[20]

On a religious level, Basel was primarily Protestant. However, a closer look reveals a conglomerate of different religious movements in the city. Theoretically, religious freedom prevailed throughout the city. However, inter-confessional marriages were not contracted for a long time and Protestant faith was a mandatory requirement for obtaining citizenship. Basel also had a Jewish community and was an important Pietist center and point of contact for the Moravian Church. Pietism was so deeply

19 Rosenmayr, Leopold*: Die Schnüre vom Himmel. Forschung und Theorie zum kulturellen Wandel*. Wien: Böhlau, 1992, 265.

20 For Basel (not only) during French occupation: Kreis, Georg, Wartburg, Beat von (eds.): *Basel - Geschichte einer städtischen Gesellschaft*. Basel: Christoph Merian Verlag, 2000; and for Switzerland in general: Maissen, Thomas: *Geschichte der Schweiz*. Baden, 2019.

rooted within the city walls that it was somehow mockingly nicknamed 'pious Basel'.[21] In reality, many people of Basel made use of the city's entire religious offering and drew from it the approaches that were relevant and coherent for them personally.

Furthermore, Basel, like the rest of Switzerland and most Central European countries, did not yet have an institutionalized and compulsory social security and pension systems around 1800. For the most part, everyone had to provide for their own monetary security and housing situation during old age.[22] As previous research has shown, the three-generation household was not the ideal living situation in Western and Central Europe. Older people wanted to run their own household for as long as possible.[23] In the middle classes or bourgeoisie, the elderly often lived under one roof with employees or boarders. Older people were also expected to remain active and useful to society for as long as possible. If they became in need of help, they were quickly considered dispensable.[24]

When does 'old age' begin?

To be able to analyze Preiswerk-Iselin's strategies for coping with old age and her roles as an aging woman, it must first be clarified when or in which situations she considered herself old. Furthermore, it is also essential to consider when those around her perceived her as an individual, as well as women of her status in general as 'old', and what this meant for her in particular.

21 For pietism in Basel: Cf. Hebeisen, Erika: *"Leidenschaftlich fromm". Die pietistische Bewegung in Basel, 1750-1830*. Köln: Böhlau, 2005.

22 The first social security system in Basel was the 'Prediger Witwen- und Waisenkasse', founded in 1777. This non-mandatory security fund was open solely to clergymen and provided their widows or orphaned children with some sort of social security. The development of the modern social insurance system in Switzerland only began during the 20th century.

23 Ehmer, Josef: Zur Stellung alter Menschen in Haushalt und Familie. Thesen auf der Grundlage von quantitativen Quellen aus europäischen Städten seit dem 17. Jahrhundert. In: *Gerontologie und Sozialgeschichte. Wege zu einer historischen Betrachtung des Alter*s (Conrad, Christoph, Kondratowitz, Hans-Joachim von, eds.). Berlin: Deutsches Zentrum für Altersfragen, 1983, 187.

24 Göckenjan, Gerd: Hilfebedürftigkeit als Rahmug der Statuspassage ins hohe Alter. Zur Geschichte einer unsicheren Statuspassage. In: *Moderne Lebensläufe im Wandel* (Leisering, Lutz et al., eds.). Weinheim: Deutscher Studien Verlag, 1993, 187.

Preiswerk-Iselin already described physical weaknesses in the early years of her diary, which she began at the age of 37. At this time, however, she did not attribute this to her increasing age, but to other exertions, such as her daughters' illnesses, which demanded a great amount of energy and strength from her. In her 50s, she explicitly mentioned old age for the first time, such as in October 1813, with 55 years of age:

> *"Aber mein Alter, meine Schwächlichkeit die mir keine lange Anstrengung mehr erlaubt, meine Zurückgezogenheit, mein schüchternes Wesen, mein finsterers Aussehen, mein langsamer Ideengang mein Mangel an schneller Geistes Gegenwart, die Mühe die ich habe meine Gedanken, besonders mündlich, klar u leicht auszudrücken u ach wie vieles noch!"* [25]

Over the years, Preiswerk-Iselin repeatedly resolved to adapt her activities to her age and take her declining strength into account. However, she rarely put these plans into practice. Despite her frail physical condition, she still carried out strenuous work on her house at the age of 72: "mancherlei Hausgeschäfte so wie Waschen [,] Gibsen des Hauses u Änderung der Köchin nahmen meine schwach Kräfte so ganz in Anspruch."[26] The fact that Preiswerk-Iselin was even still plastering her house indicated that she did not limit herself to pure housework, but also carried out more demanding manual work. Only her diminishing hearing caused increasing difficulties for her. She first mentioned this ailment at the age of 64: "natürlich ist es also daß der Mangel am Gehör den ich seit einigen Wochen fühle, mir beschwerlich ist."[27] Her hearing did not improve from that point on. She

25 Translation: "But my age, my frailty which no longer allows me to exert myself for long, my reclusiveness, my shy nature, my gloomy appearance, my slow flow of ideas, my lack of quick presence of mind, the difficulty I have in expressing my thoughts clearly and easily, especially verbally, and oh how much more!" StABS, PA 511a (304-03-04), Tagebücher der Anna Maria Preiswerk-Iselin, book 10, 29 October 1813, p. 57.
Note: "finsterers Aussehen" does not necessarily refer to her looks, it might also be connected to a poorer eyesight. I deal with this topic in greater detail in my dissertation.

26 Translation: "various household chores such as washing [,] plastering the house and changing the cook took up so much of my weak strength". StABS, PA 511a (304-03-04), Tagebücher der Anna Maria Preiswerk-Iselin, book 27, 22 March 1830, p. 21.

27 Translation: "it is natural that the lack of hearing I have been feeling for a few weeks is troublesome for me" (*Ibid*., book 18, 3 September 1822, p. 1).

repeatedly complained about her declining hearing and the impact this had on her social life.

Preiswerk-Iselin always felt and described herself as 'old' when something was not working the way she was used to and when her physical limitations became noticeable. She also liked to describe her body as a reliable machine that occasionally got out of gear: "einige Verdrüßlichkeiten griffen mich an, dazu kam eine Erkältung u meine Maschine war aus dem Gang gehoben: nun ist wieder etwas besser."[28] Although illnesses and ailments were seen as God-given, it was still necessary to take care of the body, which was God-given as well, as best as possible. Preiswerk-Iselin therefore also consulted doctors and healers in order to obtain relief and remain capable of action. To be able to measure her own biological and perceived age, she also compared herself with people around her. This was particularly the case when either people younger than her were already struggling with more serious age-related ailments or older people appeared particularly agile and healthy to her. Preiswerk-Iselin's own sense of age was strongly oriented towards the images of old age of her time, place and social context. She came to terms with her own age as a natural process, but this did not mean that she did not develop strategies to retain her agency and also went against social conventions. Depending on the situation, she perceived her age differently and was also perceived differently by her surroundings.

In general, various standards can be used to measure age. In addition to chronological age, which is the age recorded in a passport or other official document, the physical-biological age, the socially ascribed age or the psychological age, i.e. the person's own perceived age, can also be taken into consideration.[29] On a purely chronological or calendrical level, the question arises as to how old people lived in Basel around 1800 and, in

28 Translation: "some indispositions attacked me, plus a cold and my machine was out of gear: now it's a bit better again" (*Ibid*., book 28, 25 November 1830, p. 15).
Although the machine metaphor is reminiscent of Julien Offray de La Mettrie's "l'homme machine", Preiswerk-Iselin had little in common with his general approach. After all, he depicted the soul, for example (and extremely abbreviated), as part of a physical process in the brain and did not concede any God-given immortality to it – a theory that Preiswerk-Iselin would certainly have disagreed with. For an English version of La Mettrie's work: La Mettrie, Julien Offray de: *Man A Machine*. Chicago: The Open Court Publishing Co., 1912, <https://www.gutenberg.org/files/52090/52090-h/52090-h.htm>.

29 Cf. Laslett, Peter: *Das Dritte Alter. Historische Soziologie des Alterns*. Weinheim, München: Juventa, 1995, 38–39.

particular, what the life expectancy of women of the upper classes was. The possible age to be reached depended on many factors, including periods of crisis, such as wars, environmental factors, famines or epidemics. Child and infant mortality were still considerably high around 1800 and did not exclusively affect the lower classes. On average, a newborn baby did not even reach the age of 40, while around 20% of infants died before their first birthday.[30] However, those who survived the critical phase of childhood could live to be well into their 60s. Although the 82-year-old Preiswerk-Iselin died at an advanced age for her time, she was not alone in that age group. There are even several people up to 100 years old recorded for the early modern period.[31] As early as the 16th century, wealthier women at least lived to the same age or grew even older than their male contemporaries.[32] Although women could certainly reach an advanced age, they played only a marginal role in medical research and literature of their time. Only the onset of the menopause was of medical interest, as were age-specific ailments and diseases in general. However, the treatment methods remained largely the same, regardless of age and gender.[33]

Certain expectations were placed on ageing people. Gerd Göckenjan referred to this as "Alterserwartungscodes" (age expectation codes).[34] Depending on factors, such as age, gender and status, the elderly were expected to behave in certain ways. In a time when there was no retirement age, anyone who was no longer able to fulfill his or her socially intended

30 Audrey, Georges: Auf der Suche nach dem neuen Staat (1798-1848). In: *Geschichte der Schweiz und der Schweizer* (Mesmer, Beatrix, ed.). Basel: Schwabe, 2006, 579. By comparison, 25–30% of newborns in Switzerland died in their first year of life between the mid-17th and early 19th century. Cf. De Capitani, François: Beharren und Umsturz (1648-1815). In: G*eschichte der Schweiz und der Schweizer* (Mesmer, Beatrix, ed.). Basel: Schwabe, 2006, 449.

31 For France: Stearns, Peter N.: *Old Age in European Society. The Case of France*. London: Croom Helm, 1977, 19.
Johann Koechlin-Dollfus (1746–1836), Preiswerk-Iselin's relative by marriage, who was also known as Jean, lived to the age of 90.

32 Schäfer, Daniel: *Alter und Krankheit in der Frühen Neuzeit. Der ärztliche Blick auf die letzte Lebensphase*. Frankfurt a.M.: Campus, 2004, 268.

33 The fact that the treatment methods for older people did not differ significantly from those for younger people and were at most somewhat weakened (see, for example, bloodletting) was already evident in the 17th century: Bothelo, Lynn A.: "An idle youth makes a needy old age". The 17th century. In: *A History of Old Age* (Thane, Pat, ed.). Los Angeles: J. Paul Getty Museum, 2005, 113–173.

34 Göckenjan, Gerd: *Das Alter würdigen. Altersbilder und Bedeutungswandel des Alters*. Frankfurt a.M.: Suhrkamp, 2000, 25.

role, for example due to physical infirmity, was quickly considered unserviceable and old. This was particularly serious for individuals who became in need of assistance. Elderly people quickly lost their reputation and were at risk of becoming socially dependent or suffering financial hardship. It was therefore particularly important for the ageing population to maintain their state of physical health for as long as possible or to find other meaningful tasks. Further, marriage could be a positive transition into older age. However, if a woman of a certain age was not married, she could be pejoratively referred to as "alter Jungfer" (old maid).[35] Taking contemporary depictions of 'Lebenstreppen' or 'Altersstufen' (steps or stages of life) into consideration, one often finds 50 as a standardized boundary and transition to old age.[36] After this peak in life, the pictures show an inevitable descent down the steps. For women in particular, this age was also equated with the onset of the menopause – a physical entry into female old age.

Old age brings change

As Preiswerk-Iselin described herself as 'old', she also began to write more frequently in her diary. In the following, it will be argued that this was related to various changes in the diarist's life that were related to her age and aging. On the one hand, her children had left home and were independent, and her husband also died during this phase. She had more time for herself, but rarely described herself as lonely in a negative sense. On the other hand, her social behavior also changed. The family became more of a focus, while at the same time she increasingly withdrew from bourgeoise sociability.

Bourgeois socializing included making regular visits to other families of the same class or receiving visitors themselves. Participation in this practice was crucial for the reputation of the bourgeois household. Visits could be scheduled at practically any time, as the early modern house,

35 Göckenjan, Gerd, Taeger, Angela: "Matrone, Alte Jungfer, Tante. Das Bild der alten Frau in der bürgerlichen Welt des 19. Jahrhunderts." *Archiv für Sozialgeschichte*, 30, 1990, 44.

36 Cf. Joerissen, Peter, Will, Cornelia (eds.): *Die Lebenstreppe. Bilder der menschlichen Lebensalter*. Köln: Rheinland Verlag, 1983.

as a semi-public space, was always open. Accordingly, this type of socializing took up a lot of time in the lives of the higher classes. Women like Preiswerk-Iselin played a central role in this socializing practice by acting as hosts, creating a seemingly informal setting for conversation, catering for guests and introducing suitable topics of conversation themselves. This also gave them a certain position of power in society that they were otherwise denied. Socializing was also cultivated in the streets outside the front door, around church visits and at the bathhouse.

Through her father Isaak Iselin, who was also very well connected beyond the city walls, Anna Maria Preiswerk-Iselin was part of this bourgeois hustle and bustle from an early age. Many central figures in Basel and Swiss history at the time came and went with the Iselins. Even as an adult and after her father's passing, Preiswerk-Iselin maintained good and regular contact with some of those visitors, such as the educationalist Johann Heinrich Pestalozzi and the clergyman Johann Caspar Lavater. Preiswerk-Iselin certainly did not mention every visit or participation in social events in her diary. This is probably because these visits were too common and too firmly anchored in the everyday life of the bourgeoisie. It seems that whenever she was in the city, she combined this with various visits to family, friends and acquaintances. After all, the journey from her country residence to Basel and back by horse carriage could hardly be completed in one day.

As she got older, Preiswerk-Iselin withdrew gradually from social events and focused instead on contact with close family members. A diary entry from 1827 reads:

> *"Ich habe gestern einige Besuche gemacht, u bin davon sehr ermüdet zurück gekommen: das muß ich künftig bleiben lassen u meine wenigen Kräfte nur in einem kleinen Kreise zusamen ziehn; man glaubt oft den Verwandte Zeichen der Liebe geben zu müssen, allein in meinem Alter ist man der aussern Weld so wenig mehr!"* [37]

37 Translation: "Yesterday I made a few visits and came back very tired: I must refrain from doing so in future and only gather my little strength in a small circle; one often thinks one has to give signs of love to relatives, but at my age one is so little more to the outside world!" StABS, PA 511a (304-03-04), Tagebücher der Anna Maria Preiswerk-Iselin, book 24, 20 January 1827, p. 4.

That she felt to retreat was partly due to her dwindling strength, which she wanted and needed to manage better, and partly due to her poor hearing, which made it difficult for her to follow lectures or sermons. In addition, and possibly connected to her bad hearing, she felt increasingly uncomfortable in larger crowds of people. At the age of 69, and in the same year as mentioned above, she aptly summarized this in her diary: "am öffentlichen Gottesdienste kann ich nicht Theil nehmen wegen meinem schwachen Gehör u auch, weil ich das Gewirre vieler Menschen gar nicht mehr ertragen kann."[38]

However, her status alone did not allow her to completely withdraw from society and become lonely in the negative sense. In line with Arthur Imhof's approach that "being alone and being lonely are two different matters,"[39] she valued being alone from time to time, but increasingly less with advancing age. On Christmas day 1830, she wrote about this as follows: "Ich verbringe den heutigen, Weihnachtstag, recht zufrieden u froh, ob ich gleich ganz einsam bin".[40] Preiswerk-Iselin regularly received her children and grandchildren at her country estate. The latter often stayed with her for several weeks and were brought up and taught by her. Nevertheless, she felt lonely when no one was visiting her. She noted: "Ich hätte nie geglaubt daß mir das allein wohnen so schwer fallen würde."[41] Being alone had a particularly negative effect when the family had just left and went back to their own homes, as she stated: "die kleine Marie war nur ein pr Tage bei mir u ihr Abschied that mir doch so wehe. Ist dieses Gefühl Altersschwäche, sollte es mit den Jahren zunehmen?"[42] In this particular case, with her granddaughter going back home after a few days visit, Preiswerk-Iselin explicitly associated the increasing pain of parting with

38 Translation: "I can't take part in public church services because of my poor hearing and also because I can't stand the noise of so many people" (*Ibid*., book 24, 13 April 1827, p. 23).

39 Original: „[dass] Alleinsein und Einsamsein zwei verschiedene Dinge sind". Imhof, Arthur Erwin: *Die Lebenszeit. Vom aufgeschobenen Tod und von der Kunst des Lebens*. München: C. H. Beck, 1988, 302.

40 Translation: "I am spending today, Christmas Day, quite content and happy, even if I am quite lonely". StABS, PA 511a (304-03-04), Tagebücher der Anna Maria Preiswerk-Iselin, book 28, 25 December 1830, p. 18.

41 Translation: "I would never have believed that living alone would be so difficult for me" (*Ibid*., book 16, 01 February 1821, p. 55).

42 Translation: "Little Marie was only with me for a few days and her departure hurt me so much. Is this feeling age-related weakness, should it increase with the years?" (*Ibid*., book 18, 29 January 1823, p. 38).

her increasing age. In these times of loneliness, she found refuge in writing her diary: "Das Schreiben ist mir Ersatz an genügender Unterhaltung, u bevestigt meine Gedanken u Entschlüße."[43]

It is no coincidence that many of the entries on loneliness and solitude were written around the turn of the year or in winter, although not exclusively. On the one hand, the sense of time around 1800 was future-oriented and characterized by the idea of progress.[44] On the other hand, as Koselleck proposed, this increased the feeling of insecurity.[45] Traditional patterns of experience were no longer sufficient to imagine a predictable future. This became increasingly difficult for Preiswerk-Iselin as she grew older. There was additional uncertainty as to how long her life in this world would last. Against this background, the family seemed all the more important as a known variable and a sign of stability. Visits from grandchildren filled this need for family closeness and Preiswerk-Iselin was very happy to fulfill her role as a grandmother. In the context of these visits, she also developed an idea – a project close to her heart. Driven by the need to live closer to the family and thus make faster and more frequent visits possible, and determined to be able to offer her grandchildren an adequate upbringing and education in their grandmother's house, Preiswerk-Iselin planned a building project in front of Basel's Aeschentor.

Female education – A 'retirement project' for the aging Preiswerk-Iselin

In 1826, the 68-year-old Preiswerk-Iselin decided to build a property in front of the Aeschentor in Basel. Around the same time, she wrote in her diary: "Wie bebe ich vor dem Gedanken zurück, ein altes unnützes Weib zu warden."[46] In order to remain a useful member of society in her old age and to keep herself occupied in a meaningful way, Preiswerk-Iselin had to

43 Translation: "Writing is a substitute and sufficient entertainment for me, and it strengthens my thoughts and resolutions." (*Ibid.*, book 29, 28 January 1832, p. 25).

44 Cf. Jung, "Das Neue der Neuzeit ist ihre Zeit", 175.

45 Cf. Koselleck, *Vergangene Zukunft*. Frankfurt a.M.: Suhrkamp, 1979, 374.

46 Translation: "How I shudder at the thought of becoming an old useless woman." See footnote 1.

look for a new project – in keeping with the Zeitgeist. She had fulfilled her role as a mother and being a grandmother alone was not enough for her. Meaningful occupation was also necessary to maintain her body and mind for as long as possible. At the same time, the St. Apollinaris estate in Alsace was up for sale, as Preiswerk-Iselin found it unsuitable for her retirement project, and decided for the founding of a private school for girls. She wanted to set up a small residential section in the new building and teach her granddaughters and a few other pupils in the rest of the house. Her project, both regarding the building and the female education, was entirely in keeping with her time. Firstly, the choice of building site was hardly surprising. Other well-known Basel families and personalities also had their homes in the neighborhood. In general, many Basel families kept a country house.[47] Secondly, the education of girls and women was also an important Enlightenment topic in Basel.

A good 10 years earlier, Preiswerk-Iselin had already been dealing with the topic of education and, in addition to detailed diary entries, she also wrote an essay in which she drew up a detailed schedule, timetable, and a set of values she wanted to convey.[48] In doing so, she linked the education of her grandchildren to a larger context that would contribute to the betterment of society. She also considered how many teachers and helpers she needed to employ to aid her with the ambitious plan. Even though she thought about male employees, ideally the teachers were to be mainly women. With the help of at least one other female teacher and a principal, she wanted to educate and teach girls across all social classes. That included "Frauenzimmer vom gesitteten Mittelstande"[49] and "Menschen vom niedren Stande nach ihren Kräften u Fähigkeiten zu ihrem Stande auszubilden".[50] In addition to moral and religious teaching, girls were to learn at least one other language than German. Presumably they were to be educated in French, the language of education in Basel around 1800. Also,

47 Cf. Salathé, René (ed.): *Baslerische Landsitze einst und jetzt. Ein kommentierter Reprint*. Liestal: Verlag Baselland, 2021.

48 For the whole essay: StABS, PA 511a (304-03-07), Aufsatz von Anna Maria Preiswerk-Iselin, 1815.

49 Translation: "Women from the civilized middle class". StABS, PA 511a (304-03-04), Tagebücher der Anna Maria Preiswerk-Iselin, book 12, 1815, p. 17.

50 Translation: "To train people from the lower classes according to their strengths and abilities to fit their social standing" (*Ibid.*, book 26, 16 March 1829, p. 40).

the pupils should have been taught mathematics and geometry, as well as geography and natural history. Fine arts, music, and drawing also found a place in the curriculum. Finally, the "Erlernung aller weiblichen Arbeiten" was on the syllabus.[51] As Preiswerk-Iselin did not go into detail about the latter subject, 'female work' probably needed no further explanation for her contemporaries. According to a listing from the *Basler Töchterschule* (Basel school for daughters), this included domestic and textile work, such as knitting.

Preiswerk-Iselin's school project was indeed ambitious and progressive in terms of female education, but not so much revolutionary. Like her father, she did not want to prepare the girls for a working life, but rather for their role as wives, mothers and heads of households:

> *"Auch der Ausbildung des weiblichen Geschlechtes ist dieses Verhältnis sehr ungünstig: Ich bin weit entfernt eine Ausbildung derselben zu wünschen die sie ihrer Bestimmung entrückte: aber eine welche sie dieselbe in einem ausgedehntern Grade derselben fähiger machte, damit sie nicht nur eine gute Hauswirthin sondern auch eine u gute Mutter sondern auch eine verständige weise u glückliche Mutter werden möchten."*[52]

In order to be good hostesses, for example, who maintained bourgeois socializing and visiting practices as mentioned earlier, women had to have a certain level of education. They were also expected to be good conversation partners for their husbands and provide them with advice.[53] In Preiswerk-Iselins imagination, only a small percentage of women were fitted to learn a trade. No doubt to reassure her fellow male citizens and preventively put their minds at rest, she noted in the year 1815:

51 Translation: "learning of all female work" (*Ibid*., book 12, 1815, p. 16).

52 Translation: "This relationship is also very unfavorable to the education of the female sex: I am far from wishing for an education that would take them away from their destiny: but one that would make them more capable of it to an extended degree, so that they would not only become a good housekeeper but also a good mother and also an intelligent, wise, and happy mother" (*Ibid*., book 11, 02 January 1811, p. 3).

53 Simon, Christian: Einleitung. In: *Sozioökonomische Strukturen; Frauengeschichte/Geschlechtergeschichte* (Simon, Christian, ed.). Basel: Helbing & Lichtenhahn, 1997, 1–12, 9.

> *"Man besorge nicht daß eine solche Einrichtung der Fortpflanzung des Menschengeschlechtes hinderlich seyn würde: wenn nur von allen unver-heuratheten Frauenzimmern ein Dritthel zu den edlen Zwecken angestelt würden so wäre es hinreichend, / auch würden immer der größte Theil eine günstige Heurath einem Art Klosterleben vorziehn."* [54]

According to Preiswerk-Iselin, not more than one third of all unmarried women were to be trained for a profession. Here, the diarist considered alternative occupations to married life for women but emphasized that this would not pose a threat to the traditional role of women in early modern society as wives and mothers. In doing so, she mitigated the potential transgression of boundaries by the female sex and ruled out a possible threat to social order. In the urban-reformed context, it was not common for girls from the educated middle classes to take up a career. An exception to this was the profession of teacher or governess, to which more and more unmarried daughters from good families devoted themselves towards the end of the century.[55]

An old-age project doomed to fail?

Although Preiswerk-Iselin's old-age project certainly fitted in with the Enlightenment debate on usefulness well into old age, which was still relevant around 1800, the planned girls' school never materialized. The reasons for this were manifold and ranged from a lack of family and social support to the general mentality of Basel society, which was in favor of female education, but only as long as it remained within established

54 Translation: "It is not to be feared that such an institution would hinder the procreation of the human race: if only a third of all unmarried women were hired for noble purposes, it would be sufficient, / and the majority would always prefer a favorable marriage to a kind of monastic life." StABS, PA 511a (304-03-04), Tagebücher der Anna Maria Preiswerk-Iselin, book 15, 07 October 1819, p. 26–27.

55 Using the example of the vicar's daughter Valerie Gernler (1741–1806): Opitz-Belakhal, Claudia: *Die Gernlers. Eine Basler Familiengeschichte*. Basel: Christoph Merian Verlag, 2023, 139–146. Elsewhere and under certain circumstances, women were also able to work as entrepreneurs, cf.: Labouvie, Eva: In weiblicher Hand. Frauen als Firmengründerinnen und Unternehmerinnen (1600-1870). In: *Frauenleben – Frauen Leben. Zur Geschichte und Gegenwart weiblicher Lebenswelten im Saarraum, 17.–20. Jahrhundert* (Labouvie, Eva, ed.). St. Ingbert: Werner J. Röhrig Verlag, 1993, 88–131.

boundaries. Despite all the adversities and hardships that Preiswerk-Iselin had to endure, she stuck to her plan for many years and well into old age. Although the opinions of those around her, especially her children, were always important to her, they became less so as she grew older. This increasing indifference to what others thought of her is linked to the concept of growing autonomy from social norms and expectations in old age.

Preiswerk-Iselin's unmarried sister Esther Iselin actively supported her in her project – in complete contrast to her children, something the diarist often complained about, such as:

> *"Warum meine so gutmüthige T. V. sich so sehr dagegen (nehmlich gegen mein Projekt) sträubt begreife ich nicht! Ich muß mich ofen mit ihr erklären. Wie es die Para. Aufnimmt muß ich auch sehn. Ich bin / so gerne der l. T. gefällig, aber wo es gegen meine innere Überzeugung geht, da glaube ich nicht nachgeben zu sollen."* [56]

Here, Preiswerk-Iselin already shows signs of resistance to her daughters' opinions. We do not learn the reasons for the children's negative attitude from the diary of their mother. On the one hand, they were perhaps worried about their mother's health. After all, the building project was already quite exhausting for the ageing Preiswerk-Iselin, as she herself confirmed: "Die Zurüstungen zu meinem künftigen Wohnsitze kosten mich mehr Mühe u nehmen mir den Kopf mehr ein als <für> mein sich nach Rhue sehnendes Gemüth gut ist, als für mein Alter paßt."[57] She also explicitly linked the strains to her age. On the other hand, the children might have possibly been worried about their inheritance. The building alone cost a lot of money. Teaching staff would also have had to be paid, and with such a small private school, which was also supposed to accommodate girls from the lower classes, there would certainly not have been many revenues

56 Translation: "I do not understand why my so good-natured T. V. [daughter Vischer] is so reluctant (namely against my project)! I must openly explain myself to her. How the Para. [daughter Paravicini] takes it, I must also see. I am / so glad to please the l. T. [loving daughter], but where it goes against my inner convictions, I do not think I should give in." StABS, PA 511a (304-03-04), Tagebücher der Anna Maria Preiswerk-Iselin, book 22, 13 December 1825, p. 23–24.

57 Translation: "The preparations for my future residence cost me more effort and take up more of my head than is good for my mind, which longs for calm, than is suitable for my age." (*Ibid*., book 23, 19 September 1826, p. 32).

in the way of school fees. The latter would be plausible, as the construction of the property consumed considerably more money than originally planned, as Preiswerk-Iselin complained after two years of planning and building: "Die Unkosten meines neuen Wohnung kömmt mich wenigstens um 1/3 höcher als ich vermuthete: das macht einen fatalen Strich in meine Pläne!"[58] She was certainly not impoverished by the construction costs but was therefore all the more dependent on external support for her school. Despite the opinions of her children, Preiswerk-Iselin stuck to her project. As she herself described, this was also due to the fact that the opinions of others became increasingly unimportant to her. With 75 years of age, though in a different context, she wrote in her diary: "Was habe ich in meinem Alter noch von d Menschen für Rechtfertigung nöthig? Wem mein Denken u Thun nicht genügt den muß ich gehn lassen."[59] This clearly shows an increased autonomy from social norms and obligations in old age. Preiswerk-Iselin not only had to contend with a lack of family support and financial shortages, but also with particularly male opposition. Together with her sister, she tried to recruit suitable female teaching staff. For the most part, the women approached did not initially seem averse, but ultimately declined. Contrary to the various reasons given by the women, Preiswerk-Iselin considered their husbands or male relatives to be the reason for the rejections.[60]

What were the reasons for the male rejection? In the following, three reasons are presented that explain the negative attitude of the important and wealthy men in Basel, and thus potential donors and financiers.

1. The upper classes in Basel mainly sent their children to boarding schools in the French-speaking Welschland, a region in western Switzerland. Away from home, the children were to receive an education befitting their status and improve their knowledge of the French language. Girls and boys were taught separately.[61] Preiswerk-Iselin's

58 Translation: "The expenses of my new apartment will cost me at least 1/3 more than I expected: that is a fatal blow to my plans!" (*Ibid*., book 25, 13 January 1828, p. 10).

59 Translation: "What justification do I need from people at my age? For whom my thoughts and actions are not enough I must let them go." (*Ibid*., book 30, 29 March 1833, p. 34).

60 Cf. *Ibid*., book 27, 23 January 1830, p. 15; *Ibid*., book 27, 19 April 1830, p. 28.

61 Johann Heinrich Pestalozzi, for example, founded such an institute for daughters: Cf. Buol, C.: "Mädchenbildung im Geiste Pestalozzis. " *Bündner Schulblatt*, 12, 2, 1952.

grandchildren also attended such boarding schools. She herself, however, is unlikely to have attended as a young girl. Her father Isaak Iselin was opposed to this type of child education. He therefore advocated female education within the city walls of Basel. Convincing the middle classes of the benefits of inner-city children's education required considerable effort.

2. In Basel, the *Gesellschaft des Guten und Gemeinnützigen* (*GGG* for short)[62] founded the *Basler Töchterschule* (a Basel girls' school) in 1813, where girls from the middle classes were educated. The very existence of the girls' school was also a reason for the failure of Preiswerk-Iselin's old age project. While previous efforts by a number of well-known Basel personalities, including Isaak Iselin, to found a girls' school had failed, this school persisted. The school was much more expensive than the schools for boys. When it opened, 35 girls attended the school; by 1815, the number had risen to between 52 and 66 pupils per month.[63] As there was already a girls' school within the city walls, potential sponsors probably saw no benefit in Preiswerk-Iselin's small and private girl's school.

3. Preiswerk-Iselin's project touched on two social boundaries: a gender boundary and a class boundary. She planned to run the school with a predominantly female teaching staff and under female leadership. The *Basler Töchterschule*, founded in 1813, also employed female teachers. However, most of them exclusively taught the aforementioned 'female work'. In addition, they earned significantly less than their male co-workers for the same working hours. Also, the head of the *Töchterschule* was always an older man with an unblemished reputation, as can be seen from a vacancy notice from the year 1814.[64] Preiswerk-Iselin's female-centered plan certainly stoked

62 The GGG, co-founded by Isaak Iselin, has been committed to social issues and education, especially female education, since its foundation in 1777. Cf. Opitz-Belakhal, Claudia: Von der Aufklärung zur Kantonstrennung. In: *Basel – Geschichte einer städtischen Gesellschaft* (Kreis, Georg, Wartburg, Beat von, eds.). Basel: Christoph Merian Verlag, 2000, 150–185, 156.

63 Cf. StABS, Erziehung W3 (1814–1847), Töchterschule, Lehrer; and W12 (1815–1860), Töchterschule, Jahresrechnungen.

64 StABS, Erziehung W2 (1814–1829), Töchterschule, Rektorat.

contemporary fears of 'Weiberherrschaft' (female domination).[65] At the same time, Preiswerk-Iselin was also confronted with the female education- and reading-addiction-debate around 1800. As Esther Baur noted, Preiswerk-Iselin's educational aspirations quickly reached "the limits of what is permissible for female socialization".[66] In addition, women were at risk of being labeled with the flaw of a 'Lesewut' (reading mania) or 'Lesesucht' (reading addiction) if they appeared to consume an excessive amount of literature.[67] Such women were quickly considered unfeminine and were frowned upon in society. Preiswerk-Iselin therefore rightly asked the following question: "Schwierig wird es wohl seyn zu bestimmen in wie fern Bildung für das weibliche geschlecht zuträglich sey! Noch weit schwieriger die Urtheile der Weld darüber nicht zu verletzen: den worüber wird so verschieden geurtheilt!"[68] In the end, her skepticism proved correct. Preiswerk-Iselin also caused offense from a class boundary perspective, by planning a school for girls from different social classes. This was not in line with established norms. She firmly rejected the offer to run a servants' school instead, which would have contradicted her personal values and goals regarding her old-age project.[69]

Concluding remarks

The diary passage "Wie bebe ich vor dem Gedanken zurück, ein altes unnützes Weib zu warden" of the then 68-year-old Basel citizen Anna Maria Preiswerk-Iselin was the starting point for this research extract.[70]

65 Cf. Simon, Einleitung, 10.

66 Original: "Ihr Bildungswille führte an die Grenzen des für eine weibliche Sozialisation erlaubten." Baur-Sarasin, Esther: „Reflexionen einer gebildeten Baslerin", *Basler Magazin*, 25, Basel, 27 June 1998, p. 8.

67 Banki, Luisa, Wittler, Kathrin: Historische Praktiken der Lektüre in geschlechtertheoretischer Perspektive. Zur Einführung. In: *Lektüre und Geschlecht im 18. Jahrhundert. Zur Situativität des Lesens zwischen Einsamkeit und Geselligkeit* (Banki, Luisa, Wittler, Kathrin, eds.). Göttingen: Wallstein Verlag, 2020, 12.

68 Translation: "It will probably be difficult to determine to what extent education is beneficial for the female sex! It is even more difficult not to violate the judgments of the world about this: for what is judged so differently." StABS, PA 511a (304-03-04), Tagebücher der Anna Maria Preiswerk-Iselin, book 12, 1815, p. 13.

69 *Ibid*., book 27, 16 March 1829, p. 40.

70 Translation: "How I shudder at the thought of becoming a useless old woman." See footnote 1.

Remaining a useful member of society and keeping herself meaningfully occupied for her own physical and mental well-being, even in old age, was essential for Preiswerk-Iselin and was also expected by the community. Using her as an example, the aim of this article is to exemplify the strategies used by ageing women to find new roles and secure their place in bourgeois society of Basel around 1800. Due to her status and her deceased husband's wealth, she was in the comfortable position of not having to worry much about provision for the elderly, which was particularly important at a time when there were no institutionalized pension funds.

In line with the images of old age of her time, the diarist described herself as being old in her mid-50s. By then, she explicitly recognized signs of aging, such as in a diary entry at 55 where she detailed her physical and mental limitations. Contemporary depictions of life's stages often marked 50 as the onset of old age, coinciding with menopause for women. With this, their previously intended role as mothers receded into the background. Preiswerk-Iselin's perception of her age was influenced by these norms and by comparing herself to other people of her age. Her self-perception and societal expectations of old age varied depending on the context and her own physical condition. Maintaining physical health and finding meaningful tasks was essential for avoiding dependence and facing social marginalization. Preiswerk-Iselin navigated these societal and expectations and personal challenges with resilience, adapting her activities and seeking to maintain her agency and social relevance even in old age. Being a grandmother was one such possibility, but that was not sufficient for her.

Getting older, Anna Maria Preiswerk-Iselin experienced significant changes in her life that influenced her increased diary writing. As her children married and became independent and her husband passed away, she had more time for herself, yet rarely felt negatively lonely. Her social behavior shifted from engaging in bourgeois socializing, which was crucial for maintaining social status, to focusing even more on family interactions. This change was partly due to her decreasing physical strength and poor hearing, which made social gatherings exhausting and uncomfortable. Despite her withdrawal from wider social activities, Preiswerk-Iselin did not become an entirely isolated and sullen elderly woman. She cherished visits from her children and grandchildren, whom she often hosted at

her country estate. However, she still felt a sense of loneliness particularly when they were leaving again. Writing in her diary became a solace during these times. As she aged, Preiswerk-Iselin found stability and comfort in her family, which became increasingly important against the backdrop of an uncertain future. This aligns with Koselleck's concept of the sense of time around 1800. Preiswerk-Iselin's close bonds with her family led her to plan a building project outside the city gates of Basel to facilitate more frequent and convenient family visits, emphasizing her enduring commitment to her role as a grandmother and family matriarch.

To remain a useful member of the community, Preiswerk-Iselin embarked on a project to improve female education in Basel. She thus followed in her father's footsteps. She had long been interested in this topic. Her planned school aimed to educate girls across social classes, preparing them for their roles as wives, mothers, and heads of households, rather than for professional careers. This approach aligned with Enlightenment ideas prevalent in Basel, emphasizing the importance of education for women within traditional societal roles. Although progressive for its time, Preiswerk-Iselin's vision was not revolutionary. The educational project reflected her commitment to contributing to society and improving the status of women within the accepted norms – and up to the limits of those norms – of her era.

Despite aligning with enlightened ideals about remaining useful in old age, Anna Maria Preiswerk-Iselin's project to establish a girls' school ultimately failed. Numerous factors contributed to this failure, including a lack of family and social support, financial constraints, and societal attitudes that favored female education only within certain boundaries. Preiswerk-Iselin's children opposed the project, possibly out of concern for her health and for their own financial implications, whereas her younger sister Esther supported her throughout the years. Preiswerk-Iselin's determination to pursue her school project persisted despite these obstacles, which was also due to her increasing indifference to others' opinions on her as a person and on her behavior, as she aged. Her vision of a school with a predominantly female staff that catered to girls from various social classes challenged the prevailing gender and class norms. Basel society, including potential male donors and influential figures, generally preferred to send their children to

prestigious boarding schools in French-speaking parts of Switzerland and supported existing institutions like the *Basler Töchterschule*, which already provided education for middle-class girls. Preiswerk-Iselin's ambitious and progressive plans for female education were seen as transgressive, potentially threatening established social orders. Her skepticism about societal acceptance of her educational aspirations was well-founded. Ultimately, her efforts were met with resistance, since her approach did not align with the traditional, hierarchical structure of Basel society.

The findings are of course limited to women from the wealthy educated middle classes in a Protestant urban society around 1800. Preiswerk-Iselin's diary as a source offers insights into the personal life of the ageing writer over a period of 44 years. Drawing on the prevailing norms and notions of age in her temporal and local context still allows a certain degree of generalization. It has been shown that ageing women did not necessarily withdrew themselves from social life and were content with their proscribed role as grandmothers, but actively sought ways to remain meaningful.

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Dragica Čeč

Characteristics of Poor Elderly People in the Early 19th Century Included in the System of Formal Care – the Case of the Provincial Centre of Ljubljana[1]

"The undersigned learned the profession of postmaster properly and in due form from the local guild of postmasters in 1771 and earned an honest living in the Imperial-Royal lands for 20 years. In 1779, he served the state in the war (...) Owing to great exertions in his work, he exhausted his strength and has for several years now been supporting himself only with great difficulty and very poorly. At present, not only his advanced age but also his failing eyesight and additionally a diseased leg make it entirely impossible for him to earn a living. The undersigned, with the deepest respect, awaits and hopes that the honourable commission will grant his request for poor relief, so that he will not be forced to seek alms from door to door and on the street. Valentin Mačehet"[2]

1 The research was partly financed by the ARIS project J6-4602 (Motherhood and Reproductive Politics in 18th and 20th Century).

2 In original: "*Podpisani se je poklica poštnega mojstra redovito priučil pri tukajšnjem cehu poštnih mojstrov leta 1771 in se v cesarsko kraljevih deželah 20 let pošteno preživljal, leta 1779 je služil državi v vojni (...) Zaradi velikih delovnih naporov je svoje moči izčrpal in se že nekaj let preživlja zelo slabo in z veliko muko. Sedaj pa mu ne samo visoka starost ampak tudi pešanje vida in poleg tega še bolna noga popolnoma onemogočajo, da bi se preživljal. Podpisani z globokim spoštovanjem pričakuje in upa, da bo častitljiva komisija ustregla njegovi prošnji za oskrbo revnih, da ne bo prisiljen iskati podpore od vrat do vrat in na ulici. Valentin Mačehet*." (SI_ZAL_LJU/0508, b. 15, 1825, n. 126, 19. 11. 1825).

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The petition of Valentin Mačehet, who was born in the rural surroundings of Ljubljana, is in many respects exceptional. It does not represent a typical recipient of assistance within the existing funds for the support of the poor or the elderly, which will be the focus of this analysis, yet it nevertheless reveals a broad spectrum of attitudes toward the elderly in the early 19th century. The article presents the basic characteristics of the perception of old age based on an analysis of the records of the largest poor-relief institution in Ljubljana between 1785[3] and 1857. The material is examined through three perspectives and hypotheses. The first underlying assumption is that the documentation of the Poor Institute is particularly informative for the study of old age, as it describes in considerable detail the life circumstances of individuals at the moment they entered the institution. It thus shows when and how people perceived the decline of their physical strength and their ability to support themselves, which often also meant the loss of independence. In certain cases, it also makes it possible to trace their way of life, shaped by biological as well as social, cultural, and economic circumstances. Since an analysis of the entire spectrum of ideas would be too extensive for the format presented here, the contribution focuses on two aspects: imaginaries of old age and the characteristics of informal forms of care in old age—namely intergenerational solidarity and the "economy of makeshifts." Although the analysis concerns attitudes toward old age in urban environments, the life stories of applicants are in some cases also connected with rural life, especially because they lived in the countryside in their youth or moved there in old age. Because the operation of the Poor Institute in Ljubljana is well preserved for the first half of the 19th century, the analysis of representations of old age is based on the records of the largest poor-relief institution in Carniola, intended for the care of the poor after its reorganisation in 1820, when the number of recipients increased significantly in a short period of time. Both qualitative and quantitative data are examined. The quantitative analyses are based on the records of 267 recipients in 1819, who, after the reorganisation, received support

3 SI_ZAL_LJU/0336, b. 1, circulars requiring the establishment of a Poor Institute were already being issued in 1784, namely on 18 September 1784 and 3 December 1784. They were followed—characteristically for the Josephinian period—by an intensive wave of circulars that regulated the operation of the institute, the official records that had to be kept and submitted to higher authorities, as well as other instructions, namely: 10. 6. 1785, 26. 4 and 10. 5. 1786, 25. 8. and 6. 9. 1787, 24. 5. and 30. 6. 1788, 19. 1. 1789.

from the institute for an average of three years. The qualitative analyses draw primarily on 145 petitions and minutes of the commission for applicants,[4] which were processed in 1820 as part of the admission procedure to the Poor Institute. This represents the largest single corpus of admission petitions, as in the following decades the institute admitted new recipients only to the extent of vacancies and occasional increases in available funds. Until 1832, the support consisted exclusively of outdoor relief.

The Poor Institute in Ljubljana was, in terms of available funds and the number of allowances granted, the largest in Carniola (land of Austrian empire), and it was intended to provide outdoor support for the poor in Ljubljana, the capital of the land, and its suburbs. Poor Institutes were introduced in the 1780s as part of the Josephinian social reforms and, despite resistance from certain political and social groups (such as the Ljubljana burghers and the nobility), they remained—albeit with necessary adjustments—one of the mechanisms for addressing social issues in Carniola until the late 1880s. These institutes functioned as institutions that collected money for poor-relief in a regulated and supervised manner and established rules and procedures for distributing the collected funds among eligible recipients. With the support provided through the Poor Institute, institutional care for the poor in Ljubljana for the first time reached a scale that was no longer limited to a negligible number of paupers—far fewer than one percent of the urban population. In 1786, approximately four percent of the city's population received assistance through the Poor Institute.[5] This was still a small share, considering that the city physician Viljem Lipič classified as many as 51 percent of Ljubljana's inhabitants among the poorest strata in 1831, even though he included only maidservants

4 SI_ZAL_LJU/0508, b. 11 and 12.

5 Čeč, Dragica: "Revni – ostareli v času kriz: družba na dlani." *Arhivi: glasilo Arhivskega društva in arhivov Slovenije*, 43, 2020, 2, 307–329; Čeč, Dragica: Reforme na področju reševanja socialnih vprašanj v 18. stoletju. In: *Marija Terezija: med razsvetljenskimi reformami in zgodovinskim spominom* (Preinfalk, Miha, Golec, Boris, eds.). Ljubljana: ZRC SAZU, Zgodovinski inštitut Milka Kosa, Založba ZRC, 2018, 363–406. Čeč, Dragica: Župnijski ubožni inštituti kot začetki sistemske oskrbe revnih. In: *Religio, fides, superstitiones: o vjerovanjima i pobožnosti na jadranskom prostoru: zbornik radova = Religio, fides, superstitiones: faith and piety in the Adriatic area: conference papers* (Mogorović Crljenko, Marija; Uljančić-Vekić, Elena, eds.). Poreč: Zavičajni muzej Poreštine = Museo del territorio parentino; Pula: Sveučilište Jurja Dobrile; Pazin: Državni arhiv, 2017, 254–273.

and manservants, day labourers, and urban paupers.[6] He did not include certain petty artisans who also belonged to vulnerable social groups and were at risk—especially in old age, with declining physical strength or in the event of an accident—of falling below the poverty line. Such risks are also confirmed by the life—narratives of the recipients of the Ljubljana Poor Institute. A total of 412 petitions for assistance will be analysed, representing support for well over 500 individuals. Although far fewer people received systematic institutional care than those who lived at or below the poverty line, the number of beneficiaries was nevertheless significantly higher than at any previous point in the city's history.

The municipal authorities, aware of the problem of the financial sustainability of the poor-relief system, sought to supervise the collection and distribution of support to the poor, since their care depended on voluntary donations from individuals. These donations to the Poor Institute were either distributed directly among the poor or invested as capital, with the interest then used as a basis for provisions to beneficiaries. In the political theory of the Habsburg Monarchy, the care of the poor was understood primarily as the responsibility of the individual. The authorities intervened only occasionally and in times of crisis, providing assistance from other public funds. They were aware of society's sensitivity toward certain types of paupers who were not necessarily those who, according to the strict norms of the begging and domicile laws (1754), formally qualified for relief. In the first half of the 19th century, special funds existed for recipients who were members of urban elite with special rights – burghers. Funds for them were established from the assets of abolished institutions: the municipal hospital (*Bürgerspital*) and the Ljubljana almshouse. The types of poor relief in the first half of the 19th century included: 1. care in the almshouse (from 1832 onward), 2. monetary or material support in the form of basic necessities,[7] 3. so-called "natural care," that is, the practice of

6 These are the proportions that Lipič attributed to individual social groups which, according to the political theory of the 18th and the first half of the 19th century, lived solely on the income generated by their labour (that is, servants, maidservants, day labourers, and urban paupers), cfr. Lipič, Fran Viljem: *Topografija c.-kr. deželnega glavnega mesta Ljubljane z vidika naravoslovja in medicine, zdravstvene ureditve in biostatike*. Ljubljana: Znanstveno društvo za zgodovino zdravstvene kulture Slovenije, 2003, 166–168.

7 In the first half of the 19th century, the costs were covered by the Poor Institute, and the responsibility was transferred to the municipality with the administrative reforms.

housing a pauper from household to household. In the homes where they were accommodated, the poor were required to perform all the tasks they were capable of doing.[8]

With the funds of the Poor Institute in Ljubljana, support was provided primarily to women. Men accounted for only 23.5 percent of all recipients. Expressions of solidarity toward men were considerably more restrained than those toward women, even though opinions among the Ljubljana burghers and the officials of the Poor Institute differed significantly regarding who experienced greater or more severe poverty in old age. The petition of Valentin Mačehet likewise elicited divergent reactions. His petition—rarely recorded in such a formal manner—was confirmed as credible by two prominent burghers, which was more the exception than the rule. Yet even so, the petition met with quite varied responses among the officials and members of the Poor Institute. The "poor father" and the parish priest would have granted the petitioner an allowance, though a modest one, while one of the most distinguished members of the commission, the burgher and merchant Ivan Dežman, believed that poverty among men was "more arduous" than among women and that the "old man" therefore deserved a substantial allowance.[9] This case, as well as the broader functioning of the institute, reveals the presence of solidarity within particular social or occupational groups. There was a sense of obligation on the part of existing institutions to support those who, due to the limited financial capacity of traditional forms of corporate assistance (especially guilds), had fallen out of the support networks of their own estate or profession. Estate-based solidarity was particularly pronounced at this time, as also illustrated by the petition of the postmaster's apprentice with which this article begins. Mačehet hoped that he would eventually receive a higher allowance—one that the Ljubljana municipal authorities, through the mediation of the Poor Institute, granted to burghers from the municipal fund, which provided significantly higher support to a very limited number of

8 The basic characteristics of the functioning of the Poor Institute after its reorganisation, rather than its establishment, were presented by Anžič, Sonja: *Skrb za uboge v deželi Kranjski: socialna politika na Kranjskem od srede 18. stoletja do leta 1918*. Ljubljana: ZAL, 2002, and Anžič, Sonja: "Ubožni institut v Ljubljani." *Kronika*, 42, 1994, 3, 6–11.

9 SI_ZAL_LJU/0508, b. 15, 1825, n. 126, 19. 11. 1825.

applicants.[10] He submitted such a petition to the commission despite the fact that the master for whom he worked provided him with free lodging.

Four years after the major crisis experienced by the Poor Institute due to funding difficulties in 1815, the structure of recipients in 1819 displayed the following characteristics (see Tables 1 and 2): around sixty percent of all beneficiaries were over sixty years old at the time of entering the system, which already corresponded to the chronological age that was also understood in legal frameworks as the threshold of general physical and often also incapacity for work.[11] If we add to this group the recipients over fifty, their share increases significantly in comparison with other adult age groups, as beneficiaries from both age categories together accounted for almost 84 percent of all recipients in 1819, and on average they had already been receiving support for three years. Analyses of the institute's operations show that in the following decades the duration of support increased substantially. Among the new applicants for admission to the relief system in 1820, the share of the ageing population was somewhat smaller: nearly 75 percent were over fifty, and by far the largest number of beneficiaries were admitted to care after the age of sixty. Within the group of applicants over fifty, there were many individuals with work-related disabilities, both men and women. The petitions for admission to poor relief in 1820 reveal similar patterns, except that the age at the time of submitting the petition—or entering the support system—was slightly lower.

10 In Celje, the funds of the dissolved guilds were allocated to the operation of the hospital. In Ptuj, support was even expanded, as after the reorganisation of poor relief the guilds committed themselves by contract to supporting the »hospital« (as almhouse) "for assistants, apprentices, and servants." (Žižek, Aleksander: *Skrivno življenje cehov. Cehi Celja, Maribora in Ptuja med letoma 1732 in 1859*. Celje: Zgodovinski arhiv, 2012, 427–430). The determination of assistance within the hospitals depended on the amount of the foundational capital and, consequently, on the amount of interest generated by that capital. Cfr. also Vrhovec, Ivan: *Meščanski špital. Doneski h kulturni zgodovini ljubljanskega mesta*. Ljubljana: [s. n.], 1898.

11 See the case from 18th-century military conscriptions, in which the age limit was set at sixty years.

Table 1: Share of recipients by age groups in 1819

Age groups	Widows	Widowers	Married women	Married men	Single women	Single men	Sum
50–54	10	1	2	1	9	1	24
55–60	12	3	0	3	10	1	29
61–70	37	8	2	13	26		86
71–80	**18**	4	3	10	22		57
81–104	**11**	5	0	4	8		28
Sum	88	21	10	30	72	2	224
Share	39.29%	10.29%	4.90%	14.71%	35.29%	0.98%	83.90%

Table 2: Share of recipients by status in 1819

Age group	Widows/ widowers	Married	Single
50–54	39.13%	26.09%	26.09%
55–60	31.82%	13.64%	45.45%
61–70	41.98%	18.52%	35.80%
71–80	38.60%	22.81%	38.60%
81–89	60.71%	14.29%	25.00%
Sum	**43.63%**	**20.10%**	**36.27%**

When is someone perceived as old?

The transition of an individual into old age—namely, the question of when someone was perceived as "old" or regarded as old by society—varied greatly in the context under study. Old age, whether understood chronologically, culturally, or functionally, differed considerably between social groups. In general, we may say that physical incapacity for work, mental and cognitive weakness, and physical appearance[12] were the primary factors determining when someone was perceived as old, and when individuals perceived themselves as old, since this involved an interplay of cultural and functional understandings of old age. Yet the very threshold at which someone was labelled as "ageing" also depended on the individual's integration into the community, including behavioural patterns, family ties, economic circumstances, and, not least, lifestyle. Functional old age began when a person could no longer perform certain tasks or work sufficiently to support themselves. The decline in functionality was linked to the physical characteristics of the body, including behavioural and cognitive abilities. Cultural perceptions of old age marked an individual as old when they "appeared" or behaved as old according to the norms, experiences, and beliefs established within a given community. For a long time, the boundary of old age remained undefined; it was only clearly fixed by bureaucratic definitions that granted certain rights or imposed certain obligations (such as population censuses or systems of (pension) insurance). Among the many debates[13] on determining the threshold of entry into this stage of life, chronological age had the least influence on self-perception and collective

12 But also in this case it concerns different physical perceptions of the body, as pointed out by Urška Bratož (Staro telo. Medicinski pogled 19. stoletja. In: *10. Istarski povijesni biennale: Corpus, Carnalitas – o tijelu i tjelesnosti u povijesti na jadranskom prostoru: zbornik radova s međunarodnog znanstvenog skupa*, sv. 10. (Mogorović Crljenko, Marija, Uljančić-Vekić, Elena, eds.). Poreč: Zavičajni muzej Poreštine, Pula: Sveučilište Jurja Dobrile, Filozofski fakultet, Pazin: Državni arhiv, 2023, 102–114).

13 Cfr. Thane, Pat: "Social Histories of Old Age and Aging." *Journal of Social History*, 37, 2003, 1, 93–111; Neumann, Alexander Christian: Introduction. Old Age before Modernity. In: *Old Age before Modernity: Case Studies and Methodological Perspectives, 500 BC–1700 AD* (Neumann, Alexander Christian, ed.). Heidelberg: Heidelberg University Publishing, 2023, 1–30; Ehmer, Josef: Altersbilder im Spannungsfeld von Arbeit und Ruhestand. Historische und aktuelle Perspektiven. In: *Bilder des Alters im Wandel. Historische, interkulturelle, theoretische und aktuelle Perspektiven* (Ehmer, Josef, Höffe, Otfried, eds.). Stuttgart: Wissenschaftliche Verlagsgesellschaft, 2009, 209–234; Ehmer, Josef: Das Alter in Geschichte und Geschichtswissenschaft. In: *Was ist Alter(n)? Neue Antworten auf eine scheinbar einfache Frage* (Schriften der Mathematisch-naturwissenschaftlichen Klasse der Heidelberger Akademie der Wissenschaften 18) (Staudinger, Ursula M., Heinz, Häfner, eds.). Berlin: Springer-Verlag, 2008, 149–172.

understandings of old age at least until the late nineteenth century, while the other two criteria were far more significant.

Since more than two-thirds of the beneficiaries—or more precisely, the female beneficiaries—of the Poor Institute in Ljubljana were over fifty years old and were temporarily or permanently unable to work, the institute's recipients were inseparably associated with images of ageing individuals, often ill and above all marked by declining physical strength. Officials and burghers thus confronted a similarly "grey" image of ageing as the one presented in eighteenth-century encyclopaedias.[14] If in certain rural environments, shaped by different forms of property transmission, the age of fifty could mark the beginning of a gradual withdrawal from the position of household head,[15] in this pattern of beneficiaries of the urban Poor Institute—who were primarily the poor lacking accumulated capital or possessing very little of it—the onset of old age was defined precisely by diminished capacity for work.

It is evident from the analysed sources that around the age of fifty certain physical changes associated with the biological ageing of the body began to appear among part of the population, and more frequently among those engaged in physically demanding occupations (e.g., blacksmiths, carpenters, masons), especially among the poor.[16] Just as widespread as the awareness of the inevitable "biological clock"[17] was, in the period in which Valentin Mačehet lived, the belief in the interdependence between lifestyle—or the performance of certain types of work—and ageing, as well as the occurrence and course

14 Borscheid, Peter: *Geschichte des Alters*. Münster: F. Coppenrath, 1987, 134.

15 Ehmer, The Life Stairs, 63–65.

16 Čeč, Revni – ostareli.

17 Some studies have calculated that retirement in the early 19th century in Upper Austria peaked between the ages of 50 and 65, while around 1890 it occurred on average at the age of 52 in Moravia and Bohemia, and between 45 and 50 in Upper Bavaria. See Ehmer, The Life Stairs, 63; Čeč, Dragica: "Funkcije preživitka in družbena realnost preživitkarjev." *Glasnik Slovenskega etnološkega društva*, 62, 2023, 2, 31–44; Held, Thomas: "Rural Retirement Arrangements in Seventeenth to Nineteenth-Century Austria: A Cross-Community Analysis". *Journal of Family History*, 7, 1982, 3, 227–254; Grulich, Josef: "Das ländliche Ausgedinge in der Frühen Neuzeit. Ein Beitrag zur Problematik der Wahrnehmung sozialer Kategorien im 17. und 18. Jahrhundert." *Opera Historica*, 9, 2001, 1, 343–369.

of particular illnesses.[18] This is reflected, to some extent, in the pattern of those receiving support, since the share of individuals who had never married (often servants or apprentices) was lowest precisely in the group of the oldest beneficiaries. Servants, artisan assistants, and day labourers therefore often did not reach advanced old age. Yet, almost in defiance of the prevailing pattern, the oldest beneficiary in the analysed sample was, contrary to all stereotypes of ageing, an unmarried "old woman," a former maidservant, who at the age of 103—despite being immobile—was still cared for by a prominent burgher woman referred to as "Madam" Vogel (Vogau).[19] An individual's alignment with the characteristics of a particular age group was thus linked to the person's physical attributes, outward appearance, and bodily traits. Given that the majority of the Poor Institute's beneficiaries over the age of fifty were temporarily or permanently unable to work, the institute's recipients were inevitably associated with images of ageing individuals. Poverty and old age had, for centuries, often been synonymous.[20]

The image of poverty

Cultures respond to the needs of older people by creating ideals of ageing, old age, and its position within society. Perceptions of old age have always been shaped by cultural codes—that is, by imaginaries and idealised images of ageing—as well as by the social constructions of gender. Cultural patterns of attitudes toward the elderly were marked above all by the ideology of the "stages of life." The theory of the stages of life is the most widespread temporal and spatial representation of the life cycle. Between the Middle Ages and the seventeenth century, images and stereotypes of ageing emerged that depicted it as a sequence of life stages, a personal or

18 This is clearly reflected in the work of F. V. Lipič, while Meta Remec (*Podrgni, očedi, žival otrebi: higiena in snaga v dobi meščanstva*. Ljubljana: Inštitut za novejšo zgodovino, 2015) has provided a more detailed analysis of interpretations concerning the interdependence between lifestyle and life expectancy on the basis of scholarly literature and historical surveys.

19 SI_ZAL_LJU/0508, b. 11, 1820, n. 64.

20 The classic "triad" of the poorest members of society consisted, in addition to the elderly, of children and widows or families with many children (cfr. Čeč, Revni – ostareli; Jütte, Robert: *Poverty and Deviance in Early Modern Europe*. Cambridge: Cambridge University Press, 2001).

spiritual drama, or as a conception of life as a career—an idea which, according to J. Ehmer, was especially characteristic of the European middle classes and, of course, of men, who were most exposed to the risks of losing status and property in old age. In popular iconography, the depiction of the stages of life became a motif that transcended social estates. It presented recognisable, stereotypical images of the phases of an individual's life, regardless of how long each phase lasted or how many phases were included. Through popular texts and affordable visual representations, images of the stages of life spread across various cultural environments—from Spain and Italy to France and the Netherlands, where such typified images formed part of the interiors of wealthy burghers' homes, and further to Germany and Scandinavia.[21] With inexpensive prints, they eventually reached the broadest layers of the population and their everyday surroundings; in the Slovenian context, most likely in the nineteenth century, as evidenced by the depiction of the stages of life on beehive panels.[22]

Even though the images of the stages of life are undoubtedly typified, they nevertheless represent, to some extent, a social definition of life and behaviour—one that did not perceive life merely as the work of fate, but also reflected on—albeit subconsciously—planned practices which, despite all limitations, constituted long-term investments and took into account risks and security in the process of ageing. Despite the fact that depictions of the stages of life—of ascent and decline within an individual's life—are idealised, they nonetheless indicate that ageing was understood as a process divided into several phases, which affected individuals at different speeds. The petitions and the extensive information on the living circumstances of the beneficiaries of the Poor Institute, although dominated by the discourse of hardship inherent to the system itself, still reveal that ageing and the decline of physical strength could, at least in its early stages, also represent a challenge and an opportunity. Older people did not always passively accept their circumstances; rather, they often tried to cope, to find work still suitable for them, to secure shelter, and above all to maintain

21 Shakespeare playfully mocks the stages of life in The Seven Ages of Man. From Spain, Pedro Mexía's 1542 encyclopaedia spread—through translations into eight languages—into various cultural environments in the sixteenth and seventeenth centuries, and depictions of the stages of life can also be found in Scandinavia.

22 Ehmer, The Life Stairs, 53–55.

independence through petty work. Thus, a 76-year-old locksmith sold tobacco; a former apprentice who had never advanced to the rank of master, Jakob Flere, continued to chop firewood, even though the physician noted that he was completely exhausted and disabled; and a former day labourer cleaned a stable in exchange for a place to sleep.

Indigent elderly tended to live out their final years in much the same way as they had always done—through hard and constant work, or by relying on the kindness of others. The petition of Valentin Mačehet follows, as expected, the typical images and anticipated lifestyle patterns of the elderly. In his petition, he touches upon the characteristic motifs associated with poverty, ranging from the immorality of public begging to society's expectation of active labour to the extent that an individual's physical and other circumstances still allowed. He concludes his petition with a request to be admitted into some form of poor relief. Despite all the necessary methodological reservations that such sources require, his petition already points to the remarkable complexity of the experience of ageing and of the various stages of old age, to which Valentin, as a morally exemplary individual, adapted in accordance with social expectations. The petitions and the information that applicants for support provided to the officials of the Poor Institute are wrapped in a discourse of distress—characteristically pragmatic and prone to exaggeration.[23] These petitions were addressed to a very specific audience: the volunteers of the Poor Institute. On the other side stood the recipient of the petition. His attitude, and that of the institute's committees, toward the poor was highly multifaceted, ranging from compassion and solidarity to social control and criminalisation—from mercy to the gallows, to borrow the apt translation of the title of Geremek's study on poverty in the early modern period.[24] Their decisions were constrained by moral and legal norms that defined the behaviour of the elderly and guided various forms of social disciplining. The attitudes and perceptions

23 In the case of protocol concerning admission to poor relief, we are not dealing with exactly the same type of source, since the information that the officials of the Poor Institute were required to obtain from petitioner was standardised (King, Steven: "Pauper Letters as a Source." *Family & Community History,* 10, 2007, 2, 167–170 in King, Steven, Jones, Peter (eds.): *Obligation, Entitlement and Dispute under the English Poor Laws*. Cambridge: Cambridge Scholars Publishing, 2015, 74).

24 Cfr. Geremek, Bronisław: *Usmiljenje in vislice: zgodovina revščine in milosrčnosti*. Ljubljana: ISH, 1996.

of the elderly were also shaped by the cultural prejudices held by the urban middle classes. The collective of the poor—even if largely elderly—could represent a social threat, for it consisted of a large segment of the population who, as the life stories of individuals show, often lived in subletting arrangements due to lack of space.[25]

The key normative criterion that distinguished between an adult and an elderly person in this context was the ability to work. In the eighteenth century, the concept of work occupied a central place both in political theory and in moral norms and ethics.[26] From the Enlightenment onward, moral treatises increasingly linked the notion of work with that of wealth. Thus, a person who worked[27] was not supposed to be poor. This also implied that anyone no longer capable of work was, by definition, poor. Individual responsibility for one's own fate held an important place in society,[28] yet at the same time the care of the elderly rested on intergenerational solidarity. This solidarity should not be understood solely as solidarity among relatives, but also as solidarity within the community in which an individual lived.

Among the beneficiaries or applicants for admission to the Poor Institute, the elderly predominated. Among the older applicants, one occasionally finds representatives of wealthier social groups who hoped for additional support. At times, petitions for assistance submitted to the Poor Institute also came from individuals who were far from typical applicants. Even though the turbulent and morally questionable life of Ivan Nepomuk

25 Cfr. Čeč, Revni – ostareli.

26 Cfr. Bratož v tem zborniku; Bratož, Urška: "Kruha in dela: o reševanju socialnih vprašanj v Istri in Trstu 19. stoletja." *Annales: Series historia et sociologia*, 32, 2022, 4, 547–558.

27 Studen, Andrej: Človek mora delati za svojo srečo! Pretekla razpravljanja o delu s poudarkom na drugi polovici 18. stoletja in prvi polovici 19. stoletja. In: *Pomisli na jutri* (Studen, Andrej, ed.). Ljubljana: Inštitut za novejšo zgodovino, 2012, 9-36, 14; Münch, Paul: *Lebensformen in der Fruhen Neuzeit*. Berlin, Propyläen, 1998, 304–353. Odnos med revščino in nezmožnostjo dela in dolžnostjo države za skrb za te skupine prebivalstva je izpostavil že Justi sredi 18. stoletja, a že kmalu Sonnenfels postavi dolžnost države (in s tem tudi državne upravne strukture) v ozadje, ko vlogo države omeji na občasno pomoč (see Čeč, Dragica: Srce vsakega je treba pripraviti za dejavno udejanjanje zapovedi ljubezni do bližnjega: začetki sistemske oskrbe revnih in pomen kulture osebne dobrodelnosti. In: *Pomisli na jutri* (Studen, Andrej, ed.). Ljubljana: Inštitut za novejšo zgodovino, 2012, 37–70, 43).

28 Pančur, Andrej: Problem samoodgovornosti beračev, potepuhov in brezposelnih na Slovenskem pred drugo svetovno vojno. In: *Pomisli na jutri: o zgodovini (samo)odgovornosti* (Studen, Andrej, ed.). Ljubljana: Inštitut za novejšo zgodovino, 2012, 135–168, 136, 137.

Jurkovič, a judge and commissioner responsible for the provisioning and accommodation of soldiers in Vrhnika, had been investigated by the Ljubljana authorities in 1801, this circumstance did not trouble the parish priest of St. Jacob, Pohlin, seventeen years after the events, nor did he mention it when giving his opinion on the economic situation of the official in question. He did, however, state that the applicant, at sixty years of age, was still a very robust man who could certainly take up some form of work. He concluded his assessment of the judge's living circumstances by noting that he was perfectly capable of supporting himself, given that, as a widower, he was able to pay as much as thirty gulden in rent for his accommodation. He had collected the money for it from "benefactors." This circumstance aroused strong compassion and sympathy in the official of the Poor Institute toward the applicant, whereas for the parish priest it carried no weight, unlike the former, he did not wish to grant support to the applicant. On the other hand, the parish priest believed that the only work Jurkovič was still capable of was writing, and that he was not entitled to support. In the end, however, his application was rejected precisely because of the rules of domicile rights, as he had not yet lived for ten years in the town where he applied for assistance.[29] Of all the children born before 1803 to his twenty-year-old foster daughter, Uršula Cerer—whom he had taken into his care at the age of four—only one boy was still alive, a student at the higher school. Uršula herself, whom the former judge was supposedly to marry, had already died.[30]

In the everyday lives of the poorer population—in all 412 petitions for assistance, on which more than 500 people certainly depended, since some beneficiaries also supported family members—one finds almost no stereotypical images of the elderly disseminated by written and visual media, particularly the motif of the elderly person as a source of shame for descendants or the community. Typified negative representations of old people must, in any case, be understood in connection with the widespread

29 SI_ZAL_LJU/0508, b. 11, 52, n. 94, 1820.

30 This intriguing case—though without this epilogue in the protagonists' later lives—has already been discussed by Kos, Dušan: *Zgodovina morale. 2, Ljubezenske strasti, prevare in nasilje ter njihovo obravnavanje na Slovenskem med srednjim vekom in meščansko dobo*. Ljubljana: Založba ZRC, ZRC SAZU, 2016, 188 and Mal, Josip: *Stara Ljubljana in njeni ljudje: kulturnozgodovinski oris*. Ljubljana: Državna založba Slovenije, 1957, 49–50.

culture of exempla and contra-exempla. A note stating that someone was unable to "converse with others," and was therefore asocial, appears only in the case of a single woman, who had evidently been marginalised for a long time, as she was described as a cowherd—a particularly stigmatised occupation.[31] Widows and elderly women were often subjected to highly negative stereotypes, shaped by various cultural imaginaries associated with social disciplining and the informal regulation of the marriage market by families, kin groups, and the wider community. Visible biological changes and imagination further fuelled these perceptions. Elderly women were frequently attributed supernatural powers, especially the ability to exert negative or harmful influence on women's reproductive capacities and on food.[32] The active role of women was centred on their reproductive function, which, as theoretical works of the Renaissance show, could be considered complete by around the age of thirty-five. After this point, a woman's social standing could rapidly decline—unless she belonged to the higher social strata.

The partial absence of "problematic" impoverished elderly in the sources is also conditioned by the nature of the material itself, since—except in truly exceptional cases—individuals of questionable moral character were not proposed for support. Such people are more likely to be found in police and criminal records.[33] The poor-relief system rewarded morally irreproachable elderly individuals; those who behaved immorally, and especially those who begged publicly, were excluded from the system. Because the analysis also included archives of criminal courts, the (admittedly incomplete) corpus covering roughly the same period, 1820–1850, also contains elderly or older individuals who committed crimes arising from long-standing conflicts with spouses, children or their spouses, or from disputes within the community. Likewise, the analysed material rarely contains stories of elderly people who enjoyed social esteem due to their experience and knowledge—qualities particularly important in shaping relationships within illiterate communities—wisdom, or social standing.

31 SI_ZAL_LJU/0508, b. 11, 1820, n. 43.

32 Cfr. Cavallo, Sandra, Warner, Lyndan: *Widowhood in Medieval and Early Modern Europe*. Harlow: Longman, 1999.

33 Čeč, Dragica: "Starostniki na podeželju v 19. stoletju". *Prispevki za novejšo zgodovino*, 64, 2024, 1, 142–160.

Such representations are more common in rural environments and among social groups not typically captured by the sources examined here. In petitions for admission to poor relief, we naturally do not find positive images of the elderly, even though such images were produced by, and embedded in, broader society. These positive roles of the elderly were already widespread in humanist thought (for example, in Erasmus of Rotterdam). Theoretical and didactic texts in educational contexts celebrated the elderly as guarantors of wisdom and experience.[34] This motif became especially prominent among eighteenth-century pedagogues, as it fit perfectly with the ideal of the educator as a moral exemplar.

Since more than two-thirds of the residents—or more precisely, the female residents—of the Poor Institute in Ljubljana were over fifty years old[35] and were temporarily or permanently unable to work, the institute's beneficiaries were inseparably associated with images of physical decline: people who were often ill and whose physical strength was waning. A similarly "grey" image of ageing is conveyed by eighteenth-century encyclopaedias or by depictions of the elderly as wrinkled, frail, incapacitated, or physically deformed.[36] The image of poverty was frequently intertwined with the image of old age.[37] Yet, through the lens of these attributed representations of ageing, exceptional and atypical elements occasionally emerge—elements that were likely also part of the self-perception of the ageing individual.

The body of the elderly person

In early modern society, old age was not the only cause that could deform the human body and provoke various negative emotions and feelings of repulsion in others, but it was certainly the most common one. Although

34 Borscheid, *Geschichte*, 135; Bratož, Urška: "Podobe starosti v ljudski in uradni medicini 19. stoletja." *Glasnik slovenskega etnološkega društva*, 63, 2023, 2, 22–30.

35 Eighteenth-century encyclopaedias placed the peak of life at the age of forty-five, which differed markedly from military conscriptions, where the authorities were interested in the male population up to the age of sixty.

36 Borscheid, *Geschichte*, 134.

37 See Čeč, Dragica: *Revni, berači in hudodelci na Kranjskem v 18. stoletju*. PhD Thesis, Ljubljana: Filozofska fakulteta UL, 2008, 45–64; Židov, Nena: "Časopisi o beračih na Slovenskem v drugi polovici 19. in v začetku 20. stoletja." *Etnolog*, 22, 2012, 45–64.

epidemics were another major cause of bodily impairment, it seems that the primary association with a deformed and fragile body was linked to images of old people. Ageing was accompanied by biological changes that pathologically altered the ageing body and its physical strength.[38] These processes, however, were not necessarily tied to a specific chronological age. Certain biological circumstances were particularly pronounced in women and also affected their outward appearance. Menopause undeniably altered a woman's physical appearance, but it also transformed one of her fundamental social roles—motherhood. Fran Viljem Lipič, analysing fertility data, argued that women's reproductive period in Ljubljana ended at the age of forty.[39] However, his findings must be interpreted within the context of the inaccuracy of reported ages of mothers and the cultural constructs of particular life stages, which shaped women's perceptions and subjective statements about their age.

Old age was also associated with declining physical strength, bodily defects, or with individuals suffering from illnesses linked to ageing and to decades of physically demanding labour: joint problems and (partial) disability, reproductive-organ diseases before and during menopause, hernias, rheumatism, pain in the joints and back, incontinence, digestive problems, poor eyesight and blindness, impaired hearing or deafness. Difficulties with breathing—usually described simply as asthma—were also mentioned quite frequently. Sometimes the only description was "age-related weakness," which, as the city physician Viljem Lipič wrote, was a "common illness of the poor."[40] The seventy-four-year-old Mihael Smrekar, who had been discharged from military service at the age of fifty-nine, supported himself by mending shoes until he became completely incapable of work. When his condition was recorded before he was admitted to the poor-relief system, the only remark was that he was completely "exhausted."[41] The fifty-six-year-old disabled Luka "Žganc," who had lived in Ljubljana for only the last fifteen years, likely obtained poor relief[42] after years of begging—an

38 Cfr.: Bratož, Staro telo, 102–114.

39 Lipič, *Topografija*, 408.

40 Lipič, *Topografija*, 236.

41 SI_ZAL_LJU/0508, b. 15, 1825, n. 63.

42 SI_ZAL_LJU/0508, b. 12, 1820, n. 146.

activity suggested by his nickname. A medical certificate for the military veteran Marko Tomič (Tomiz), who had served sixteen years in the army and later earned a living working for farmers, described him at the age of sixty-one as a "worn-out" and disabled old man (!) suffering from colic and a hernia—very common ailments among Ljubljana's inhabitants, as F. V. Lipič emphasised.[43] The seventy-two-year-old Apolonija Janežič embodied the typical elderly woman: she was mobility-impaired and could move only with the help of a stick, and she ate only easily digestible food. Yet she still looked after children.[44] Even more frequent among applicants, however, were notes on poor eyesight or complete blindness, as in the case of the sixty-four-year-old Elizabeta Cigler, since such impairments hindered women in the types of work typically performed in old age—sewing and knitting.[45] Based on the data on blind recipients of support, it is evident that blind women living in the city generally supported themselves in adulthood through day labour. Among the blind and visually impaired individuals who submitted petitions for assistance, there were no young people who had lost their sight—something one might otherwise expect, since petitions for poor relief do appear for younger disabled individuals. As with the rest of the applicants, the majority of blind and visually impaired petitioners had already crossed the threshold into old age. For some elderly individuals, it is possible to discern that they gradually went blind only in old age, as this circumstance is noted either by the officials deciding on their admission or in the medical reports. Another indicator suggesting a gradual loss of sight is the information about the type of work the applicant had performed during their life: former maidservants and craftsmen inevitably lost their source of livelihood as their eyesight deteriorated, and the slow or rapid decline of vision was closely connected to their occupations. Among men, the visually impaired most often came from two artisanal trades: tailors and shoemakers. Some former maidservants lost their employment due to age even before going blind, while in other cases the records show that a maidservant lost her job precisely because her eyesight had begun to fail.

43 Lipič, *Topografija*, 203, 204.

44 SI_ZAL_LJU/0508, b. 12, 1820, n. 171.

45 SI_ZAL_LJU/0508, b. 11, 1820, n. 31.

The collective of elderly paupers could also represent a social danger because their appearance evoked negative emotions in others.[46] This was especially true of the elderly with "unaesthetic," repulsive bodily defects, unpleasant smells, or behavioural disturbances resulting from ageing.[47] Such figures had to be removed from public space.[48] This attitude is also reflected in the decision-making practices of the Poor Institute, which, through individual life narratives, simultaneously reveals concrete reactions of society and the immediate community. One such person was the seventy-eight-year-old former day labourer Tomaž Grabnar. His outward appearance was pitiable, as he moved with two sticks due to disability. For most of the year his presence among people was at least tolerable. But because he suffered from urinary incontinence, "they would not tolerate him under a roof in winter," as the institute's overseer wrote. Thus, almost every winter he went to Udmat (village near Ljubljana), where "a farmer tolerated him in a remote corner."[49] Both the elderly day labourer and the officials were aware of the limitations imposed by his body and of the smells that disturbed those around him. Jera Hubiš, when submitting her petition for support, believed that at the age of sixty-four she would no longer be hired as a child-carer because of cramps and digestive problems. [50]

Personal experiences of old age

Some individuals felt old very early in life due to their physical characteristics or other circumstances, and they described their condition as passive and tragic. This was the case, for example, with the fifty-four-year-old Marija Weis, born in the Slovene village of Javornik in Gorenjska region.

46 *Ibid*., 250.

47 Čeč, Dragica: "Revščina kot grožnja družbenemu redu v 18. stoletju." *Acta Histriae*, 24, 2016, 2, 291–312.

48 Compares the discourse analyses for the eighteenth century, even though many elements of this discourse persisted well into the nineteenth century: *Ibid*., 291–312.

49 SI_ZAL_LJU/0508, b. 12, 1820, n. 78. The direct association between stench or unpleasant smells and poverty was not yet as pronounced as it would become in the second half of the nineteenth century, cfr. Studen, Andrej: *Neprilagojeni in nevarni. Podoba in status Ciganov v preteklosti*. Ljubljana: Inštitut za novejšo zgodovino, 2015, 26–27.

50 SI_ZAL_LJU/0508, b. 11, 1820, n. 19.

She had two children—a son and a daughter—who were in service and therefore unable to care for her. When asked about her previous employment, she said that earlier, when she was "not yet so old," she had supported herself by sewing and knitting. Her physical frailty was so evident that even the overseers noted she was physically weak. She likely perceived her situation in the same way, as the poor-relief officer attributed her weakness and inability to work to a chronic illness that prevented her from making a living; he did not even mention her age. The question of why Marija interpreted her long-lasting ailments as changes brought about by old age can also be answered by the fact that she had "very poor eyesight"—a consequence of ageing.[51] The image of the elderly woman was also tied to certain petty, low-paid work, which in the examined sample represent one of the few remaining means of survival. The most typical low-paid work mentioned as employment for elderly women applying for some form of support was the combing of yarn.

An individual might perceive a particular life circumstance as especially tragic or associate it with profound fear. If we look beyond the typical rhetoric of the source, the recorded circumstances of some applicants reveal above all a fear arising from altered physical and other conditions that affected certain standards of everyday life which the individual still considered appropriate. For part of the population accessible through these sources, ageing was therefore both a personal and an economic drama, and at the moment of writing also an existential fear. For many people—especially the poor—fear stemmed from reduced or altered possibilities of survival, which often threatened both their livelihood and their housing. The elderly and unmarried Jera Hubiš expressed her wishes quite clearly to the members of the commission: she wanted a roof over her head and food. When new circumstances in her life—illness—arose, she believed that this will change her living standards dramatically. She feared that because of the illness that prevented her from working, she would be left without shelter. She believed that she earned her accommodation in old age through her work – child-minding. According to the physician who assessed her physical abilities, she was not only weakened by age but worn out by labour. Her fear was undoubtedly shaped by the images and experiences of old age

51 SI_ZAL_LJU/0508, b. 12, 1820, n. 115, 13. 6. 1820.

she observed in her surroundings, as she also mentioned unpleasant digestive problems. However, the priest reviewing her petition was unwilling to grant support: she would receive assistance only if no one was willing to employ her.[52]

(Intergenerational) solidarity, social networks

Intergenerational solidarity—understood, in contrast to earlier and especially sociological research, not only as solidarity among family members and relatives but also within the wider community, or in more contemporary terms, within the relationship between the individual, the welfare state, and the community[53]—constituted an important element of coexistence in urban environments. It was particularly crucial for the poorer strata of the population and for those who were ageing or already elderly, who lacked accumulated capital and whose physical strength was declining, since solidarity within the community, alongside kinship, was one of the main forms of security in old age. Although European historiography still often maintains that the European marriage pattern shaped family formation and that the EMP —with its late age at marriage—also influenced the development of public poor-relief systems, which included a considerable number of elderly people.[54] On the other hand, the southern part of Europe is generally described as lacking broader institutional support for the poor and the elderly. The region under consideration, situated at the boundary between these two models, still lacks a comprehensive demographic analysis for the period in question. Despite the assumption that the southern European marriage pattern was characterised by multigenerational households, the key finding in the analysed case is that only one of

52 SI_ZAL_LJU/0508, b. 11, 1820, n. 19.

53 This represents an extension of Hareven's concept, as the examined cases clearly demonstrate the significant role of the community in shaping and determining the quality of intergenerational relationships, especially in old age (Hareven, Tamara K: Introduction. In: *Aging and Generational Relations over the Life Course: A Historical and Cross-Cultural Perspective* (Hareven, Tamara K., ed.). Berlin, New York: De Gruyter, 1996, 1-12). Cfr. also French, Henry: "How dependent were the 'dependent poor'? Poor relief and the life-course in Terling, Essex, 1762–1834." *Continuity and Change*, 30, 2015, 2, 193–222.

54 Bouman, Annemarie, Zuijderduijn, Jaco, De Moor, Tine: *From Hardship to Benefit: A Critical Review of the Nuclear Hardship Theory in Relation to the Emergence of the European Marriage Pattern*. Working Papers, 2012.

the 267 recorded recipients of assistance in 1819 lived with his adult son; all other beneficiaries of the poor-relief fund were tenants and did not live with their adult children. These administrative practices were also reflected in the structure of those receiving care.

In 1819, 34 percent of the elderly under the care of the Poor Institute were single people. As in other urban centres, the environment under study was characterised by a high proportion of temporarily or permanently single individuals—one of the fundamental features of household labour and the urban labour market,[55] where employment as domestic servants was not only in demand but also conferred a certain prestige on the employing family. Because of legal and economic constraints, it was typical—also in the sample examined—that such individuals migrated to the city, married late, and many remained single for their entire lives (life-long servants). The social group of servants—those employed in households and, as such, legally counted as members of the household during their period of service—was statistically significant in the city. According to the 1831 population census, the physician Lipič estimated that they made up as much as 26 percent of Ljubljana's permanently settled urban population. Nor should we overlook Lipič's comment on several years of marriage-trend analyses, in which he noted that part of Ljubljana's population was "inclined toward a single way of life."[56] Even if this figure is high compared to some other urban environments, it nevertheless indicates that servants formed a noticeable part of the urban population.[57] Lipič already noted that all workers in the domestic sphere were "predominantly from the countryside," a point also confirmed by the records of the Poor Institute.[58] The demands of domestic service shaped the lives of many servants. In descriptions of their life stories, we frequently encounter the typical phrase that they had spent their best years in service as household helpers, and urban environments developed a

55 According to a very general estimate, between 10 and 20 percent of the population remained "permanently unmarried" (Studen, Andrej: ‚Nekaj drobcev iz vsakdanjika ljubljanskih služkinj pred prvo svetovno vojno.'' *Kronika*, 42, 1994, 3, 42–46).

56 Lipič, *Topografija*, 397.

57 *Ibid*., 166. According to the 1754 census, in the wealthier and exclusively urban Ljubljana parish of St Nicholas, the share of households headed by the elderly accounted for 22.16% of the town's population (Valenčič, Vlado: "Prebivalstvo Ljubljane pred dvesto leti." *Kronika*, 2, 1954, 3, 191–200, 197).

58 Lipič, *Topografija*, 167.

particular form of collective solidarity toward them. Only some women were explicitly recorded as former maidservants, although it is evident that many who later listed peddling, day labour, child-minding, or other petty women's work (such as combing yarn, knitting, or sewing) as their sources of livelihood had initially been employed as maids. Although maidservants as a social group were heavily stigmatised, this did not exclude particularly intense forms of solidarity—rooted not only in moral expectations but also in specific emotions and interpersonal bonds that developed over long periods of service between employer and employee. In mature adulthood and old age, as their physical strength declined and they became unable to perform full-day and often physically demanding work, this occupational group was even more dependent than others on their ability to establish and maintain interpersonal ties in order to secure shelter and occasional work. Especially those servants who had remained with the same employer for a very long time were, in some cases, recipients of special solidarity from their former employer as well as from members of the poor-relief commission. Thus, the sixty-year-old former maidservant Marija Mak, who had been immobile for five years, was provided with a bed free of charge by her former employer.[59] The case would not stand out in the city's everyday life were it not for the fact that the woman was described as worn-out or having "served her time" (*ausgedienstet*[60]) and ill.[61] What is also interesting in such cases is the attitude of the members of the poor-relief commission when assessing the applicant's social circumstances and her eligibility for support. The poor-relief officer and the priest would have granted Marija Mak a higher allowance than the other two members of the commission, though one of the commissioners himself stated that she was unable to earn anything at all and would have approved four kreuzers of support for her. We also find other, though rarer forms of community solidarity, such as employing elderly servants or providing lodging for older people. Uršula "Milnerca" was employed as a maid at "over seventy years of age." She was evidently still able to perform the tasks her employer required, as she had been in his service for twelve years, meaning she had been hired

59 SI_ZAL_LJU/0508, b. 12, n. 151.

60 It was a term that meant "having served one's time."

61 SI_ZAL_LJU/0508, b. 12, n. 151.

when she was well over fifty. In the petition for her support, her employer added that she was almost entirely incapable of performing the heavy work usually expected of maidservants.[62] Her last employer, the official Johann Baptista Novak, submitted the petition for her support when he was leaving Ljubljana.[63]

As an indicator of the limits of intergenerational and neighbourhood solidarity, let us consider one final example—that of the maidservant Jera (Ira) Kvasovka, who had served highly respectable employers. This could have benefited her in old age and in securing support from the poor-relief fund, even though she remained single and, unlike most elderly servants, lived with relatives. A member of the poor-relief commission, contrary to the priest's opinion, argued that the applicant deserved support because she had "lost her best years" in service as a servant, and the money she had saved had lost its value,[64] as she had kept it in banknotes that had depreciated significantly in the second decade of the century. Owing to the network of acquaintances she had built through her work, she ultimately received support despite the differing views among the commission members.

Individual solidarity was built on the basis of a person's social capital, which included the social ties cultivated throughout life and which served as an important safeguard against falling below the level of mere subsistence. Magdalena Pinter, born in Domžale, thus developed excellent social capital during the thirty-six years she spent in Ljubljana. This helped her even when, at the age of fifty-six, she applied for assistance from the Poor Institute. While the poor-relief officer would have granted her only the lowest allowance, the parish priest Janez Krizostom Pohlin—who in other cases proved to be a very strict evaluator of applicants—showed her particular favour, noting that she had distinguished herself as especially diligent and loyal. He was the priest of the parish of St Jacob, where many craftsmen as well as many former maidservants and farmhands lived. He pointed out to the other members of the commission that Magdalena was willing to undertake various kinds of work, despite being limited by

62 SI_ZAL_LJU/0508, b. 15, 1825, n. 44.

63 SI_ZAL_LJU/0508, b. 15, 1825, n. 44, 12. 12. 1824.

64 SI_ZAL_LJU/0508, b. 11, n. 56, 1820.

a crippled arm. All of this, together with her pious way of life, "speaks loudly in her favour," he concluded in his assessment of her standard of living.[65] The solidarity network and the social ties an individual built over a lifetime were shaped by various events: migration, economic and cultural circumstances, and political and legal demands and restrictions, yet individuals continually adapted to them. Solidarity was equally important for women, whom society marginalised and controlled for longer periods of life than men. In urban settings, the question of solidarity is particularly complex, as it reflects economic and political conditions, moral expectations and emotions,[66] belonging to a particular social group, and gender. Intergenerational solidarity, moreover, depends on numerous social patterns that define and constrain life in the city.

Intergenerational solidarity has often been highlighted in the study of family history as an indicator of the quality of family relationships—first and foremost the relationship toward children, which initially attracted the attention of historians. To a certain extent, solidarity among family members was also required by law (the Austrian Civil Code - *Allgemeines Bürgerliches Gesetzbuch*), albeit with limitations. In historical overviews of the family, the co-residence of several generations was associated with a guarantee of care and nursing for physically frail and ailing parents. Yet research on the elderly has shown that there was considerable variation in the family structures of older people, even when a particular family type predominated in a given environment.[67] Studies have demonstrated that elderly people in towns rarely lived with one of their married children.[68] In urban settings, poor families typically lived in sublet accommodation,

65 SI_ZAL_LJU/0508, b. 12, 1820, n. 145.

66 Fevert, Ute: *Emotions in History – Lost and Found*. Budapest: Central European University Press, 2011.

67 In many respects, the characteristics revealed by the sample under study overlap with the general demographic features of urban populations: Sieder, Reinhard: *Socialna zgodovina družine*. Ljubljana: Studia humanitatis, ZRC, 1998; Goody, Jack: *Evropska družina: zgodovinskoantropološki esej*. Ljubljana: Založba /*cf., 2003.

68 Cfr. Alter, George, Cliggett, Lisa, Urbiel, Alex: Household Patterns of the Elderly and the Proximity of Children in a Nineteenth-Century City, Verviers, Belgium, 1831–1846. In: *Aging and Generational Relations over the Life Course: A Historical and Cross-Cultural Perspective* (Hareven, Tamara K., ed.). Berlin, New York: De Gruyter, 1996, 30–52, 30, 31.

which further hindered multigenerational co-residence.[69] In the records of the Ljubljana Poor Institute, cases in which adult children of applicants lived together with their parents are rare. In the sample from 1819, only 11.6 percent of applicants had a child older than nine—old enough to help the parents but not yet of legal age—living with them. If we consider only elderly couples and widows or widowers, children over the age of nine are mentioned in just 23 percent of supported households. It remains unclear how many of these children actually lived with the beneficiaries, since the records list the number of children but not whether they resided in the same household as the recipient of assistance. Only two elderly widows were cared for by a daughter or a son, and one married woman cared not only for her own children but also for two elderly individuals over ninety years old. In the petitions for admission to care, where the applicants' lives are described in greater detail, only 29.8 percent of applicants had children; two women reported that all their children had already died. Seven married applicants still had minor or otherwise dependent children, and one widower and two widows also had a minor, dependent, or underage child. A full 81 percent of applicants did not indicate that they had ever cared for children.[70] Volunteers of the Poor Institute conditioned the provision of assistance on the requirement that an adult child leave the parental home and enter domestic service. There is also evidence of a practice in which elderly couples without their own children cared for a foster child who was still a minor—both because of the potential financial support and perhaps also because such a child could assist the foster parents as their strength declined. The care of such children was the responsibility of women, and it brought couples certain advantages within the poor-relief system that they would otherwise have had difficulty accessing. There is even a case in which the benefits generally associated with caring for a foster child were arranged directly by the volunteers of the Poor Institute: they secured a foster child for an elderly woman who would not have been eligible for support from the fund, and she was expected to support

69 Troyansky, David: The 18th Century. In: *The Long History of Old Age* (Thane, Pat, ed.). London: Thames & Hudson, 2005, 175–210.

70 SI_ZAL_LJU/0508, b. 11 and 12.

both herself and the child with the allowance granted for the child.[71] Partly, the environment under study also reflects the broader pattern that elderly men were small minority within the poor-relief system—only 10 percent. Of these men, only 33 percent were without family members (and therefore were not household heads), and only 11 percent had never married. A further trend is visible: male offspring from poor families were often sent into military service. Among members of the urban middle class who, through their profession, were in regular contact with the poor, the remark by the Graz topographer Benditsch—that the marriages of poor people could expect God's wrath rather than God's blessing—was seen as reflecting the everyday reality of impoverished families.[72]

Many applicants for admission to the Poor Institute had migrated to the city, and some of them had remained single throughout their entire working lives.[73] Poverty or low family income, mobility in search of work, and the resulting distance from relatives—or the absence of kinship networks in the place where the elderly lived—together with higher age at marriage and bureaucratic restrictions on the marriages of the poor, which resulted in fewer children, were all factors that hindered, if not prevented, intergenerational solidarity within the family. Local authorities harboured numerous reservations about the marriages of the poor. After the restoration of Austrian rule, local authorities spent more than a decade interpreting the provisions of the *Allgemeines Bürgerliches Gesetzbuch* in their own way—despite the fact that the code did not envisage any restriction of the freedom to marry—and used marriage permits to significantly limit marriage among the poorer strata of the population.[74] High infant mortality may also have contributed to these dynamics—or, conversely, the family circumstances of adult children, who often had to prioritise supporting their own offspring, a point frequently emphasised by the volunteers of

71 Rhodes, Emily: "Women as Child Carers: Arranging and Compensating Mothering in Early Modern Lancashire." *The History of the Family*, 30, 2025, 1, 108–124.

72 Lipič, *Topografija*, 397.

73 Lipič thus observed that from around 1790 onwards, "due to political and religious strictness," which hindered marriages on account of poverty and immorality, the number of marriages noticeably declined (Lipič, *Topografija*, 397).

74 Valenčič thus cites the responses sent in 1825, in which the Ljubljana gubernium explicitly defended the supervision of marriages among the poor (Valenčič, Vlado: "O ženitni svobodi in njenih omejitvah od fevdalizma do liberalizma." *Zgodovinski časopis*, 22, 1968, 3, 225–260, 243, 244; Lipič, *Topografija*, 397).

the Poor Institute. At times, conclusions about an applicant's inability to provide for themselves were also drawn on the basis of their social ties and their belonging to a particular social group.

A large share of those supported by the Poor Institute—no less than 43 percent in 1819—were widows and widowers. Their life trajectories were shaped by various demographic circumstances. Although the death of a spouse was not necessarily linked to the couple's old age, it could be perceived as particularly tragic for certain social groups. This is also reflected in the structure of beneficiaries in 1819: the proportion of widows and widowers was the highest among all recipients, and in both analysed data sets they accounted for more than 40 percent of those receiving support. The death of a spouse was regarded as especially tragic for women, as it could mean the loss of their primary source of livelihood and the occupational identity they had acquired through marriage. Yet this was not always the case: some women took over their husband's craft, even if they were unfamiliar with the work, and in some instances managed it successfully for decades, as shown in the petitions analysed here. These women applied for support from the poor-relief fund only in advanced old age. Some widows inherited and managed particularly strong social capital from their husbands. Their social capital was tied to the social esteem and goodwill that their deceased husbands had enjoyed within the community. Thus, in the petition of the sixty-year-old widow Marija Roskopf, it was noted that her husband had been an exceptionally skilled artisan, but that due to the war—which caused a shortage of work—he had lost his sanity and died some time later, leaving his widow with debts. Nevertheless, solidarity within the craft community was so strong that the artisan Fatig cared for her, although at the time she submitted her petition to the poor-relief officers he himself was giving up his craft due to old age.[75] Even when a widow was already receiving some form of support, all members of the commission agreed that she should receive almost the highest possible allowance, despite not being completely incapacitated. In addition, widows of craftsmen had another safeguard in the form of guild regulations, which allowed them to remarry and transfer the craft to their new husband. The vulnerability of widows—and at the same time the community's solidarity

75 SI_ZAL_LJU/0508, b. 12, n. 104.

toward this group of residents—was particularly evident in 1819, both in the support they received from the Poor Institute and from the fund of civic hospital.[76] Many widows had been married to day labourers, servants employed by officials, or other wage-earning workers whose social capital depended entirely on their occupation. The large share of new female applicants in 1820 suggests that they, too, sought to make use of this form of social capital. This segment of elderly couples and widows/widowers belonged to the group of poor former servants, day labourers, and other impoverished strata who married late and thus fell into the category of so-called "nuclear hardship"—a term used to describing situations in which couples, marrying late and having children late, left those children unable to care for their elderly parents. The situation was different for some widowers, especially craftsmen, even in trades that were not particularly profitable and were described by officials as "tailors' patchers" or "shoemakers' menders." These men most likely remarried at a relatively advanced age and still had small, dependent children in their sixties. Adult children—married or earning their living through a craft or other work—appeared more frequently in the households of craftsmen. By contrast, adult children are almost never found living with married day labourers, who often reached old age without children. Even those day labourers who did have children generally did not live in the same household or residential community as their elderly parents. Elderly people who were not yet completely incapacitated could still earn something through their labour. In addition to the applicant's physical and economic incapacity, supervisors also recorded the economic incapacity of adult children. Sometimes this was because the children themselves faced economic or housing difficulties due to supporting their own young families. More often, however, it was because they were so poor that they had not been granted permission to marry, or because they held occupations that made caring for elderly parents impossible (soldiers, domestic servants, apprentices, and occasionally pupils or students). In the rare cases where unmarried daughters cared for

76 The newly established parish poor institutes also did not receive the endowment capital of the civic hospital, even though on 31 March 1787 a central poor-relief fund was founded to administer all charitable institutions and funds. From the interest generated by this capital, up to fifty Ljubljana burghers were supported in the first half of the nineteenth century, and they received higher allowances than those granted by the parish poor institute.

their elderly parents,[77] this occurred more often in households that could afford such an arrangement. There are also cases in which maidservants left their positions for a period of time in order to care for their elderly parents. Most examples of unmarried daughters caring for ageing parents are found in craftsmen's households, which corresponds to the general behavioural patterns of families within this occupational group. Among them was the unmarried daughter of the peddler Helena Terseglav, who, together with her sister, evidently took over their mother's trade as well as her care. The daughter—or both daughters—attempted to obtain means for their mother's support from the Poor Institute. Because the daughter (apparently) had an illegitimate child, the mother, a hatter's widow, was granted support.[78] Yet the daughter's immorality was not mentioned, nor was the child described as illegitimate. One of the rare cases in which a woman receiving poor-relief assistance referred to her numerous grandchildren—whose existence prevented her children from caring for her—was that of the widow of the city night watchman, Marija Lastnik (Lastnig). At the age of seventy, her daughter was caring for five children of her own, and her father had married her to a clerk who earned his living in Ribnica. His annual salary was only twenty gulden higher than that of a sacristan, a wage already considered low.[79]

Another demographic factor posed a risk for ageing individuals in urban centres: the high mortality of children. Deaths of children and adolescents up to the age of twenty accounted for as much as 40 percent of all deaths in Ljubljana. This statistical reality was experienced by the widow Marija Grohar. Although she had been born in Ljubljana, she came from the very bottom of the social hierarchy and spent the first part of her life as a maidservant. She served for twenty years. According to her own account, she was able to marry only in her late twenties or early thirties, yet she nevertheless gave birth to five children—all of whom died.

A very important element of intergenerational solidarity in urban settings was the community in which people lived. Numerous circumstances

77 Quantitative analyses reveal similar patterns as well, cfr. Alter et al., Household, 37.

78 SI_ZAL_LJU/0508, b. 11, n. 61.

79 SI_ZAL_LJU/0508, b. 12, List of the Poor, Šentpeter Suburb.

described by applicants for support therefore indicate that intergenerational solidarity must be understood more broadly and in a more complex way, which is why it will be illustrated below through examples of individual life stories. Elderly single people or those who had become single again did not necessarily live alone. Above all, they wished to preserve their independence[80] for as long as possible, and in this regard, they relied on the widely recognised solidarity of the community—solidarity that was, after all, also required by law through the demands of domicile rights. Unlike unmarried servants, Marija Grohar possessed a different kind of property. At the age of seventy-nine, her assets consisted of a cow, and she apparently supported herself with the milk it produced. She nonetheless asserted that others were supporting her, despite paying up to two gulden a year for a modest attic room.[81] One of the motives for requesting poor-relief support for the sixty-year-old mentally ill Elizabeta Hvaleta was certainly the need to ensure supervision over her, which would be made possible precisely through granting support to whoever would care for her. Not only did individuals living in her neighbourhood write a petition for her admission to the Poor Institute, but her application also reveals other forms of community solidarity: she was allowed to sleep in the attic of a house "outside the city walls" free of charge, and she received food—though not every day—in different households. At the same time, Mrs Čehovin, the mistress of the house in the city where this elderly woman had previously been receiving food but not lodging, committed herself to caring for the applicant if she were granted support from the poor-relief fund.[82] Among the forms of informal solidarity was the employment of infirm individuals. Certain employers were willing to hire elderly people and recipients of poor-relief support because older workers were cheaper than other labour. Sources only rarely indicate that support from the Poor Institute benefited the entire household in which the recipient lived. A different strategy for securing subsistence in old age was adopted by the sixty-four-year-old servant Štefan Vidmar. He cared for an orphaned boy, perhaps with the intention that the child would support him once he became infirm. Yet fate intervened. The

80 Ottaway, Susannah R.: *The Decline of Life: Old Age in Eighteenth-Century England*. Cambridge: Cambridge University Press, 2004.

81 SI_ZAL_LJU/0508, b. 12, n. 129, 8. 8. 1820.

82 SI_ZAL_LJU/0508, b. 11, n. 59, 20. 3. 1820.

servant had already become quite frail by the age of sixty, while the boy he cared for turned out to be an excellent pupil. This case is one of the few in which the mayor himself guaranteed that he would ensure the eleven-year-old boy would be trained as apprentice in crafts.[83] Given the importance of child-rearing as a female task, this form of mothering granted ordinary women authority they might otherwise have lacked. Women understood its wider significance and skillfully leveraged it in their petitions. [84]

The poor formed a wide variety of living arrangements that differed from the households of the wealthier classes, and for this reason scholars of family types often overlooked them, especially when they approached the family primarily as a basic social unit whose main function was the production of offspring.[85] Older women in particular entered the households of co-lodgers, where they contributed to the shared household through their labour and occasional poorly paid or unpaid work (childcare, cleaning, sewing, knitting, and similar work), in exchange for food and a roof over their heads. At times, as already mentioned, they took in orphans or illegitimate children. Some of the better-off elderly took in students or other lodgers, or they were granted free use of living quarters in which soldiers were billeted; in return, their obligation to the property owner was to accept the duty of housing soldiers. A market for servants (and day labourers of both sexes) developed, and it was not limited to married women but also included ageing individuals with declining physical strength. The solidarity of the neighbourhood was not merely the result of expected, morally conditioned, and traditionally inherited patterns of mutual aid on the one hand and stigmatisation on the other, but also of many other circumstances; for this reason, community and family solidarity should not be idealised. A noteworthy example is the fate of the Ljubljana baker Katarina Ljubič, who was only forty years old but already suffered from urinary incontinence. Although the poor-relief commission did not explicitly

83 SI_ZAL_LJU/0508, b. 12, n. 95, 1820 and 10. 4. 1820.

84 Rhodes, Emily: "Women as child carers: Arranging and compensating mothering in early modern Lancashire." *The History of the Family*, 30, 2025, 1, 108–124.

85 Botelho, A. Lynn: The 17th century. In: *The Long History of Old Age* (Thane, Pat, ed.). London: Thames & Hudson, 2005, 113–174, 159; Studen, Andrej: *Stanovati v Ljubljani. Socialnozgodovinski oris stanovanjske kulture Ljubljančanov pred prvo svetovno vojno*. Ljubljana: ISH - Institutum studiorum humanitatis, 1995, 147–150.

mention unpleasant smells, they claimed she could no longer obtain work. This was likely the reason her husband abandoned her. Her illness was also used to justify her high rent. She was evidently in poorer health, as she was described as "physically weak." Because she was becoming a burden to the community, the officials appealed to the person who, according to the Austrian Civil Code, was legally obliged to care for her—her husband. He was formally summoned and instructed to provide for his wife.[86]

Conclusion

The representation of old age, based on selected themes and on the analysis of petitions submitted by recipients of poor relief, proved to be far more complex than the images conveyed solely through political, moral, and other textual or visual sources, which tend to follow certain stereotypical or archetypal notions of ageing. The data provided by applicants for admission to the poor-relief system reveal a range of images and experiences associated with different stages of old age. They demonstrate that both the perception of ageing and the response to changing circumstances were highly individual. The documentation of the Poor Institute shows that perceptions of old age were shaped less by chronological age than by the outward physical and mental condition of the individual—conditions that were the result of the intensity of the work they had performed, something well understood by both society and the medical profession. The appearance of an elderly person and their physical and mental state were also the consequence of the living conditions in which they had spent most of their lives. Although the elements examined in this article cannot capture the full complexity of experiences of old age in an urban population, they nonetheless reveal part of the life circumstances of elderly people. In certain cases, precisely because of atypical entries characteristic of the initial phase of entering the relief system, it is even possible to distinguish between an ageing individual's self-perception as "old" and the perception held by the surrounding community or by relief supervisors, who—regardless of biological age—did not yet regard the person as old.

86 SI_ZAL_ LJU/0508, b. 11, lists of relief recipients in 1819.

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Filip Draženović

Old Age in 18th-Century British Health Regimens

What should we eat, and how should we live in order to ensure a long and fulfilling life? These questions have been central to every society, from early civilizations to the present day. Each society has provided its own answers, and this paper focuses on how these questions were addressed in health regimens published in eighteenth-century Britain. To provide a comprehensive insight, this study engages with the concept of the six non-naturals, which were believed to be fundamental to human health: climate (air), food and drink, evacuation and repletion, sleep and wakefulness, movement and rest, and the passions of the mind, as outlined by antique physician Galen.[1] Although medical theory evolved and the majority of regimens no longer strictly followed humoral medicine, they continued to postulate the six non-naturals as the cornerstone of health regimens. Among these, diet held a particularly prominent place and was often equated with health itself due to its centrality in Galenic physiology.[2] These regimens demonstrate the belief that individuals could live to a very old age if they were willing to adhere to a prescribed regimen.

1 Niebyl, P. H.: "The Non-Naturals". *Bulletin of the History of Medicine*, 45, 1971, 5, 486–492.

2 Schäfer, Daniel: *Old Age and Disease in Early Modern Medicine*. Abingdon: Routledge, 2016, 26–27. John Arbuthnot asserted, "all the intentions, pursued by medicines, may be obtained and enforced by diet." (Arbuthnot, John: *An essay concerning the nature of aliments, and the choice of them, according to the different constitutions of human bodies. In which the different effects, advantages, and disadvantages of animal and vegetable diet, are explain'd*. Dublin, 1731, 145). George Cheyne gave two general recommendations: The Aged should (1) carefully guard against all the Injuries of the Weather; and (2) lessen the Quantity, and lower the Quality of their Food gradually, as they grow older; even before a manifest Decay of Appetite force them to it (Cheyne, George: *An essay of health and long life*. London, 1724, 229). See also Mead, quoted via Sinclair, John: *The code of health and longevity; or, a concise view of the principles calculated for the preservation of health, and the attainment of long life. Vol. 3*. Edinburgh, 1807, 484.

https://doi.org/10.35469/978-961-7276-18-3_4

The definition of old age, however, was far from uniform.[3] Old age was never defined solely by the passing of a certain birthday; rather, it was shaped by functional, cultural, as well as chronological criteria. Most reflections on aging began with the premise that human beings possess limited bodily resources that must be carefully managed and preserved. Achieving this, required individuals to develop self-awareness of their own bodies, a skill closely linked to self-governance and the suppression of inappropriate desires. Nevertheless, certain general observations were widely shared: the old man was commonly perceived as either cold and moist or cold and dry.[4] To sustain life, it was considered essential to counteract the dryness and coldness associated with aging and to restore humoral balance. Consequently, identifying ways to warm and moisten the body became the chief aim of geriatric advice. There were no regimen books specifically devoted to aging women, although advice concerning them was scattered across various works. It was generally accepted that female "grows old sooner than the Male,"[5] but old age was mostly seen as asexual, a view that can be observed in George Cheyne's one-sex model.[6]

In the premodern period, morality and medicine were closely intertwined, forming a shared field united by the principle of moderation, which was widely recommended as the most effective means of maintaining bodily balance. Two guiding principles from this era—etched into the Temple of Apollo at Delphi—resonated deeply with premodern readers and shaped ideals: "Know thyself" and "Nothing in excess."[7] As John Theobald quoted Dr. Barrow in *Every Man His Own Physician*: "We can never set upon it too soon, we should never think it too late to begin; to live well is always

3 The most important studies of this field are Schäfer, *Old Age and Disease in Early Modern Medicine*; Yallop, Helen: *Age and Identity in Eighteenth-Century England*. Abingdon: Routledge, 2013; Ottaway, Susannah R.: *The Decline of Life Old Age in Eighteenth-Century England*. Cambridge: Cambridge University Press, 2004; Roberts, Marie Mulvey: A Physic Against Death: Eternal Life and the Enlightenment – Gerontology and Gender. In: *Literature and Medicine during the Eighteenth Century* (Roberts, Marie Mulvey, Porter, Roy, eds.). London: Routledge, 1993, 151–167.

4 Schäfer, *Old Age and Disease in Early Modern Medicine*, 24–25.

5 Lynch, Bernard: *Guide to Health through the Various Stages of Life*. London, 1754, 8.

6 Yallop, Helen: "Representing Aged Masculinity in Eighteenth-Century England". *Cultural and Social History*, 10, 2013, 2, 191–210, 201.

7 "Considering the great damage that comes upon most people daily by not knowing or not regarding there own Constitutions of body, whereby they neglect the pretious Jewel of Health." Archer, John: *Every man his own doctor in two parts*. London, 1671, Preface (unpaginated).

the best thing we can do (...); it is most seasonable for young Men, it is most necessary for old, it is most advisable for all."[8]

Regimen

To understand the popularity of regimens[9] during the early modern period, it is essential to recognise the prevailing notion that prevention was preferable to cure. This distinction underpinned the divide between regimen and medicine. Premodern authors frequently stated that: "Since no Man therefore can have a better Physician than himself, nor a more sovereign Antidote than a Regimen."[10] Knowing how to conduct life was considered crucial and those who disregarded regimens could not hope to live long, which emphasised personal responsibility for one's health. Nevertheless, even strict adherence to these rules did not always guarantee a long and happy life.[11]

Regimens blended medical advice with traditional maxims, folkloric remedies, and moral guidance.[12] Analogies and proverbs were frequently employed as effective tools to convey and impart knowledge. This compilation of advice is evident in texts such as *The nurse's guide: or, the right method of bringing up young children. To which is added, an essay on preserving health, and prolonging life. With a treatise of the gout*.[13] There are three

8 Theobald, John: E*very man his own physician. Being a complete collection of ... remedies, for every disease incident to the human body. With plain instructions for their common use*. London, 1764, 141–142.

9 For general introduction see: Fissell, Mary E.: Readers, Texts, and Contexts: Vernacular Medical Works in Early Modern England. In: *The Popularization of Medicine, 1650-1850* (Porter, Roy, ed.). London: Routledge, 1992, 72–96. Furdell, Elizabeth Lane: *Publishing and medicine in early modern England*. Rochester, NY: University of Rochester Press, 2002.

10 Mead, Richard: *Medicina flagellata; or, The doctor scarify'd*. London, 1721.

11 "This accounts for some Things we can't tell what to make of in the Providence of God, about the Health and Life of some Persons; that some weak Persons should live a long while, when others of a more healthy Constitution are cut off; that some pious, useful, an excellent Persons are so sickly, and (as we think) immaturely taken away, while some of a very different Character are healthy, and attain a great, though not a good Old Age." (Theobald, *Every man his own physician*, 97–98).

12 Sometimes they were written in verse: Armstrong, John: *The art of preserving health*, London, 1757; Baynard, Edward: *Health, a poem. Shewing how to procure, preserve, and restore it*. London, 1719.

13 Anonymous: *The nurse's guide: or, the right method of bringing up young children. To which is added, an essay on preserving health, and prolonging life. With a treatise of the gout*. London, 1729.

different works within a single volume, each addressing a different group of readers but united by a similar underlying idea.

From the sixteenth century onward, medical authors increasingly made their regimens and health guides accessible by writing in the vernacular.[14] For example, dietary advice was much more generalised, often summed up in a few rules, as opposed to earlier regimens such as Gabriele Zerbi's *Gerontocomia*. As a result, late seventeenth-century and eighteenth-century regimens were significantly shorter, and their advice became less complex. Regimens were often reprinted over several decades, as evidenced by the examples used as sources for this study. They were written for practicing rather than reading and were seen by the public as a dialogue between those who possessed knowledge and those who sought to apply it. The genre was not confined to a specialist readership, as its rules were intended to be adopted by everyone. During this period, some translations of works originally published on the continent (Leonardus Lesius, Luigi Cornaro) were also published. Translations and reprinting of older works were common, which shows that the content was passing between different cultures.

Illness

While regimens primarily focused on prevention rather than cure, authors nevertheless reflected on the illnesses that accompanied old age. Authors did not typically offer advice on curing illness, but stated that most old men were subject to chronic diseases, "which seized them in their Youth, or declining Age," as Floyer wrote, and continued: "By a proper Regimen we prevent their Increase; but their Cure belong to Physick."[15] Here, Floyer drew a clear distinction between the two fields and their respective approaches. It was widely accepted that "old men die merely by being old, and Old age cannot be cured," [16] as, "old age was inevitable." Hill stated

14 For example, John Trusler wrote 15 rules at the beginning of the book in Latin. Trusler, John: *An easy way to prolong life, by a little attention to what we eat and drink: containing, a chemical analysis, or, an enquiry into the nature and properties, of all kinds of food; how far they are wholesome, and agree with different constitutions*. London, 1773.

15 Floyer, John: *Medicina Gerocomica: or The Galenic Art of Preserving Old Mens Healths*. London, 1725, 24–25.

16 Hill, John: *Virtues of Sage in Lengthening Human Life*. London, 1770, 9.

that, "men must expect a decay of strength: and it would be as idle so call it a disease, as it were vain to think of remedies."[17] Old age was often described metaphorically as a kind of disease, as stated by the author of *Synopsis medicinae*, "Old Age itself is a Disease or rather a Legion of them."[18] Certain illnesses were especially associated with old age, such as gout, which was the result of intemperate living,[19] haemorrhoids,[20] memory, [21] and repletion, as elderly "can more expeditiously diminish than increase the juices of the body."[22] Elderly women were considered particularly susceptible to phlegmatic conditions and uterine complaints.[23]

Writers offered general advice on how to cope with illness, rooted in the principles of temperance and timely intervention. Hill recommended that "purging[24] will be cured by proper diet, when it is regarded early: otherwise medicines must be called in."[25] Medicine was considered a last resort, as old age required exemption from "strong physic",[26] or too much sweating, [27] because "After fifty Years of Age, we must be more cautious and moderate both as to the frequency of Bleeding, (...) which from that Age to extreme old Age are daily decaying both in Quantity and Quality."[28] Hill therefore advocated: "Avoid medicine if possible (...) the best guard of their health is

17 Hill, John: T*he Old Man's Guide to Health and Longer Life.* London, 1750, 45.

18 Allen, John: *Synopsis medicinae; or a summary view of the whole practice of physick*. London, 1756, 97.

19 Oliver, William: *A practical essay on the use and abuse of warm bathing in gouty cases*. London, 1751, 8.

20 Carr, Richard: *Medicinal epistles upon several occasions*. London, 1714, 94.

21 Strother, Edward: *An essay on sickness and health; wherein are contain'd, all necessary cautions and directions, for the regulation of diseas'd and heal thy persons: in which Dr. Cheyne's mistaken opinions in his late essay, are occasionally taken notice of*. London, 1725, 167.

22 Mead, quoted in Sinclair, *The Code of health and longevity*, 483.

23 Strother, *An essay on sickness and health*, 281.

24 Hill, *The Old Man's Guide*, 27: "No disease is more mischievous to weak old persons than a purging."

25 Ibid. 42. "Children and old Men bear fasting very ill, it weakens their Spirits, abates their Heat, dries their Bodies, hinders their Sleep, binds their Bodies therefore all thin old Men ought to eat little." (Floyer, *Medicina Gerocomica*, 13).

26 Radcliffe, John: *Dr. Radcliffe's practical dispensatory: Containing a complete body of prescriptions, ... selected I. From various authors. II. From the best prescriptions chiefly used / by Dr. Radcliffe, ... By Edward Strother*, M.D. London, 1730, 44, 108.

27 Anonymous, *The nurse's guide*, 114.

28 Flamant, M.: *The art of preserving and restoring health explaining the nature and causes of the distempers that afflict mankind: also shewing that every man is, or may be his own best physician*. London, 1697, 37.

quietness".[29] Even "though old age in many be a disease not curable, but by death; yet these are but accidental," wrote the author of *The divine physician*: "life itself is a blessing; and the longer we live, the more experience we have of God's favour."[30]

Six Non-Naturals

Focusing on six non-naturals, we begin with **air**, about which authors of regimens wrote the least. Although Galen listed air in first place among his six non-naturals, we cannot find detailed advice in regimens regarding what good air means.[31] Rules concerning air were expressed in very general terms: "Nothing contributes more to health and long life than pure and good air,"[32] or as John Archer stated "Air is the most worthy Element for the preservation of Life in every creature."[33] For George Cheyne, the primary recommendation was to "avoid the Injuries of the Weather, as much as ever they can. The Blood of the Aged is ever most certainly poor and viscid. I advise such, to keep Home, provide warm Rooms and Beds, and good Fires, whenever the Sky lowes, Winds blow, or the Air is sharp."[34] John Arbuthnot provided the most detailed contemporary analysis of air in his *Essay Concerning the Effects of Air on Human Bodies*, although the work did not focus exclusively on old age. He wrote that the best mark of the wholesomeness of the air is the customary longevity of the inhabitants, an observation echoed by Mackenzie several years later.[35] Air should not be cold or damp, since "Cold air chills the blood; and in old men we want rather to warm it," and Hill noted that north and north-east winds are

29 Hill, *The Old Man's Guide*, 36.

30 Harris, John: *The divine physician, prescribing rules for the prevention, and cure of most diseases, as well of the body, as the soul*. London, 1676, 5.

31 For example: "The Air that is good for old People, ought to be temperate" (Anonymous, *The nurse's guide*, 87).

32 Hill, *The Old Man's Guide*, 16.

33 Archer, *Every man his own doctor*, 14.

34 Cheyne, *An essay of health and long life*, 11, 205.

35 Mackenzie, James: *The History of Health, and the Art of Preserving it: Or, An Account of All that Has Been Recommended by Physicians and Philosophers, Towards the Preservation of Health*. Edinburgh, 1758, 368. Authors also wrote about Unwholesome Air: Steele, Richard: *A discourse concerning old-age, tending to the instruction, caution and comfort of aged persons*. London, 1688, 24–25.

the worst for old men. Older people were advised to avoid being outdoors in the early morning or late evening.[36] Another recommendation was to avoid "smoaky Coffee-Houss when a clear Air and Sun shine invite you into the Fields The Blood grown heavy by Inactivity should be stirred up: by Exercises in the open Air."[37]

With regard to **sleep**, it was believed that the elderly need longer hours than the young "because it lessens the dryness of their constitution"[38] and makes the pulse lower.[39] John Hill noted: "Six hours is as long as a person in the prime of life should sleep; but, in age, eight, or even ten, according to the peculiar constitution, may be more proper."[40] Mackenzie, however, warned against excessive sleep, which "renders the body phlegmatic and inactive, impairs the memory, and stupefies the understanding. And excessive wakefulness dissipates the strength, produces fevers, dries and wastes the body, and anticipates old age."[41] Regimens also addressed the timing, duration, and conditions of sleep. It was important to sleep at the right hours, in a salubrious environment, and in a suitable position.[42] It was suggested that the elderly should warm their bed.[43] While daytime sleep was discouraged for the young, it was considered permissible for the elderly, provided that they "take it rather sitting than lying down, because the head will be less offended with the rising vapours."[44] As a general rule, both

36 Hill, *The Old Man's Guide*, 18, 20. *Ibid*., 29.

37 Carr, *Medicinal epistles*, 29–30.

38 Trusler, *An easy way to prolong life*, 13-14. But as it is written in Hill, *The Old Man's Guide*, 29, there should not be any additional lying in the bed (*Ibid*., 31).

39 Floyer, *Medicina Gerocomica*, 16–17.

40 Hill, *The Old Man's Guide*, 34. Also Mackenzie, *The History of Health*, 383; Hill, *Virtues of Sage*, 32.

41 Mackenzie, *History of health*, 383–384.

42 Trusler, *An easy way to prolong life*, 9: "… proper Time of going to Sleep, the right Way of lying in Bed, the true Manner of being cover'd in it, and the fit Time of waking and riling." Also: "Going into Bed, they ought first to lie on their left Side, that their Food may descend to the Bottom of the Stomach, which inclines that Way." (Anonymous, *The nurse's guide*, 115, 117).

43 Trusler (*An easy way to prolong life*, 14/5) reports of older who constantly sit near fire, heath their beds, wearing warm clothes. There were also different opinions: "Sit not dole to the Fire, even in cold Weather, presently after Dinner: For it raises Fumes, and hinders Digestion: A cool Air will strike the Heat inward, to help the new Access." (Byfield, Timothy: *Directions tending to health and long life*. London, 1717, 12).

44 Trusler, *An easy way to prolong life*, 10.

excessive wakefulness and excessive sleep were deemed harmful and were sometimes considered akin to disease. [45]

Management of **emotions** and **passions** was considered of the utmost importance for good health.[46] "Nothing, in a man's life", wrote John Trusler, "tends more to health and longevity, than peace of mind; it is the index to old age."[47] Emotions were understood not only as psychological phenomena but also as physiological processes, reflecting a psychosomatic and holistic understanding of the body. Emotional regulation was not considered solely within the domain of moral philosophy, as John Hill remarked: "WITHOUT entering into the province of the moralist or preacher, we may affirm here, that the passions demand great regard in preserving the health of old men. The motion of the blood in circulation is greatly affected and altered by them", and advised them to avoid the hurry of the spirits at any age.[48] For this reason, Hill also suggested seeking assistance beyond strictly medical practitioners:

> *Let him examine himself, whether it be a disorder of his mind; and then his physician, whether it lie in the body. In the first case the remedy is philosophy: But in the latter, a few medicines will restore him to temper; to that temper on which his life and happiness depend. LET the hasty old man cool himself by physic and a low diet; and let him who is melancholy and gloomy, banish the everlasting fear of death by warmer foods, cordial medicines, and that best of cordials, wine.*[49]

45 Carr, *Medicinal epistles*, 164–165.

46 Cheyne, *An Essay of Health*, 144. For a more in-depth discussion of the history of emotions in the early modern period, see f.e. Broomhall, Susan (ed.): *Early Modern Emotions: An Introduction*. London: Routledge, 2016 and Stolberg, Michael: "Emotions and the Body in Early Modern Medicine". *Emotion Review*, 11, 2019, 2, 113–122.

47 Trusler, John: *A Sure Way to Strengthen Life with Vigour; Particularly in Old Age*, London, 1770, 167. Quotation from Yallop, "Representing Aged Masculinity", 196.

48 Hill, *The Old Man's Guide*, 24, 27.

49 *Ibid*., 27. Hill described sage as: "Helpfull, as it can calm both also raise passions. O cheer, and raise, and elevate the spirits: for this keeps up their motion, and expands the substance of the brain, preventing that contraction which we fear" (Hill, *The Virtues of Sage*, 11). "That it continues health, preserves the faculties, and memory, and by a grateful warmth cheers, revives, refreshes, and recruits. preventing coldness, flatulencies, and indigestions there, and giving constantly a moderate, never a voracious appetite; curing also numbness! deafness, dimness of fight, and dullness of apprehension." (*Ibid*., 12).

Since food was believed to influence emotions, dietary regimens were also proposed as a means of mitigating passions, reflecting the interconnected nature of bodily and emotional states. This perspective was also endorsed by moral authors.[50] John Floyer in *Medicina Gerocomica* warned that: "cold Air, cold Baths, cold Diet ... cold Cloaths, cold Beds", might have exactly the same result as the "cooling Passions of Fear and Sadness" (...), since "Immoderate Cares and Passions, especially Sorrow, hasten old Age". Positive emotions, however, were understood as life-extending: "Envy, Ambition, Covetousness, Anger, do decay the Body; but Hope, Love, Joy, are Prolongers of our Lives by their Influence on the Humours."[51]

Among the positive emotions, cheerfulness held a particularly esteemed position. In his *Old Man's Guide*, John Hill defined cheerfulness as "the natural offspring of health".[52] As Hellen Yallop observed,[53] within medical advice, the word cheerful functioned as a stamp of approval for habits, pursuits and behaviours characterized by moderation and sociability: "The company of agreeable friends will be the best medicine in an evening; and good broth his fittest supper. – mixing advice from different fields."[54] This illustrates the interconnectedness of different forms of advice: what one ate was important, but so was the company in which one ate.

In suggesting that the "old man" should be "always cheerful but never merry", Hill recommended an hour or two of conversation with family or neighbours before sleep.[55] Here, the distinction between temperate cheerfulness and intemperate joy becomes apparent, the latter being considered

50 "Moderate Fasting is a most excellent Physician both for the Body and Mind." (Tryon, Thomas: *Wisdom's dictates, or, Aphorisms & rules, physical, moral, and divine, for preserving the health of the body, and the peace of the mind*. London, 1691, 5).

51 Floyer, *Medicina Gerocomica*. He also proposed: "IT is necessary to conquer the vitious Passions which attend old Age" (*Ibid*., 20–21). For effect of lethargie in old see Arbuthnot, John: *An essay concerning the nature of aliments, and the choice of them, according to the different constitutions of human bodies. In which the different effects, advantages, and disadvantages of animal and vegetable diet, are explain'd*, Dublin, 1731, 86.

52 Hill, *The Old Man's Guide*, 4.

53 Yallop, *Age and Identity in Eighteenth-Century England*, ch. "Society and Sociability: Cheerfulness," 83–106.

54 Hill, *The Old Man's Guide*, 46.

55 *Ibid*., 33. "GOOD humour, and a happy satisfaction of mind, will give the aged many years, and much happiness in them." (*Ibid*., 25).

harmful to older bodies because it could excessively accelerate bodily processes. Cheyne stated that nothing will more effectively contribute towards the "Felicity of a Green Old Age", "than innocent and entertaining Amusements, engaging and light Studies, and rational Diversions in cheerful and affectionate Society. "[56] It was especially important for old men to mix with young company.[57] As Hannah Newton wrote: "Cheerfulness was not just a sign of recovery: it was also the means by which the weak body was restored to full strength."[58] In contrast to some of the other aspects of convalescent care, cheerfulness was beneficial in all bodily states,[59] and was compared to high spirit[60]: "for this cause Physicians frequently advise their Patients to nourish that Affection in them, and to avoid the contrary, (namely) Sorrow and Sadness; which last being cold and dry, and so hindering the circulation of the Blood, debilitating the Animal, and Natural."[61]

As Hill wrote, violent passions and intemperance "disturb and hurt the brain and bring premature old age."[62] This reinforces the importance of temperance and moderation. "Perhaps the wise and good live long because they are temperate. CHEARFULNESS promotes longlife; and this springs best of all from the same source; for what is so chearful as innocence?"[63] Hill asked himself and showed how longevity, physical health and emotions were tightly connected. The elderly were advised to live as innocently as possible—not ascetically, as a preparation for death, but temperately, avoiding tumult and excess. Next quotation shows the dangers of passions:

56 Yallop, "Representing Aged Masculinity", 198.

57 *Ibid*., 199.

58 Newton, Hannah: *Misery to Mirth. Recovery from Illness in Early Modern England*. Oxford: Oxford University Press, 2018, 84.

59 Carr, *Medicinal epistles*, 47–48: "… chearful Mind; for that easy Temper, which' Innocently gives into any Humours, and always accompanies Honesty and good Manners, is not only very conducive to a good State of Health, but likewise promises a happy old Age."

60 Newton, *Misery and Mirth*, 86, 84.

61 Harris, *The divine physician*, Foreword, unpaginated.

62 Hill, *The Virtues of Sage*, 10. See also Newton (*Misery and Mirth*, 58) who shows that cheerful passions were also needed for patients.

63 Hill, *The Virtues of Sage*, 30. "We can get chearful with food we eat." (*Ibid*., 32).

> *THE Passions alter the Circulation. In Anger, Hatred, Envy, the Pulse is great and vehement. In Joy, great, rare, flow. In Sadness the Pulse is rare and flow and languid. Fear and Despondency make the Pulse inordinate, unequal. Immoderate Passions make the Pulse languid. Studies spend the Animal Spirits; in Melancholics the Pulse is obscure, contracted, inconstant, unequal, deficient, flow, rare; Modesty and Shame stop the Circulation, as appears by the Flushing in the Face. Immoderate Cares and Passions, especially Sorrow, hasten old Age. Envy, Ambition, Covetousness, Anger, do decay the Body; but Hope, Love, Joy, are Prolongers of our Lives by their Influence on the Humours.*[64]

Yet even joy, when excessive, was considered potentially harmful, as: "it hurries the circulation vehemently, and irregularly; it exhausts the spirits; and has occasioned sudden death. It is a violence of youth; it belongs to that period of life; that can bear it; and to that let us leave it. Let the old man be as the Quakers in this point; always cheerful but never merry."[65] As Yallop remarked, unlike joy, cheerfulness was never vehement or harmful. It was benign and moderate, while excessive joy could overflow uncontrollably.[66]

Moderation and temperance were habits best instilled from youth. As Mackenzie observed, these virtues could sustain a healthy old age.[67] Bernard Lynch argued: "that the Harmony and Union of our Principles, which are called Temperament, be well Supported, that the Spirits which are dissipated every Moment be repair'd, and the Excrements retain'd in the Body be expell'd. All this may be easily obtain'd by the means of a good Regimen, without the Assistance of any Medicine."[68] Thus, temperance and emotional balance were seen not merely as health practices, but as guiding principles for a harmonious and fulfilling life.

64 Floyer, M*edicina Gerocomica,* 20–21.

65 Hill, *The Old Man's Guide*, 24. "We know madness is a disease; and violent passion is a temporary madness." (*Ibid*., 26).

66 Yallop, *Age and Identity in Eighteenth-Century England*, 80.

67 Mackenzie, *The History of Health*, 411. Also: "Temperance is of infinite Benefit to Mankind." (Mead, Medicina flagellate, 143).

68 Lynch, *Guide to Health*, 60. "In fine, let a Man's Life be longer or shorter, yet Sobriety and Temperance renders it pleasant and delightful" (Mead, *Medicina flagellata*, 132).

Ease and good humour were considered key ingredients of a happy life and long life.[69] Older people were seen as needing to accept that some activities are no longer possible. A manual for women *The Female Aegis*, explains that: "Age has its privileges and its honours. It claims exemption from the more arduous offices of society, to which its strength is no longer equal . . . Deprived of many active pleasures, it claims an equivalent of ease and repose."[70] And as *The nurse's guide* stated:

> *But above all, aged People ought to take particular Care not to be excited to Passion, for fear of falling into an Apoplexy; they had better, look upon those that use them ill, as unreasonable People, that are beneath their Anger. They should hope to live as long as Nestor and never think of Death, for fear of anticipating it by so doing, and grieving themselves at the Approach of what they will not perceive, for this is hurtful to all the Senses; for an insuperable Evil there is no Help but Oblivion. But yet old People ought not to live like Epicures, without Hopes of another Life, but should endeavour by their virtuous Actions, to acquire an immortal Glory.*[71]

Among the six non-naturals, older men (advice was rarely formulated for women) were advised to avoid a foolish fondness for women and for **sexual life**,[72] which was considered more dangerous than complete abstinence, as Flamant stated:

> *for the Ebullition of the Blood ending sooner or later with Age, the Passions are extinguish'd with it, and the Calm we enjoy after the Storm, makes us soon forget all the Pain we suffer'd to resist it: whereas the Inconveniencies that remain after the immoderate use of those Pleasures, such as the trembling of the Nerves, Palsie, Shortness of Breath, Phthisis, Gout, &c. make us pay very dear, in a long and*

69 Hill, *The Old Man's Guide*, 28.

70 *The Female Aegis; Or, the Duties of a Woman from Childhood to Old Age*. London, 1798, 171. Quoted from: Ottaway, The Decline of Life, 28.

71 Anonymous, *The nurse's guide*, 132.

72 Hill, *The Old Man's Guide*, 25.

> *infirm Old Age, for the transitory Charms we enjoy'd, and the frivolous Amusements of our Youth.*[73]

Venereal pleasures were considered harmful to men of all ages, as they were believed to "consumes that fat and unctuous Part of the Blood, which is necessary to repair the radical Moisture of which there is never too much."[74] Frequent indulgence in these pleasures was believed to have deleterious effects, including: "makes the Hair fall, obscures the Lustre of the Eyes, and changes the florid, lively Colour of the Face and Lips, by extinguishing that Heat, and dissipating those Spirits which animated and cherish'd those Parts."[75] Premature concubinage was believed to hasten old age, as Mackenzie wrote.[76] Certain foods were even recommended as a means of tempering sexual passions in the elderly. One author suggested that "Lettice, may be of Use to make old People deep, and to defend them against the Attacks of Venus, if they are not already exempted from them by their Age."[77] However, even in this context, complete abstinence was not universally encouraged. The balance between indulgence and restraint was a recurring theme in advice regarding sexual passions, as with other aspects of the non-naturals.

Diet was among the most important topics addressed in health regimens. Age-specific diets have a long history, dating back to the recommendations of Hippocrates and Galen, who tailored dietary prescriptions to the differing humoral compositions of various age groups. Food was regarded as one of the most critical factors influencing aging, as exemplified by Luigi Cornaro's Regimen *Discourses on the sober life*. The primary emphasis was placed on controlling one's appetite and avoiding sudden changes in diet, since "all sudden alterations are dangerous."[78] As Hill wrote, many causes of ill health existed, "but the principal one is the variety and excess of

73 Flamant, *The art of preserving and restoring health*, 20–21.

74 Anonymous, *The nurse's guide*, 124. Similar also on *Ibid*., 126. Old man should "abstain from the Use of these Pleasures, that they may not consume and destroy that Oily Part of the Blood, which is necessary to recruit their radical Moisture, as well as to support and preserve Life." (*Ibid*., 126).

75 *Ibid*., 126. Too much sex could also "weakens the Memory, especially in old Men." (Allen, *Synopsis medicinae*, 208).

76 Mackenzie, *The History of Health*, 388.

77 *Ibid*.

78 Hill, *The Old Man's Guide*, 8.

food."[79] The elderly were advised to eat less and to consume lighter foods in order to accommodate the weakened digestive capacity of the stomach.[80] "By a temperate, sober Diet, I mean, neither eating nor drinking more at a time 5 nor oftener, than the Constitution of the Body allows,"[81] wrote Timothy Byfield. The author of *Medicina flagellata* stated: "A sober Diet makes a Man die without Pain; it maintains the Senes in Vigour; it mitigates the Violence of Passions and Affections. It preserves the Memory; it helps the Understanding; it allays the Heat of Lust; it brings a Man to that weighty Confederation of his latter End."[82]

A simple diet was generally recommended, with particular emphasis on avoiding the mixing of different foods: "The next thing to be considered is, a maxim generally laid down by all authors on this subject; namely, that simplicity of food is more conducive to health than a variety: but experience teaches us the contrary."[83] "There is not a greater error in an old person," wrote Hill: "than to eat of many dishes at one meal. (...) A regularity of eating is the next care to the selecting proper food; and fixing on a right quantity."[84] Once again, the emphasis lay on moderation, which did not imply abstinence or starvation:

> *They were in the right who declared the mischief of heavy suppers; but the poets have long since told us what sort of people those are, who, in avoiding a fault, rush into its contrary. There is a medium sure between a heavy supper, and emptiness; and that is best. Let the old man*

79 *Ibid*., 5.

80 Hill, *The Old Man's Guide*. 9–10: "No aged person should eat more than one considerable meal of solid food in the day"; Mead, *Medicina flagellata*, 137. "Eating less, abstaining and Strong food should be omited in the morning." Hill, *The Old Man's Guide*, 35, 42; Floyer, *Medicina Gerocomica*, 16: "stomach ought never to be overloaded." Similar advice Anonymous, *The nurse's guid*e, 107: "But they that are full of Blood, ought to eat a hearty Dinner, and not sup at all, whereas they that are lean and wafted, ought to dine moderately. and eat a plentiful Supper." Trusler, *An easy way to prolong life*, 6, 45, 72.

81 Byfield, *Directions tending to health and long life*, 4.

82 Mead, *Medicina flagellate*, 172–173.

83 Trusler, *An easy way to prolong life*, 34. Similar Hill, *The Old Man's Guide to Health*, 16, 36–37: "THE rule is to eat only innocent, tho' the most nourishing things, and these only in moderate quantities." See also Anonymous, *The nurse's guide*, 88.

84 Similar Hill, *The Old Man's Guide to Health*, 14–16.

> *eat liquids; and of all liquid diets, those which are partly composed of milk are best for him.*[85]

Easily digestible meat, such as cock, hen, capon, or turkey, were considered suitable for the elderly;[86] "Weak broths, of veal, chicken, or mutton, may be eat occasionally; and jellies honestly made at home, are proper, safe, and wholesome. THESE things will answer the two purposes of nourishing and moistening: for aged persons are naturally too dry." [87] Here, too, disagreements emerged: some authors recommended meat from younger animals,[88] while others believed older animals were preferable because their flesh was less viscous.[89] Fish, understood as colder and moister than meat, was generally discouraged for the elderly.[90] Cold and viscous foods were to be avoided or consumed only in small quantities as "Flower Meats, Cheese, Roots, Herbs, Pork, breed a viscid Nutriment; but Wine heats and promotes the Secretion in old Men."[91] Practical dietary recommendations also included the use of hot flavours for those with a low pulse and the consumption of well-fermented, well-baked bread. It was noted that "very old men live much on milk, small ale, sack, eggs, and broths."[92]

Diet was closely connected with drink. "Was man to live the life of a savage, water would be a sufficient drink; as eating only a small quantity, and using great exercise, his digestive organs would be much stronger, and sufficient for digestion without any other assistance: but according to his present method of living, eating daily too much, and taking little exercise,

85 *Ibid*., 10.

86 *Ibid*., 62–63.

87 *Ibid.,* 9–11. "LET his breakfast be a yolk of an egg, beaten up with half a pint of asses milk, and a quarter of an ounce of conserve of roses; and his supper veal broth nearly boiled to a jelly." (*Ibid*., 37).

88 Anonymous: *The nurse's guide*, 89: "Pork and Beef are hurtful to them, if they don't commonly use a great deal of Exercise. Lamb, which is full of a viscous Juice, is prejudicial; but Veal and Mutton are wholesome for them". "Old People may sometimes make use of Fish and fait Meat, to loosen and carry away that viscous Phelgm that flicks to the inside of their Guts, and to remove Obstructions; but then they must return again in a little Time to their usual Diet, which ought to be altogether moistening." (*Ibid*., 105).

89 Trusler, *An easy way to prolong life*, 42.

90 *Ibid*. – for promoting fish see Hill, *The Old Man's Guide to Health*, 9–10.

91 Floyer, *Medicina Gerocomica*, 13. Also Hill, *The Old Man's Guide to Health*, 47.

92 Floyer, *Medicina Gerocomica*, 12.

he requires wine. However, the wine should be diluted with water."[93] Even though water—if clean and without odour—was regarded as the best drink.[94] The authors focused predominantly on wine, which was understood as warming and comforting. Wine was also necessary for normal functioning of the body. *The nurse's guide* warned that no wine was considered wholesome in itself, nor could it replace a regular diet, and added that it should be taken moderately.[95] Neither sweet nor overly sharp wines were recommended; instead, wines with "quickness and poignancy" were preferred.[96] Red wine was often recommended because it was believed to warm the body and exert a diuretic effect. Strong drinks, like liquors, were also used for heating the body.[97]

Another drink that was highly recommended was milk: "Goat's milk or donkey's milk, which should only briefly be exposed to air, is better, but the best is milk sucked directly from a human female's breast,"[98] as: "for every Thing living is nourished by the same Kind of Matter, from which it was first form'd."[99] Milk was considered particularly suitable for the elderly due to their weakened digestive faculties, and popular preparations

93 Trusler, *An easy way to prolong life*, 54. "Water then, is the necessary drink, but it is much helped by brewing; that is, wine, beer, &c. if moderately taken, as we have mentioned, is the best liquor we can use." (*Ibid*., 54–55).

94 For gout see Smith, John: *The curiosities of common water, or, the advantages thereof in preventing and curing distempers: gather'd from the writings of several eminent physicians, and also from more than forty years experience*, London, 1724, 29. "Sack is the best" wrote Thomas Short: *Discourses on tea, sugar, milk, made-wines, spirits, punch, tobacco, &c: with plain and useful rules for gouty people*. London, 1750.

95 Anonymous, *The nurse's guide*, 108.

96 *Ibid*.

97 Strother, Edward: *The family companion for health, or, the housekeeper's physician: containing a description of all the diseases incident to the human body*. London, 1729, 28. – "In this Case all spirituous Liquors (drank in Moderation) are proper, and every thing that may quicken the Fermentation in the Stomach; for this is a slackness of Motion, as the former is a quickness; therefore riding, and all Brisk Exercises of the Body, are proper in this Case, as they are hurtful in the former; and as the other is from the Force of Eagerness and Rashness in Youth, this the Effect of Heaviness in Old Age; and although this sort of Consumption is not of so sharp a Nature, yet it is much harder to cure; notwithstanding the Patient may be very much reliev'd by expectorating Medicines"; Burdon, Henry: *The fountain of health*. London, 1734, 42; "When the Stomach is jaded and weakened by a Surfeit of tenacious Food the preceding Day, which have left much Phlegm in the excretory Ducts of its Glands, or exhausted its Spirits, a Dram is good before Dinner … Drams are chiefly useful to phlegmatic Constitutions, bulky Bodies, or old Age, and such as have weak and lax Stamina." See Short, *Discourses on tea, sugar, milk*, 169, who also recommended Rum (*Ibid*., 178).

98 Schäfer, *Old Age and Disease in Early Modern Medicine*, 36–37. About milk see Hill, *The Old Man's Guide*, 43–44.

99 Anonymous, *The nurse's guide*, 125.

included milk pottage and thin rice pudding that were recommended as food for breakfast.[100] Newly introduced beverages in Europe also became topics of discussion within regimens, as we can find different effects of tea and coffee: "In this manner it strengthens the stomach and assists digestion; it keeps the body from emptiness without loading it. (...) Tea in this quantity is also sufficient for the great purpose of diluting; and it refreshes the spirits more than any other liquid."[101] Hill advised a cup of chocolate for breakfast, and added: "Coffee I cannot advise generally: But the exceptions against tea are in a great measure groundless."[102]

Despite their age, the elderly were encouraged to remain active in order to help their bodies maintain vitality. **Exercise** was regarded as a means of quickening natural heat and assisting circulation.[103] Moderate exercise, together with bathing, was believed to preserve circulation and to stimulate secretions as well as the expulsion of excrements. [104] As Floyer explained:

> *THE Pulse is accelerated, and is made quicker and greater by moderate Exercise; but becomes less and languid by the Immoderate. That is good Exercise, when the Breath and Pulse are accelerated, the Heat is increased, the Flesh is hardened, the Perspiration and other Secretions promoted ... Riding is the best (...) All sort of Work are Exercises, but these are too violent, Digging, Plowing, Sawing, carrying Burdens, Ringing, Mowing, Hunting, cleaving Wood, Pounding, Racing, Travelling, Dancing, driving a Chariot. THESE are gentle Exercises, Sailing, pruning Trees, Riding, bowling, Billiards, Nine Pins, Fishing, Walking, some of these we must use if suitable to the Strength ... For Women, Dancing, Walking, Riding, Spinning, Housewifery.*[105]

100 Hill, *The Old Man's Guide*, 43–44.

101 Short, *Discourses on tea, sugar, milk*. See also Hill, *The Old Man's Guide*, 39.

102 Hill, *The Old Man's Guide*, 12.

103 "Give no place to Idleness, but use Lawful and Innocent Exercises." Tryon, *Wisdom's dictates*, 7; Hill, *The Old Man's Guide*, 23.

104 Hill, *The Old Man's Guide*, 7. Cheyne, *An essay of health and long life*, 205: "Moderate Exercise and Baths preserve the Circulation, and irritate all the Secretions, as well as Expulsion of Excrements. Exercise is only to purge off Superfluities. If these therefore, be careful not to exceed." Floyer, *Medicina Gerocomica*, 16: "Moderate Exercise and Baths preserve the Circulation, and irritate all the Secretions, as well as Expulsion of Excrements."

105 Floyer, *Medicina Gerocomica*, 16–17. Similar Hill, *The Old Man's Guide*, 6: "If the pulse beat too quick and high, the diet must be lower; if too slow and weak, the food must be somewhat richer."

Maintaining proper circulation was considered essential; however, it was emphasised that movement should not be excessively vigorous. Exercise was recommended on a daily basis, preferably in the morning and always on an empty stomach. It was considered best to follow forms of exercise to which one was accustomed: walking,[106] gardening[107] Bowling, Chariot, horse raiding,[108] or as noted, "The Home Exercises, such as playing at Tennis and Billiards, Dancing, Fencing, and the like, ought to be follow'd only when the Season forbids being Abroad; for being in the Air, contributes much towards the Benefit of Exercise."[109] If older individuals were unable to engage in exercise, they were advised to compensate through friction and the use of a flesh-brush.[110] Since older individuals could not always engage in as much exercise as required, they were advised to regulate their diet more carefully as a compensatory measure.

Conclusion

Most authors shared one characteristic: they provided advice on how to reach old age but offered little guidance on managing the diseases that accompanied it. Official medicine of the period remained relatively powerless in the face of many age-related ailments. Instead, their recommendations combined general, stereotypical advice with practical guidance. Although the concept of balance was no longer framed strictly in humoral terms, its

106 Floyer, *Medicina Gerocomica*, 16–17: "waking spends the Spirits, and makes the Pulse small and rare."

107 Hill, *The Old Man's Guide*, 21. "THE only danger in this healthy and happy course is, that it is too alluring. Let him who delights in it take an invariable resolution, never to let his fondness for the garden carry him out too early, or keep him there too late. TO such as are fond of gardening, nothing affords so happy, or so constant exercise. We do not mean that they should dig or weed the ground; but to use such employment as will give exercise without labour; and such as no hand will so well perform as that of the master. SUCH are the trimming of shrubs, and flowering plants; the management of espaliers, the removal of seedling flower-roots; the thinning of fruit upon the trees."

108 Hill, *The Old Man's Guide*, 20–21. For sailing as exercise: Gilchrist writes about possibility of curing a middle-aged men (Gilchrist, Ebenezer: *The use of sea voyages in medicine: and particularly in a consumption, with observations on that disease*, London, 1771, 264). See also Fuller, Francis: *Medicina Gymnastica: or a treatise concerning the power of exercise, with respect to the animal oeconomy: and the great necessity of it in the cure of several distempers*. London, 1705.

109 Cheyne, *An essay of health and long life*, 95.

110 Hill, *The Old Man's Guide*, 23.

underlying logic remained largely unchanged.[111] While Helen Yallop has noted that texts on aging devoted less attention to dietary advice and more to the mind, moods, and social interaction,[112] diet nevertheless remained a central concern, as demonstrated by the examples discussed above.

While it was possible to live a long life without adhering to a regimen, no guarantee of such an outcome was assumed. Neglecting a regimen was often portrayed as inviting the premature onset of old age, understood as a form of punishment for disregarding bodily discipline in youth.[113] As Richard Steele wrote: "In short, a Chearful Heart, a Sober Diet, and moderate Exercise, may defer Old-age for a time; but come it will at length, even an House of Stone will at last decay, and grow out of repair."[114] Old age could thus be interpreted as a moral consequence of failing to observe bodily discipline earlier in life.

To summarise, the ideal old man was advised to work little, engage in minimal sexual activity, eat sparingly, and avoid excessive excitement, anxiety, and anger. This raises the question, however, of how strictly these rules were expected to be followed. On this point, John Trusler offered a more nuanced perspective:

> *Although it has been an old saying, as foolish as common, Qui medicè vivit, miserè vivit; he that lives by rule, lives miserably; yet experience teaches us the contrary, and grounded upon pure reason and the contents of these pages: that he who pays no regard to the injunctions of nature, both shortens his life and destroys the comforts of it. In short, would you see without spectacles, go without crutches, or the help of a stick; would you lie easy in your bed, not telling the clock or wishing for day; would you eat with an appetite and be young in strength when you are old in years: in fact, would you enjoy yourself, and every thing about you, and lengthen your life to the latest period; exercise your reason and attend to the advice here given, for Qui medicè vivit, sine*

111 Schäfer, *Old Age and Disease in Early Modern Medicine*, 177.

112 Yallop, "Representing Aged Masculinity in Eighteenth-Century England", 196.

113 "Despise not the Rules for promoting Health and Temperance, the ways of God and Nature are plain and simple, but mighty in operation and effects." (Tryon, *Wisdom's dictates*, Foreword, unpaginated).

114 Steele, *A discourse concerning old-age*, 10.

medicis diu vivet. He that lives by rule and wholesome precepts, is a physician to himself, and needs not the help of others.[115]

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Urška Bratož

The Burden of Ageing: Old Age, Poverty, and Attitudes toward Social Issues in the 19th-Century Austrian Littoral

At the end of the 19th century, the Italian neurologist and physiologist Paolo Mantegazza, reflecting on ageing wrote that although the attitudes towards the elderly in the society of his time were not as bad as they had been previously, they were often despised and blamed for their weakness and infirmities.[1] At most, he says, elders are treated with empathy, almost never with sympathy or love, not even with respect. In his view, an old man can arouse sympathy for his weakness and respect for his many experiences, but also for his 'unconscious admiration for everything that has been able to resist the tyrant of all tyrants: time'. However, Mantegazza continues, this cannot be generalised to all segments of society. Where social conditions are poor, old age is perceived differently (e.g. in impoverished, working-class families, where there are many hungry mouths to feed, the elderly are redundant, and here compassion and respect towards them disappear).[2]

Similar implications—understood within the broader context of welfare and social provision, which at the time remained limited and closely tied to the criterion of incapacity for work, as well as within the framework

1 Mantegazza, Paolo: *Elogio della vecchiaia*. Milano: Fratelli Treves, 1895, 5.

2 Mantegazza, *Elogio della vecchiaia*, 11.

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of bourgeois perceptions of labour and poverty[3]—can also be found in Slovenian newspapers in the second half of the nineteenth century.

Often, the literary pieces published in the Slovenian daily press reflect an image of the old man that is closely associated with poverty, misery, and the contempt of relatives and other household members.[4] One example is a poem about an old man who comes to the nativity scene at Christmas and complains to the newborn Jesus about being despised and mistreated by his young relatives.[5]

However, it is difficult to say to what extent such publications were reproducing stereotypes and to what extent they were a reflection of a certain reality,[6] or whether they had a moral message aimed at preventing undesirable behaviour (such as children refusing to help elderly parents, marginalising elderly members of the family and community, neglecting the elderly, or even other forms of immoral attitudes towards the elderly, including various forms of violence).

In any case, the images of old age were diverse and linked to different factors; in addition to social status, also to gender, occupation, social influence, cultural environment, etc. Contemporary historiographical studies on ageing emphasise that old age is a socio-cultural construct, pointing to the plurality of meanings and perceptions attached to it, as well as to the heterogeneity of perceptions and experiences of the ageing process – not only in different societies but also within different segments of the same

3 See f.e. Čeč, Dragica: «Srce vsakega je treba pripraviti za dejavno udejanjanje zapovedi ljubezni do bližnjega»: začetki sistemske oskrbe revnih in pomen kulture osebne dobrodelnosti. In: *Pomisli na jutri: o zgodovini (samo)odgovornosti* (Studen, Andrej, ed.). Ljubljana: Inštitut za novejšo zgodovino, 2012, 37–70.

4 The same is true for some other areas in Slovenia; for the case of Pohorje, see Ramšak, Mojca: Starost in staranje v pohorski pravljični prozi. In: *Starost – izzivi historičnega raziskovanja* (Šorn, Mojca, ed.). Ljubljana: Inštitut za novejšo zgodovino, 2017, 35-44. The author notes that fairy-tale prose about old age and the elderly in Pohorje in the 19th century reflects the key problems of old age, such as health, lack of means of subsistence (due to the absence of social and health insurance), and partly also the contemptuous attitude towards the elderly (Ramšak, *Starost in staranje*, 43).

5 F.e. Radoslav: "Starček pri jaslicah". *Zgodnja Danica*, XXV/1, 1872, 1.

6 For example, oral sources in some ethnographic studies in Istria (see e.g. Brumen, Borut: *Sv. Peter in njegovi časi: socialni spomini, časi in identitete v istrski vasi Sv. Peter*. Ljubljana: Založba /*cf., 2000, 111) testify that good upbringing was judged by the respectful attitude of the young towards the elderly.

society,[7] and that the study of ageing has also been influenced by cultural gerontology with its interest in understanding old age in terms of its cultural significance, which is, of course, manifested in different dimensions.[8]

There were certainly many images of old age. An ageing bourgeois experienced the last phase of his life differently from an elderly peasant or worker, but in addition to self-perception, there were also differences in social perception of how old age should be lived and what an ageing person represents. Thus, even the 19th-century writers sometimes noted that the old man evoked mainly sympathy for his frailty in the upper classes but also respect for his experience, whereas the elderly member of a working-class or poorer family could be perceived as a burden.[9]

The elderly and poverty

In the nineteenth century, older people often represented a substantial share of those receiving welfare support. Social assistance at the time took two main forms:[10] non-institutional care, which included socalled *external charity* such as regular or occasional relief in money[11] or in kind (food, rations, clothing, and similar goods) and institutional care, which meant accommodation in dedicated social institutions. Information on long-term or permanent support is limited, especially in regions without

7 See f.e. Ottaway, Susannah R.: *The Decline of Life: Old Age in Eighteenth-Century England*. Cambridge University Press, 2004; Pelling, Margaret, Smith, Richard M.: Introduction. In: *Life, Death and the Elderly* (Pelling, Margaret, Smith, Richard M., eds.). London: Routledge, 1991, 1-32, etc.

8 Higgs, Paul: Social and Cultural Gerontology and the Importance of the Ageing Body. In: *Old Age before Modernity: Case Studies and Methodological Perspectives, 500 BC–1700 AD* (Neumann, Christian Alexander, ed.). Heidelberg: Heidelberg University Publishing, 2023, 272.

9 In these, we do not usually find positive images of the elderly as a wise educator, nor as someone who enjoys the respect and esteem of the community because of his or her experience and knowledge (especially not in an urban environment) (Čeč, Dragica: Podobe starosti v začetku 19. stoletja. In: *Starost - izzivi historičnega raziskovanja* (Šorn, Mojca, ed.). Ljubljana: Inštitut za novejšo zgodovino, 2017, 22).

10 As S. Woolf (*Porca miseria. Poveri e assistenza nell'età moderna.* Bari: Laterza, 1988, 37) points out, however, it is not possible to speak of two completely separate segments of aid, as they were often complementary.

11 This has usually been the social measure with the least presence, due to its financial weight. In Trieste, too, historians (cf. Fabi, Lucio: *La carità dei ricchi: povertà e assistenza nella Trieste laica e asburgica del XIX secolo*. Milano: F. Angeli, 1984, 38) have noted that there was a marked tendency to reduce cash grants and to replace them with less costly forms of assistance.

an established system of outdoor relief or without Poor Institutes, which elsewhere routinely recorded such data and thus left a clearer documentary trace. The latter emerged from the reforms of Emperor Joseph II, which centralised institutions responsible for collecting, managing, and distributing charitable funds under state supervision.[12] This model, however, did not extend to Istria, which in the eighteenth century still belonged to the Republic of Venice. Even so, Habsburg Trieste did establish a Poor Institute, and it continued to operate well into the nineteenth century.[13] Institutional care in the area was placed mainly in charitable institutions, such as almshouses or asylums for the disabled, the elderly and the sick,[14] which were financed mostly by rents, the sale of produce (and legal revenues, e.g. from certain fines, including in Trieste a tax on wine[15]), bequests and charitable donations.[16] Municipalities did allocate funds under the heading of "charity," but this designation largely referred to covering care expenses in hospitals[17] and health facilities for the mentally ill, women giving birth, newborns, the deaf, and similar groups. At the same time, local authorities were expected to provide for the rest

12 Čeč, Dragica: "Donacije Janeza Nepomuka Kalistra - tržaškega 'self-made mana' - in njegove vdove Marije v meščanski kulturi darovanja". *Annales. Series historia et sociologia*, 33, 2023, 1, 105.

13 On it, see in particular A. Di Fant (Pauperismo e assistenza medica: l'Istituto generale dei poveri di Trieste dalla fondazione alla metà dell'Ottocento. In: *Tra Esculapio e Mercurio: medici e sanità nella Trieste dell'Ottocento: con note sulla vita di un primario chirurgo, Emerico Pepeu* (Ponte, Euro, ed.). Trieste: EUT, 2011, 78–107; "Contro la questua molesta e a pro della vera indigenza". L'Istituto generale dei poveri di Trieste dalle origini alla Prima guerra mondiale. In: *Carità pubblica, assistenza sociale e politiche di welfare: il caso di Trieste* (Vinci, Anna Maria, ed.). Trieste: EUT Edizioni Università di Trieste, 2012, 17-40) and occasional publications reporting on its activities (e.g. Rossetti, Domenico, Formiggini, Saule: *Cenni storici intorno a l'istituto generale dei poveri in Trieste*. Trieste: A. Levi, 1903 and *Cenni storici intorno all'istituto generale dei poveri in Trieste dall'epoca della sua prima fondazione fino a tutto il 1858.* Trieste: Lloyd austriaco, 1859).

14 Among others, there were almshouses in Koper, Piran, Motovun, Lovran, Bale, Umag, ... (*Handbuch für das Küstenländische Verwaltungs-Gebiet Gefürstete Grafschaften Görz und Gradisca, Markgrafschaft Istrien und die Stadt Triest mit ihrem Gebiete für das Jahr 1855*. Trieste: Weis, 1855; cf. Madonizza, Antonio: "Di alcune pie fondazioni nell'Istria". *Porta Orientale*, 1857, 59-71).

15 Cfr. Di Fant, Pauperismo e assistenza medica, 80.

16 For more detailed information on this type of financing in the case of the Koper almshouse (which was annexed to the civic hospital), cf. in particular Z. Bonin ("Ustanovitev in delovanje koprskega vrtca ter dobrodelne ustanove Grisoni do konca prve svetovne vojne"· *Arhivi,* 35, 2012, 2, 455ff).

17 At the time when the public health system was still developing, hospitals were intended mainly for the poor, who did not have adequate conditions for medical treatment in their own homes (which was the most common practice), nor the means to pay for a physician; for those who did not formally demonstrate poverty, hospital care was chargeable, as was physician's visit at home.

of the poor, so the responsibility for financing all other aspects of social assistance also rested with them.[18]

In the Vormärz period, social welfare was generally a symbiosis between Poor Institutes (where they existed), private charity and church institutions, but after 1848 there was already a shift of administrative autonomy in this area to the local (municipal) level.[19] Initially, also in Istria, it was still the Provincial Fund that covered institutional care.[20] The Province, it was argued in the Istrian Provincial Assembly in March 1863, had to bear a great deal of the cost of hospital care for the poor inhabitants of Istria, which was attributed, on the one hand, to the freedom of the latter to move freely around the Province, and, on the other, to the public hospitals' duty[21] to admit anyone to their care, irrespective of their pertinence,[22] and to the ease with which certificates of indigence were believed to be issued.[23]

At the end of the same year, responsibility for (institutional and other) social care was, as the Provincial Assembly had hoped, devolved to the municipalities, which meant that they were also responsible for the flow and

18 Cfr. Scheutz, Martin: Demand and Charitable Supply: Poverty and Poor Relief in Austria in the 18th and 19th Centuries. In: *Health Care and Poor Relief in 18th and 19th Century Southern Europe* (Grell, Olle Peter, Cunningham, Andrew, Roeck, Bernd, eds.). Aldershot: Ashgate, 2005, 68.

19 Scheutz, Demand and Charitable Supply, 66.

20 A decree of the Luogotenenza of 1 March 1855 already stipulated that the costs of the hospital were to be reimbursed by the province to which the patient belonged (*Atti della dieta provinciale dell'Istria in Parenzo.* Rovigno: Antonio Coana, 1863, 377).

21 From 1856, those institutions that had the status of public hospitals (this did not apply to municipal hospitals) could apply to the provincial government for reimbursement (*Atti della dieta provinciale*, 1863, 377).

22 The right of domicile was first formalised by an imperial decree of 1754 and a decree of the Court Chancellery of 1789, which stipulated that domicile was to be acquired either by owning a house, by acquiring the right of bourgeois or artisanal tenure, or by continuous residence for 10 years. The next related provision was the Conscription Patent of 1804, which counted as "native" all persons born in the locality, followed by the provisional Municipal Law of 1849 (distinguishing between citizens and foreigners). The last phase included the Municipal Law (1859) and the Homeland Law (1863) (Stariha, Gorazd: "'Z nobenim delom se ne pečajo, le z lažnivo beračijo': odgon kot institucija odvračanja nezaželenih". ***Zgodovina za vse***, 14, 2007, 1, 40–41). It is also necessary to add the 1896 amendment (which entered into force in 1901), which made it somewhat easier to obtain the right of domicile in the Austrian part of the monarchy, by reviving the 10-year continuous residence in the municipality condition – abolished by the Homeland Law (cf. Steidl, Annemarie: *On Many Routes: Internal, European, and Transatlantic Migration in the Late Habsburg Empire*. Lafayette: Purdue University Press, 2020; Kirchner Reill et al.: "Redefining Citizenship After Empire: The Rights to Welfare, to Work, and to Remain in a Post-Habsburg World". *The Journal of Modern History*, 94, 2022, 2, 326–362; Čeč, "Donacije Janeza Nepomuka Kalistra").

23 *Atti della dieta provinciale,* 1863, 377.

distribution of funds, which often required a great deal of ingenuity. This was concerning the determination of domicile, i.e. municipalities were responsible for the poor with a right of domicile,[24] and could claim reimbursement from their home municipalities for the foreign poor.

The 1863 Homeland Law (*Heimatrecht*) stipulated that whenever the provision of poor relief exceeded the capacities and resources of charitable institutions, the municipality was obliged to support those poor who were pertinent to the municipality.[25] At the level of the monarchy, the law established jurisdiction over social welfare matters and, through the concept of domicile, determined which community was responsible for covering the costs of care, for example in hospitals or almshouses.[26]

However, the free disposal of funds for charitable purposes by municipalities has also meant different criteria for determining who is entitled to this aid, as highlighted by some European studies.[27] Increasingly, the individual circumstances of applicants were becoming a criterion for the distribution of poor relief support, while municipal administrations were approving the rights of residency[28] and discussing it at municipal council meetings. In these cases, it was up to the management structures of the bourgeois elites[29] to decide on eligibility for social assistance and to determine the

24 Scheutz, Demand and Charitable Supply, 67; Anžič, Sonja: *Skrb za uboge v deželi Kranjski: socialna politika na Kranjskem od srede 18. stoletja do leta 1918*. Ljubljana: Zgodovinski arhiv, 2002, 210; Grošelj, Branka: *Na dnu: položaj beračev in brezdomcev od konca 19. stoletja do leta 1940*. Ljubljana: Inštitut za novejšo zgodovino, 2018, 210; Dobaja, Dunja: "Pregled razvoja socialne zakonodaje v Avstro-Ogrski monarhiji v letih 1867–1918". *Zgodovina za vse*, 16, 2009, 2, 50.

25 Reichs-Gesetz-Blatt, 1863, § 22. For the area in question see esp. Toncich, "Inside and Outside the Habsburg Public Health System. Managing Complexity Within the Austrian Littoral (1849–1880s)." *Annales: anali za istrske in mediteranske študije. Series historia et sociologia*, 32, 4, 2022, 523–534; see also Mezzoli, Erica: "Safe waters: Austrian seafarers between charity and welfare, ca. 1850–1920." *Annales. Series historia et sociologia*, 32, 4, 2022, 574.

26 Čeč, "Donacije Janeza Nepomuka Kalistra", 106.

27 Cfr. Zimmermann, Susan: *Divide, Provide, and Rule: An Integrative History of Poverty Policy, Social Reform, and Social Policy in Hungary under the Habsburg Monarchy*. Budapest: Central European University Press, 2011, 12.

28 Stariha, "Z nobenim delom se ne pečajo", 41; cfr. Globočnik, Anton: *Nauk slovénskim županom, kakó jim je délati, kadar opravljajo domačega in izročenega podróčja dolžnósti*. Ljubljana: Klein in Kovač, 1880, 70.

29 For example, it is important to note that donors who contributed at least 50 gld. annually to the Poor Institute in Trieste had the right to vote and could become members of its directorate – the latter was superior to the Fathers of the Poor, who determined eligibility for support in the field (Di Fant, Pauperismo e assistenza medica, 82).

type and modalities of care (which also included the choice of the appropriate institution). It should be added that there was no special poor law for Istria[30] (such as the one obtained by Carniola in 1883[31]), but the provisions of the Homeland and Municipal Laws were required.[32] However, there were nevertheless municipal funds for the maintenance of charitable institutions and social care, among other things.

In times of extraordinary circumstances and increased needs (e.g. epidemics, economic crises, natural disasters, etc.), the vulnerability of the system became even clearer, burdening municipalities whose capacities were not equivalent. It is clear that many municipalities were not always able to help themselves, especially when there was an increase in the need for social assistance. Funds were therefore often raised through personal charity.[33] It should be pointed out that charity was an important component of the bourgeois ethic and could be relied upon by the power structures as a source of additional funds.[34] In Trieste, with its strong economic elite, a number of private bourgeois foundations were formed, especially from the mid-century onwards, which also gave their funds annually to a certain number of poor individuals or families, widows with children and, to a lesser extent, to the elderly without a source of income and to workers who had become incapable of working.[35] At the turn of the 20th century, "private charity" was in decline and individuals (philanthropists) were

30 These were formed after the abolition of the Poor Institutes (Scheutz, Demand and Charitable Supply, 68), which took place in 1883 (Dobaja, "Pregled razvoja socialne zakonodaje", 52).

31 Cf. Anžič, *Skrb za uboge*, 40ff.

32 Pančur, Andrej: Problem samoodgovornosti beračev, potepuhov in brezposelnih na Slovenskem pred drugo svetovno vojno. In: *Pomisli na jutri: o zgodovini (samo)odgovornosti* (Studen, Andrej, ed.). Ljubljana: Inštitut za novejšo zgodovino, 2012, 145.

33 Cfr. Bratož, Urška: ""Kruha in dela": o reševanju socialnih vprašanj v Istri in Trstu 19. stoletja". *Annales. Series historia et sociologia*, 32, 2022, 4, 547-558; Čeč, "Donacije Janeza Nepomuka Kalistra".

34 On the subject see f.e. Čeč, "Srce vsakega je treba pripraviti", 49–50; Čeč, Dragica: "Revni- ostareli v času kriz: družba na dlani". *Arhivi*, 43, 2020, 2, 323.

35 E.g. the foundation of L. Riess, founded in 1873, as well as those of Baron P. Revoltella, M. Radich, and others (*L'amministrazione comunale di Trieste nel triennio 1900-1902*. Trieste: Il Municipio di Trieste editore, G. Caprin, 1903, 306ff). This does not include the workers' mutual aid societies that had been established since the first half of the century, which targeted specific professional groups, such as hatters, merchants, coopers, etc. (Bratož, Urška: "Delalcu ne ostane druzega, nego, da sam premisli, kako bi se preskrbel tudi v slučaju bolezni---": o delavcih, obrtnikih in podpornem društvu v Kopru. In: *Historični seminar 13* (Šter, Katarina, Žagar Karer, Mojca, eds.). Ljubljana: Založba ZRC, 2018, 122).

replaced by associations, societies, often politically motivated, which used charity to build consensus and support.[36]

Incapacity for work, an integral element of old age

In 1864, the Municipality of Trieste set up a special commission for the poverty ('Commissione sul pauperismo'), composed of two municipal councillors and four representatives of the charitable directorate, to study and present proposals for improving the social situation. The report[37] presented by the commission at the end of its task highlighted the problem of job scarcity. In this context, it is possible to agree with the opinion of the time that old age, illness, and unemployment have been the key social problems and drivers of poverty in the Istrian region.[38] However, the important discourse related to eligibility for social assistance or the debate on "deserving" and "undeserving" poor cannot be overlooked here. The demand to divide the poor into two groups (employable beggars on the one hand, and the poor who could not support themselves, e.g. because of their age or physical condition, on the other) existed in the secular authorities, in particular with the economically justified (mercantilist) moralisation that man's work should be useful to the state and its economy. According to this logic, only the poor who were unable to work for objective reasons (i.e. the elderly, the sick, the disabled, etc.), were truly worthy of pity (and entitled to assistance).[39] The remaining poor have, for the most part since the 18th century, been seen as an untapped potential labour force. There was also an important distinction between permanent and temporary

36 Di Fant, "Contro la questua molesta", 19, 30.

37 On this cfr. Fabi, ***La carità dei ricchi***, 145–146; Rossetti, Formiggini, ***Cenni storici***, 87; Finzi, Roberto: Gli ultimi non saranno i primi. I poveri a Trieste fra Sette e Ottocento. In: ***Storia economica e sociale di Trieste***. Vol. I. (Finzi, Roberto, Panjek, Giovanni, eds.). Trieste: Lint, 2001, 416ff; Scartabellati, Andrea: *Prometeo inquieto: Trieste 1955-1937. L'economia, la povertà e la modernità oltre l'immagine della città della letteratura*. Roma: Aracne, 2006, 40ff.

38 Cfr. also Scheutz, Demand and Charitable Supply, 59.

39 This is how the "deserving poor" were defined in the 1818 Regulations of the Poor Institute in Trieste: "The truly poor are distinguished into those who, through misfortune, bodily defects or old age, have rendered themselves completely incapable of earning their livelihood by work, and those who, through similar circumstances, have become only partially incapable of work, who cannot earn their entire livelihood from themselves, but rather at least part of it." (Kandler, Pietro: I poveri ed i pitocchi. In: *Raccolta delle leggi, ordinanze e regolamenti speciali per Trieste*. Trieste: Lloyd Austriaco, 1861, 11).

incapacity for work; if the latter was sought to be remedied as soon as possible (also within the framework of existing health and social welfare institutions), the former usually already implied the granting of some kind of social care.

Work as a value and a guarantee of personal happiness and social well-being was also firmly anchored in 19th-century bourgeois cultural codes, whereby the task of society was to produce as many able-bodied (useful) members of society as possible.[40] For example, in 1845 Carlo Combi – then head of the bureaucracy staff of the Poor Institute in Trieste – wrote about this, summarising the mindset of the merchant elite of Trieste and the common discourse on the pauperisation of (urban) society. His idea was, that "to educate and moralise" is the key task of philanthropy and charity, and that there must also be public (not just private) charity that contributes not only to the temporary solution of problems but also to the longer-term elimination of the causes of poverty for the public good.[41]

However, public charity in the sense of re-education of the poor was also not feasible for all; adults (especially the elderly) were, in Combi's words, "plants already lost to society", either deprived of the strength to work by old age or deprived of employment for moral, physical or other reasons (competence). Even at the opening of the new Triestine almshouse in 1862, the inaugural addresses echoed the message that charitable institutions offered two things – shelter and work – and that this was the most that the poor could ask of society.[42] The doctrines of the time promoted the belief that by providing work, true and benevolent mercy[43] was being exercised and that everyone, according to his or her own abilities, determined by

40 On the ideology associated with work, see Studen (Človek mora delati za svojo srečo!: pretekla razpravljanja o delu s poudarkom na drugi polovici 18. stoletja in prvi polovici 19. stoletja. In: *Pomisli na jutri: o zgodovini (samo)odgovornosti* (Studen, Andrej, ed.). Ljubljana: Inštitut za novejšo zgodovino, 2012, 9–36); Stariha ("*Z nobenim delom"*), and in the context of vagrancy, e.g. Wadauer ("Establishing Distinctions: Unemployment versus Vagrancy in Austria from the Late Nineteenth Century to 1938". *International Review of Social History,* 56, 2011, 31–70).

41 In general, the Poor Institute was the key regulator of private charity, and presented itself as the only valid intermediary for private charity, which could have otherwise been abused by the undeserving poor if the means had been channelled through individuals rather than through the institution (Di Fant, 'Contro la questua molesta', 23).

42 Rossetti, Formiggini, *Cenni storici*, 68.

43 *"… col dare lavoro si opera la veritiera e benefica carità".*

gender, age, and physical strength, was contributing to the common good. Only those who are incapable of work should thus be exempted.[44] Even some almshouses infiltrated the doctrine of work and its benefits into their operations to a certain extent; in these institutions, in return for a place to stay, it was customary to expect unpaid work, insofar as the individual was able to perform it.[45]

The temporary incapacity of wage-earners is also worth mentioning; for these workers, benefits from workers' mutual aid societies, insurance companies, etc., could go some way to alleviating their hardship, in exchange for the membership fee. Austria introduced accident insurance in 1887 and health insurance a year later, but organised forms of self-help for workers had existed for decades before that.[46]

Those who were permanently unable to work were entitled to some form of social support (albeit usually insufficient); apart from institutional care in an almshouse, they could receive food or commodity assistance. Particularly common (e.g. in larger cities such as Trieste) was the distribution of free meals (soup) under the auspices of the Poor Institute – the need for these is said to have risen from 800 to 2,000 or more meals distributed between 1837 and 1845 (due to economically motivated labour immigration).[47] This distribution of free rations was intended as a broader, albeit temporary, form of charity, not strictly tied to the right of domicile.[48]

The concurrent complaints that social care is concentrated in predominantly urban spaces or does not meet enough of the needs manifested in rural areas were probably also partly justified. In Trieste, for example, the distribution of meals was also intended for the inhabitants of the

44 Rossetti, Formiggini, *Cenni storici*, 66.

45 See f.e. the regulations of the Besenghi almshouse in Izola (SI PAK KP 250, b. 1, m. 3).

46 See f.e. Bratož, 'Delalcu ne ostane druzega'; Bratož, "Kruha in dela" …

47 Fabi, *La carità dei ricchi*, 41. Also later (1862), there are reports of 1,200 to 2,000 free meals cooked daily for all the needy outside the care of institutions, the number of which varied according to the needs and the season (Rossetti, Formiggini, *Cenni storici*, 67).

48 Di Fant, 'Contro la questua molesta', 22 and 30.

neighbourhoods and villages (surrounding areas),[49] but this was carried out in the city, which could be a problem for the elderly living outside it. They were also unable to take part in another "social measure", namely paid public works (road repairs[50]), for which the municipality allocated some funds in 1863,[51] which were then paid to the workers involved. Unemployment, even temporary one, was a pressing problem, which increased the quota of those in need.[52] It was repeatedly pointed out that rural poverty was seasonal,[53] as people "work in the fields in summer ... but in winter they are almost all poor".[54] Measures such as making public works available in winter and the distribution of goods (flour, salt, etc.) were occasionally tried to address this, but there was no systematic organisation of formal or informal charity in the countryside.[55]

Old people and their bodies

Since it was in the interest of the state that people should be able to work for as long as possible and not be a social burden, medical imperatives were also geared towards appropriate lifestyle habits that would enable healthy ageing and the maintenance of a strong body even in old age. For example, medical and hygiene manuals of the 19th century depict, above all, the inevitable decline of vitality; the body undergoes noticeable changes, visible in

49 Of the 580 families receiving free meals in Trieste, more than 47% were from the surrounding area, which also accounted for almost half of the rations distributed (*Verbali della Dieta provinciale di Trieste*. Trieste: Lloyd Austriaco, 1864, 215).

50 And also on the railways, but only the population living nearby was to be involved (*Atti della Dieta provinciale dell'Istria in Parenzo.* Trieste: Lloyd Austro-Ungarico, 1873, 76).

51 In the amount of 1,400 (Bazovica), 720 (Padriče), 204 (Bane), and 700 gld. (Lonjer) (*Verbali del Consiglio della Città di Trieste*, 1863). In Istria, too, part of the funds, "to help the healthy and working man", were allocated in the form of public works (*Atti della dieta provinciale*, 1863, 310).

52 *Verbali del Consiglio della Città di Trieste*, 1863, 35.

53 This was not only the case for agrarian workers; dockers were often out of work in winter, as the weather prevented ships from sailing, and fishermen were similarly without income (Fabi, *La carità dei ricchi*, 42) and could become occasional paupers.

54 *Verbali della Dieta provinciale di Trieste*, 1864, 215.

55 Čeč, "Donacije Janeza Nepomuka Kalistra", 108. Although it appears to have been at least a distribution network operating through rural parishes in the Triestine territory, which received raw ingredients for the soup from the Institute and then distributed them to the poor (see Gonnella, Anna: L'assistenza pubblica a Trieste: l'alimentazione nell'Istituto dei poveri (1818–1918). In: *Gli archivi per la storia dell'alimentazione.* Vol. III. Roma: M.B.C., 1995, 1596).

the skin, physiognomy, hair, senses, and in the decline of physical strength and the functioning of the organs.[56] Most often, advice on prolonging life and living healthily in old age were contained in general hygiene reading, usually aimed at young people to ensure a better quality of life through a healthy lifestyle, especially by following the principles of Hufeland's macrobiotics.[57]

The guidance notes recommended that the elderly should have a sparing and regulated diet; their food should be easily digestible and less irritating, in smaller quantities; they should avoid purging (purgatives, blood leaks, heavy sweating, etc.), as this weakens the strength and further dehydrates the body. The elderly need order, calmness, a steady movement of the body without great effort, and as little mental restlessness, strong passions as possible, while joy, optimism, hope for a long life and also for life after death are beneficial.[58] However, this advice was often difficult to implement for the lowest social classes (especially with regard to diet, limiting physical work, etc.), as it followed mainly bourgeois lifestyles and values, and hardly even reached the lower social strata, due to illiteracy or unwillingness to follow the collective health-related imaginary[59]).

Work was recommended in old age, but in a moderate way – preferably in the fresh air, and certainly not in the form of strenuous tasks.[60] Older people should have the right to get some well-deserved rest in the last years of their lives and to devote more time to maintaining their own

56 On this see Bratož, Urška: Staro telo: medicinski pogled 19. stoletja. In: *10. Istarski povijesni biennale = 10th Istrian History Biennale: Corpus, Carnalitas ---: the body and corporality in the history of the Adriatic* (Mogorović Crljenko, Marija, Uljančić-Vekić, Elena, eds.). Poreč: Zavičajni muzej Poreštine, Pula: Sveučilište Jurja Dobrile, Filozofski fakultet, Pazin: Državni arhiv, 2023, 102-114.

57 Christoph Wilhelm Hufeland (1762–1836) incorporated traditional dietetics into a new scientific discipline that he called macrobiotics. Its aim was not cure, but prevention and longevity (Remec, Meta: ""Živeti dolgo ali živeti srečno?": Christoph Wilhelm Hufeland in njegov vpliv na dojemanje starosti in staranja v dolgem 19. stoletju". *Glasnik Slovenskega etnološkega društva*, 63, 2023, 2, 7-21). See also Prelog, Matija: *Makrobiotika ali nauki, po kterih se more človeško življenje zdravo ohraniti in podolgšati*. Maribor: self-publishing, 1864.

58 Prelog, *Makrobiotika*, 256–259; see also Ricciardi, Giuseppe: *Trattatello d'igiene, ossia Medicina senza medici e senza farmachi.* Firenze: Stabilimento Civelli, 1869, 53; Guyétant, Sebastien: *Il medico dell'età regrediente e della vecchiaia ossia consigli alle persone d'ambo i sessi, che transcorsero l'eta' dei 45 anni*. Venezia: Bazzarini, 1841, 126–127.

59 See also Bratož, Urška: "Podobe starosti v ljudski in uradni medicini 19. stoletja". *Glasnik Slovenskega etnološkega društva*, 63, 2023, 2, 22-30.

60 *Dizionario classico di medicina interna ed esterna,* vol. 21, Venezia: Giuseppe Antonelli, 1835, 38.

health. Of course, as contemporary writers have noted, this was only realised by those who could afford to take a break, unlike peasants and workers who had to work even in old age to ensure their survival.[61] Similarly, other recommendations (e.g. rest, peace of mind, proper diet, optimism, etc.) reflected the bourgeois ethic and were an ideal that was difficult for the general population to attain, conditioned with financial means and social networks.

The ideal that was probably attainable by few was, of course, an old age free from suffering and pain, and at the same time free from the deprivation that the elderly were largely confronted with. On the other hand, the outward appearance of an impoverished man, marked by hunger and physical exhaustion, closely resembled that of an ageing man, suggesting that the "ageing" of the poor was, at least superficially, more rapid.[62] It is generally accepted that the well-being of the elderly—multifaceted and encompassing physical, economic, and emotional dimensions—depended to a large extent on economic status, nutritional levels, living conditions, and other factors that define "quality of life."[63] Yet examining the historical implications of these conditions remains a significant research challenge.

Older people have faced a variety of health problems that have affected their quality of life, their ability to earn a living and, ultimately, could be the cause of death in old age. What is interesting in this context is a particular category of causes of death which – most often under the label of *marasmus senilis* (referring to physical weakness, wasting away, depletion of the life force, deterioration, degeneration of the human body), not only because of its frequent occurrence, but also because of its indirect implications. Although wasting away could be the result of various chronic

61 S. Guyétant, *Il medico dell'età regrediente*, 122. On the fact that the elderly were often compelled to work as long as their bodies allowed, see e.g. Studen, Stari, onemogli, 208; the problem was addressed also in the case of seafarers in Mezzoli, "Safe waters".

62 Cf. also Čeč, *Podobe starosti*, 22–23, who at the same time highlights the body and the biological changes visible in it as a criterion for defining a person as old, especially in the context of social care (Čeč, Dragica: "Revščina kot grožnja družbenemu redu v 18. stoletju". *Acta Histriae*, 24, 2016, 2, 302).

63 Pelling, Smith, Introduction, 8.

medical conditions (especially tuberculosis, gastroenteritis, cancer, etc.[64]), "marasmo senile", "debolezza senile", etc. were the official medical categorisations of death in the last decades of the 19th century.[65]

Viljem Lipič, physician in Ljubljana in the first half of the 19th century, classified old-age debility as a nervous disease, since the natural end of life was most often associated with a weakened mental capacity, but he also noted that the majority of those who died of marasmus came from poorer backgrounds.[66] Another revealing information is the number of the almshouses' inmates, who died of marasmus; in Gorizia in 1891, for instance, the ratio was over 72% for men and 75% for women of all deaths in that year.[67]

The social conditionality of marasmus is evident also in the case of Koper. Although between 1840 and 1845 more than 32% of debility cases recorded in the death registers were attributed to individuals whose occupation or social status was not clearly indicated, (age-related) debility – as a vaguely defined diagnosis – accounts for the highest proportions of causes of death[68] among the lower classes (servants, poor), farmers, fishermen, and

64 Cfr. F.e. *Nuova enciclopedia popolare italiana*, vol. 12. Torino: Società l'Unione tipografico-editrice, 1861.

65 Between 1880 and 1885, for example, we can see that the proportion of old-age debility in Koper was up to 12% of all deaths (excluding stillbirths and inborn debility) on an annual basis (see the health reports in SI PAK KP 7, b. 206, no. 1025; SI PAK KP 7, b. 179, no. 768; SI PAK KP 7, b. 197, no. 964; SI PAK KP 7, b. 216, no. 1004/XIV; SI PAK KP 7, b. 208, no. 1207; SI PAK KP 299, b. 9). About a half of people aged above 60 were diagnosed with marasmus at their death, which was a high proportion, when compared to data of some other case studies (see f.e. Katarina Keber, "Ostareli v Ljubljani v 19. stoletju: Mortaliteta na primeru Šempetrskega predmestja". *Kronika,* 73, 2025, 2, 393–404).

66 Lipič, Fran Viljem: *Topografija c.-kr. deželnega glavnega mesta Ljubljane z vidika naravoslovja in medicine, zdravstvene ureditve in biostatike*. Ljubljana: Znanstveno društvo za zgodovino zdravstvene kulture Slovenije, 2003, 236. Recent studies have also highlighted the links between wasting and inadequate nutrition and hard work (von Kondratowitz, Hans-Joachim: The Medicalization of Old Age: Continuity and Change in Germany from the late Eighteenth to the Early Twentieth Century. In: *Life, Death and the Elderly* (Pelling, Margaret, Smith, Richard M., eds.). London: Routledge, 1991, 112-137).

67 Luzzatto, Aronne: *Rapporto sanitario del Comune di Gorizia per il triennio 1891-1892-1893*. Gorizia: Magistrato civico, 1894, 25.

68 At this point it should be clarified that – since the first half of the century – according to the Regulations on the Determination of Causes of Death (Trieste, 1819; Circolare del imp. Reg. Governo del Litorale, concernente la visita de' morti, SI PAK KP 304, b. 9, a.u. 15), the cause of death was determined by the municipal mortuary inspectors, and this information was then forwarded to the parish priests for entry in the death registers. In their work, the mortuary inspectors also relied to a large extent on information from the deceased's attending physician, and the cause was sometimes more difficult to determine if such information did not exist.

the lowest proportions among the middle and upper social classes (civil servants, landlords, clergy, etc.).

Most of the people to whom marasmus was attributed before the age of 70 were peasants or members of the lower social strata. This may indirectly suggest that those who became weakened the fastest and to the greatest extent were individuals who had to work hard for their livelihoods, were poorly nourished, and most likely lived in deprivation. The links between poverty and old age have been increasingly highlighted by scholars who deal with the history of old age.[69] This is evident by the data on the inmates of the almshouses, many of whom were elderly.[70] It also shows that society's preoccupation with the elderly has been predominantly with their actual or potential poverty and the appropriate means to prevent or alleviate it, with much less (or no) concern for their health.[71] Physical weakness was also to be conflated with the category of incapacity for work, which was used to describe those who were usually involved in institutional social care.[72]

The "marasmus senilis" was a fundamental concept linked to the irresistible process of the depletion of the life force (in the vitalist sense) and, from the Hippocratic-Galenic tradition,[73] a key marker of the medicalisation of old age since the 18th century.[74] In some European settings (e.g. Germany), it is noted that – while medical nomenclature became more sophisticated in the second half of the 19th century – the number of causes of death attributed to old age (or age-related diseases) increased, indicating that the

69 See f.e. Pat Thane: "Social Histories of Old Age and Aging". *Journal of Social History*, 37, 1, 2003, 93–111, and also Čeč, in this volume

70 Some data for Ljubljana in Čeč, "Revni – ostareli v času kriz", 326, and Čeč, in this volume; for Gorizia in Tavano, Luigi: *Assistenza e sanità a Gorizia: le suore di carità (1846-1984)*. Gorizia: Provincia religiosa di Gorizia delle suore di carità di S. Vincenzo de'Paoli, 1984, 200. In Gorizia, for example, in 1892, more than 70% of all the inmates of the almshouse (Casa di ricovero), both men and women, were over 60 years of age (Luzzatto, *Rapporto sanitario*).

71 Conrad, Old Age and the Health Care System, 505.

72 Kondratowitz, The Medicalization of Old Age.

73 The basis for these concepts was the composition of the four elements (fire, water, earth, air) and the four qualities (hot, cold, wet, dry), and the resulting division into the basic body juices (blood, mucus, yellow and black bile) – harmony, the balance of the body fluids, was thought to make health possible. Humoral pathology was also the basis for ascribing certain characteristics to the old body: it was understood as "cold" and "dry", while at the same time in the process of its tissues becoming more rigid and its life force waning (for more on this, see Bratož, Staro telo and Draženović, in this volume).

74 Kondratowitz, The Medicalization of Old Age, 120, 125.

concept of natural, inevitable death had taken over.[75] It can also be confirmed for Koper that the proportion of deaths specifically attributable to age (senility) among those over 60 years of age rose from 15% in the 1840s to just over 39% in the 1870s.[76]

Among the elderly in Koper aged over 75 (who died in the period 1875–80), 76.5% were diagnosed with "marasmus" ("senilis"), and 87% of those aged over 80. This suggests that debility was an expected condition in old age, but probably also that the elderly rarely called a physician,[77] so that many of the causes of their deaths were vaguely identified conditions (such as *tabes* or *marasmus*), and that such apparently neutral and broad labels were probably convenient to accommodate all that was not always medically identifiable. Of the elderly people in Trieste who died of marasmus between 1888 and 1890, 60% or more were women, mostly *privates*,[78] but also many of them inmates of the almshouse and peasants. The last two groups were predominant among the men to whom this cause of death was attributed.[79] Data on marital status would certainly also have been informative, but they are unfortunately lacking here.

Some indications from the medical reports of the Trieste hospital[80] suggest that the elderly sought medical help very late, which probably led to a higher mortality rate, especially in cases of infectious diseases. The reasons

75 Thane, Pat (ed.): *The Long History of Old Age*. London: Thames & Hudson, 2005, 244; cfr. Kondratowitz, The Medicalization of Old Age, 128.

76 ŠAK, Death register 1832–1846; Death register 1875–1899.

77 See e.g. Pelling, Smith, Introduction, 7. This could be indicated by the absence of medical treatment that would have helped the medical examiner to determine the cause of death more accurately, as well as by data from individual epidemics of infectious diseases, where patients (including the elderly) sought help in hospital at a very late stage of the disease, which in most cases resulted in a fatal outcome of the disease (cf. Bratož, Urška: Epidemija in ostareli: kolera in domet oskrbe v Avstrijskem Primorju. In: *Epidemije in zdravstvo: zgodovinski pogled* (Keber, Katarina, ed.). Ljubljana: Založba ZRC, 2024, 219-232).

78 Usually women without a profession, who lived off their own resources or property, often widows.

79 Costantini, Achille: *Rapporto sanitario per il triennio 1888-90*. Trieste: Municipio, 1895, 86.

80 See De Giaxa, Vincenzo, Lustig, Alessandro: *Relazione sul colera nell'anno 1886*. Trieste: Municipio, 1887, 65–66 and Bratož, Epidemija in ostareli.

for this often lay in the shortage of physicians, especially in rural areas,[81] the remoteness of trained medical personnel, and the limited financial access to formal healthcare. Equally important was the widespread distrust of conventional medicine,[82] the cultural and linguistic distance between physicians (who were often outsiders in rural communities) and local populations, and the distinct cultural frameworks that shaped local understandings of disease.[83]

In the 19th century, in both rural and urban settings, medical treatment (especially of the poor) was still mostly carried out in the home. In times of epidemics (in 19th century mainly cholera), temporary hospitals for infectious diseases were set up (often, for this purpose suitable spacious buildings in convenient locations[84] were used), where infected people were isolated, but only those who could not be treated at home were hospitalised, most often because they were living in inadequate conditions or did not have the necessary care or accommodation in the city.[85]

81 This was certainly true for Istria, at least to a certain extent. In 1873, for example, there were 40 physicians in the province, but they were located only in the larger municipalities (*Atti della dieta provinciale* 1873, 118). As Carlo Apollonio, an Istrian physician and hygienist, reported just before the end of the 19th century, in 1895 there was supposed to be one physician for every 5,293 inhabitants in Istria, but many places (e.g., Dekani, Pomjan, Dolina, Boljun, Kanfanar, Plomin, Oprtalj, Croatian Tinjan, Savičenta, Bale, Veprinac, etc.) – according to author's calculations, with a total population of 60,073 people – were without a permanent physician, as the whole province (Istria) only had 60 of them altogether (Apollonio, Carlo: *La riorganizzazione del servizio sanitario nell'Istria*. Pula: La Camera medica istriana, 1896).

82 Cfr. Makarovič, Gorazd: "Prehrana v 19. stoletju na Slovenskem". *Slovenski etnograf*, 33/34, 1988/1990, 127-205; Židov, Nena: "Jurij Humar in njegovo zdravljenje ljudi z magnetizmom". *Etnolog*, 15=66/1, 2005, 323-343; Kovačič, Kristina: "Porodna babica šantla Ana iz okolice Trsta in njena zapuščina". *Etnolog: glasnik Slovenskega etnografskega muzeja*, 7=58, 1997, 71-85; Bratož, Urška: "Zdravnik med idealom in resničnostjo: zdravniško delo in ljudski odnos do zdravja in medicine v 19. stoletju". *Acta medico-historica Adriatica*, 8, 2010, 2, 295-328 etc. On the late calling of a physician (due to distance, high price, mistrust, etc.); see f.e. Makarovič, "Zdravstvena kultura", 484–485, as well as Bratož, "Zdravnik med idealom".

83 For the case of Istria see in particular Lipovec Čebron, Uršula: *Krožere zdravja in bolezni: tradicionalna in komplementarne medicine v Istri*. Ljubljana: Filozofska fakulteta, Oddelek za etnologijo in kulturno antropologijo, 2008, 120.

84 In Trieste, they were usually close to the poorer areas of the city and in locations where they could be accessible to the inhabitants of the wider urban territory (Bratož, Urška: *Bledolična vsiljivka z Vzhoda: kolera v severozahodni Istri (1830–1890).* Koper: Znanstveno-raziskovalno središče, Založba Annales ZRS Koper, 2017, 172).

85 See Keber, *Čas kolere: epidemije kolere na Kranjskem v 19. stoletju.* Ljubljana: Založba ZRC – ZRC SAZU, 2007, 123; Bratož, *Bledolična vsiljivka*, 172.

Looking at the proportion of hospital admissions during one of the cholera epidemics (1886), we can see that about 36% of all cholera patients were admitted to an auxiliary cholera hospital, but the figures are more telling when divided by age: while for younger patients the proportion of admissions was less than half, for the 71–80 age group it was more than 70%.[86] A larger proportion of elderly patients were therefore treated in hospital, which may reflect their social deprivation, and also a lack of sufficient social network to provide them with adequate care and nursing.[87]

Finally, age-related perceptions (expected higher mortality in old age) may have led the elderly not to seek medical help, ultimately making hospitalisation necessary because of delayed response to their health condition. The report for 1886 on the cholera auxiliary hospital in Trieste states that many patients arrived there at a very late stage of the disease and died after only a few hours. It is also worth noting that 75%[88] of all elderly patients (aged between 61 and 80) admitted to the hospital in Trieste died, and the records from the civil hospital where cholera patients were admitted in 1873 are very similar.[89] In the case of some other diseases, particularly respiratory ones, the mortality rate of the elderly was also relatively high. At the end of the 19th century, for example, data on mortality due to *pneumonitis* in Trieste show that (in addition to a high proportion of children under 5 years of age) between 23% and 29% of those who died were aged over 60.[90]

On the other hand, these data may be linked to another important issue that cannot be neglected in the context of health care for the elderly: attitudes towards medicine and the refusal of medical assistance, and especially hospital treatment. In particular, bourgeois rhetoric highlights lower social status as an element that is associated with a higher degree of resignation, distrust of medicine, and recourse to "superstition" when confronted

86 Giaxa, Lustig, *Relazione*, 63.

87 In that year, 325 patients were treated for cholera at the St. Mary Magdalene Auxiliary Hospital; the female patients were dominated by housewives and housekeepers, with a large number of children, and the male patients included porters, as well as peasants, day-labourers, and various (petty) artisans (Giaxa, Lustig, *Relazione*, 65). The data for the epidemic of 1873 are also comparable (Brettauer, *Resoconto sanitario*, 61).

88 Giaxa, Lustig, *Relazione*, 65–66.

89 Brettauer, *Resoconto sanitario*, 61.

90 Costantini, *Rapporto sanitario.*

with illness. Already in the first half of the 19th century, warnings against "quackery" were sounded in the daily press.[91] The supposed attitude of the lower social groups towards health or the medical profession (and also the somewhat disparaging attitude of the bourgeois towards the rural mindset) is described in some of the treatises[92] problematising the health and hygiene situation in the Austrian Littoral.[93] For example, people were said to seek spiritual rather than medical help for advice in the face of illness.[94] According to some studies,[95] the elderly were less likely to turn to conventional medicine and more likely to rely on untrained healers,[96] there was greater resignation in the event of illness, and many elderly people could not afford medical help because of their financial situation – all these factors, together with their often fragile and questionable social network, probably contributed to the overall mortality pattern among the elderly.

Conclusion

Perceptions of old age in the nineteenth century were inevitably linked to physical weakness, the decline of the immune system, and the depletion of vital force, but in many cases also to social deprivation or at least economic dependence resulting from reduced capacity—or complete inability—to

91 F.e. in Kreft, "Zakaj še ljudje v boleznih pri lažnjivih babah, in goljufnih mazačih pomoči išejo?". *Kmetijske in rokodelske novice,* V/39, 1847, 154.

92 But it also appears in personal accounts; for example, the Slovene writer France Bevk (1890–1970) mentions it when recalling his father's sudden illness [translation made by the author of this paper]: "At that time there was no physician around. In our solitude, people lived and died without help, as if they did not like to interfere with God's will." (Bevk, France: "Začudene oči". ***Ljubljanski zvon***, 56, 1936, 1, 362).

93 F.e. Castiglioni, Arturo: *La mortalità a Trieste e le sue cause speciali. Brevi cenni statistici.* Trieste: B. Appolonio, 1877, 34.

94 Facchinetti, Antonio: "Degli Slavi Istriani". *L'Istria*, II/25, 1847, 97; some decades later this was also mentioned by Rutar, Simon: *Samosvoje mesto Trst in mejna grofija Istra: prirodoznanski, statistični, kulturni in zgodovinski opis*. Ljubljana: Matica Slovenska, 1896, 188.

95 See f.e. Pelling, Smith, Introduction, 7.

96 It is true that this characteristic was not exclusive to the elderly, as it also appeared among various age and social groups in both rural and urban contexts. For example, the Triestine publicist Josip Godina Verdelski (1808–1884), who also lost his wife due to cholera during his stay in Koper, mentions in his autobiography that, in his forties, he resorted to the help of healers because he distrusted conventional medicine (Godina Verdelski, Josip: *Živenje Josipa Godine Vèrdélskega: opisal on sam leta 1879 s pristavkom raznih stranskih réčij za razdélitev mej domačince po njegovi smèrti: s podobo zgoraj iménovanega*. Trieste: Centralgrafica, 1992, 119).

work. The bourgeois work ethic and prevailing attitudes toward ageing shaped contemporary views of poverty and old age, and the data that reveal ageing (and sick) bodies in all their vulnerability suggest that the image of old age characteristic of the lower social strata was likely the most common one at the time. This was not a positive image, and it differed markedly from bourgeois perceptions, which often carried more favourable connotations, as they were not associated with financial dependence in old age but rather with experience and wisdom that elicited respect. Meanwhile, the older bodies that emerge from medical statistics and parish records under the diagnosis of *marasmus senilis*—a common and expected condition in old age, and consequently a frequent cause of death—appear in great numbers. Their physical debilitation, whether biologically or socially conditioned, can be understood not only as a cause but also as a symptom of their social deprivation, since they were compelled to work for as long as they were able in order to secure their livelihood and meet societal expectations not to become a burden to their family or the state.

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Otto Gerdina

The Stereotype Content Model Approach to the Study of Ageism in History

The term "ageism" was first coined in 1969 to describe discrimination resulting from prejudice against one age group by another[1]. Although the original definition encompasses discrimination and prejudice experienced by all age groups, scientific research has established an understanding of ageism as a specific form of discrimination experienced by older people[2] on the basis of actual (objective) or perceived (subjective) age.[3] Such a conceptual narrowing is already evident in Butler's 1975 definition, where he defines ageism as "the process of systematic stereotyping and discrimination against people because they are old."[4] Although the concept of ageism is relatively recent, the phenomenon itself is much older and exists in all societies where there is an implicit ranking of age groups into higher and lower classes.[5] It refers to a form of oppression that occurs in all societies and historical periods, whereby individuals are discriminated against on the basis of the assumption that age is an indicator of competence and worth.[6] The

1 Butler, Robert, N.: "Age-ism: Another form of Bigotry". *The Gerontologist*, 9, 1969, 4/1, 243–246.

2 Gerdina, Otto, Kurdija, Slavko: "Ageism in Slovenia: Assessing Differences between 2008 and 2022". *Annales: Series historia et sociologia*, 34, 2024, 1, 45–58.

3 Marcus, Justin: Age Discrimination. In: ***Encyclopedia of Geropsychology*** (Pachana, Nancy A., ed.). Singapore: Springer, 2015.

4 Butler, Robert. N.: ***Why Survive? Being Old in America***. Baltimore: The Johns Hopkins University Press, 2002, 12.

5 Palmore, Erdman: *Ageism: Negative and Positive*. 2nd ed. New York: Springer, 1999.

6 Thompson, Sue: Aging and Ageism. In: *Handbook of the Sociology of Death, Grief, and Bereavement: A Guide to Theory and Practice* (Thompson, Neil, Cox, Gerry R., eds.). London: Routledge, 2017, 210–223.

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very notion that older individuals are distinct from their younger counterparts and possess unique characteristics renders it more readily acceptable for society to treat them unequally or at the very least, differently.[7] Ageism encompasses both the societal perceptions of and attitudes towards older people, as well as specific instances of discrimination that limit the number of opportunities for individuals to participate in society or exclude them from society in their final years of life.

Ageism consists of three dimensions:

- dimension of perception/cognition, which communicates how older people are understood/perceived;
- the emotional dimension, which tells us how people feel about older people and how they evaluate them;
- the behaviour dimension, which describes how people actually behave towards older people.[8]

The first dimension is associated with stereotypes, the second with prejudice and the third with discrimination.[9]

Stereotypes play a key role in the dissemination and perpetuation of preconceived ways of thinking about (old) age.[10] They can be defined as "cognitive structures that store our beliefs and expectations about the characteristics of members of social groups".[11] Stereotypes can be either true or false, but they do influence our behaviour in a number of ways. They often determine what information we seek, what we pay attention to and what we remember. The term 'stereotyping' is used to describe "the process of applying stereotypical information".[12] The act of stereotyping is rooted

7 Gerdina, Otto: Starizem in starostni stereotipi. In: *Homo senescens: dolgoživost in izobraževanje starejših* (Ličen, Nives, Mezgec, Maja, eds.). Ljubljana: Založba Univerze v Ljubljani, 2022, 85–97.

8 Tornstam, Lars: "The Complexity of Ageism: A Proposed Typology". *International Journal of Ageing and Later Life*, 1, 2006, 1, 43–68.

9 Cuddy, Amy. J., Fiske, Susan T.: Doddering but Dear: Process, Content, and Function in Stereotyping of Older Persons. In: *Ageism: Stereotyping and Prejudice against Older Persons* (Nelson, Todd, ed.). Cambridge: The MIT Press, 2002, 3–26.

10 Marcus, Age Discrimination, 11.

11 Cuddy and Fiske, Doddering but Dear, 4.

12 *Ibid*.

in our innate tendency to "assign objects, events and people to meaningful classes, about which we have established beliefs and expectations".[13] Stereotyped ideas tend to obscure the nuances of individual differences between people, instead emphasising their affiliation with a specific social group.[14]

Prejudices are defined as negative attitudes towards older people and the process of ageing.[15] They are the most persistent micro-ideologies of the everyday world, evading conscious control and succumbing to spontaneous and automatic responses to social situations.[16] While older people are occasionally perceived in a positive light, for example as active members of the community, good-hearted, loyal and reliable, they are more frequently regarded in a negative manner. This includes perceptions of them as being unwell, mentally slow, forgetful, sexually inactive and unproductive.[17] Consequently, old age increases the probability of being seen through the lens of negative age-related stereotypes and prejudices, thereby increasing the risk of discriminatory treatment.[18]

Age stereotypes and prejudices are a necessary, but not sufficient, condition for the labelling of certain behaviours as ageist.[19] As will be demonstrated subsequently, an understanding of age-related stereotypes and prejudices can be employed to anticipate people's predisposition to behave towards older people in an ageist way.

13 *Ibid*.

14 Lippman, Walter: *Public Opinion*. New York: Macmillian, 1922.

15 Palmore, *Ageism*.

16 Ule Nastran, Mirjana (ed.): *Predsodki in diskriminacije: Izbrane socialno-psihološke študije*. Ljubljana: Znanstveno in publicistično središče, 1999.

17 Palmore, *Ageism*.

18 Swift, Hannah, J., Steeden, Ben: *Exploring Representations of Old Age and Ageing*. Canterbury: Centre for Ageing Better, 2020.

19 Voss, Peggy et al.: "A World of Difference? Domain-Specific Views on Aging in China, the US, and Germany". *Psychology and Aging*, 33, 2018, 4, 595–606.

Stereotype content model

The stereotype content model[20] integrates cognitive and emotional elements inherent to stereotyping. The model is predicated on the assumption that social groups of people are classified along two axes, namely those of warmth and competence. In this context, the relative social status of a group predicts whether the group will be stereotyped as competent or incompetent, or its willingness to cooperate whether it will be stereotyped as warm or cold. The concept of competence encompasses attributes such as independence, skill, self-confidence and competence, while the notion of warmth encompasses qualities such as benevolence, trustworthiness, honesty and friendliness. A social group is more likely to be stereotyped as cold if it is perceived as a rival. A social group is perceived as warm if it is regarded as an ally.

The stereotype content model has been previously employed to evaluate the stereotype content of disparate social groups, including women,[21] individuals of lower socioeconomic status,[22] migrants,[23] members of various racial and ethnic minorities,[24] people with disabilities,[25] and older individuals. With regard to the latter, empirical research on the model has demonstrated that older individuals are predominantly perceived as warm

20 Cuddy and Fiske, Doddering but Dear. See also: Fiske, Susan. T. Cuddy, Amy. J., Glick, Peter, and Xu, Juan: "A Model of (often Mixed) Stereotype Content: Competence and Warmth Respectively Follow from Perceived Status and Competition". *Journal of Personality and Social Psychology*, 82, 2002, 6, 878–902.

21 Eckes, Thomas: "Paternalistic and Envious Gender Stereotypes: Testing predictions from the stereotype content model". *Sex Roles*, 47, 2002, 99–114.

22 Durante, Federica, Tablante, Courtney Beams, Fiske, Susan. T.: "Poor but Warm, Rich but Cold (And Competent): Social Classes in the Stereotype Content Model". *Journal of Social Issues*, 73, 2017, 1, 138–157.

23 Lee, Tiane, Fiske, Susan T.: "Not an outgroup, not yet an ingroup: Immigrants in the Stereotype Content Model." *International Journal of Intercultural Relations*, 30, 2006, 6, 751–768.

24 Durante, Federica, Volpato, Chiara, Fiske, Susan. T.: "Using the Stereotype Content Model to Examine Group Depictions in Fascism: An Archival Approach". *European Journal of Social Psychology*, 40, 2010, 3, 465–483.

25 Canton, Emily, Hedley, Darren, Spoor, Jennifer. R.: "The Stereotype Content Model and Disabilities". *The Journal of Social Psychology*, 163, 2023, 4, 480–500.

but less competent.[26] Phalet and Poppe[27] found, in a study of European national stereotypes, that older people were perceived as less competent, less ambitious and less responsible than younger people. However, they were also perceived as friendlier and warmer. The prejudices revealed by Fiske and colleagues[28] showed that patronising attitudes (pity and sympathy) predominate in attitudes towards older people, and that respondents felt less envy and jealousy towards them compared to other social groups. These perceptions give rise to feelings of sympathy, and less frequently, envy, pride or contempt.[29]

The stereotype content model was subjected to empirical investigation in a variety of cultural settings and contexts. To illustrate, Cuddy and colleagues[30] evaluated the model in seven European individualistic and three East Asian collectivistic cultures, thereby substantiating its cultural universality. Despite the model's widespread use in contemporary societies, to the best of the authors' knowledge, the stereotype content model has only been employed in one historical study of different social groups in fascist Italy. In this study, Durante, Volpato and Fiske[31] conducted an analysis of the content of the Italian fascist magazine La Difesa della Razza. Their findings indicated that the members of the ingroup (Italians and Aryans) were depicted with positive attributes, such as competence and warmth, which led to the formation of admiration prejudice. Conversely, outgroups were depicted with envious (Jews and English) and contemptuous (Blacks and mixed heritage) prejudices. The Jewish and English populations were depicted as competent, yet lacking in warmth. They were

26 Cuddy and Fiske, Doddering but Dear; Swift and Steeden, *Exploring Representations of Old Age and Ageing*.

27 Phalet, Karen, Poppe, Edwin: "Competence and Morality Dimensions of National and Ethnic Stereotypes: A Study in Six Eastern-European Countries". *European Journal of Social Psychology*, 27, 1997, 703–723.

28 Fiske, Susan T., Xu, Juan, Cuddy, Amy. C., Glick, Peter: "(Dis)Respecting Versus (Dis)Liking: Status and Interdependence Predict Ambivalent Stereotypes of Competence and Warmth". *Journal of Social Issues*, 55, 1999, 3, 473–489.

29 Ayalon, Lyat, Tesch-Römer, Clemens: Introduction to the Section: Ageism – Concept and Origins. In: *Contemporary Perspectives on Ageism* (Ayalon, Lyat, Tesch-Römer, Clemens, eds.). New York: Springer, 2018, 1–10.

30 Cuddy, Amy J. et al.: "Stereotype Content Model Across Cultures: Towards Universal Similarities and Some Differences". *British Journal of Social Psychology*, 48, 2009, 1, 1–33.

31 Durante et al.: "Using the Stereotype Content Model."

portrayed as powerful, manipulative, and dangerous, reflecting the Fascist narrative of a Jewish conspiracy. Those of African and mixed heritage were depicted as lacking both competence and warmth. Such portrayals depicted these groups with negative physical attributes and as socially inferior. In contrast with the predictions of the stereotype content model, no evidence of paternalistic prejudice was found. This absence was attributed to the Fascist regime's lack of positive interdependence with any outgroups, as well as its focus on racial purity and superiority. Notwithstanding the specific findings regarding in-group and out-group stereotypes in the Fascist era, this study effectively demonstrated the applicability of the stereotype content model in historical research. Nevertheless, as this is the sole study to employ the stereotype content model in a historical context, the utilisation of this approach in historical analysis remains in its infancy.

The aim of this chapter is to demonstrate how the stereotype content model can be applied in the historical study of ageism. This will be achieved in three steps. First, this chapter examines the attitudes of dominant groups in historical societies towards older people. Second, it outlines the generally prevalent stereotype content associated with old age. Third, it hypothesises the most probable widely shared type of ageism in a given era based on presented historical evidence. To this end, existing typologies of ageism are briefly presented and conceptually related to the Stereotype Content Model.

Typologies of ageism

A number of different forms of ageism have been identified in the literature. The majority of research distinguishes between individual and institutional ageism.[32] The first refers to biases and discriminatory behaviour expressed in everyday interactions with older people, often shaping their own self-perceptions through internalisation.[33] Individual ageism encom-

32 For example, Butler, *Why Survive*. See also: Ayalon, Lyat, Tesch-Römer, Clemens: Introduction to the Section: On the Manifestations and Consequences of Ageism. In: *Contemporary Perspectives on Ageism* (Ayalon, Lyat, Tesch-Römer, Clemens eds.). New York: Springer, 2018, 109–114.

33 Levy, Becca: "Stereotype Embodiment: A Psychosocial Approach to Aging." *Current Directions in Psychological Science*, 18, 2009, 6, 332–336.

passes behaviours such as avoiding contact with older people, denying the reality of old age, telling inappropriate jokes, accepting old age stereotypes and displaying negative attitudes towards older people.[34] Institutional ageism, by contrast, is woven into organisational policies and social structures. It is reflected in regulations, norms, and professional routines that, intentionally or not, curtail opportunities for older individuals.[35] Consequently, older individuals are subjected to disparate treatment in various domains, which is frequently justified by the erroneous assumption that their needs and preferences diverge from those of the broader community.[36] This also implies that ageism can occur even in the absence of an explicit intention to discriminate. As Thompson and Cox[37] note, "policies, structures and institutional practices can be experienced as oppressive even when the staff carrying them out are acting entirely in good faith."

In his seminal report, Ageism in America,[38] Butler distinguishes between two interrelated forms of ageism: intentional and unintentional. Intentional ageism can be defined as ideas, attitudes, rules or practices that are consciously or unconsciously biased against individuals or groups on the basis of their age. It occurs when a particular social group, typically the dominant one, exercises its power to oppress, exploit, silence, or simply ignore individuals who are younger or older than them.[39] Unintentional ageism, by contrast, operates more subtly, through taken-for-granted ideas, everyday rules, and habitual practices that reproduce bias without conscious awareness. As Butler notes, such acts often proceed without the perpetrator's awareness that they are biased against persons or groups based on their older age."[40]

34 Gerdina, Starizem in starostni stereotipi, 89.

35 Voss et al., "A World of Difference?".

36 Thompson, Ageing and Ageism.

37 Thompson, Neil, Cox, Gerry R.: Understanding Ageism. In: *Age and Dignity* (Thompson, Neil, Cox, Gerry R. eds.). Cheltenham: Edward Elgar Publishing, 2024, 8–32, 15.

38 Butler, Robert N.: *Ageism in America*. New York: International Longevity Center – USA, 2006.

39 Applewhite, Ashton: *Lepota let: manifest proti starizma*. Nova Gorica: Eno, 2017.

40 Butler, *Ageism in America*, 26.

While explicit ageism is the most visible form of ageism, Levy and Banaji point out the existence of implicit ageism.[41] Implicit ageism encompasses ideas, attitudes, rules, and practices that are not consciously biased against individuals or groups on the basis of their age. Implicit ageism consists of automatic or unconscious stereotypes that comprise "thoughts about the attributes and behaviours of the elderly that exist and operate without conscious awareness, intention, or control".[42]

Prior to 1990, typologies of ageism exclusively encompassed negative forms of ageism. Erdman Palmore was the first to posit that ageism can also manifest in a positive form.[43] In his seminal work, he defined ageism as any negative or positive prejudice or discrimination against any age group.[44] The presence of positive and negative prejudice and stereotyping towards older people has since been confirmed by a substantial corpus of research, as evidenced by studies such as those conducted by Cuddy and Fiske;[45] Fiske, Cuddy, Glick and Xu;[46] Kite, Stockdale, Whitley and Johnson;[47] and Meisner,[48] which have underscored the necessity for more nuanced typologies of ageism.

In this paper, I will draw on a typology that was developed by Tornstam,[49] who identified four types of ageist attitudes toward older people based on empirical findings from Sweden in 1984 and 2002: pitying positive, the no fuzz, the consistently negative and the consistently positive attitude.

- Consistently negative attitude is characterised by negative views of older people in society combined with negative beliefs about the role

41 Levy, Becca, Banaji, Mahzarin, R.: Implicit Ageism. In: *Ageism: Stereotyping and Prejudice against Older Persons* (Nelson, Todd D., ed.). Cambridge: The MIT Press, 2002, 49–76, 51.

42 *Ibid*., 51.

43 Marcus, Age Discrimination.

44 Palmore, *Ageism*.

45 Cuddy and Fiske, Doddering but Dear.

46 Fiske, Cuddy, Glick and Xu, "A Model of (often Mixed) Stereotype Content".

47 Kite, Mary E. et al.: "Attitudes toward Younger and Older Adults: An Updated Meta-Analytic Review". *Journal of Social Issues*, 61, 2005, 2, 241–266.

48 Meisner, Brad A.: "A Meta-Analysis of Positive and Negative Age Stereotype Priming Effects on Behaviour among Older Adults". *Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 67, 2012, 1, 13–17.

49 Tornstam, "The Complexity of Ageism".

older people should play in society.[50] If it includes aggressive and drastic attitudes and behaviours that reflect intergenerational tensions in society, it can also be conceptualised as hostile ageism.[51]

- Consistently positive attitude implies positive perceptions of older people and positive attitudes towards their social participation.[52] The attitude can be related to the term positive ageism, which is understood as the projection of traditionally virtuous traits, such as wisdom and frugality, onto older people.[53] It is thus the attribution of certain virtues to older individuals simply because of their age, which can reinforce stereotypes and influence how older adults are perceived and treated in society.[54]
- No fuzz or the jealously negative attitude combines the belief that older people are doing well in society and a negative attitude towards their relatively good social position.[55] In this chapter, I will use the term envious ageism to refer to this form of ageism.
- Pitying positive attitude is characterised by the belief that older people have a bad position in society and the desire to improve it.[56] Although seemingly benevolent, this stance has been described as compassionate ageism, a mode of thinking, based on one or more ageist assumptions,[57] namely that older people are frail and deserving individuals who merit protection and sympathy.[58] Compassionate ageism involves "the attribution of the same characteristics, status, and just deserts

50 *Ibid*.

51 See Cary, Lindsey, A., Chasteen, Alison L., Remedios, Jessica: "The Ambivalent Ageism Scale: Developing and Validating a Scale to Measure Benevolent and Hostile Ageism". ***The Gerontologist***, 57, 2017, 2, 27–36; Chen, Zizhuo, Zhang, Xin: "We Were All Once Young: Reducing Hostile Ageism from Younger Adults' Perspective". *Frontiers in Psychology*, 13, 2022.

52 Tornstam, "The Complexity of Ageism".

53 Palmore, *Ageism*.

54 *Ibid*.

55 Tornstam, "The Complexity of Ageism".

56 *Ibid*.

57 Vervaecke, Deanna, Meisner, Brad: "Caremongering and Assumptions of Need: The Spread of Compassionate Ageism during COVID-19". *The Gerontologist*, 61, 2021, 2, 159–165.

58 See for example: Binstock, Robert H.: "'The Oldest Old:' A Fresh Perspective or Compassionate Ageism Revisited?." *The Milbank Memorial Fund Quarterly. Health and Society*, 1985, 420–451; Binstock, Robert H.: "From Compassionate Ageism to Intergenerational Conflict?". *The Gerontologist*, 50, 2010, 5, 574–585; Chen and Zhang, "We Were All Once Young".

> to a heterogeneous group of "the aged" that tend to be stereotyped as poor, frail, dependent, objects of discrimination, and above all "deserving."[59]

The following section will present the typology in the context of the stereotype content model. As already noted, this model elucidates the cognitive processes by which individuals form impressions and judgements about social groups on the basis of two fundamental dimensions: warmth and competence.[60] The dimension of warmth assesses the extent to which a group is perceived as friendly, trustworthy, and benevolent. It is influenced by the perceived intention of the group to help or harm the perceiver. The competence dimension assesses the perceived competence, intelligence, and skills of the group in question. The perceived status of the group and its ability to act have a significant influence on this dimension.

A stereotype content model and the associated forms of ageism

The stereotype content model classifies social groups into four quadrants according to their perceived warmth and competence (see Table 1). The model identifies four distinct ideal-typical combinations of warmth and competence.

- A combination of high warmth and high competence in older people will result in admiration and respect.
- Those of an older generation who display a combination of high warmth and low competence may be subjected to patronising stereotypes that evoke feelings of pity.
- Those of an older generation who display a combination of low warmth and high competence are likely to be regarded with disdain and viewed as potential competitors for limited social resources.

59 Binstock, "From Compassionate Ageism to Intergenerational Conflict?", 575.

60 Fiske et al., "A Model of (often Mixed) Stereotype Content".

- A combination of low warmth and low competence in older people will result in their despising and marginalisation.

Table 1: Stereotype content model and the attributed type of ageism

The content of stereotypes: Type of ageism:	high warmth and high competence **positive ageism**	high warmth and low competence **compassionate ageism**
The content of stereotypes: Type of ageism:	low warmth and high competence **envious ageism**	low warmth and low competence **hostile ageism**

The four combinations of stereotype content can be linked to the four types of ageism:

- When older people are characterised by a combination of high warmth and high competence, they will be seen as allies and will usually enjoy a high social status, so this combination of stereotypes can be linked to positive ageism.
- When older people are characterised by a combination of high warmth and low competence, they will receive sympathy based on one or more ageist assumptions, so this combination of stereotypes can be linked to compassionate ageism.
- When older people are characterised by a combination of low warmth and high competence, older people will be respected but disliked, so this combination of stereotypes can be linked to envious ageism.
- When older people are characterised by a combination of low warmth and low competence, they will not be perceived as either friendly or competent and are likely to provoke an immediate negative response, so this combination of stereotypes can be linked to hostile ageism.

The experience of envy, pride, or contempt may emerge in relation to older individuals when specific social conditions are met. North and Fiske[61] cite two such cases:

- When older people prevent young people from accessing resources, for example, by not stepping down from their positions, they encourage feelings of envy in young people.
- When older people are seen as the main consumers of society's resources, the stereotype of warmth is reduced (due to perceived selfishness) and the stereotype of low competence is deepened (due to perceived burden of dependency).

Prior research has demonstrated that admiration engenders facilitation behaviours, whereas contempt and envy give rise to active harm, which may manifest in the form of aggressive policies and actions.[62] With regard to ageism, this implies that positive or compassionate ageism may evolve into hostile or envious ageism. This shift is aligned with the proposition that competition for limited social resources can precipitate negative sentiments between members of in- and out-groups.[63] In a context of what is termed 'realistic intergroup conflict', members of the in-group begin to develop negative sentiments towards the out-group, ascribing negative characteristics to them (for example, they are no longer perceived as trustworthy or as having benevolent intentions). As North and Fiske[64] posit, a comparable response is observed when the dominant group perceives that the marginalised group has transgressed a boundary. As long as older individuals accept condescending pity and remain in their perceived position of inferiority, they are subject to what is known as compassionate ageism. Should they transgress the boundaries of acceptable conduct by, for instance, demanding greater rights, they will engender resentment among the dominant group and further risk the transformation of their compassionate ageism into a hostile ageism.

61 North, Michael S., Fiske, Susan T.: "An Inconvenienced Youth? Ageism and its Potential Intergenerational Roots". *Psychological Bulletin*, 138, 2012, 5, 982–1009.

62 Durante et al, "Using the Stereotype Content Model."

63 Sherif, Muzafer: *Common Predicament: Social Psychology of Intergroup Conflict and Cooperation: The Robbers' Cave Experiment*. Norman: University of Oklahoma Book Exchange, 1966.

64 North and Fiske, "An Inconvenienced Youth?".

Historical societies' attitudes towards older people through the Stereotype Content Model

In the following section, I provide a brief summary of the attitudes of historical societies towards older people,[65] with reference to the stereotype content model. It should first be noted that I am not a historian, and that this discussion relies on the interpretations and syntheses of authors who have studied these periods in greater depth. Consequently, I do not evaluate their accounts in terms of historical accuracy or methodological rigour. Rather, my perspective is that of a sociologist interested in how historical evidence can be mobilised to illustrate changing patterns of age-related attitudes. The purpose of this section, therefore, is not to produce a historical analysis in the strict sense, but to demonstrate the potential of the Stereotype Content Model for identifying predominant forms of ageism in different historical contexts.

Throughout much of the written history, older people have not been the focus of social attention, with the exception of exceptional individuals such as rulers or popes. As a consequence of the lack of attention they received, older individuals have been subjected to stereotypical treatment.[66] In regimes where property was legally protected, older individuals with significant assets were accorded greater respect, as their status was based on their property rights rather than on their personal capabilities. In periods when property ownership was institutionalised, the ruling class respected owners. Age was not a disqualification, and the accumulation of property over the life course – comprising real estate, goods and money – ensured that older people, if they were rich, enjoyed a high standing in public and private life.[67]

Historically, the elevated status accorded to the older people was largely contingent upon their control over material resources, a privilege that did

65 It is not intended to provide an exhaustive or fully substantiated social history of ageism. In this review, the focus is on attitudes towards older people living in urban settings. Given the limitations of this single chapter, a consideration of attitudes towards older people in both urban and rural settings is beyond the scope of this study.

66 De Beauvoir, Simone: *Old Age*. Middlesex: Penguin Books, 1972, 183.

67 *Ibid*., 249.

not extend to those who endured extreme poverty.[68] Similarly, Dannefer[69] warns that the perception of respect accorded to older individuals in historical contexts may be largely shaped by the interplay between wealth and advanced age. This phenomenon tends to obscure the experiences of numerous older individuals who may have lacked status or resources. It is therefore important to approach historical attitudes toward old age with caution and, wherever possible, to take into account the different experiences of older people from both the upper and lower social strata. This is also pertinent to the identification of ageism in different social periods, given that the stereotype content model posits that the status of a social group predicts how competent the group will be perceived.[70] This, in turn, determines the form of ageism that they are likely to experience.

Antiquity

In antiquity, advanced age was frequently regarded as a virtue, conferring a certain degree of prestige and respect. For example, Simmons[71] observed that older adults were more well-respected in ancient societies because old age was rare and older members often served as a repository of local traditions and knowledge. In various ancient Greek oligarchies, Sparta and Rome until the second century BC, older people were entitled to a seneschal, representative position (for example, they could form an assembly of old men to advise rulers). Plato[72] posited that the role of the older generation was to rule, whereas the younger generation was to submit. This indicates that in these societies, older individuals from the upper social classes were distinguished by a combination of high competence and low warmth. However, the existence of these social arrangements that privilege and favour old age should not be taken as evidence of a general 'golden age'

68 ***Ibid.***, see also Čeč, Dragica: Podobe starosti v zgodnjem 19. stoletju. In: *Starost – izzivi historičnega raziskovanja* (Šorn, Mojca, ed.). Ljubljana: Založba INZ, 2017, 11–34.

69 Dannefer, Dale: *Age and the Reach of Sociological Imagination: Power, Ideology and the Life Course*. New York: Routledge, 2022, 63–101.

70 Cuddy and Fiske, Doddering but Dear.

71 Simmons, Leo W: "Attitudes toward Aging and the Aged; Primitive Societies". *Journal of Gerontology*, 1, 1946, 72–95.

72 Plato: *The Republic*. Harmondsworth: Penguin Books, 1975.

of old age, as argued by Cowgill and Holmes[73] in their theory of modernisation.[74] The example is the analysis of the social status of older people in ancient Greece showing that not all older individuals were treated equally. In city-states like Athens, the contributions made to the community and the level of social participation were the basis of citizenship. Those who were no longer able to contribute fully were the subject of ridicule and were seen as a reminder of the sad end of life.[75] In light of these circumstances, it is not possible to speak of a stereotype of high competence. It seems more probable that, with the exception of the wealthy, older people were characterised by a combination of low competence and low warmth. Once they were no longer able to contribute to the community, they were regarded as inferior citizens.[76]

The Middle Ages

In the early Middle Ages, European cities were sparsely populated, technology and engineering were in decline, and the middle class had disappeared.[77] The physical demands of labour were excessively strenuous for older individuals, resulting in their near-total exclusion from public life. Within the feudal societies of the early Middle Ages, the influence of older individuals was minimal across all social strata.[78] As older individuals became increasingly unable to care for themselves, they were viewed as burdensome. This perception was underpinned by stereotypes that associated them with low competence and low warmth.

The historical understanding of old age in the Middle Ages is also evident in the depiction of the life course as a sequence of steps. The middle years

73 Cowgill, Donald O., Holmes Lowell. D. (eds.): *Aging and Modernization*. New York: Appleton-Century-Crofts, 1972.

74 This theory has been largely refuted by contemporary social gerontology. See, for example, Laslett, Peter: *The World We Have Lost*. 2nd edition. London: Methuen, 1972.

75 Fiore, Giulietta: "Decay and Reverence: Conceptions of Old Age in Ancient Greece and China". *Hirundo*, 13, 2014, 74–84.

76 *Ibid*.

77 De Beauvoir, *Old Age*.

78 *Ibid*.

were regarded as the pinnacle of life, whereas youth and old age were distinguished from middle age in different ways. De Beauvoir[79] provides the example of Dante's account in Il Convivio (The Banquet), in which he compares the life course to a curve that begins on earth, reaches a peak in the sky around the age of thirty-five, and then returns to earth again. The concept of life as a series of stages facilitates the formation of an image of old age as a decline. A similar perspective on old age is also evident in medieval medical thought. The interpretation of age differences is based on the four principles of humoral medicine, which is a system of medicine that focuses on the balance of bodily fluids. The humoral tradition of medicine associates advanced age with the different somatic states of cold, heat, dampness and dryness. The perception of age is dichotomised, with the older individuals being regarded as either cold and dry[80] or cold and wet.[81] Older individuals, particularly those facing economic adversity, most likely elicited sentiments of disdain.

If we take medieval medical views of old age as a reflection of broader social attitudes, the prevailing perception of older people was one of limited competence and diminished bodily integrity, often accompanied by a degree of disgust. In the High Middle Ages, however, the resurgence of urban life and the expansion of commerce and banking created a small group of older individuals, who were able to accumulate and retain significant wealth. Attitudes toward these older persons were more ambivalent: while they were still viewed with suspicion—especially those who profited from lending practices considered exploitative—they were also attributed a higher degree of competence. This combination of high competence and low warmth aligns with established stereotype patterns and likely generated feelings of envy among the wider population.

79 *Ibid*.

80 Bratož, Urška: "Podobe starosti v ljudski in uradni medicine 19. stoletja". *Glasnik Slovenskega etnološkega društva*, 63, 2023, 2, 22–30.

81 Katz, *Disciplining Old Age*.

The Renaissance

The Renaissance, which flourished between the fourteenth and seventeenth centuries, introduced into the European cultural imaginary the ideals of eternal beauty embodied in youth, an aesthetic shift that simultaneously cast old age as its undesirable and deteriorating counterpart. One example of this reinforced revulsion against disease associated with old age can be found in painting Portrait of an Old Man and a Young Boy by Ghirlandaio, where a grandfather with rhinophyma and a blemished face looks affectionately at the golden child.[82] The negative perception of old age was marked by the external physical and psychological deformation of the individual, which was the result of the intensity of work and the harsh living conditions in which people, with the exception of the upper classes, spent the majority of their lives. Old age was generally still associated with poverty, unproductivity and, subsequently, deviancy and marginality, as well as with physical decrepitude and weakness.[83] The concentration of older residents in almshouses further contributed to positioning older people as a group dependent on charity and public relief.[84] During this period, poor older people were often characterised as lacking competence and warmth, due to their association with poverty, dependency, inability to work, unproductivity, and a lack of productive activities.

In the middle and upper classes, particularly in the later phases of the Renaissance, and in regions where Puritanism was gaining influence, such as Britain, a distinct approach to the concept of old age and older people emerged. Puritanism reinterpreted Christian morality in the context of emerging market relations and growing competition, framing ageing less as a spiritual culmination and more as a test of personal discipline, productivity and moral worth. As de Beauvoir[85] notes, "the best way of praying was working; work was a kind of sacrament and profit was a mark of divine selection". In the middle classes, where Puritanism was most firmly established, a new value was ascribed to old age. The family unit and

82 Mully, Graham: "Myths of Ageing". *Clinical Medicine*, 7, 2007, 68–72, 68.

83 De Beauvoir, ***Old Age***; see also Katz, *Disciplining Old Age*.

84 Katz, *Disciplining Old Age*.

85 De Beauvoir, *Old Age*, 201.

the grandfather figure, in particular, were held in high regard. The ascetic lifestyle, strongly advocated by Puritanism, was idealised as an attainable state for those who had reached old age, having freed themselves from the passions of youth. The older generation came to serve as a model for others to emulate. Accordingly, the Puritans held older individuals in high regard.[86] Adults perceived old age as a period of happiness and exemplary behaviour. The value attributed to old age was based on the assumption that it was a period free from the turbulence of passionate emotions and characterised by peace and wisdom. The absence of desire was considered to be of greater value than the pleasure derived from wealth and possessions. A harmonious equilibrium between the various aspects of life of older people resulted in economic independence and a cheerful mood.[87] Members of the aristocracy even made an effort to appear older than they truly were. The attire worn by men accentuated the posture and physique of older people. Narrow and rounded shoulders, wide hips and waists, and the backs of coats were designed in a way that created the illusion of a bent spine, a consequence of the weight of many years.[88] Wigs were dusted with white powder to give the appearance of advanced age.[89]

Older individuals were frequently regarded as valuable contributors to the workforce.[90] At that time, society was guided by "a prevailing notion that the old were seasoned veterans of productivity, whose advice and participation enhanced prospects for a successfully accomplishing many tasks."[91] A significant number of trades required the input of skilled craftsmen who were able to adhere to strict routines, necessitating precision and endurance in order to produce useful goods in an efficient manner. Given that "such skills take time to develop and are sharpened and refined with experience, and hence with age, the economic engagement of [older people]

86 *Ibid*.

87 *Ibid.*

88 Dannefer, *Age and the Reach of Sociological Imagination*.

89 Fisher, David Hackett: ***Growing Old in America:*** *The Bland-Lee Lectures Delivered at Clark University*. Oxford: Oxford University Press, 1978.

90 Dannefer, *Age and the Reach of Sociological Imagination*, 70.

91 Achenbaum, W. Andrew: Past as Prologue: Toward a Global History of Ageing. In: *The Sage Handbook of Social Gerontology* (Dannefer, Dale, Phillipson, Chris, eds.). London: Sage, 1978, 20–31, 19.

was integral to the production process".[92] The members of the family business were closely linked by a common set of interests, with the grandfather serving as a unifying figure. He occupied the position of head of the family, exercised control over the family's assets and enjoyed a high social status until his demise.[93] The ageing process did not result in a decline in the social need for the skills and productive engagement of older individuals, nor was it consistently accompanied by the pervasive stigmatisation of old age.[94] This indicates that attitudes towards older people, particularly within the middle and upper classes, were shaped by a combination of high competence and warmth, fostering a sense of pride in the individual.

The long 19th century

The long 19th century[95] marked a gradual erosion of the hierarchical worldview in which authority and wisdom had traditionally been associated with old age. The egalitarian ideals of the French Revolution challenged age-based privilege, recasting the social order around principles of individual autonomy and progress. Concurrently with the advent of industrial progress, the older person was increasingly regarded as a fixed entity within an increasingly dynamic and rapidly evolving world.[96] The skilled hand of the old craftsman was "rendered obsolete by machines, that dictated specialized repetitive actions of the human worker, and thereby are more suited to less costly young workers who bring more raw strength and endurance to the physically demanding, albeit less skilled, work demanded by industrial machinery".[97] When such changes entail the rapid introduction of new technologies, their introduction favours the young, who are easier

92 Dannefer, *Age and the Reach of Sociological Imagination*, 71.

93 De Beauvoir, *Old Age*.

94 Dannefer, *Age and the Reach of Sociological Imagination*, 90–91.

95 Since its currents, ideas and bourgeois ideals transcend the chronological frameworks of the 19th century we consider the period between 1789 and 1918 as the long 19th century (Remec,"'Živeti dolgo").

96 De Beauvoir, *Old Age*.

97 Dannefer, *Age and the Reach of Sociological Imagination*, 72.

to train, while at the same time the skills of mature and old workers become obsolete and useless.[98]

The latter half of the nineteenth century provides further evidence to support the notion that knowledge does not accumulate with the passage of time, but rather becomes obsolete.[99] To illustrate, an examination of the Corpus of Historical American English, an archival database comprising over 400 million words of printed texts, revealed a shift in age stereotypes from a slight positive bias to a neutral stance and subsequently a negative one around the year 1880.[100] During the Industrial Revolution, workers who had reached old age encountered difficulties in maintaining the pace of work, resulting in a perception of reduced competence due to lower productivity. In the event of losing their employment, they were frequently condemned to a life of poverty. Negative portrayals of old age are also evident in late nineteenth-century fairy tale fiction, where old age is often associated with poverty, declining health, diminished vitality, sexual incapacity, and loss of social status.[101] This negative image of old age was avoided to a certain extent and only among the few members of the middle and upper classes who had accumulated property, goods, or money over their lifetime. They were esteemed for their economic influence, experience, and extensive social networks.[102] Even in their sixties, they engaged in social activities, attended theatrical performances, and participated in salons. As a result of their capacity for recollection, they were esteemed and appreciated as conversational partners.[103] Within this social milieu, affluent older individuals tended to be perceived as both competent and warm, while those without comparable wealth were perceived as less competent but still warm.

98 Branco, Kenneth J., Williamson, John B: Stereotyping and the Life Cycle: Views of Aging and the Aged. In: *In the Eye of Beholder: Contemporary Issues in Stereotyping* (Miller G., Arthur, ed.). New York: Praeger, 1982, 364–410.

99 De Beauvoir, *Old Age*.

100 Ng, Reuben et al.: "Increasing Negativity of Age Stereotypes across 200 years: Evidence from a Database of 400 Million Words". *PloS one*, 10, 2015, 2.

101 Ramšak, Mojca: Starost in staranje v pohorski pravljični prozi. In: *Starost - izzivi historičnega raziskovanja* (Šorn, Mojca, ed.). Ljubljana: Založba INZ, 2017, 35–44.

102 Čeč, Dragica: "Izkusiti starost v 19. stoletju: Strategije, identitete in družbeni status". *Glasnik Slovenskega etnološkega društva*. 63, 2023, 2, 5–6.

103 De Beauvoir, *Old Age*.

During the course of the 19th century, another significant transformation occurred that served to reinforce the perception of older people as less competent, yet warm, across all social strata: the attitude towards ageing underwent a process of medicalisation and pathologisation.[104] The advent of modern medicine has resulted in the emergence of age-based, medically oriented knowledge about the human body. The process of ageing is increasingly defined by the presence of age-related diseases, which cause a series of unpleasant physical and anatomical changes. Consequently, the older body is both regarded as normal and viewed as pathological, representing the physiological processes that lead to death. The medical profession has begun to interpret diseases through symptoms, with the older body becoming an indicator of precisely identifiable pathologies hidden inside the body:[105] "Doctors predominantly conceptualised ageing as an inevitable pathological process, as a disease with discernible symptoms such as slowed digestion, deterioration of organs, shrinking bones and teeth, hair loss, loss of muscle mass, and others, which unambiguously indicated the body's inevitable decline".[106]

The stereotype that equates old age with pathology has been reinforced by the view that old age is a consequence of tissue degeneration and progressive cell deterioration.[107] Furthermore, the diminished capacity associated with old age is no longer seen as a personal trait but rather as an inevitable consequence of the ageing process. The perception[108] of older people shifted from viewing them as wise and knowledgeable individuals to seeing them as childlike and incapable of self-care.[109]

104 Cole, Thomas. R.: *The Journey of Life: A Cultural History of Ageing in America*. Cambridge: Cambridge University Press, 1992.

105 Katz, *Disciplining Old Age*.

106 Remec, Meta: "'Živeti dolgo ali živeti srečno?' Cristoph Wilhelm Hefeland in njegov vpliv na dojemanje starosti in staranja v dolgem 19. stoletju". *Glasnik Slovenskega etnološkega društva,* 63, 2023, 2, 7–20, 17.

107 Ng et al., "Increasing Negativity of Age Stereotypes".

108 This perception did not extend to all contexts. In certain professions, such as medicine, old age was still regarded as a marker of high status (Bratož, "Podobe starosti").

109 Cole, *The Journey of Life*, 103.

At this time, a current of feeling and sentiment[110] swept through the European thought, imposing on the newly created states a duty of care for all those who could not support themselves by their labour, including the helpless older people. Despite the waning authority and influence of older people, public opinion demanded at least "outward signs of respect and the assurance of a dignified end of life".[111] The latter can be seen, for example, in the writings on old age of the Italian neurologist and physiologist Paolo Mantegazza, who wrote that an older person can inspire sympathy and respect - sympathy for his frailty and respect for his many experiences.[112] Conversely, Mantegazza's reflections on old age include the observation that older individuals are frequently subjected to contempt and that their vulnerabilities are exploited as a means of eliciting guilt.[113] The above two accounts demonstrate that attitudes towards old age at the end of the nineteenth century were characterised by a certain degree of ambivalence, wherein expressions of respect coexisted with an enduring contempt for old age. The ambivalence can be attributed to the conflict between humanist values and those that prioritise health, productivity and independence.

Despite the predominance of low-competence, high-warmth stereotypes of old age at the end of the nineteenth century, a competing view also emerged that cast older people as both less competent and cold. These harsher judgements, however, were rarely voiced explicitly, in part because the rise of humanist thought constrained the open expression of such negative sentiments.

First half of the 20th century

The social imaginary of old age increasingly took on pathological and dependent overtones as the combined effects of demographic ageing, industrialisation, and the economic collapse of the Great Depression reinforced

110 De Beauvoir, *Old Age*, 204.

111 *Ibid*., 235.

112 Mantegazza, Paolo: *Elogio della vecchiaia*. Milano: Fratelli Treves, 1895, 11.

113 Mantegazza, *Elogio della vecchiaia*, 5.

the idea that older people constituted a population both in need of, and entitled to, social assistance.[114] As previously stated, stereotypes associated with old age at the turn of the 20th century (which coincides with the conclusion of the long 19th century) are typified by a combination of low competence and high warmth. The latter is evident, for example, in newspapers and magazines that in the early 20th century try to help people in their forties by advising them to avoid looking old, old-fashioned or unemployable by dyeing their hair, wearing corsets, applying face creams and similar means of concealing the signs of ageing.[115] This combination of stereotypes gives rise to the necessity for the implementation of a comprehensive state protection scheme for the older people.[116]

The development of pension schemes coincided with the process of bureaucratisation of the newly emerging states in the latter half of the eighteenth century. However, these schemes were not yet universal in scope. In the name of efficiency, states first began to implement pension programs for specific demographic groups, typically civil servants, as a social consensus emerged that individuals were no longer capable of maintaining employment at the age of sixty or seventy.[117] In the aftermath of the Great Depression, older workers were the first to become unemployed and the most severely affected by the prevailing economic conditions, which were characterised by mass unemployment and intense competition for jobs. The stock market crash of 1929 and the subsequent economic recession of the 1930s revealed the inherent deficiencies of the economic system, which was characterised by individualistic orientation.[118] This led to the legitimisation of state intervention and the initial formulation of social policies within the context of the emerging welfare state.[119] In the United States,

114 Katz, *Disciplining Old Age*.

115 Haber, Carole, Gratton, Brian: *Old Age and the Search for Security: An American Social History*. Bloomington, IN: Indiana University Press, 1993.

116 ***Ibid***.

117 Thane, Pat: "Social Histories of Old Age and Aging". *Journal of Social History*, 37, 2003, 1, 93–111.

118 Macnicol, John: *Poverty and Dependency: America, 1950s to the Present*. Cheltenham: Edward Elgar Publishing, 2020.

119 Chapleski, Elisabeth. E.: Reflections on Ageism: Perspective of a Septuagenarian on the Avoidance of Burdenhood. In: *Nobody's Burden: Lessons from the Great Depression on the Struggle for Old-Age Security* (Ray, Ruth E., Calasanti, Toni, eds.). Lanham: Lexington Books, 2011, 273–292.

for instance, the Roosevelt administration introduced insurance for the unemployed, the disabled, and the older people as part of the New Deal.[120]

The rationale behind state aid for the older people can be traced back to debates that emphasised the necessity to address the deprivations experienced by this demographic, particularly in relation to social isolation and neglect,[121] poverty and ill-health.[122] The welfare state was tasked with providing assistance to vulnerable and often dependent groups, a significant proportion of whom were older people. This assistance took the form of health and social welfare services, as well as pensions. For example, in an influential 1942 report, the founding father of the welfare state in Britain, Beveridge, put forth a plan of universal protection against want, disease, ignorance, poverty, and idleness. This included comprehensive healthcare, assistance to families, and the right to a minimum of social protection for the older people, the unemployed, the sick and people with disabilities.[123] The provision of care for the older people was regarded as a form of fair compensation for their contributions and past achievements,[124] as well as a means of addressing the uncertainty and suffering associated with the last phase of the life course.[125]

In the initial decades of the twentieth century, attitudes towards the older people were significantly influenced by a complex interplay of stereotypes, which portrayed them as lacking competence but exhibiting warmth. This combination of characteristics helped justify the provision of state support for the older people, as it reinforced the association between old age

120 Previously, it was anticipated that older individuals would rely on their own resources for as long as they could (after losing their source of income, such as through renting out spare rooms, providing domestic services, or sewing), and ultimately would become dependent on children, who were legally obligated to provide care for their parents (Ray, Ruth E., Calasanti, Toni, (eds.): *Nobody's Burden: Lessons from the Great Depression on the Struggle for Old-Age Security*. Lanham: Lexington Books, 2011).

121 Santos, Daniel Kerry D., Lago, Mara, Coelho de Souza: "The Dispositif of Age, the Historical Production of the Old Age, and Regimes of Subjectification: A Genealogical Tracking". *Psicologia USP*, 27, 2016, 133–144.

122 Binstock, "From Compassionate Ageism to Intergenerational Conflict".

123 Blair, Tony: Beveridge Revisited: A Welfare State for the 21st Century. In: ***Ending Child Poverty*** (Walker, Robert, ed.). Bristol: Bristol University Press, Policy Press, 1999, 7–18; Benassi, David: "'Father of the Welfare State?' Beveridge and the Emergence of the Welfare State". *Sociologica*, 4, 2010, 3, 1–21.

124 Phillipson, Chris: *Ageing*. Cambridge: John Wiley & Sons, 2013.

125 Judt, Tony: *Postwar. A History of Europe since 1945*. New York: The Penguin Press, 2005.

and poor living conditions, illness, and a lack of productivity.[126] Despite the prevalence of prejudice and age discrimination, which were based on "the perception that older adults were no longer useful to society,"[127] old age-related risks (e.g. poverty, debilitation, exclusion) led to the perception of older people as a social group in need of, and deserving of, state assistance.[128]

Second half of the 20th century

In the two decades since the Second World War, the institution of retirement has helped to shape a new identity of old age, one that is associated with a well-deserved rest, withdrawal from the active working population and separation from society.[129] Nevertheless, the new identity remained predominantly shaped by stereotypes of dependency and powerlessness. Consequently, social gerontologists began to advocate "the radical deconstruction and displacement of negative images of ageing".[130] They observed that, in contrast to the negative stereotypes associated with old age, a significant proportion of older individuals have become healthier, wealthier, and more socially engaged.[131] Consequently, there was a growing emphasis on promoting images of older people that emphasise vitality, creativity, empowerment, resourcefulness, and the positive qualities that can be acquired in later life. This is evidenced in the gerontological literature as an assault on the notion of a uniform concept of old age, predominantly characterised by illness.[132] Since the 1960s, the social construction of middle-

126 Santos and Lago, "The The Dispositif of Age".

127 Chu, Li, Lay, Jennifer, C., Tsang, Vivian, Hiu, Ling, Fung Helene H.: "Attitudes toward Aging: A Glance Back at Research Developments over the Past 75 Years". *The Journals of Gerontology: Series B*, 75, 2020, 6, 1125–1129, 1126.

128 Binstock, "From Compassionate Ageism to Intergenerational Conflict?".

129 Lessenich, Stephan: From Retirement to Active Aging: Changing Images of ‚Old Age' in the Late Twentieth and Early Twenty-First Centuries. In: *Challenges of Aging* (Torp, Cornelius, ed.). London: Palgrave Macmillan, 2015, 165–177.

130 Featherstone, Mike, Hepworth, Mike: Images of Positive Ageing: A Case Study of Retirement Choice Magazine. In: *Images of Ageing: Cultural Representations of Later Life* (Featherstone, Mike, Wernick, Andrew, eds.). London: Routledge, 1995, 27–47, 31.

131 Chu et al., "Attitudes toward Aging", 1126.

132 Featherstone and Hepworth, Images of Positive Ageing.

and upper-class older people has shifted "from the representation of social isolation, structured dependency, lack of roles and passivity, to a portrayal of later life as a time of opportunity, continued productivity, self-fulfilment and self-reliance".[133] The advent of positive portrayals of advanced age and the tangible advancements of the middle and upper classes in the mid-1970s could have culminated in a convergence of high competence and high warmth stereotypes had it not been for the neo-liberal political right's orchestration of an assault on the notion of old age as a protected phase of life.[134]

From the mid-1970s to the end of the 20th century, an analysis of the costs of public pension programmes established old age as a threat to social life.[135] In particular, neoliberal ideology situated old-age policies in the context of a zero-sum game,[136] according to which such policies are only possible if social policies aimed at younger groups are reduced. Concurrently, as Macnicol[137] notes, the discourse on intergenerational justice was predicated on the irrefutable distressing circumstances faced by the younger demographic in the 1970s and 1980s. Improvements in the quality of life of the older people, particularly in terms of health and material security, have been used as a rationale for curbing the social rights of this demographic.[138] With the exception of the poorest and sickest, older people were beginning to be depicted as one of the more affluent and politically influential social groups, while simultaneously being criticised for the burden of maintaining their "privileges," primarily the cost of pensions. The perception of the burden that health and social care costs impose on society[139] defined

133 Rudman, Laliberte, Debbie: "Shaping the Active, Autonomous and Responsible Modern Retiree: An Analysis of Discursive Technologies and Their Links with Neo-Liberal Political Rationality". *Ageing & Society*, 26, 2006, 2, 181–201, 183.

134 Macnicol, John: *Age Discrimination: An Historical and Contemporary Analysis*. Cambridge: Cambridge University Press, 2006.

135 Santos and Lago, "The Dispositif of Age".

136 Thurow, Lester C.: *The Zero-Sum Society: Distribution and the Possibilities for Economic Change*. New York: Basic books, 1980.

137 Macnicol, John: *Neoliberalising Old Age*. Cambridge: Cambridge University Press, 2015.

138 *Ibid*.

139 Macnicol, *Neoliberalising Old Age*; see also Phillipson, Ageing; Pickard, Susan: "Age War as the New Class War? Contemporary Representations of Intergenerational Inequity". *Journal of Social Policy*, 48, 2019, 2, 369–386.

old age through a combination of stereotypes of high competence and low warmth. The more affluent part of the older population was often held responsible for a range of social issues,[140] with this perception influencing public discourse through the concept of intergenerational injustice.[141] Towards the end of the twentieth century older people in the middle and upper classes were increasingly stereotyped as a confident, wealthy, hedonistic and selfish social group that inspires envy rather than pity or pride. In contrast, only poor and sick older people, defined as they were at the beginning of the century by a combination of low competence and high warmth, were able to avoid this neoliberal onslaught.

In this section, I have conducted a brief review of the literature on the attitudes of historical societies towards older people. I have deliberately set aside the specificities of each historical period and have instead employed a stereotype content model to elucidate the attitudes towards old age in broader historical contexts. In the following section, I build on this overview and put forward some preliminary, theoretically based hypotheses about the manifestations of ageism throughout history.

Manifestations of ageism throughout history

The application of the stereotype content model to the attitudes of dominant social strata in historical societies towards older people allows the derivation of six working hypotheses.

Antiquity

In antiquity, the older people of the upper classes were held in high esteem and regarded with envy due to their distinctive combination of high competence and low warmth stereotypes, which is characteristic of envious ageism. In a slave-owning society where physical strength was not a prerequisite for survival, older people from the upper classes enjoyed a high

140 Binstock, Robert H.: "The Aged as Scapegoat: The Donald P. Kent Memorial Lecture". *Gerontologist*, 23, 1983, 2, 136–143.

141 Binstock, "From Compassionate Ageism to Intergenerational Conflict?".

status.[142] In contrast, the combination of low competence and low warmth that characterises hostile ageism was prevalent among poorer older people.

H1: In antiquity, envious ageism and hostile ageism coexisted.

The Middle Ages

In the Middle Ages, a period marked by heightened challenges to survival, all those unable to work were effectively marginalised from public life.[143] In a divided, threatened, broken and combative society, the weak, the sick and the older people in all social classes were subjected to negative stereotyping, which positioned them as lacking competence and warmth. Older individuals were regarded as less competent and cold, in part due to the association between advanced age and physical decline and poverty. This contributed to the emergence of hostile ageism. Attitudes towards wealthy older people were, from the High Middle Ages on, somewhat more favourable as a consequence of urbanisation and economic change, which once again made it possible to accumulate wealth in ways that did not require physical strength. Those of advanced age who were wealthy were regarded as competent, but they were perceived as lacking warmth, which probably made them the subjects of envious ageism.

H2: In the Middle Ages, hostile and envious ageism coexisted.

The Renaissance

During the Renaissance, the ideals of eternal beauty associated with youth contributed to the reinforcement of negative perceptions of old age, particularly among economically disadvantaged older individuals, who were subjected to discriminatory attitudes and stereotyping. These perceptions were often accompanied by the suggestion that such individuals were less capable and cold. Consequently, this suggests that they were subject to hostile ageism. In contrast, the middle and upper classes held the view that

142 De Beauvoir, *Old Age*.

143 De Beauvoir, *Old Age*.

older individuals possessed abilities and were engaged in productive pursuits,[144] indicating that ageing did not inevitably result in stigmatisation. Instead, older people in these classes were more likely treated with a sense of pride, characterised by perceptions of high competence and warmth, which facilitated the emergence of positive ageism.

H3: During Renaissance, hostile and positive ageism coexisted.

The Long 19th Century

During the long nineteenth century, the process of industrialisation resulted in an increasingly challenging environment for older individuals. It became increasingly difficult for them to meet the demands of the workforce, leading to a perception of old age as a period of reduced competence. As a consequence of the perception of older people as victims of technological progress, the stereotype of warmth persisted. This suggests that they were likely victims of compassionate ageism. Only those of a higher socioeconomic status, belonging to the middle or upper classes, were able to maintain a positive image due to their economic power, experience and social networks, which enabled them to remain socially active and valued.[145] Such individuals were likely distinguished by a combination of high competence and warmth, which is characteristic of positive ageism.

H4: During the long 19th century, compassionate ageism and positive ageism coexisted.

First Half of the 20th Century

In the first half of the 20th century, attitudes towards the older people were strongly marked by a combination of stereotypes of low competence and warmth, which helped to legitimise state assistance to the older people. The advent of the Welfare State and the universal pension system contributed to the institutionalisation of a division between active and passive

144 Dannefer, *Age and the Reach of Sociological Imagination*.

145 De Beauvoir, *Old Age*.

populations, which in turn served to reinforce the construct of compassionate ageism.[146] This is corroborated by Gilleard and Higgs,[147] who posit that post-war social policies for the older people have institutionalised old age as a social security issue or a problem of illness and fragility.

> *H5: During the first half of the 20th century, the most prevalent form of ageism was compassionate ageism.*

The efforts of social gerontologists in the 1950s and 1960s to challenge negative age stereotypes have contributed to an evolving perception of old age in middle- and upper-class contexts. The late 20th century discourse often depicted this phase of life as one of opportunity, productivity, self-fulfillment, and self-reliance.[148] However, proponents of neoliberalism employed these very concepts to challenge the idea of a protected special period for older individuals, arguing that it is instead a time of vulnerability requiring state support. This led to a conceptual transition from compassionate ageism, which until the mid-1970s portrayed older people as poor, fragile, dependent, objects of discrimination and, above all, as deserving of help, to envious ageism, which has been on the rise. Since the 1980s, envious ageism has been fuelled by a neoliberal set of stereotypes that portray older people as happy, enjoying a high quality of life, politically powerful and selfish consumers of society's limited resources. This has resulted in the combination of high competence and low warmth stereotypes being applied to middle- and upper-class older people. In contrast, those who are impoverished and unwell are still characterised by a combination of low competence and high warmth.

> *H6: During the second half of the 20th century, compassionate and envious ageism coexisted.*

146 Binstock, "From Compassionate Ageism to Intergenerational Conflict?", 575.

147 Gilleard, Chris, Higgs, Paul: "Aging without Agency: Theorizing the Fourth Age". *Aging & Mental Health*, 14, 2010, 2, 121–128, 124.

148 Rudman, "Shaping the Active, Autonomous and Responsible Modern Retiree".

Conclusion

From a sociological, macro-historical perspective, historical societies' attitudes towards older people were largely determined by the social status that older people occupied and by the socio-cultural context. For the majority of history, the status of older people differed according to the class to which they belonged.[149] According to the stereotype content model, social status determines the assessment of the competence of a social group.[150] The socio-cultural context, on the other hand, strongly influenced the assessment of warmth. In historical periods when older people were regarded as allies, they were perceived as warm in accordance with the stereotype content model. Conversely, when they were viewed as rivals, they were attributed a certain degree of coldness. This chapter has illustrated the utility of the stereotype content model for identifying the salient types of ageism in historical research. It has developed a theoretical model in which each combination of competence and warmth predicts one of four types of ageism: positive ageism (high competence and high warmth), compassionate ageism (low competence and high warmth), envious ageism (high competence and low warmth), and hostile ageism (low competence and low warmth). This indicates that, in the event of sufficient evidence pointing towards a particularly salient combination of stereotype content within a given historical period, the theoretical model presented here may be employed to predict the ageism experienced by older individuals within a specific social class. The hypotheses presented in this chapter provide a framework for future empirical historical research, which could map the broader spectrum of perceptions of old age in particular contexts and further clarify where historical realities converge with or diverge from the model.

149 De Beauvoir, *Old Age*.

150 Cuddy and Fiske, Doddering but Dear.

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Tomislav Vignjević

Images of Old Age in the Paintings of Ivana Kobilca

In the imagery of 19th-century art and visual production, images of old age and the elderly occupied a special, prominent place in the iconography of the time. Death, old age and the approaching end of life were very common motifs in 19th-century realist art.[1] In this period, a kind of transition finally took place from the almost derisory images of old people in early modern art to the depiction of the elderly as venerable and wise, most often cast in the role of grandparents. This process was mainly the result of the Enlightenment's revaluation of old age and the French Revolution, which even introduced a kind of worship of old age.[2]

Since the Renaissance, one of the iconographic ways of addressing old age was highlighting the transience of life. The personifications of vanitas, such as those found in the Renaissance, often emphasised to the extreme all the negativity and ugliness of old age as a warning about the transience and brevity of life and beauty, as well as an admonition against disregard for the precariousness and vanity of all that is mundane.[3] The characteristic iconography of transience and decay was depicted in countless works

1 Covey, Herbert C.: *Images of older people in western art and society*. New York, Westport, London: Praeger, 1991, 5.

2 Knöll, Stefanie: Generationsabfolge und Wissenstradierung: zur Beziehung von Großeltern und Enkel in der Kunst des 19. Jahrhunderts. In: *Alterskonzepte in Literatur, bildenden Kunst, Film und Medizin* (Herwig, Henriette ed.). Freiburg i.B., Berlin, Wien: Rombach Verlag, 2009, 98.

3 Knöll, Stefanie: Antikenrezeption und Naturbeobachtung. Der alternde Frauenkörper in der schwäbischen Kleinskulptur. In: *Menschenbilder. Beiträge zur Altdeutschen Kunst* (Tacke, Andreas, Heinz, Stefan. Petersberg: Michael Imhof Verlag, 2011, 84.

https://doi.org/10.35469/978-961-7276-18-3_7

of the period, in which youth is often juxtaposed with old age and also include sudden encounters of the individual with death.[4]

In the face of secularisation and the decline of traditional iconography, from the mid-19th century onwards, realist art deals with death and old age with worldly sobriety, an almost objective description of the facts and a realistic depiction of ageing and the end of life. There can often be found precise descriptions of the facts and characteristics of old age and death, as well as an almost factual depiction of the conclusion of human existence and the inexorable end. On the other hand, the academic movement in the art of the second half of the 19th century unreservedly emphasised its canon of beauty, its softened realist style, and its edification. Thus, anecdotal images of helpless and pitiful old people on the fringes of society and at the end of their lives are also common in this period, and a popular motif of the time, especially in the academic current within the art of the second half of the 19th century.

A typical example of a somewhat overly sentimental anecdotal image of old age and its associated ills, such as poverty and begging, is provided by Alojzij Repič's sculpture *The Blind Beggar and the Boy*, created in 1895, which addresses us with its emotive image of a beggar boy and an old man (Fig. 1).[5]

The theme of old age was thus firmly rooted in the art of the second half of the 19th century and contained various individual motifs, one of which was the widespread motif of grandparents, often depicted in an extremely idealised form in both magazine illustrations and painting. However, paintings or illustrations of old people living a God-fearing, home-centred life, lovingly and sacrificially devoting themselves to caring for their grandchildren, as this art often offers, do not in any way mirror the typical or most widespread life of old people, whether peasant or bourgeois, of the mid-19th century. Rather, many such paintings of the Biedermeier era and later in the Realist period show a familial idealisation of old age,

4 Białostocki, Jan: *Stil und Ikonographie. Studien zur Kunstwissenschaft*. Köln: DuMont Verlag, 1981, 176.

5 Vignjević, Tomislav: *Kiparstvo okoli leta 1900. Iz zbirke Narodne galerije*. Ljubljana: Narodna galerija, 1998, 11.

i.e. an idyllic image of grandparents, which spread rapidly from the 1860s onwards, especially in the German-speaking countries and elsewhere in Central Europe. In the period up to the late 18th century, images of grandparents were rare, appearing mainly in the context of family portraiture or illustrations of the transmission of custom and virtue from one generation to the other.[6]

Fig. 1: Alojzij Repič: The Blind Beggar and the Boy, 1895 (National Gallery of Slovenia, Ljubljana).

6 Knöll, *Generationsabfolge*, 87.

Ivana Kobilca and her vision of older people

Ivana Kobilca's oeuvre of paintings, especially in the first decade of her career in the 1880s, undoubtedly includes numerous works on the theme of old age. This important realist painter was born in Ljubljana in 1861. The periods of her life took place in different capitals of Europe, from Vienna and Munich, where she studied from 1881 to 1891, Paris, where she worked from 1891 to 1893, and then Sarajevo, where she lived and worked from 1897 to 1905. From 1906 to 1914 she lived in Berlin, from where she returned to Ljubljana, where she died in 1926. During her first creative period, between 1881 and 1891, she created numerous works with the motif of old age. The iconographic motif of a grandmother taking exemplary and devoted care of her grandchildren is also present in her painting *Grandmother and Granddaughter*, which was mostly painted in Munich in 1886 and 1887, with only the image of the little girl being painted later, the model being the painter's cousin (Fig. 2).[7] In any case, this painting is a rather idyllic image of an old woman peeling an apple for her granddaughter and showing her affection in her eyes and expression; in many ways, it is a typical genre work of the second half of the 19th century. The genre anecdote involving the two people in this painting places this work in the group of idealised images that could have served as a kind of model or example for the audience of the time. However, the artist's sharp, objective sense of observing people is also present in this painting, as is her realistic approach to the two figures, staged in the characteristically Leibl-esque idiom of the Munich realist style.[8] Thus, the narrative anecdote is somehow neutralised by the realistic visual description of the two protagonists. In terms of iconography, this painting is one of the characteristic works of its time, as it stages the new role of grandparents, as promoted at the time by, among other factors, the magazine press with its illustrations.

7 Vrhunc, Polonca: *Ivana Kobilca*, 1861–1926. Ljubljana: Narodna galerija, 1979, 121; Ciber, Nataša, Jaki, Barbara, Simončič, Alenka eds., *Ivana Kobilca (1861–1926). ‚Slikarija je vendar nekaj lepega …'*. Ljubljana: Narodna galerija, 2018, 395.

8 The "Leibl circle" of painters, which included artists, such as Wilhelm Trübner, Theodor Alt, and Carl Schuch, gathered around the painter Wilhelm Leibl, is a collective term for the style of realist painting in the second half of the 19th century. These artists eschewed the narrative and genre components of painting and focused on an acutely realistic rendering of their subject matter, whether portrait, still life or landscape.

Fig. 2: Ivana Kobilca: Grandmother and Granddaughter, ca 1886-1887 (Private Collection, Ciber et al., Ivana Kobilca*).*

Reflection or interpretation? Picturing the elderly people

The actual living conditions and circumstances of the elderly were highly varied and depended almost entirely on their occupational affiliation, but also on their wealth, education and, of course, their state of health. Until the middle of the 19th century, the most established and widespread practice was for elderly people or grandparents to lead an independent life, separated spatially, economically and emotionally from their children and grandchildren. Demographic changes in industrial societies resulting from the declining infant and child mortality rates, increasing living standards and the rejuvenation of society led to the elderly becoming an even larger minority within the overall population structure in the 19th century.[9] Perhaps this is why in the art of the time, especially in the Realist movement of the second half of the 19th century, there is an increased interest in the motifs associated with old age, which is becoming a kind of exceptional old age status within an increasingly younger society, focused on the worship of youth.

Images of the elderly caring for their grandchildren and acting as a kind of mediator of the cultural memory of society mirrored the ideal to which society aspired at the time. These idyllic images of grandparents were disseminated in German-speaking countries and elsewhere in Europe, especially by the increasingly influential illustrated family weeklies such as the *Gartenlaube,* which was published between 1853 and 1943. From the Biedermeier period onwards, there was a re-evaluation and a strong idealisation of the family and the role of grandparents, which is also reflected in the paintings of the time, for example by Joseph Anton Koch, Carl Spitzweg and Ferdinand Georg Waldmüller.[10]

For the artists of the time, this kind of visual codification of values was also very interesting, if nothing else, as a kind of negative instance of bourgeois

9 Vögele, Jörg: Alter und Altern im demographischen Wandel des 19. und 20. Jahrhunderts. In: *Zum Sterben schön. Alter, Totentanz und Sterbekunst von 1500 bis heute* (von Hülsen-Esch, Andres, Westermann-Angerhause, Hiltrud, Knöll, Stefanie, eds.). Regensburg: Schnell & Steiner Verlag, 2006, 21.

10 Göckenjan, Gerd: *Das Alter würdigen. Altersbilder und Bedeutungswandel des Alters*. Frankfurt am Main: Suhrkamp Verlag, 2000, 174 .

taste that they tried to transcend and deny. A characteristic pungent observation about this magazine and its illustrations can be found in the memoirs of Rose Pfäffinger, one of Ivana Kobilca's companions and her friend in the Parisian bohemian circle. In her memoirs, Pfäffinger wrote a kind of dialogue in which she emphasised that she had nothing to do with "*Gartenlaube* pathos";[11] she made it quite clear that the painters were very conscious of their own artistic path, which had to avoid these simplistic, widespread patterns of pathos and displays of emotion, and to deny the visual stereotypes prevalent at the time.

Gartenlaube, as the leading family newspaper, systematically visualised the world of the family idyll and the bourgeois family, which was its main mission. Moralising weekly newspapers before 1800 were only exceptionally different from the general literature of the time, which dictated customs and morals to its readers. The magazines *Gartenlaube* and *Daheim*, for example, published from 1865, promoted the concept of the family through their illustrations. At first, these did not differ much from the previous pictorial thematising of old age, but from the 1860s onwards, the presence of the elderly became omnipresent, including reproductions of romantic genre painting. The elderly thus represented a kind of intimacy, a spiritual world and the internalisation of the family, without being its centre. It is above all a visual staging of the discourse on old age, which was at the service of the idealised family ideology of the time.[12]

In this type of magazine press, the main *topos* of this discourse on old age is the image of the old mother or grandmother, which is the most common type of presentation of old women in this type of press. She is depicted reading to her grandchildren, often praying with them and carrying them in her arms; in short, she is most often depicted with her young grandchildren, whom she attends to with all her care and to the best of her ability. Thus, it is the image of the old mother that is presented as the emotional and spiritual-religious backbone in this new and idealised staging of the family. The image of old age, therefore, often depicts attempts to restore

11 Wolff-Thomsen, Ulrike (ed.): *Pariški bohémi (1889–1895). Avtobiografsko poročilo slikarke Rose Pfäffinger*. Ljubljana: Narodna galerija, 2014, 28.

12 Göckenjan, *Das Alter*, 169.

security and reliability. It is a collective rather than an individual lifestyle in a world that may be less and less able to satisfy such desires.[13]

The painter Hans Thoma (1839–1924), who in his Munich period (1870–1876) was often close to Leibl's circle of realist painters of the so-called "pure painting", became very well known in the Realist period for such idealised images of older people. With his idealised images, such as the oil painting *Grandmother, Child, and Cat* of 1878 (Neue Pinakothek, Munich), Hans Thoma found a highly appreciative audience, as this painter experienced immense popularity (Fig. 3).[14] The painting contains a characteristic anecdotic gist that was otherwise alien to Leibl's circle. Thus, this work also contains characteristic allusions to religion and family ties, which are pronounced in both figures in the painting.

With the increasing proliferation of illustrations in newspapers and magazines, such images of family idylls, which depicted idealised genre scenes of everyday life in a realistic style, became widespread among the general public and served as models of behaviour. At least three social patterns can be identified within this type of iconography in the illustrations. Grandparents primarily function as advisers and teachers to their grandchildren, enriching them with their wisdom and life experience, and also fulfilling a religious function. In addition, they develop emotional bonds with their grandchildren and they are also characterised by a markedly kind character and a concern for security and closeness. Last but not least, grandparents are characterised by the fact that they focus all their life and activities in the sphere of the home. It is also their mission to share their traditions with their grandchildren, to preserve them and to pass them on to the younger generation. A typical work is Kobilca's painting *Grandmother's Chest* from around 1888, which depicts two girls looking admiringly at folk costumes, gloves and colourful shawls. They found all this in their grandmother's chest, which is almost an illustration of her role in preserving (national) traditions and customs.[15]

13 Göckenjan, *Das Alter,* 177.

14 Ruhmer, Eberhard: *Der Leibl-Kreis und die Reine Malerei*. Rosenheim: Rosenheimer Verlagshaus, 1984, 394.

15 Vrhunc, *Ivana Kobilca*, 125.

Fig. 3: Hans Thoma: Grandmother, Child, and Cat, 1878 (Neue Pinakothek, Munich, Ruhmer, Der Leibl-Kreis*).*

Concentrating on oldness: Kobilca's studies of heads

In any case, this painting and her *Grandmother and Granddaughter* are far from being the only examples of the theme of old age in Ivana Kobilca's work. It is highly significant that in this same, early period of the painter's activity, in the 1880s, a whole series of extremely moving and convincing studies and paintings of the heads of old people were produced, forming a very large and comprehensive group in the first decade of the painter's activity. A typical work is the painting by Ivana Kobilca entitled *Old Woman* from the 1880s, now in the National Gallery in Ljubljana (Fig. 4).[16] This group of paintings is characterised by Kobilca's realistic dedication to and scrutiny of old age and the elderly, with their picturesque appearance and wrinkled faces, on which their long life paths are mapped out. It is thus also evident that such works, which confront the viewer with a kind of topography of the face, are about the representation of the iconographic type of the old woman and, more rarely, the old man. However, these characters are treated individually and offer the artist extremely vivid and attractive material for her study of the psychological aspects of a person or of the characteristics of old age. Individuals who have been worn down by an abundance of work or the hardships of life are presented in a kind of close-up, with all the fragility and vulnerability brought on by old age. These paintings certainly convey a certain amount of sympathy, or maybe closeness, that the painter experiences with her models, without her painting falling into the superficial sentimentalism that is common in the treatment of this subject in the second half of the 19th century. It is obvious that Kobilca's oeuvre contains a considerable number of heads and portraits of old people, which, under Leibl's influence, give us realistically detailed studies of faces. A characteristic formal feature of these studies is that the image of the face somehow stands out from the dark brown and strongly contrasting background.

This type of portrait is an artistic scheme that the painter adopted during her studies at the private painting school for women under Professor Alois Erdtelt in Munich between 1881 and 1889, where the curriculum

16 Ciber, Jaki, Simončič, *Ivana Kobilca*, 389.

Fig. 4: Ivana Kobilca: Old Woman, ca 1885 (National Gallery of Slovenia, Ljubljana).

included, above all, the painting of the human figure, most often the busts and heads of people with distinct and interesting physiognomies.[17] Such works were called *Charakterköpfe*, character studies of heads, which allowed the painter to provide a psychological outline of the sitter, who most often remained anonymous, but addressed the viewer with their marked presence and the emotions drawn on their faces, suggesting their life story.

In 1891, during her stay in Paris, Ivana Kobilca, having become more closely acquainted with contemporary French plein-air painting,[18] including by Jules Bastien Lepage, about whom she was particularly enthusiastic, radically changed her colour palette, style and artistic outlook. Thus, she later wrote in her memoirs that at that time, she "got a premonition of a new ideal and I started to detest with all my might the black heads that we painted in Munich and that Erdtelt wanted to have".[19] After this Paris experience the images of older persons almost completely disappeared from her oeuvre.

In fact, Ivana Kobilca produced a large group of portraits, some twenty-five paintings, which are extremely realistic and insightful studies of old people. Thus, we can speak of a real, clear and obvious thematic focus of this painter. In terms of style, however, we can observe a division of the canvases into sketchy studies and fully finished, carefully detailed works, such as the famous *Coffee Drinker* of 1888 in the National Gallery of Slovenia, which Kobilca considered her finest work.[20] As I mentioned, this pictorial formula of a head set against a dark background was dictated by Kobilca's studies at the painting school of the portraitist and studio genre painter Alois Erdtelt in Munich. The style and compositional conception of such studies of the head, set against a dark background, however, derive primarily from the contemporary realism of Wilhelm Leibl and his circle of painters. A typical work of this kind by Leibl is the painting

17 Mastnak, Tanja: "Ivana Kobilca in možnosti likovnega izobraževanja za ženske v 19. stoletju". *Časopis za kritiko znanosti,* 32, 2004, 215–216, 93–107.

18 Brejc, Tomaž: "Primer iluzionizma v slovenskem slikarstvu do konca 19. stoletja". *Sinteza*, 6, 1972, 23, 47–50.

19 Kobilca, Ivana: "Spomini – zapisal Stanko Vurnik". *Zbornik za umetnostno zgodovino*, 3, 1923, 3–4, 107.

20 Menaše, Ljerka: "Umetniški razvoj Ivane Kobilce". *Zbornik za umetnostno zgodovino*, 2, 1952, 124.

The White-Bearded Old Man from 1866, now in the Wallraf-Richartz-Museum in Cologne (Fig. 5).[21] The parallels with the painting by Ivana Kobilca are obvious since in both cases, the same type of stylistic approach can be found in the image of the sitter's head, standing out from the dark, almost monochrome background.

Certainly, it is obvious that not all of Kobilca's paintings of this kind were the product of her study alone. Their quantity and quality also reflect the painter's purely personal interest, as well as her lively and pronounced desire to produce paintings with the motifs of old people. Thus, it would not be at all correct to claim that the numerous old women and old men in her paintings are merely the result of a stylistic orientation dictated by her study practice and her dedication to 'character heads'. The studies of psychologically outlined characters, as expressed on the faces of the elderly and captured in the painted image, were also the basis that, among other things, dictated the proliferation of these images of the elderly. Despite the fact that Erdtelt's courses took "much too long",[22] as Kobilca wrote, to reach the point of a skilful mastery of the portrait head, the painter's transformation of the then-established motif left a series of paintings that form a clearly outlined group and also testify to her interest in the intensive and in-depth study of physiognomies.

Almost all of these dark paintings by Ivana Kobilca were done in the 1880s, especially in the second half of that decade. This series of studies and portraits of the elderly is rounded off by a portrait of the artist's mother from around 1893 or a little later (private collection). Such a large quantity of paintings with the motif of facial studies of the elderly is hardly to be found in the work of other Slovenian artists of the Realist period, i.e. in the oeuvres of the brothers Janez and Jurij Šubic, Jožef Petkovšek or Ferdo Vesel, and especially not in such large numbers. This type of motif only appears sporadically in these oeuvres, e.g., a few times in the work of Vesel, while in Kobilca's art, it was old age that was one of the most prominent

21 Von Maistein, Marianne, Von Waldkirch, Bernhard (eds.): *Wilhelm Leibl. Gut sehen ist alles!*. München: Hirmer Verlag, 2020, 118.

22 Čopič, Špelca: "Ivana Kobilca na slikarskem razpotju". In: *Ivana Kobilca, 1861–1926* (Vrhunc, Polonca, ed.). Ljubljana: Narodna galerija, 1979, 32.

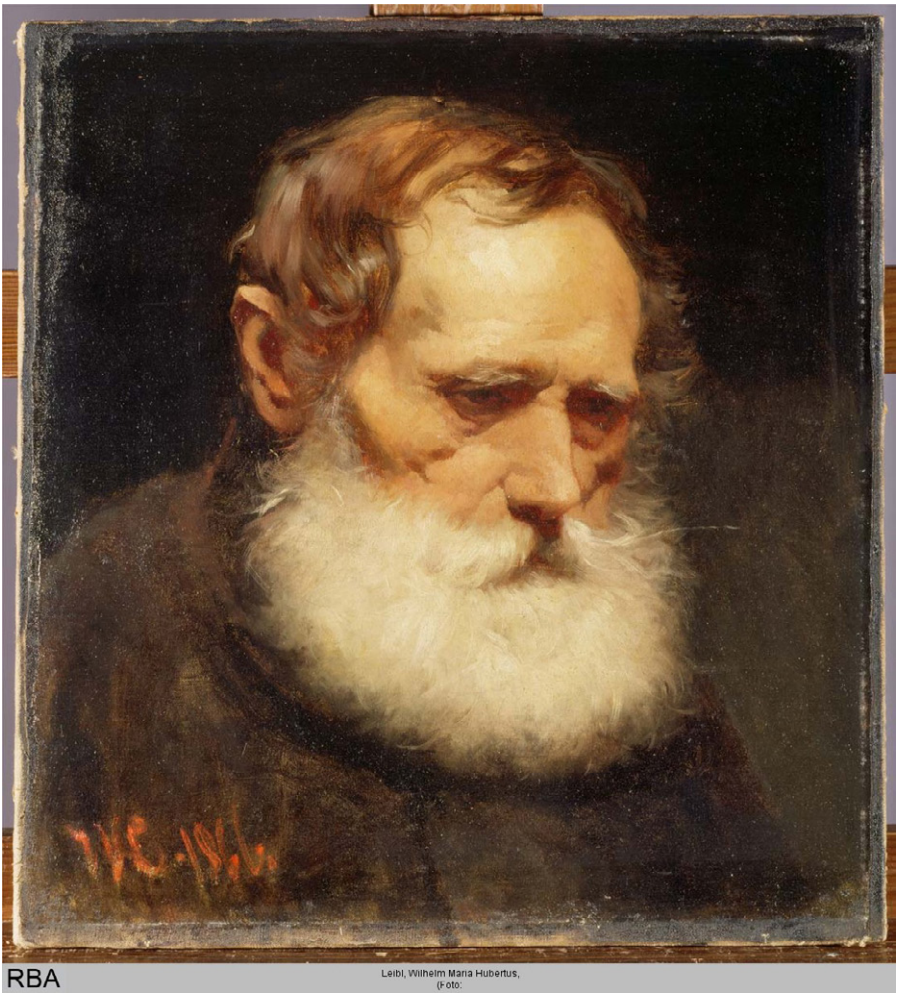

Fig. 5: Wilhelm Leibl: The White Bearded Old Man, 1866 (Wallraf-Richartz-Museum & Fondation Corboud, Cologne, inv. no. dep. 0318. Photo: Historisches Archiv mit Rheinischem Bildarchiv).

motifs during the decade when her personal style and motivational preferences were being formed.

Kobilca's painting *The Old Man*, a study of the head of a grey-haired and bearded elderly man from the 1880s, is also very characteristic (Fig. 6). It is one of the most poignant studies of old age in the artist's oeuvre, and one can say that this painting had a special significance for the painter. While images of old men are somewhat less numerous in Kobilca's oeuvre than those of old women, this painting is still a characteristic image by the artist, whose naturalistic vision of old age emphasised the difficulties and conundrums of late life. Ivana Kobilca exhibited this exquisite study at her solo exhibition in Ljubljana in 1889, and it is characteristic that the convincing visualisation and the artist's insightful study of old age were already noted and highlighted in contemporary accounts of this painting.

In 1890, the critic Vatroslav Holz wrote in the magazine *Ljubljanski zvon* that among the exhibited studies, "the most famous was the old man with long grey hair and beard, whose face tells the whole odyssey of his difficult life".[23] According to the painter's own statement, the model was a man who, despite his old age, was still active and employed, working on the freight railway between Ljubljana and Trieste.[24]

The painting, with its context and the life of the sitter, reminds us that in this time of industrialisation in the second half of the 19th century, a whole new "old people's proletariat" had emerged.[25] In this new situation, most of the elderly had to work for as long as they could if they wanted to survive. The industrialisation of society in some parts of Europe at that time did improve the living conditions and standards and, as a consequence, considerably increased life expectancy. On the other hand, this novelty also reduced the number of family members who could devote themselves to caring for grandparents, who were more often left to fend for themselves.

As a result, depictions of old, work-worn people and the obvious marks and traces of years of hard work on their faces were a common motif in

23 Holz, Vatroslav: "Ivana Kobilca in nje slike". *Ljubljanski zvon*, 1890, 54–57.

24 Vrhunc, *Ivana Kobilca*, 122–123.

25 Thane, Pat (ed.): *Das Alter. Eine Kulturgeschichte*. Berlin: Frölich & Kaufmann Verlag, 2019, 229.

Fig. 6: Ivana Kobilca: The Old Man, ca 1885 (Private Collection; Ciber et al., Ivana Kobilca*).*

the naturalistic current in the realism of the second half of the 19th century in European art. What is characteristic, however, is the fact that Kobilca often and to a greater or lesser extent devoted herself to a kind of merely implied but still sufficiently noticeable bitterness, perhaps even tragedy of old age, which can be seen in the wrinkled and somehow resigned faces of the old in her paintings.

Given the traditional aesthetic norms, which realism thoroughly upsets, it is necessary for the portrait painter to make some kind of compromise between their mission to create the beautiful and the necessity to create an accurate portrait of a person based on resemblance. In the early modern period, the imperative of the desire for the beautiful dictated the artist's exclusion, disregard or at least mitigation of all that was 'ugly' in portraiture. However, since all facial features and characteristics of age were once considered ugly, portraitists were faced with the rather difficult task of finding a middle path between accurately imitating appearance and following the imperative of the beautiful, realistically portraying age on the one hand and idealising nature on the other.[26]

For Kobilca, however, these restraints were almost non-existent, because in her realistic painterly confrontation with the model, she tried to bring out from the image of the old man or woman precisely those features that made the painted face a small drama, or at least a story about the (past) life of the sitter.

One of her most poignant paintings with this kind of subject is an early depiction of a seated old man in the small format painting *The Old Šibar*, created between 1885 and 1889 (Fig. 7). It depicts a former army deserter who managed to escape from the army three times. After the first two escapes, he was caught and punished by having to 'run through the gallows'. In all these attempts to escape and evade the army, he is said to have hidden in the forests of Gorenjska (Upper Carniola) for thirty years. His life story was told to the painter by a local village teacher while she was at the village Sv. Križ upon Planina near Jesenice.[27] With this painting of a distraught

26 Kampmann, Sabine: *Bilder des Alterns. Greise Körper in Kunst und visueller Kultur*. Berlin: Reimer Verlag, 2020, 221.

27 Vrhunc, *Ivana Kobilca*, 132.

Fig. 7: Ivana Kobilca: The Old Šibar, 1885-1889 (National Gallery of Slovenia, Ljubljana).

person whose very posture shows resignation, introverted pain and a kind of ennui with life, Kobilca has created a convincing image of old age and the suffering of the individual that goes with it. It is a depiction of the individual, of a person who has been crushed by society and is present before the viewer in the form of a broken, numb and life-weary old man. This work and a portrait study of the same person prove that Kobilca not only used the motif of old age to demonstrate her virtuoso mastery of painting but also that she often observed and analysed the faces of the elderly with great empathy and compassion, as well as in her own unique way.

Parallels can be found in the works of the Realist movement in 19th-century painting, where the motif of old age, its darker sides and the proximity of death was a widespread and almost typical motif.[28] The paintings of Jean-François Millet, Vincent van Gogh and many other painters, which realistically depicted the severe hardships and afflictions of the working and peasant classes of the time, are just some of the possible parallels for this poignant image.[29] A portrait of the head of this unfortunate and perhaps even tragic figure, created around the same time, has also been preserved.[30]

Conclusion

The motif of old age is therefore strongly present in Kobilca's work, but especially in the earlier period of her career, in the 1880s and early 1890s. These years saw the production of a multitude of studies of the heads of old women and also of elderly men, characterised by the painter's concentration on the essential, realistically rendered features of the face in a kind of close-up, focusing on the details, and standing out distinctly and contrastingly from the dark monochrome background. This kind of artistic formula has resulted in a whole series of works by Ivana Kobilca, which, with their simplicity and direct expressiveness, offer a shocking plethora of figures of old, meticulously depicted and psychologically insightful people.

28 Nochlin, Linda: *Realism*. Harmondsworth: Penguin Books, 1971, 57–101.

29 Mikuž, Jure: "Ivana Kobilca v kontekstu evropskega umetnostnega dogajanja in slovenskih zapisov o njej." In: *Ivana Kobilca (1861–1926). ‚Slikarija je vendar nekaj lepega…'* (Ciber, Nataša et al., eds.). Ljubljana: Narodna galerija, 2018, 68–69.

30 Ciber, Jaki, Simončič, *Ivana Kobilca*, 394.

Their lives and their troubles seem to be etched on their faces and with these studies, the painter has left a remarkable testimony to that era, and above all, a very personal, original artistic vision of old age. Its main quality is its direct, basic focus on the individual, who is presented on these canvases as a completely singular and unique personality with all the signs of age, which is also the main theme of this exceptional artist in her first decade. It is most probably with these paintings, which were initially created as a result of her study practice in the Munich period, that Kobilca went beyond this starting point and built on Erdtelt's study guidance, creating realistic and relentlessly detailed images of old people, which are an original contribution to the visualisation and appreciation of old age and another important component in the overall image of the typical realistic themes of old age and death in the nineteenth century.

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Urša Marinšek

Narratives of Old Age: Decline, Burden, and Defiance in Representations of Care Home Residents in Contemporary Slovenian Literature

Literary representations of older people, age, and aging, provide readers with various perspectives on the aging process itself, and through the fictional worlds and characters encourage a deeper understanding of one own's aging process. While critically examining our societies' attitudes toward older population, literary works should not be neglected as they are a valuable resource to consider and evaluate how positive and negative representations are shaping our perception and attitudes towards getting and being old. To illustrate this, Diana Wallace leans onto Simone de Beauvoir regarding the positive role of the literary representations in gaining a better understanding of aging and old age: "The imaginative engagement Beauvoir calls for can be enabled through literary representations of ageing and old age. Voice and point of view can be manipulated in a literary text so that we see through the eyes of, for instance, the 76-year-old first-person narrator of May Sarton's novel *As We Are Now* (1973) and identify with her desperation at being trapped in a 'concentration camp for the old' (1973, p. 3)."[1] Literary representations of older people challenge our attitudes and prejudices towards older people, highlighting our ageism,

1 Wallace, Diana: Literary Portrayals of Ageing. *In: An Introduction to Gerontology* (Stuart-Hamilton, Ian, ed.). Cambridge: Cambridge University Press, 2011, 389–415. https://doi.org/10.1017/CBO9780511973697.014.

https://doi.org/10.35469/978-961-7276-18-3_8

and provide a better understanding of their identities, through evoking empathy, their experience of aging, and new outlooks into their realities.

Literature has a lot to offer; it "explores the existential and symbolic meaning of life in all life stages."[2] Looking at old age, it has been seen as "a motif, metaphor, or symbol for something else,"[3] and historically seen, "as a motif and metaphor for decay and mortality."[4] Contemporary literary works still touch on mortality, but they also give older people new dimensions, like in the form of the midlife progress novel, novel of ripening, life writing, and other life-course narratives.

This paper explores literary representations of age, aging, and older people in care homes and discusses how the characters' aging is represented against the backdrop of three prevalent cultural narratives of aging in the Western societies: the decline narrative, the burden narrative, and the defiance narrative. The decline narrative represents aging as loss of function, be it bodily, mentally, or cognitively. Terms such as "frailty," "vulnerability," "disability," "immobility," "dependency," and also, "dementia," are all embedded in the decline narrative. This narrative is inherently ageist; discriminatory towards older people. The burden narrative signals older people are redundant and put a strain onto the society as a whole. They are marginalized, alienated, and othered. The defiance narrative covers efforts to age actively, age healthily, and slow down the aging process. Within this narrative, older people can be represented as physically working out, mentally training (with solving crosswords and puzzles), and having strict dietary regimes, and other routines. It can be seen as a way to defy aging, pain, and illness, but also as a pushback and resistance against ageism and societal norms.

The paper at hand investigates three Slovenian literary works: the novel *Dom dom (Home Home,*[5] 2008) by Tone Partljič, the short story collection

2 Skagen, Margery Vibe: How Can Literary Studies Contribute to a Cultural History of Ageing? In: *Cultural Histories of Ageing. Myths, Plots and Plots of Senescent Self* (Skagen, Margery Vibe, ed.). New York: Taylor & Francis, 2021, 16.

3 Wallace, *Literary Portrayals*, 391.

4 Wallace, *Literary Portrayals*, 411.

5 All the translations (for the titles of the Slovenian literary works and quotations) were done by the author of this paper.

Kavni krog (*Coffee Circle*, 2021) by Barbara Hanuš, and the crime novel *Umor v domu za ostarele?* (*Murder in a Care Home?*, 2022) by Vito Komac. All these books have the care home as a setting or, as Ulla Kriebernegg argues "as a spatial frame," where "the care home illustrates the marginalized social position of old age,"[6] a characteristic of the care home genre. The paper provides examples of the decline, burden, and defiance narratives seen and analyzed in the selected care home genre[7] works and scrutinizes the care home as an institution with its personnel, administration, care home residents, and outsiders' (visitors') points of view. Through these works, readers get a comprehensive look at how the narratives of aging are constructed, blended, and mimic life.

Another important aspect when reading care home genre, novels or narratives is, according to Sally Chivers, to imagine "possible futures and understandings of the present and the past," and "to recognize and create alternative visions of the dreaded 'nursing home.'"[8] Care homes in literature echo social realities and can be represented as prison-like institutions, with heavy control over their residents, but may also present a starting point for a new life.

The Care Home Genre and Slovene Contemporary Literature

The literary works analyzed in this paper all fit the care home genre as explained by Ulla Kriebernegg.[9] The genre is providing framework and conventions, typically including narratives of burden, decline as well as defiance. The care home genre takes elements from various other genres and blends their themes and plot elements; from escape narratives, comedy,

6 Kriebernegg, Ulla: "Putting Age in Its Place. Representations of Institutional Eldercare in Contemporary North American Film and Fiction." *Virus*, 16, 2017, 252. https://doi.org/10.7146/ageculturehumanities.v2i.130742.

7 The three prevalent cultural narratives of aging are of course not exclusive to the care home genre.

8 Chivers, Sally: "'Blind People Don't Run': Escaping the 'Nursing Home Specter' in *Children of Nature* and *Cloudburst*." *Journal of Aging Studies*, 34, 2015, 139. https://doi.org/10.1016/j.jaging.2015.06.001.

9 Kriebernegg, "Putting Age," 253.

romance, detective fiction, suspense, mystery, and horror.[10] In their core "nursing [care] home narratives draw ... readers into the world of the care home, permitting them to identify with their protagonists in their struggles against institutionalization, or in their attempts to redefine themselves in a way that makes sense for them in a new environment."[11]

The genre of the care home is not new; texts containing threats about "ending at care homes" as terminal stations have been around since the 1960s, and, as Kriebernegg determines, the care home narrative in its generic manifestation surfaced in the 20th century after the "the emergence of the public old age home."[12] Chivers makes a point for why the care home narratives are so compelling: "As a trope [the care home] within literature and film ... offers a setting devoid of life and possibility, teeming with animosity, torpor, and disgust."[13] "The genre of the care home novel," as Kriebernegg establishes, is " reflecting care-giving models that range from prison-like, infantilizing, and even abusive institutions to hotel-like retirement facilities with luxurious amenities and responsible caregivers."[14]

Examples of care home novels that have been translated into a variety of different languages and became global bestsellers are Jonas Jonasson's book *The 100-Year-Old Man Who Climbed Out of the Window and Disappeared* (2012), Hendrik Groen's *The Secret Diary of Hendrik Groen* (2014), and Richard Osman's *Thursday Murder Club* (2020) series. A look at Slovenian care home novels reveals that there are not many literary works that have the care home as the main setting and care home residents as protagonists. Taking the relatively small size of the Slovenian literary space into consideration, however, there are plenty of texts that belong to the care home genre. Some of the "earlier" works include Andreja Pšeničny's *Na visokih petah* (*In High Heels*, 2007) and Tone Partljič's *Dom dom* (*Home Home*, 2008). Later, other works emerged, including Sebastijan Pregelj's well-known novel *Kronika pozabljanja* (*A Chronicle of Forgetting*, 2014) and Milan Petek Levokov's *Ljudje na burji* (*People in*

10 Kriebernegg, "Putting Age."

11 Kriebernegg, "Putting Age," 268.

12 Kriebernegg, "Putting Age," 253.

13 Chivers, "'Blind People,'" 135.

14 Kriebernegg, "Putting Age," 252.

the Bora, 2015). In Slovenia, the interest in care home narratives seems to have been (re)sparked by the COVID-19 pandemic where the discourse in the national news included care homes, be it limiting visitors due to the virus, increasing covid infections, saving lives and death tolls, staff shortages etc. Apart from Vito Komac's crime novel *Umor v domu za ostarele?* (*Murder in a Care Home?*, 2022) and Barbara Hanuš's first short stories collection *Kavni krog* (*Coffee Circle*, 2022), as well as her second collection titled *Od sedem do sedemindevetdeset* (*From Seven to Seventy-Nine*, 2022), there are some other literary works falling under this genre, including Bojan Macuh's novel *Vrni se* (*Come Back,* 2021) that touches upon the pandemic in a care home directly, Marjetica Senčar's dystopian novel titled *Rezidenca* (*Residence*, 2022), and Jože Roblek's diary *Lepo je biti star. Dnevnik duhovnika iz doma starejših* (*It is Nice to Be Old. The Diary of a Priest in a Care Home*, 2023).

In this paper, three literary works chosen for the analysis were selected primarily because of their publication years; two were published during the pandemic (Hanuš and Komac's works) and one a good decade before (Partljič's book). Partljič's novel is therefore a temporary contrast to the former two. While Tone Partljič is well known among readers in Slovenia, his novel *Home Home* has been rather obscure among the readership. Whether this is because of the themes, a care home and older people, including the topic of dying, one can only speculate. Vito Komac's novel *Murder in a Care Home?* gathered interest from literary critics and readers precisely due to of its theme.[15] Barbara Hanuš has been so far primarily engaged as a writer for children and youth, and her first short story collection *Coffee Circle*, intended for adult readers, was clearly prompted by the COVID-19 pandemic; the second story in her collection opens up with a notice in a care home stating "Closed due to the virus."[16] All the books can be classified under the care home genre; the main setting is a care home, or in Komac's novel, a major theme or frame, protagonists are care home residents, and the stories revolve around the institution. In addition to the publication years, the books were also selected because they blend with additional genres: a novel, a crime novel, and a short story collection,

15 Vodopivec, Dora: "Umor v Domu Ostarelih?" Občina Bovec, MojaObčina.si, 23 June 2022.

16 Hanuš, Barbara: *Kavni krog*. Ljubljana: Hart, 2022, 8.

respectively. Specifics of each cannot be disregarded as they rather add to the comparison and analysis of the literary works.

Care Home – A Prison, Terminal Station, or New Start?

Care homes in literary works or in the care home genre are represented as a prison-like organization or a total institution. The latter well-known term defined by Erving Goffman in his study on the asylums defines a total institution as "a place of residence and work where large number of like-situated individuals, cut off from the wider society ... together lead an enclosed, formally administered round of life."[17] The care home is seen as a "bubble," as a self-sufficient community from where there is no escape (and there should be no need to escape from). Kriebernegg sees the care home as "a microcosm of society—a disciplinary institution that is often run by overbearing and despotic administrators"[18] and elaborates on the institution being a panopticon in "Michel Foucault's sense by using discipline and punishment."[19] These definitions and descriptions might seem harsh and unjustified, however, they are not farfetched when looking at literary representations of care homes. The selected works perpetuate stereotypes of old age and aging through the narratives of decline and burden, including clichés. Care homes work on a schedule; from mealtimes to washing and bedtime. There are rules and regulations for everything. Residents' freedom is restricted; there are prescribed visitor hours and times for (brief) outings. Everything is overseen by care home management and staff. For newcomers, the admission to a care home can be a shock despite how well they had been prepared for a life in a care home. Entering a care home is also seen as a failure, loss of independence and autonomy. Wyatt-Brown, Ray Karpen, and Kivnick include moving into a care home into a category of "the big moves," where a big move "represent[s] turning points in our lives ... and pose many challenges to our sense of identity

17 Goffman, Erving: *Asylums. Essays on the Social Situation of Mental Patients and Other Inmates*. London: Penguin Modern Classics, 2022, XI.

18 Kriebernegg, "Putting Age," 257.

19 Kriebernegg, "Putting Age," 258.

and belonging."[20] What such a move means includes familiarizing with new environment, people, regulations, activities, and so on. There is a stigma around the care home still persisting, according to Wyatt-Brown, Ray Karpen, and Kivnick, "of the dreaded 'old age home' of yesteryear, where couples were separated and care was negligent."[21] Sally Chivers explains the fear of care homes stating: "Nursing homes invite fear because they house a conglomeration of what people often dread about old age."[22] As James Struthers elaborates on care homes and what they mean in our society: "[the care homes] bear the weight of cultural and economic uncertainties around population aging, changing perceptions of frailty and family ties, the meaning of dependence and independence, and fears of mortality."[23]

The care home in Partljič's novel *Home Home* is shown very clinical with typical imagery for describing a care home or a hospital: "... and they got to Home 3 [the home for immobile people], where it smelled stuffy and ammonia and urine hit your nose."[24] What other scholars have shown (e.g., Kriebernegg, Chivers) is how care home spatiality is very important: "a movement to or within the space of the care home is often used to signify transition, change, or crisis."[25] To illustrate this, certain people can be isolated from others through space; for example, dementia ward is regularly placed on the third floor in care homes, behind locked doors where there is no escape. In *Home Home*, "Home 2" ("Dom 2"), a different building, not a ward, is accommodating people with dementia. Resident Teja Marinčič's state is worsened to such degree that a doctor decides to place her in "Home 2" because her symptoms show signs of dementia. Teja is quickly moved there, within half a day, much to her husband's shock who does not have access to her in her new environment.

20 Wyatt-Brown, Anne M., Karpen, Ruth Ray and Kivnick, Helen Q.: *The Big Move. Life Between the Turning Points*. Bloomington: Indiana University Press, 2016, 5.

21 Wyatt-Brown, Karpen, Kivnick, *The Big Move*, 4.

22 Chivers, Sally: *From Old Woman to Older Women. Contemporary Culture and Women's Narratives*. Columbus: The Ohio State University Press, 2003, 58.

23 Struthers, James: Home, Hotel, Hospital, Hospice. In: *Care Home Stories. Aging, Disability, and Long-Term Residential Care* (Chivers, Sally, Kriebernegg, Ulla, eds.). Bielefeld: transcript, 2018, 283. https://doi.org/10.14361/9783839438053-023.

24 Partljič, Tone: *Dom dom*. Ljubljana: Pisanica, 2008, 74.

25 Kriebernegg, "Putting Age," 258.

In Hanuš's collection, *Coffee Circle*, the care home as an impenetrable world is nicely shown as soon as the reader starts reading the second story titled "Doors." The story starts like this: "They locked the entrance doors."[26] The residents notice that they are enclosed, it is a new situation for them and, so far, the doors had always been opening and closing with visitors coming and going. Their world had been at least partially pervious to their brief exits (for instance, smoking breaks) and now they are caged in for their safety. The residents are intrigued by the doors and are in disbelief about the doors being locked: "On their faces, surprise, fear, sadness, anger, powerlessness ..."[27] are visible. Due to the closed doors, the residents' everyday routine changes and the care home feels different and alienated.

In her article, Kriebernegg discusses one of the central topics of care home narratives, which is "the question of what it means to be 'at home.'"[28] All the three books are touching on "home;" what it means to be *at home* and *in a home*. Tone Partljič's novel bears this notion in its title: *Dom dom*, in English, *Home Home.* The repetition of the word *home,* might suggest this is *really* a home where you are *at* home and you should feel like being *in* your home. The residents themselves in the novel are widely discussing "home," what it means, where is home, and where they feel at home. They collectively name the care home a "waiting room for death ... or purgatory,"[29] which would signal they do not feel at home in the care home by any means.

Two of the residents, Janko and Jasmina, find that escaping their current home for some time is liberating. Jasmina can put on make-up, jewelry, and a proper dress. For Janko, escaping the care home and pursuing a love interest gives him motivation for living. Removing themselves from the care home also means escaping their identities as the care home residents/patients and stepping back to their old identities and feeling like their old selves: "Yes, let's go to the café... there I don't feel like everyone else, not as a resident of the Home"[30] Jasmina asserts. Change of the environment and a

26 Hanuš, *Kavni krog*, 8.

27 Hanuš, *Kavni krog*, 13.

28 Kriebernegg, "Putting Age," 258.

29 Partljič, *Dom dom*, 200.

30 Partljič, *Dom dom*, 170.

temporary escape is cherished between them: "And they went [to the café], he ordered a beer and she a sparkling wine. And they were not like other residents at all, but they felt like a man and a woman."[31]

For any newcomer, moving in a care home can be a shock. When Angela moves into the same care home, she has a hard time adjusting. She politely asks whether she can return home for her dog and gets a harsh reply by the home's director: "Pets are prohibited according to the home rules!" When the director leaves her, she stands alone in her new room "in a foreign room in a foreign home."[32] She tries to orient herself and continue with normal activities; she finds her slippers, takes her shoes off, realizes they are smelly, and places them in front of the room's door to air. Her "old" life is facing her "new" life. She tries to eat, but is overwhelmed with the situation, questions whether she will ever return home and thinks: "I was a housekeeper at home, I am nothing here. ... Who would have thought I will end my life here!"[33] When the director comes back to check up on her, she encourages her to "feel at home." This is not received well by Angela who cannot fathom to feel at home in a foreign space after just ten minutes. Later on, Angela feels relieved when she returns to the care home after spending the weekend with her family. She feels at home in the care home and is surprised by this fact: "I am rather here than with [my] children. I simply belong here, I am at home here, and I am scared of everything outside."[34] In the care home, she is removed from worries and troubles and has no wish to meddle with her children's business, let alone inheritance. She is content sitting on the balcony of her room with her roommate and chatting away without any concerns.

Among the members of the coffee circle, from Hanuš's short story collection, the perception of the care home varies drastically. Marija, a woman visiting Zarika in the home, terms the care home "a cage" and "a beehive, where everything is bustling and whirring, the doors keep opening constantly, personnel, visitors, and residents are walking here and there,"[35]

31 Partljič, *Dom dom*, 171.

32 Partljič, *Dom dom*, 39.

33 Partljič, *Dom dom*, 40.

34 Partljič, *Dom dom*, 180.

35 Hanuš, *Kavni krog*, 10.

absolutely refusing to move into the care home. Dora, another member of the coffee circle, nods to Marija's definition and calls it a "chicken coop."[36] The noise and commotion can be irritating. Other residents got used to the care home habitat and find it quite comfortable. One day, a motivational quote by George Herbert appears on the locked door and it reads: "Storms make the oak grow deeper roots."[37] Dora is unbothered by the locked doors and is more intrigued by the handwriting on the piece of paper. Nada, a fellow resident, observes Dora's cheeriness and comments: "Well, her [Dora's] roots are really here now,"[38] suggesting Dora's home is the care home and she feels at ease here.

The care home in the crime novel *Murder in a Care Home?* is mostly perceived through the outsider's perspective, Jure's, who is searching for his missing relative Milan, and Milan's friends, who share the concern with Jure. The reader never gets an assessment of the care home from a resident's perspective, although the reader can have a good idea what their view would be, considering the manipulative care home director, allegations of poor treatment and exploitation of the residents. Through the story, the novel offers a look into a care home, where residents are vulnerable, powerless, isolated, and inhumanely treated.

Care Home Residents and Institutional Dynamics in Three Selected Slovenian Literary Works

Focusing on care home residents, the three selected works offer similar yet distinct representations, revealing how the residents perceive themselves and each other, as well as how they are viewed by others—from care home staff to the wider society. Through different narrators and focalizers these perceptions and perspectives are made visible, and, in many instances, they overlap with the cultural narratives of aging.

36 Hanuš, *Kavni krog*, 10.

37 Hanuš, *Kavni krog*, 13.

38 Hanuš, *Kavni krog*, 13.

An important agent in Partljič's novel is a schoolgirl tasked with writing an essay titled "Looking through a Window" about her observations. She peers through a window from her home and spots a care home in a form of three buildings: one for active people, one for those living with dementia, and one for those who are immobile. Writing her essay, she sees the care home as a different world; she is aware that the home is part of her society and that older people live in it, but at the same time, this world is self-sufficient with medical, cleaning, and cooking staff, including its own set of rules and regulations. The schoolgirl is not a main character in the story; she serves as the first observer to locate the care home from the outside world and as a catalyst to establish the position "us vs. them."[39] "Us" includes the wider society out in the "free world" and "them" the older people who live in a care home. There is a whole variety of characters residing in this care home. The most prominent resident is Jasmina, a retired theater actress who is special, with many demands, and does not wish to mingle with other residents. Her peculiar lifestyle is disapproved by the other residents and the care home staff who are of the opinion that she is no different than the rest of the people living there and is just "one of the patients" and not an actress.[40] She recites parts from her previous productions and monologues from known plays and holds on to her identity of an actress. She refuses to eat dinner because the actresses cannot "act with a full stomach"[41] and she resists going to bed at a time set by the care home. Apart from Jasmina, other care home residents include Angela, a humble farmer, Lučka, a retired professor, Frankie, a Slovenian expat who spent most of his life in Australia, but returned to Slovenia to die in his homeland, Joža, Frankie's roommate and an ex-railway worker, Karel, an ex-prop theater manager, a married couple Teja and Franc Marinčič, Janko, the president of the active residents, engaged in many cultural and sports activities himself, and others. The backgrounds of the characters are diverse: from middle class residents who are highly educated (e.g., the actress, a professor) to lower class residents who can be seen a bit "unpolished" (e.g., a railway worker, grave maintenance worker). Quite an interesting

39 For more on "othering," see Silke van Dyk's paper "The Othering of Old Age: Insights from Postcolonial Studies." *Journal of Aging Studies*, 39, 2016, 109–120. https://doi.org/10.1016/j.jaging.2016.06.005.

40 Partljič, *Dom dom*, 5.

41 Partljič, *Dom dom*, 7.

array of characters, especially since many literary gerontologists observe that the majority of the characters in care home novels are the ones who are white, (upper) middle class, and relatively healthy.[42] The various identities and backgrounds clash when the residents meet. When Angela moves to the care home, she moves into Jasmina's room. Their first encounter is described as: "And the doors open, a grey dress and a black hat and a pearl necklace carry in the actress Jasmina Rudolf. ... The actress steps towards the farmer and offers her a hand and [introduces herself]."[43]

There is of course the staff; Marija, the care home director seems tired of her job and dismissive of her residents. She sees the residents in terms of money; her main concern is to have all the beds nicely filled and is rearranging people like building blocks between the units. When a visitor comes and meets Marija, they both realize they were classmates together. Marija's feelings towards her residents are very clear when Zvonko, the visitor, asks her about her occupation: "You are the care home's director?" She replies: "Unfortunately." She continues to explain her busy schedule: "I have to deal with a very unpleasant business. We got an immigrant back from Australia and he does not want to stay."[44] The director's behavior is clearly aligning with seeing the old people as the burden. She is not openly ageist towards them, but through her interactions with Zvonko and other staff, where she does not hide her feelings. The medical personnel includes Rozika, a carer in the home, who is not so happy with her job either; work is hard and she complains about the residents being grumpy and behaving like children. Other nurses are stereotypically represented as authoritative and telling residents off for behaving inappropriately or breaking the rules. Sometimes, nurses are depicted as tyrants, a trait of a nurse as a stock character in many works, according to Kriebernegg.[45] With more nuances in recent literary representations, the authoritarian model of nurses is still dominant. In *Home Home*, the nurses are neglecting their patients; nurse

42 For example, see Amanda Ciafone's paper (The Third Age in the Third World. Outsourcing and Outrunning Old Age to The Best Exotic Marigold Hotel. In: *Care Home Stories. Aging, Disability, and Long-Term Residential Care* (Chivers, Sally, Kriebernegg, Ulla, eds.). Bielefeld: Transcript, 2018, 155–173. https://doi.org/10.14361/9783839438053-015).

43 Partljič, *Dom dom*, 41.

44 Partljič, *Dom dom*, 72.

45 Kriebernegg, "Putting Age," 263.

Melita is frequently hiding from the residents, smoking and having coffee, ignoring calls for help. Like the home's director, she is not shy with her feelings towards the residents: "I will have this cigarette in peace, they [the residents] can go fuck themselves!"[46] and she elaborates: "When the old ones go crazy, it is hell to be a nurse in the care home."[47] The nursing staff and the authoritative nature of it represents the rigid institution of the care home, where older individuals are the Other.[48]

The novel offers various stories and perspectives of the characters and staff, with another character who works as a link between the worlds of the care home and the wider society, and between the staff and the residents. Zvonko is a member of parliament (MP) and a visitor in the care home. Due to his function as an MP, he is used to being approached by people for favors and connections. He decides to visit Lučka, his old professor and a care home resident. He gets quite a shock seeing his old professor; she is familiar, yet different. Her body is frail in his eyes, and she promptly debriefs him on her medical developments (broken hip, constipation, pain etc.). The old professor is quick to seek help from Zvonko and instructs him to write down her last will. Zvonko, completely at a loss for words and overwhelmed by all the medical issues, the care home itself, and having a last testament dictated to him, he feels that "everything that has been happening is somewhat a necrophilic uneasiness."[49] Through his reunion with his beloved professor, his old schoolmate Marija, and entering the care home, Zvonko realizes that a care home might be in his future. While he is not at a life stage yet to be entering the care home as a resident, his mother might be. After the care home visit, Zvonko pays a visit to his 80-year-old mother and recounts his care home visit. This makes her afraid that her own son is placing her into a home. While he tries to assure her that is not the case, she protests saying: "I would rather go to the Drava [river]!"[50] The care home evokes feelings of hurt, horror and dread in her to such extent that she would prefer death rather than being put into a care

46 Partljič, *Dom dom*, 50.

47 Partljič, *Dom dom*, 51.

48 See Gilleard, Chris: "Aging as Otherness: Revisiting Simone de Beauvoir's Old Age." *The Gerontologist*, 62, 2022, 2. https://doi.org/10.1093/geront/gnab034.

49 Partljič, *Dom dom*, 78.

50 Partljič, *Dom dom*, 97.

home. Clearly, the care home is seen as the lowest point in one's life, loss of independence, and abandonment in a horrible institution by one's family. This aligns with what Sally Chivers determines for the care home as "a fate worse than death"[51] where escaping in any form is preferable, be it "into the past, fantasy, death, [or] surrounding community."[52]

An interesting part of Partljič's novel is the narrator and the shift between narrators with different focalizers. The schoolgirl that prompts a look at the care home is the first-person narrator, then her perspective changes to a third person omniscient narrator. The reader is transported from the schoolgirl's window to the care home and later to residents' rooms and is privy to their thoughts, emotions, and feelings. The reader can experience this clearly in the third chapter of the novel: "Where am I? Am I alive? It is so hot, am I sweaty? Was I splashed by the sea? Where am I? ... Where is my hair? Am I wet? I am!" and then: "I am not alone ... Amalija Vrečko's throat is rattling. They said she will die in 24 hours."[53] The reader first meets another resident, Amalija, through Lučka's thoughts in a form of an internal monologue and gets more information about Lučka herself: "I am in Maribor ... Where is my Trieste, where is the sea, Duino, Jakob, Ponte Rosso ..."[54] Her memories and feelings are intertwining with sensations prompted by the care home: "I am sweating, I am thirsty, how can I get to this damn teacup on the nightstand ... how everything hurts! ... If I call a nurse, she will say to give it a rest. How did I end up here?"[55] Sensations being prompted by the care home strongly appeal to the reader through imagery (be it visual, olfactory, auditory, tactile, etc.). Through stirring unpleasant sensations in the reader, care home representations maintain negative image and reputation. The residents being the primary focalizer is something that Kriebernegg points out is quite common in the care home

51 Chivers: "'Blind People,'" 134.

52 Chivers: "'Blind People,'" 135.

53 Partljič, *Dom dom*, 9.

54 Partljič, *Dom dom*, 9–10.

55 Partljič, *Dom dom*, 10.

narratives.[56] This viewpoint prompts empathy in the reader towards the residents.[57]

The second novel, Vito Komac's crime novel *Murder in a Care Home?*, is not set in a care home per se, however, the novel is about a care home resident who goes missing and a distant relative is trying to figure out what happened to him. The care home is still a major point of discussion and a spatial frame, where the conditions are dreadful and its background is incriminatory. One day, Jure, the protagonist, gets an interesting phone call about his relative Milan who is a resident in a care home in Croatia. He is asked to come to Rijeka urgently to help find his lost relative. Milan had suffered a stroke and was then placed into a private care home. The story quickly prompts many questions: who put Milan into a care home, what exactly happened to him, does someone want him dead and take his money, and last but not least, is Milan still alive? When Jure and his wife arrive to Rijeka, it is clear that the situation is complicated and strange. The care home's director where Milan was supposed to be residing is not upfront, even more, she is hiding information and does not answer any of Jure's questions. There is even a claim that Milan was kidnapped. The narrator in this novel is the first-person narrator, still the focalizer is not a care home resident, but Jure, the relative of the missing care home resident. The reader gets an interesting perspective into a grim narrative of running a care home, exploiting care home residents, and treatment of older people. Since the readers do not have any direct input from Milan himself, his personal history and character are uncovered through Jure and Jure's memories of Milan.

Milan's unfortunate fate comes to light through the care home as an institution. The care home staff in this novel is described as monstrous and corrupt, and Jure's concerns are quickly raised. Milan's friends call one of the nurses "the care home beast,"[58] and they also elaborate on criminal activities by the home's director; the director wants to profit from the "poor old people who were left alone, nobody wants them anymore or are helpless

56 Kriebernegg, "Putting Age," 263.

57 Nussbaum, Martha C.: *Cultivating Humanity. A Classical Defense of Reform in Liberal Education*. Cambridge, MA: Harvard University Press, 1997.

58 Komac, Vito: *Umor v domu za ostarele?* Brežice: Primus, 2022, 74.

..."[59] They imply she takes them in, makes them sign over all their property and money to her, and then waits for them to die. It is apparent that the residents' lives are not worth much, but are seen as financial opportunity. This novel provides a negative view of the care home and puts themes, such as exploitation, manipulation, and fraud of older people, in the foreground. Milan's fate is chilling, hopeless, and difficult to follow. Komac's novel is not the main focus of this paper, however, it does provide another perspective on the care home residents' narratives in the care home genre.

The third literary work discussed in this paper, the short story collection *Coffee Circle* by Barbara Hanuš, is from the style and plot lines similar to the novel *Home Home*. Every chapter is a story that connects residents' past with the present and a third person omniscient narrator with care home residents as focalizers. Like in Partljič's novel, the reader is immersed into residents' perceptions of the care home through their thoughts, feelings, and emotions. The collection's title *Coffee Circle* is taken from a coffee circle which is a group of women who live in the care home and always start their day together with coffee. This circle serves as a microcosm within a bigger system and as a support system to the women in it. The circle is a safe space for complaining about aging and woes, sharing stories about the past, and making care home life happier. The author explained her motivation for writing this book: "To find strength to age joyfully" and "to be open until the end for new things that life offers, which are also offered by a care home."[60]

Coffee Circle is a complete opposite to the crime novel. While *Murder in a Care Home?* represents the care home as a horror story and age as an epitome of the decline and burden narratives, the short story collection romanticizes old age: "The gift that old age gives you is time,"[61] and builds the stories on humor, sentience, and community. The collection opens with a story called "Coffee," and the first sentence paints a picture of old age claiming: "Old age is a deep winter."[62] The page paints a picture of a calm

59 Komac, *Umor*, 176.

60 Ličen, Nataša, Radio Ognjišče. "Kavni Krog." *Radio Ognjišče*, 30 May, 2022. https://radio.ognjisce.si/sl/250/oddaje/34657/kavni-krog.htm.

61 Hanuš, *Kavni krog*, 7.

62 Hanuš, *Kavni krog*, 7.

landscape where memories are buried, nevertheless, there is still potential in the winter to have the memories and feelings provide comfort in the last days. Old age portrayed as winter is a common metaphor in representations of aging. As Skagen acknowledges, the imagery of "the leafless trees symboliz[e] winter and old age ... even approaching death." She then contrasts this to winter as "the positive stereotype of contemplative old age," expanding on Gaston Bachelard's positive connotation of winter being "reflective, retrospective or imaginary."[63]

Cultural Narratives of Aging and Old Age – Notions and Dominant Narratives

In her book, Margaret Morganroth Gullette, aging studies scholar and activist, proposes that "we are aged more by culture than by chromosomes."[64] Before Gullette, Simone de Beauvoir in her book *The Coming of Age* pointed to some of the key concepts in the Western culture. De Beauvoir characterizes the "notion of decline" through biological terms as a point saying "the organism declines when its chances of continuing to live are reduced."[65] However "it is not solely a biological, but also a cultural fact."[66] One prompt for claims of cultural aging are definitely consumerist societies that praise good looks and are obsessed with looking youthful[67] (therefore wrinkles and old bodies have no space in such societies); Wallace and many other scholars assert that the Western culture is "youth-obsessed"[68] and is Othering old age. Othering of old age can be defined with aging viewed "as a process of increasing alienation from one's self and from the wider society."[69] Othering can be, in the extreme, a complete exclusion from humanity.[70] Taking the role of media aside, literature

63 Skagen, *How Can*, 7.

64 Gullette, Margaret Morganroth: *Aged by Culture*. Chicago: The University of Chicago Press, 2004, 101.

65 De Beauvoir, Simone: *The Coming of Age*. New York: Putnam, 1972, 17.

66 De Beauvoir, *The Coming*, 13.

67 See scholars like Gullette (*Aged by Culture*) and Cruikshank (*Learning to Be Old*).

68 Wallace, *Literary Portrayals*, 289.

69 Gilleard, "Aging," 2.

70 van Dyk, "The Othering of Old Age," 109.

and literary representations with negative depictions of old and older people, and old age and aging, all contribute to seeing older people as alien, as the Other and instill apprehension towards the aging process. Literary representations work through various narratives, among the most prevailing cultural narratives of aging and old age are the decline narrative and the burden narrative. On the opposite end is the defiance narrative, which is confronting the negative depictions and fighting back. These narratives are not mutually exclusive but coexist and sometimes overlap.

a) Decline Narrative

The decline narrative can be defined as the "narrative [that] constructs ageing as a feared process that needs to be stopped or at least slowed down."[71] This narrative "tends to be marked by one-sided negative stereotypes emphasizing physical and cognitive deterioration, and ultimately marginalizes older people by rendering them socially invisible."[72] Gullette identifies that "the dominant cultural narrative of ageing [is] ... decline"[73] at least in the Western cultures. Wallace, who explores aging as a decline in the English literature, provides a reason why the decline narrative is prevalent in the Western society: "These images of ageing [for example, 'poor' King Lear, images of decaying flesh, and fear of aging] from the traditional canon of English literature are some of those which are most familiar in Western culture, to the point of cliché in some cases."[74]

The decline narrative is problematic on many levels. Literary representations of the decline (can) perpetuate ageism. The term ageism was established by Robert Butler, denoting "age discrimination ... prejudice by one

71 Falcus, Sarah, Hartung, Heike and Medina, Raquel: Introduction. In: *The Bloomsbury Handbook to Ageing in Contemporary Literature and Film* (Falcus, Sarah, Hartung, Heike and Medina, Raquel, eds.). London: Bloomsbury Academic, 2023, 2.

72 Schrage-Früh, Michaela, O'Neill, Margaret: Novels of ripening: The maturation of the Bildungsroman. In: *The Bloomsbury Handbook to Ageing in Contemporary Literature and Film* (Falcus, Sarah, Hartung, Heike and Medina, Raquel, eds.). London: Bloomsbury Academic, 2023, 11.

73 Gullette, Margaret Morganroth: *Declining to Declin*e. Charlottesville: University of Virginia Press, 1997, quoted in Schrage-Früh and O'Neill, Novels, 12.

74 Wallace, *Literary Portrayals*, 393.

age group toward other age groups."[75] As Russo elaborates on the ageist rhetoric, which is concerning, "the old [is perceived as] the culturally residual, the decrepit, the distorted, and finally, the alien."[76] This can manifest in generalization of older people and labelling them as incompetent and completely disregarding them. Moreover, Cruikshank stresses, "old women [in particular] are reviled as grumpy, frumpy, sexless, and uninteresting."[77] In addition to discriminating older people as another age group, older people themselves can internalize ageism and consequently be self-discriminatory. In a general form, internalized ageism means being ashamed of one's age, but it can take up more forms, like depreciation, feeling of shame, affecting "self-esteem, motivation, risk-taking,"[78] and other.

In literary representations, the decline narrative is frequent. Descriptions of older people alone confirm this: "Milan was sitting at the back [of a car] in a stripped care home pajamas ... with a deformed face pressed to the glass window. I will never forget his tormented expression, open-mouthed, suddenly he looked toothless, and he looked like Munch's 'The Scream,' resembling mute and awful pain of a helpless person."[79] A muted scream, an oxymoron, a shocking and disturbing image of a poor, helpless man.

Furthermore, the body starts failing and declining: "She is staring at the stairs before her. ... with difficulty she walks five steps and rests. ... Her heart says she cannot. ... With agony she moves her leg. ... In that moment, she realizes she will have to move into a care home."[80] In other cases, people feel as failures: "I cannot come [to the coffee circle], my legs do not hold me, I feel nauseous, I just can't anymore."[81] Bodily frailty plays a big part in the decline narrative, with dependency and often times mixed with the feeling of humiliation by the older person: "He stood up, bowed, she only

75 Butler, Robert N.: "Age-ism: Another Form of Bigotry." *The Gerontologist*, 9, 1969, 4, 243. https://doi.org/10.1093/geront/9.4_Part_1.243.

76 Russo, Mary: Aging and the Scandal of Anachronism. In: *Figuring Age. Women, Bodies, Generations* (Woodward, Kathleen, ed.). Bloomington: Indiana University Press, 1999, 27.

77 Cruikshank, Margaret: *Learning to Be Old. Gender, Culture, and Aging*. Lanham: Rowman & Littlefield, 2013, 139.

78 Cruikshank, *Learning*, 153.

79 Komac, *Umor*, 141.

80 Hanuš, *Kavni krog*, 43.

81 Hanuš, *Kavni krog*, 97.

saw a silhouette of a shadow in her own glittering grayness, which was the type of her blindness, and she was left alone... after a while, she had to call for help because the laxative started to work. Oh, how she felt humiliated when they were taking off her underpants ... Have I really deserved this?"[82]

In more extreme cases, residents wish to die because they have been struggling with their ailments and illnesses, and their situation seems hopeless. Lučka's roommate Amalija is in a poor state, the care home staff said she will die soon, but she is still alive, and Lučka is deliberating about her own fate: "She is lucky she will die. I want to die to."[83] Apart from thinking about death, some residents are more proactive in planning their funerals and instructing last testaments as a result of their declining health: "You know, I won't last long. I will stop eating. ... I will rebel otherwise they will feed me like the one [the woman] in a coma. With a plastic tube through the nose ... I will pour [the food] into the toilet ... you will write down I am, of my own will, leaving all my organs and bones to the anatomic institute of the medical faculty."[84]

Internalized ageism also makes an appearance in literary representations. The dialogue between Janko and Jasmina is telling how ageist residents themselves can be. Janko is trying to persuade Jasmina to get out of her room more: "Listen! You did not come to the [care] home to die, you came to live." She is stubborn and resists: "Do you think I don't see hearses that at least three times a month take an old body away?" However, Janko is not to be deterred: "But you do not see 300 alive residents. Among them 100 active ones. And you are very much so. This is not a waiting room for death, this is our second home ..."[85] Care home personnel show ageism in their treatment of older people. A vivid example is offered in the novel *Home Home*: "[the home's director] locked the doors with the demented people, who looked so timid and lost, sitting on the benches in the hallway and looking through the window to the park or onto the road, behind

82 Partljič, *Dom dom*, 27.

83 Partljič, *Dom dom*, 9.

84 Partljič, *Dom dom*, 77.

85 Partljič, *Dom dom*, 121.

her."[86] The nurses always feel the residents are a nuisance, calling them "old fools, degenerates, idiots, wheelies," and so on.

In addition to ageism, the decline narrative works through metaphors. In the story titled "A Cup," Nadja is drinking tea from a cup that was a gift from her daughter. Her hands are shaking and she feels dizzy. She lets go of the cup because she gets burned by hot water and the cup falls to the floor and breaks. The cup is a metaphor for her life and age: "Her dreams are broken, the cup is gone ..."[87] Nadja glues the cup back together and some of the pieces are "not at the right place," and she sees cracks in the cup and "in her and on her,"[88] equating the cracks from the cup to the wrinkles on her face.

b) Burden Narrative

The burden narrative sees the old people as a social and economic burden on society as a whole. Even more, the old people are seen as "a distinct group that threatens social and economic stability."[89] This narrative is prompted by "alarmist demography," a term proposed by Stephen Katz, asserting that "the growing aging population is threatening to create an economic crisis with profound consequences for healthcare systems, social security programs, industrial and intergenerational relations."[90] Mass media is very good in keeping the alarmist demography thriving with sensationist reporting on topics related to older generations and employ "terms like the 'silver (or grey) tsunami,' 'age wave,' 'grey hoard,' 'avalanche,' or 'flood'"[91] and "'onslaught,'" and "'time bomb'"[92] to signal the extent and

86 Partljič, *Dom dom*, 113–114.

87 Hanuš, *Kavni krog*, 40.

88 Hanuš, *Kavni krog*, 40.

89 Kriebernegg, Ulla: "'Time to Go. Fast Not Slow': Geronticide and the Burden Narrative of Old Age in Margaret Atwood's 'Torching the Dusties.'" *European Journal of English Studies*, 22, 2018, 1, 49. https://doi.org/10.1553/virus16s251.

90 Katz, Stephen: "Alarmist Demography: Power, Knowledge, and the Elderly Population." *Journal of Aging Studies*, 6, 1992, 3, 204. https://doi.org/10.1016/0890-4065(92)90001-M.

91 Charise, Andrea: "'Let the Reader Think of the Burden': Old Age and the Crisis of Capacity." *Occasion: Interdisciplinary Studies in the Humanities*, 4, 30 August 2012, 2. http://occasion.stanford.edu/node/96.

92 Cruiksank, *Learning*, 29.

repercussions. On the one hand, the burden narrative can concern the older population as a whole, making the aging population a wider societal problem, and on the other, it can provoke the feeling of being a burden in older people themselves.

A good example of this narrative is represented in Partljič's novel. While watching the evening news, the news segment echoes the cultural narratives of old age as a burden, defining old generations calling "old people the biggest problem of Europe's future," even a "real threat for Slovenia."[93] The show adds the notion of the old population being "a dark cloud and the sword of Damocles over Europe"[94] and creates an uproar in the care home community. The TV news segments support information with demographic data (statistics in the form of a rising percentage of old population) and put blame on old people for bankruptcy of the retirement and health funds, with claims that the future generations will have to work for them, implying not for themselves and their children, but for people who are retired and living in care homes. Janko, the president of the active residents, is disgusted by the TV news and wants to call up the TV station to complain: "I will not allow this, I am still active and I have not dropped dead yet." He manages to get a phone number and vents his opinion: "I told them what I think. Not just in my name. In the name of all us old people that are living in these ghettos for old people. Not for nothing I am the president of the active residents."[95] Prompted by the news, an instance of the burden narrative, Janko's complaint, an act of pushing back, is an example of the defying narrative, showing how these narratives coincide.

Being a burden to oneself and others is visible in a conversation between residents. When Janko confesses his love to Jasmina, she responds in a way that confirms the burden narrative premise: "How do you mean ... 'I love you'? In a care home? I am an old woman. Everything is behind me. I am *redundant* (emphasis added by U. M.), I am waiting for death, how can you love me in a care home?"[96] In this example, not only does Jasmina

93 Partljič, *Dom dom*, 51.

94 Partljič, *Dom dom*, 85.

95 Partljič, *Dom dom*, 52.

96 Partljič, *Dom dom*, 122.

feel a burden, but is also ageist towards herself. Marija, a resident from Hanuš's stories shares the same sentiment with Jasmina. When Marija's son announces he is picking her up so she can spend a Christmas eve with them, she is not too happy with the idea. She is reluctant to go saying: "I would prefer to stay in the care home, I would like to be among my own [people]." He is surprised by this, asking her: "How do you mean, with your people? We are your people."[97] Marija eventually gives in and joins her son and the rest of the family for the holiday. The reader gets an insight into her thoughts and they confirm the feeling of being a burden to others: "She does not want to be a nuisance, it is not necessary that they drive her here and back."[98]

Feeling abandoned can also be a consequence of being seen or feel as a burden. There are many instances of this in the care home genre. In *Home Home*, through Lučka as the focalizer, the reader gets her perspective on this when one night she lies in her bed and needs to go to the bathroom. She does not want to call the night shift nurse because she has been accused of making things up (this is of course an ageist remark toward Lučka from the nurse's side). Her situation is dire; she is suffering with constipation and having no air, making her feel she is suffocating. As seen through Lučka's experience, the care home staff can be patronizing in addition to being ageist. This is by no means a rare occurrence in the care home stories. The medical staff is exerting power over the residents, using rules to excuse their actions, and ordering the residents around however they please. Franc Marinčič's wife Teja is separated from him due to dementia and moved to "Home 2" where people living with dementia reside. He is now alone and misses his wife. He sneaks out of his room intending to visit her. While he cannot enter "the dementia home," he comes to a glass wall and spots her. A nurse on call finds Teja because she got lost on her way to a bathroom, sees Franc and starts shooing him away saying: "You ... go back to your room, you cannot help her, do you hear me?" He signals he will wait and when the nurse comes back, she tells him off in a stern manner: "Do not come here in front of the door so late. You are only making her

97 Hanuš, *Kavni krog*, 100.

98 Hanuš, *Kavni krog*, 101.

more confused."[99] He does not give up that easily and wants some reassurance, however, the nurse is annoyed with him and losing patience with him replies harshly: "Mister Marinič [*sic*] where do you live? She did not recognize you. ... Now, go to bed!"[100]

Furthermore, the staff is infantilizing the residents and some take to this better than others. Angela, the resident who adjusted to the care home life fairly well, experiences infantilization firsthand in an occupational therapy session. She was sent to join a session where women were busy with embroidery. Angela was offered to create a necklace from dry pumpkin seeds, which have to be painted first. The therapist is trying to "sell" her this "amazing" activity, while Angela sees it just as "toying around for keeping women occupied, and not to be working or have something done."[101] Being a farmer, she was used to hard work and the reader gets a sense how ridiculous and waste of time Angela finds this "therapy session." The therapist is over enthusiastic about painting the seeds with bright colors, claiming they are "full of positive energy,"[102] while Angela thinks very little of the whole thing. Apparently, the work is paying off and the therapist is absolutely beaming with praise for Angela. After a busy session, Angela realizes she is stained from coloring the necklace, but does not get upset, rather she comments: "Thank god I am stained in positive colors!"[103] She turns this ageist and patronizing session well naturedly into an activity she is willing to try.

c) Defying Narrative

Defying age and aging go hand in hand with the decline and burden narratives. Being branded as declining (frail, vulnerable, dependent, etc.) and being a burden is not preferred. Therefore, "'active' and 'healthy ageing' has now become the positive norm."[104] In the foreground to defy age and

99 Partljič, *Dom dom*, 161.

100 Partljič, *Dom dom*, 161.

101 Partljič, *Dom dom*, 142.

102 Partljič, *Dom dom*, 143.

103 Partljič, *Dom dom*, 144.

104 Skagen, *How Can*, 1.

aging is exercise in the form of physical and cognitive exercise (i.e., mental training). Trying to age healthily is seen as an important goal of one's life course, otherwise one might not be successful in aging. Apart from maintaining body and mind, older people resist being pushed to the margins of society, being othered, and can push back the alarmist discourse blaming them for wider societal problems.

The decline and burden narratives are dominant in all the three literary works discussed in the paper. While the crime novel *Murder in a Care Home?* provides negligible instances of the defiance narrative, the defiance narrative is more prominent in the novel *Home Home* and the short story collection *Coffee Circle*; the works provide substantial examples of (inter) actions where the residents themselves show resistance to the cultural notions of decline, burden, and ageism.

Many care home residents try reassuring each other that life is still worth living. Ada, one of the coffee circle ladies, counters Milka's complaint about ailments: "We do not talk about illnesses and pains, we do not complain, we do not have many more days left, we need to use them for happy things."[105] The residents are also proving that life can still be nice and living makes sense. When a picnic is organized for the whole care home, one of the residents happily comments on the event: "Those [residents] that had died before the picnic, can be really sorry [for not attending]."[106]

Others try to push back and resist being seen as burdens or as frail individuals with diminished capacities. Zvonko's mother, afraid he came to tell her he will place her in a care home, is appalled by the idea of moving to a care home. She showcases her mental capabilities in form of reciting poems she learnt in school, a long time ago, and still knows them by heart. Zvonko is quick on the uptake; it is clear to him she is making a point of having a clear mind (not being forgetful or having dementia) and not wanting to move anywhere. When they are saying goodbye, she says to him and stresses her capabilities: "But tell them [people in the care home], your

105 Hanuš, *Kavni krog*, 59.

106 Partljič, *Dom dom*, 193.

mother is still well up here!" as she knocks on her head,[107] emphasizing her cognitive state is not declining.

In Hanuš's short story "Camera," Dora, a care home resident, is invited to speak about life in a care home to a journalist. She describes how their daily life looks like, shows understanding for the nursing staff, for their schedules and being understaffed, and does not want to criticize the care home. Even more, she defends the medical staff saying they are really hard working, sacrificing their time with their children, and work for a low pay. Towards the end of her time at the TV station, Dora asks if she could address the viewers directly and they roll the camera for her. While she recognizes the challenges of old age, she stresses older people are part of the society. She says poignantly:

> *Dear viewers, ... You will also be old one day. Can you imagine needing care, waiting helplessly to have your diaper changed by a carer, to be dependent on employees having the time to feed you ... ? Maybe you will wish to get a diaper more because you have sensitive skin, maybe your only wish will be to have someone come by, to put you in a wheelchair and take you to a balcony. You cannot know how your old age will look like. Think about this when you are deciding about norms, about renovating and budling new care homes.*[108]

After Dora's part, it is the director's turn. She talks about the finances, lack of staff, having a social responsibility, etc. Once the filming wraps, the journalist and the cameraman seem most impressed with Dora. Her outreach to the public makes him envision himself as an "old man in a care home," however, this is rather difficult. He then "chases away the thoughts [of aging and a care home] as some annoying flies."[109] It is clear from this example how the literary representations of care home residents and their situation (life in a care home, state standards affecting their treatment, policies etc.) appeal to readers directly to evoke empathy and understanding for them.

107 Partljič, *Dom dom*, 98.

108 Hanuš, *Kavni krog*, 125–126.

109 Hanuš, *Kavni krog*, 127.

Conclusion

The selected contemporary Slovenian works all belonging to the care home genre, Partljič's novel *Home Home*, Hanuš's short story collection *Coffee Circle*, and Komac's crime novel *Murder in a Care Home?*, illustrate a diverse range of literary representations of old age, aging, and older people, each engaging with the prevalent cultural narratives of aging. These examples demonstrate the ways in which care home residents are seen, perceived, and treated, particularly through the lenses of the decline narrative, the burden narrative, and the defiance narrative. The works highlight how residents face both external ageism and internalized ageist attitudes. While some characters actively resist discriminatory perceptions and try to defy aging, others internalize negative cultural narratives, perceiving themselves as burdens and declining individuals.

Through these narratives of aging, readers are offered meaningful insights into residents' lives, shaped by their actions, past experiences, and behaviors, revealing their identities. The narrators or focalizers, in many cases the residents themselves, place the readers directly inside the care home, immersing them into a daily life within it, giving residents a voice, exposing and bridging the gap between them and the broader society.

This paper demonstrates that the negative cultural representations and narratives of old age and aging are very much present in the selected Slovenian literary works, however there is also resistance and a call for older people to be valued and not dismissed. There are at least two aspects to consider: first, the way care homes are perceived, whether as terminal stations or closed institutions at the margins of society where older people go to die, and second, the possibility of viewing the care home as a space for new beginnings and continued life. Thinking about the cultural narratives of old age, aging, and representations of care home residents, an additional thing to contemplate is how do these representations influence our relationship and attitudes towards aging and our ageism.

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ABSTRACTS

Selina BENTSCH

"How I shudder at the thought of becoming a useless old woman": Strategies for coping with Old Age and Aging Processes in the Diaries of a Swiss Woman Anna Maria Preiswerk-Iselin (1758–1840)

Female age and aging around 1800 are often associated with the role of the grandmother and social seclusion. This article presents Anna Maria Preiswerk-Iselin, a citizen of Basel in Switzerland, as a counterexample. She kept a diary for 44 years until shortly before her death in 1840 at the age of 82. In her writings, she shows herself not only as a grandmother, but also as an active, socially interested and committed aging woman. As she aged, she developed strategies to remain a useful member of society and engage in meaningful activities. However, not all her plans were successful. Preiswerk-Iselin's writing is contextualized and analyzed on the basis of contemporary norms, bourgeois socializing practices, Reinhard Koselleck's concept of the sense of time around 1800, and the concept of growing autonomy from established norms, social obligations and expectations in old age.

Key words: female aging, female education, autonomy of old age, diary writing, 19th century, Switzerland

Dragica ČEČ

Characteristics of Poor Elderly People in the Early 19th Century Included in the System of Formal Care – the Case of the Provincial Centre of Ljubljana

Newer approaches to the analysis of old age, shaped by the cultural turn, emphasise the individual's perspective and the experience of ageing "from below." An examination of the life trajectories of applicants for poor relief in Ljubljana confirms the hypotheses that elderly people combined various sources of subsistence and sought to maintain independence, yet those who entered the system of formal care were generally physically weak and almost invariably without a kin network that could support them. Nevertheless, some applicants possessed a highly developed social network. The analysis shows that in the context under study, old age was not understood as a chronological category but primarily as a matter of work capacity, physical strength, and the ability to support oneself.

Key words: poor-relief, old age, 19th century, Ljubljana, gender differences, economy of makeshifts

Filip DRAŽENOVIĆ

Old Age in 18th-Century British Health Regimens

The text analyses eighteenth-century British health regimens and their views on aging and longevity. Grounded in the Galenic concept of the six non-naturals, these regimens emphasised prevention, moderation, and personal responsibility rather than medical cure. Old age was understood as a natural, inevitable condition characterised by bodily coldness and dryness, best managed through regulated diet, gentle exercise, sufficient sleep, emotional balance, and restrained passions. Moral conduct and medical advice were closely intertwined, and cheerfulness, temperance, and self-knowledge were presented as key virtues for a healthy and prolonged old age.

Key words: old age, temperance, British health regimens, six non-naturals, longevity, self-governance, medicine, 18th century

Urška BRATOŽ

The Burden of Ageing: Old Age, Poverty, and Attitudes toward Social Issues in the 19th-Century Austrian Littoral

The paper examines attitudes toward ageing and the elderly in Istria and Trieste in the second half of the nineteenth century. It takes as its starting point the perceptions associated with old age, which in the nineteenth century inevitably included, on the one hand, the inability to work—often leading to the economic dependence of the elderly and to their being regarded as a burden on the family or the state—and, on the other hand, their physical frailty, whether biologically or socially conditioned, which could to some extent be both a cause and a symptom of their social deprivation. Elderly people can be traced among the residents of almshouses and recipients of poor relief, among patients in hospitals for infectious diseases, and among those who died of age related wasting. Medical imperatives directed at the elderly were tailored primarily to the bourgeoisie and stood in stark contrast to the actual experience of ageing among the lower classes, which could not be associated with rest and self care but rather with prolonged physical labour, bodily pain, and economic insecurity.

Key words: old age, Istria, Trieste, 19th century, diseases, mortality, poverty, social measures

Otto GERDINA

The Stereotype Content Model Approach to the Study of Ageism in History

The phenomenon of ageism is a ubiquitous one, evident in all societies where age-based hierarchies are tacitly accepted. Ageism manifests in various forms, contingent upon the age stereotypes and prejudices that are prevalent within a given social group at a specific point in time. In this chapter, the author links the stereotype content model to a typology of four forms of ageism: positive, compassionate, envious and hostile ageism. Based on a brief outline of the attitudes of historical societies towards the older people, he illustrates the applicability of the stereotype content model to identify the most likely manifestations of ageism in different historical periods. The chapter concludes with the identification of six theoretical assumptions about ageism throughout history that could be considered for future empirical research.

Key words: ageism, old age, Stereotype Content Model, historical research, typology

Tomislav VIGNJEVIĆ

Images of Old Age in the Paintings of Ivana Kobilca

This paper explores a wide range of depictions and preparatory studies of elderly figures within the artistic oeuvre of the Slovenian painter Ivana Kobilca (1861–1926). In the middle of the second half of the 19th century, she created a series of physiognomic studies of old people, which confirmed and highlighted her mastery of a realistic pictorial language, which was in many respects determined by the painting principles of Leibl's Munich circle. In this concentration on psychological expression and realism, her work differs greatly from that of other Slovenian artists of the time, who most often visualised anecdotal genre depictions of the elderly. The paper thus highlights and analyses the exceptional importance of this group of paintings of elderly people that Kobilca created in the 1880s and 1890s.

Key words: Ivana Kobilca, old age, realism, painting, genre, portrait

Urša MARINŠEK

Narratives of Old Age: Decline, Burden, and Defiance in Representations of Care Home Residents in Contemporary Slovenian Literature

In cultural age studies, we have at least three major cultural narratives of aging in the Western societies: the decline narrative, the burden narrative, and the defiance narrative. As aging studies scholars and literary gerontologists have shown, these cultural narratives can be found in literary works across various linguistic and cultural contexts (e.g., Barry & Skagen and Falcus, Hartung & Medina). This paper explores literary representations of old age and aging in three Slovenian books, all with the care home as a setting or a theme. Literary works depicting care homes and care home residents, touching upon topics such as aging, institutionalization, memory, isolation, fall under the care home genre. The selected and analysed works in chronological order are the novel *Dom dom* (*Home Home*, 2008) by Tone Partljič, the short story collection *Kavni krog* (*Coffee Circle*, 2021) by Barbara Hanuš, and the crime novel, *Umor v domu za ostarele?* (*Murder in a Care Home?*, 2022), by Vito Komac.

Key words: age(-ing) narratives, decline, burden, defiance, literary representations, contemporary Slovenian literature

POVZETKI

Selina BENTSCH

»Spreletava me srh ob misli, da bom postala neuporabna stara ženska«: Strategije spoprijemanja s starostjo in procesi staranja v dnevnikih Švicarke Anne Marie Preiswerk-Iselin (1758–1840)

Prispevek obravnava staranje žensk v 19. stoletju v Švici, s posebnim poudarkom na strategijah, ki so jih starejše ženske v Baslu okoli leta 1800 uporabljale, da bi ostale dejavne in ohranile družbeni pomen. Življenje Anne Marie Preiswerk-Iselin, opisano v njenih dnevnikih, služi kot študija primera. Pri 68 letih je izrazila strah, da bi postala »neuporabna stara ženska«. Njena odločnost, da ostane aktivna in koristna, je bila ključna za njeno dobro počutje, hkrati pa jo je pričakovala tudi družba. Zaradi svojega premožnega položaja ji ni bilo treba skrbeti za finančno preskrbo v starosti, kar je bilo pomembno v času, ko institucionaliziranih pokojnin še ni bilo.

Preiswerk-Iselin se je imela za staro že sredi petdesetih let, kar je bilo skladno s tedanjimi normami, ki so petdeseto leto velikokrat označevale kot začetek starosti, pri ženskah pogosto povezane z menopavzo. V dnevniku je zapisovala svoje telesne in duševne omejitve, kar odraža tako družbena kot lastna pričakovanja glede staranja. Da bi se izognila odvisnosti in družbeni marginalizaciji, je dajala prednost ohranjanju zdravja in vključevanju v smiselne dejavnosti.

Njeno življenje se je s staranjem močno spremenilo: ko so se otroci poročili in je umrl njen mož, je svoje družabno življenje preusmerila v družinske odnose. Kljub telesnemu pešanju in umiku iz širšega družbenega življenja je ostala povezana z družino, ki jo je pogosto gostila na svojem podeželskem

posestvu, tolažbo pa je našla tudi v pisanju dnevnika. Obrat k družini kot stalnici ni presenetljiv, če ga razumemo skozi Koselleckov koncept občutka časa okoli leta 1800 – časa, usmerjenega v prihodnost, a hkrati zaznamovanega z negotovostjo.

A. M. Preiswerk-Iselin je načrtovala tudi projekt za izboljšanje izobraževanja deklet. Želela je izobraževati dekleta različnih družbenih slojev, kar je bilo skladno z razsvetljenskimi idejami. Vendar se je njen projekt soočil z odporom in na koncu propadel zaradi pomanjkanja podpore, finančnih težav in družbenih preferenc za že uveljavljene ustanove. Kljub temu je svoj projekt za starost vztrajno zasledovala več let, kar je povezano z naraščajočo avtonomijo družbenih norm v starosti. Članek poudarja, da so si ženske tistega časa, zlasti iz premožnega izobraženega meščanstva v protestantskih urbanih okoljih, aktivno prizadevale ohraniti svoj družbeni pomen, s čimer se izpodbija predstava, da so zgolj pasivno sprejele vlogo babic. Prizadevanja A.M. Preiswerk-Iselin kažejo na odpornost in prilagodljivost teh žensk pri ohranjanju družbene relevantnosti kljub družbenim omejitvam.

Ključne besede: ženske, staranje, žensko izobraževanje, avtonomija starosti, dnevnik, 19. stoletje, Švica

Dragica ČEČ

Značilnosti revnih starostnikov v začetku 19. stoletja, vključenih v sistem formalne oskrbe – primer provincialnega središča Ljubljana

Prispevek se posveča vprašanju, kako so v Ljubljani v začetku 19. stoletja dojemali starost, revščino in oskrbo ostarelih. Izhaja iz gradiva ljubljanskega ubožnega inštituta iz let 1785–1857 ter se osredotoča na percepcijo starosti, telesne znake staranja in razmerje med formalnimi ter neformalnimi oblikami oskrbe. Raziskava temelji na kvantitativni obdelavi evidence podpirancev in na kvalitativni analizi prošenj za sprejem v sistem ubožne oskrbe.

Analiza gradiva pokaže, da starost v obravnavanem okolju ni bila razumljena predvsem kot kronološka kategorija, temveč kot vprašanje delovne zmožnosti, telesne moči in sposobnosti samostojnega preživljanja. Posamezniki so bili zato kot stari pogosto dojeti že okoli petdesetega leta, zlasti kadar so opravljali fizično zahtevna dela. Prav zmanjševanje delovne zmožnosti, bolezni in telesne spremembe so bili med ključnimi dejavniki, ki so ljudi brez premoženja potiskali v večjo revščino in jih nazadnje privedli v okvir ubožne oskrbe.

Pregled podpirancev razkriva tesno prepletenost starosti in revščine ter hkrati opozarja na izrazite razlike med spoloma, saj so med prejemniki pomoči prevladovale ženske. Institucionalna oskrba je zajela le manjši del ljudi na robu eksistence, zato so bile za preživetje odločilnega pomena tudi različne neformalne prakse – od medgeneracijske solidarnosti do razvejane mreže socialnih stikov in vsakdanjih strategij preživetja. Možnosti za družinsko podporo so bile pogosto omejene, kar je bilo povezano s samskostjo, poznim poročanjem, migracijami in visoko smrtnostjo otrok, zato je vlogo varovalnega okolja prevzemala tudi širša skupnost.

Prispevek obenem opozarja, da je bil odnos do ostarelih revežev kompleksen, saj se je gibal med sočutjem, moralnim vrednotenjem, socialno kontrolo in stigmatizacijo. Življenjske zgodbe prosilcev kažejo, da staranje ni pomenilo zgolj pasivnega telesnega pešanja, temveč tudi aktivno prilagajanje

posameznikov spremenjenim življenjskim okoliščinam. Staranje se tako kaže kot kompleksen biološki, socialni in ekonomski proces, ki je odločilno oblikoval življenjske poti revnejšega mestnega prebivalstva.

Ključne besede: ubožna oskrba, starost, 19. stoletje, Ljubljana, spolne razlike, ekonomija preživetja

Filip DRAŽENOVIĆ

Starost v britanskih zdravstvenih priročnikih iz 18. stoletja

Prispevek analizira britanske priročnike za ohranjanje zdravja iz osemnajstega stoletja in njihove poglede na staranje in dolgoživost. Ti režimi, ki so temeljili na Galenovem konceptu šestih nenaravnih stvari (*res non naturales*), so poudarjali preprečevanje, zmernost in osebno odgovornost, ne pa medicinsko zdravljenje. Starost je bila razumljena kot naravno, neizogibno stanje, za katero sta značilna telesna hladnost in suhost, ki ju je najbolje obvladovati z urejeno prehrano, nežno vadbo, zadostnim spanjem, čustvenim ravnovesjem in zadržanimi strastmi.

Moralno vedenje in zdravniški nasveti so bili tesno prepleteni, vedrina, zmernost in samospoznavanje pa so bili predstavljeni kot ključne vrline za zdravo in dolgo starost.

Ključne besede: starost, zmernost, britanski priročniki za ohranjanje zdravja, šest nenaravnih stvari, dolgoživost, samodisciplina, medicina, 18. stoletje

Urška BRATOŽ

Breme staranja: Starost, revščina in odnos do socialnih vprašanj v Avstrijskem primorju v 19. stoletju

Prispevek obravnava odnos do staranja in starajočih se v Istri in Trstu, zlasti v drugi polovici 19. stoletja. Izhaja iz tedanjih percepcij starosti, ki so neizogibno vključevale delovno nezmožnost in z njo povezano ekonomsko odvisnost starostnikov, pogosto razumljenih kot breme za družino ali državo. Starost je bila hkrati zaznamovana s telesno oslabelostjo, tako biološko kot tudi socialno pogojeno, ki je lahko delovala kot vzrok ali kot simptom njihove socialne deprivacije. Starostnike je mogoče prepoznati med oskrbovanci ubožnic, prejemniki podpor, pacienti bolnišnic ter med umrlimi zaradi starostnega hiranja. Medicinsko-higienski napotki, namenjeni starejšim, so bili oblikovani predvsem za potrebe meščanstva in so bili v izrazitem neskladju z realnostjo staranja v nižjih slojih, kjer je življenje zaznamovalo dolgotrajno fizično delo, telesna bolečina in socialna ranljivost.

Prek meščanskega odnosa do staranja, prek etike dela, ki je skozi kategorijo delovne nezmožnosti oblikovala odnos do revščine in starosti, ter prek podatkov, ki razkrivajo starajoča telesa v njihovi ranljivosti, tudi v vlogi bolnikov, je mogoče razbrati, da je bila podoba staranja nižjih družbenih plasti ena prevladujočih v tedanjem družbenem diskurzu. Seveda pa ni bila edina; meščanska percepcija starosti je vključevala tudi druge, pogosto bolj pozitivne konotacije, ki pa presegajo okvir obravnavane razprave.

Ključne besede: starost, Istra, Trst, 19. stoletje, bolezni, umrljivost, revščina, socialni ukrepi

Otto GERDINA

Pristop modela vsebine stereotipov (SCM) k preučevanju starizma v zgodovini

Čeprav je bil izraz »starizem« (*ageism*) prvič uporabljen leta 1969, je sam pojav veliko starejši. Starizem je vseprisoten pojav, opazen v vseh družbah, kjer so starostne hierarhije tiho sprejete. Kaže se v različnih oblikah, odvisno od starostnih stereotipov in predsodkov, ki prevladujejo v določeni družbeni skupini v določenem zgodovinskem trenutku. Prispevek preučuje zgodovinske manifestacije starizma z uporabo modela vsebine stereotipov, ki družbene skupine razvršča glede na zaznano toplino in kompetentnost. Najprej je model teoretično povezan s štirimi vrstami starizma: pozitivnim, sočutnim, zavistnim in sovražnim. Pozitivni starizem sepojavi, ko so starejši posamezniki dojeti kot topli in kompetentni, pogosto uživajoč visok družbeni status. Sočutni starizem nastane, ko so zaznani kot topli, a nekompetentni, kar vzbuja sočutje. Zavistni starizem je povezan z zaznavo kompetentnosti brez topline, kar vodi v nelagodje ali odpor. Sovražni starizem združuje nizko toplino in nizko kompetentnost, kar povzroča izrazitejše in bolj odkrito negativne odzive. Prispevek sledi omenjenim oblikam starizma skozi različna zgodovinska obdobja in predstavi nekaj teoretičnih predpostavk, ki jih je mogoče upoštevati pri prihodnjih empiričnih raziskavah starizma skozi zgodovino.

V antiki sta najverjetneje soobstajala zavistni in sovražni starizem, pri čemer so bili starejši iz višjih družbenih slojev spoštovani, a hkrati deležni zavisti, medtem ko so se starejši iz revnejših slojev soočali s sovražnostjo. Srednji vek je zaznamovala prisotnost tako sovražnega kot zavistnega starizma, na kar so vplivale gospodarske in družbene spremembe. Renesansa je med premožnejšimi sloji uvedla pozitivni starizem, medtem ko so se revnejši posamezniki najverjetneje še naprej soočali s sovražnim starizmom. Industrializacija 19. stoletja je prinesla sočutni starizem, ki je starejše ljudi prikazovala kot žrtve tehnološkega napredka, medtem ko so premožni starejši ohranili položaj pozitivnega starizma. V prvi polovici 20. stoletja se je sočutni starizem institucionaliziral prek socialnovarstvenih politik, v drugi polovici pa so se pojavile pozitivne podobe starosti, družbeni položaj

starejših pa se je bistveno izboljšal. Toda od sredine sedemdesetih let je neoliberalizem zaznave premaknil proti zavistnemu starizmu, saj je starejše iz srednjih in višjih slojev prikazoval kot privilegirane in potratne porabnike virov.

Prispevek sklene, da so bila zgodovinska stališča do starejših ljudi oblikovana predvsem z njihovim družbenim statusom in širšim družbeno-kulturnim kontekstom, pri čemer model vsebine stereotipov ponuja okvir za napovedovanje vrst starizma v zgodovinskih raziskavah. Predstavljene hipoteze omogočajo izhodišče za prihodnje empirične študije o zgodovinski evoluciji starizma. Predlagani teoretični model lahko pomaga prepoznati prevladujoče (ali najbolj vidne) oblike starizma v različnih zgodovinskih obdobjih in usmerja nadaljnje raziskovanje.

Ključne besede: starizem, starost, model vsebine stereotipov (Stereotype Content Model), zgodovinske raziskave, tipologija

Tomislav VIGNJEVIĆ

Podobe starosti v slikarstvu Ivane Kobilca

Slikarka Ivana Kobilca (1861-1926) je ustvarila serijo slik in študij na temo starosti, tako da je ohranjenih več kot petindvajset del, ki upodabljajo starejše ljudi. To je pomemben del umetničinega opusa, ki priča o njenem živem zanimanju za podobe starejših ljudi. Te podobe v njenih slikah lahko najpogosteje uvrstimo v žanr študij glav ali poprsij, v katerih je slikarka pokazala značilno in zelo izrazito realistično nagnjenost k podrobni - lahko bi rekli psihološko poglobljeni - študiji fizionomije starejših ljudi. Njeno zanimanje presega impulze v tem žanru, ki jih je prejela med študijem v Münchnu, in priča o njeni občutljivosti za motive starosti. V kontekstu umetnosti tistega časa je zanimanje Ivane Kobilce za podobe starosti jasen znak njene realistične stilistične usmerjenosti. Kljub temu, da jo je Alois Erdtelt med študijem v Münchnu že spodbujal k realističnemu slikanju glav v slogu kroga slikarja Wilhelma Leibla, število in kakovost njenih del na temo starosti dokazujeta, da je Kobilca gojila živahno zanimanje za te motive, bodisi v žanrski, predvsem pa v portretni umetnosti. Takšne podobe starejših so zato ena od značilnosti njenega zgodnjega delovanja v 80. letih 19. stoletja.

Ključne besede: Ivana Kobilca, starost, realizem, slikarstvo, žanr, portret

Urša MARINŠEK

Narativi o staranju: Upad, breme in upor v reprezentacijah stanovalcev domov za starejše v sodobni slovenski književnosti

V kulturnih študijah o starosti ločimo vsaj tri glavne kulturne narative staranja v zahodnih družbah: narativ o upadu, narativ o bremenu in narativ o uporu. Kot so pokazali raziskovalci, ki se ukvarjajo s študijami staranja in literarni gerontologi, lahko te narative najdemo v literarnih delih v različnih jezikovnih in kulturnih kontekstih (na primer Barry & Skagen in Falcus, Hartung & Medina). Ta članek raziskuje literarne reprezentacije starejših in kulturne narative starosti in staranja v treh slovenskih delih, ki se dogajajo v domovih za starejše oziroma v katerih ima dom pomembno vlogo. Literarna dela, ki obravnavajo domove za starejše ter teme kot so staranje, institucionalizacija, spomin, izolacija, in druge, spadajo pod literarni žanr *care home genre* (op. v slovenščini še ni uveljavljenega termina za ta žanr). Izbrana in analizirana dela po kronološkem redu izida so roman *Dom dom* (2008) Toneta Partljiča, zbirka kratkih zgodb *Kavni krog* (2021) Barbare Hanuš in kriminalni roman *Umor v domu za ostarele?* (2022) Vita Komaca.

Ključne besede: narativi o staranju, upad, breme, upor, literarne reprezentacije, slovenska sodobna književnost

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INDEX OF NAMES


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Questions of old age and the elderly in the past, as highlighted in the monograph, have long been marginalised in Slovenian historiography. The monograph is innovative both in its content and in its interdisciplinary approach, as it goes beyond historical facts alone and, by incorporating social-scientific and cultural perspectives, adds a new dimension to their interpretation. The volume offers fresh insights into the multifaceted phenomenon of ageing and into the ways in which different environments and social settings in the past confronted it.

From the review by Darja Mihelič, PhD

The monograph makes an important contribution to the development of the field, particularly within the humanities and social sciences. Through its interdisciplinary methodology, the authors open up new possibilities for understanding old age as a complex and multidimensional phenomenon that cannot be reduced to biological change alone. The study therefore offers significant insights derived from historical processes that are essential for understanding the status of old age in contemporary culture and society. It encourages critical reflection on how societies construct and evaluate old age, and how these constructions shape the lives of individuals. In doing so, it has an impact that extends beyond academia, addressing the wider public, policymakers, and professionals working in practice.

From the review by Urška Lampe, PhD


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