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The search for meaning in later life: On the connection between religious narratives and narratives of aging

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ABSTRACT

Older adults’ life stories are often connected with religious stories. In-depth interviews with 26 older Dutch adults indicate three groups of religious narratives (experiential, ontological, and critical narratives) and three master narratives of aging (active aging, decline, and inner growth). The narrative of aging as inner growth, which strives for a balance between opposites, offers a way out of the polarity between active aging and aging as decline. Kendall’s tau-b correlation analysis shows that relative use of affirmative religious narratives tends to be positively correlated with relative use of supportive and negatively correlated with use of invalidating narratives of aging.

KEYWORDS

Aging; cultural narratives; religious narratives; narratives of aging; religion

Introduction

The life stories told and lived by human beings tend to arise from and confirm a certain perspective on the world. For many people their worldview is closely connected with religious stories that offer possible worlds, created through narrative and portrayed in stories and symbols, rituals, and moral guidelines (Ganzevoort, 2014). However, for older people the physical, mental, or social losses that tend to occur in later life may be difficult to interpret in terms of their life story. In the interpretative process wherein people meaningfully integrate intrusive life events in their life stories, their worldviews can play a major role (Scherer-Rath, 2014). Because of their existential salience—especially when grounded in “Holy Scripture”—(Koster, 2014), religious worldviews in particular have the potential to account for—and even celebrate—the perceived ambiguities, puzzles, and paradoxes in human experience (Geertz, 1973; Scherer-Rath, 2014). However, nowadays the search for meaning in later life may be complicated by two developments. First, in late modernity the traditional religious frameworks that provided uncontested existential meaning have lost much of their influence, thereby intensifying the personal uncertainty at the end of life (Berger & Luckmann, 1995; Kellehear, 2017; Laceulle & Baars, 2014; Scherer-Rath, 2014). Although older adults, having grown up in a more
traditional society in which religious frameworks still had most of their existential authority, may strive to preserve the worldviews and beliefs they grew up with (Atchley, 1999), the diversity of religious content offered in late modern society may increase existential uncertainty.

Second, the cultural narratives of aging offered by contemporary Western societies may complicate the task of keeping a satisfying life story going throughout the entire life course (Bohlmeijer, Westerhof, Randall, Tromp, & Kenyon, 2011; Freeman, 2004; Laceulle & Baars, 2014). Late modern societies tend to offer two cultural master narratives of aging. On the one hand, they offer narratives grounded in a view of aging as decline (Biggs, 2001; Bohlmeijer et al., 2011; Freeman, 2004; Gulette, 2004; Kesby, 2017; Laceulle & Baars, 2014), which tend to reduce the complexities of aging to the “pathologies” of aging (Kesby, 2017, p. 376). These may be coupled to political narratives emphasizing the dependency of older adults, portraying older adults as a burden on society (Biggs, 2001; Kesby, 2017). On the other hand, late modern societies offer narratives of “active,” “productive,” “positive,” or “successful” aging (Biggs, 2001; Bohlmeijer et al., 2011; Kesby, 2017; Laceulle & Baars, 2014; Liang & Luo, 2012), which are embedded in the belief that the capability to stay young and active is the key to a good old age (Liang & Luo, 2012).

Although such narratives can stimulate the potentials of older people to live a good life, they can also complicate the search for meaning for those older adults who are not able or willing to live up to these standards (Biggs, 2001; Bohlmeijer et al., 2011; Kesby, 2017; Laceulle & Baars, 2014; Liang & Luo, 2012).

The difficulty of finding meaning in later life when the abilities for active aging have diminished has become especially noticeable in the Netherlands, where a public debate has started on the desirability of alternative legislation on euthanasia that would legitimize euthanasia without medical grounds for Dutch adults of 75 years and older upon their own, persistent, and voluntary request. Van Wijngaarden, Leget, and Goossensen (2015) show that their research participants, older Dutch adults who consider their life as “completed” and prefer death over life, are proactive and independent people with an inability or unwillingness to undergo a process of decline. Van Wijngaarden et al. (2015) interpret the experience of their research participants as “narrative foreclosure” or “the premature conviction that one’s life story has effectively ended” (Freeman, 2004, p. 83). This indicates that the search for meaning in later life can indeed be complicated by a lack of cultural narratives that provide adequate narrative resources for keeping a satisfying life story going throughout the remainder of life (Laceulle & Baars, 2014). However, religions offer alternative stories of aging and death, thereby potentially compensating for the lack of meaningful cultural narratives of aging. These observations lead us to the following research question: What narratives of aging and of religion are expressed by older Dutch adults, and to what extent are these correlated?
Methods

This study is part of a research project investigating religion, death anxiety (Fortuin, Schilderman, & Venbrux, 2018), attitudes toward euthanasia (Fortuin, Schilderman, & Venbrux, in press), and narratives of aging based on interviews with 26 adults aged between 79 and 100 born in the Netherlands and living in the eastern part of the Netherlands.

Participants and data collection

A purposeful sample maximizing variation of religiosity, health, living conditions, dependence on care, gender, and education was selected to maximize variation of meaning (Morse, 2007). Table 1 describes the research participants, categorized into three groups with different religious affiliations. The 12 institutionalized participants were selected from five different care homes (with and without nursing) and contacted through spiritual caregivers. Of the 14 participants living in private homes, apartments, or serviced apartments, 11 were contacted through (three different) general practitioners and three through spiritual caregivers. The first author conducted semi-structured in-depth interviews with all participants between December 2015 and March 2017 on experienced quality of life; religion; and views on death, dying, and the afterlife. To encourage in-depth descriptions, the interviewer frequently used follow-up questions inviting clarification or expansion (Dahlberg, Dahlberg, & Nyström, 2008). All participants were interviewed once, except for one participant who participated in a test interview. All interviews were conducted in private, in the participant’s home or apartment. They were audiotaped and transcribed by the first author. The total duration of interview visits was between 1 and 3 hours (average: 2 hours). The duration of the audiotaped and transcribed part of the interviews was between 38 and 135 minutes (average: 78 minutes).

Table 1. Description of participants, categorized by religious affiliation (N = 26).

<table>
<thead>
<tr>
<th></th>
<th>Catholic</th>
<th>Protestant</th>
<th>Unaffiliated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>79–87</td>
<td>80–100</td>
<td>79–93</td>
</tr>
<tr>
<td>Gender</td>
<td>5 female, 4 male</td>
<td>4 female, 4 male</td>
<td>4 female, 5 male</td>
</tr>
<tr>
<td>Church attendance</td>
<td>2 none, 2 monthly, 1 several times a month, 4 weekly or more</td>
<td>4 several times a month, 4 weekly or more</td>
<td>8 none, 1 seldom</td>
</tr>
<tr>
<td>Education level (ISCED 1997)</td>
<td>1 primary, 4 lower secondary, 2 upper secondary, 2 tertiary</td>
<td>2 primary, 2 lower secondary, 1 upper secondary, 3 tertiary</td>
<td>1 primary, 6 lower secondary, 1 upper secondary, 1 tertiary</td>
</tr>
<tr>
<td>Housing</td>
<td>5 community-dwelling, 4 care home</td>
<td>3 community-dwelling, 5 care home</td>
<td>6 community-dwelling, 3 care home</td>
</tr>
<tr>
<td>Residence</td>
<td>4 village, 5 city</td>
<td>2 village, 6 city</td>
<td>2 village, 7 city</td>
</tr>
<tr>
<td>Civil state</td>
<td>3 single, 2 married, 2 divorced, 2 widowed</td>
<td>2 married, 1 divorced, 5 widowed</td>
<td>1 divorced, 8 widowed</td>
</tr>
<tr>
<td>Descendants</td>
<td>4 biological children, 1 foster/stepchildren, 4 none</td>
<td>7 biological children, 1 foster/stepchildren</td>
<td>6 biological children, 1 foster/stepchildren, 2 none</td>
</tr>
</tbody>
</table>
Ethical approval

The research protocol was first evaluated by the research ethics committee of the Radboud University Medical Center (CMO Arnhem-Nijmegen), which judged in October 2015 that the research does not fall within the remit of the Medical Research Involving Human Subjects Act (WMO) because it does not entail health risks or other notable burdens (registration number: 2015–2040). Subsequently, it was assessed by the Ethics Assessment Committee Humanities of Radboud University, which gave consent in November 2015 (registration number: 8903). The board of each care institution where interviews were conducted gave written informed consent. Prior to each interview, potential participants had received an information letter describing voluntariness of participation, the aim of the research, the research procedure, contact details, their right to withdraw, and the handling and storage of research data. All participants gave written informed consent and felt fit enough to be interviewed. All interviews were transcribed with the omission of names and dates.

Analysis

In accordance with the qualitative method of constant comparison (Holton, 2007), data collection and analysis were alternated so that developing insights could be explored in succeeding interviews. As the first author performed all interviews, transcriptions, and analyses, the interviewer had in-depth knowledge of the topics and of growing theoretical concepts. Following the phenomenological “reflective lifeworld research” approach (Dahlberg et al., 2008), the qualitative data analysis was threefold. First, the analyst transcribed each interview and read it several times to become familiar with each interview as a whole. Second, using the qualitative data analysis software ATLAS.ti, version 7, each interview was divided into smaller meaning units (“quotations” in ATLAS.ti) that were assigned one or more codes. During this phase, meaning units were closely examined and compared for similarities and differences, adopting a stance of theoretical openness. This process led to a total of 204 codes describing aspects of aging and of religion. Then the analyst evaluated the relationships between these codes to distill the narratives of aging and of religion they expressed, conceptualizing narratives as accounts of connected events. The 15 narratives of aging found in this way were inductively categorized into three master narratives of aging (active aging, aging as decline, and aging as inner growth), each having four sub-narratives. The nine religious narratives found in this way were inductively classified into three groups of religious narratives, depending on whether they describe participants’ experience of God or the supernatural in their lives (experiential narratives), whether they refer to the nature of God and/or the origin of life and death (ontological narratives), or whether they express...
the encounter between critical thinking and religious beliefs or practices (critical narratives). This process led to a total of 24 narrative codes, which were coupled to 2,934 quotations. Third, to describe the essence of the distinguished narratives—or the “meanings that make that phenomenon that very phenomenon” (Dahlberg et al., 2008, p. 96)—the interviews were approached again as a whole. In a subsequent, quantitative analysis, for each participant the relative use of each narrative was determined by calculating the percentage of words used for each narrative relative to the total number of words used for all narratives together. The correlation between the relative use of religious narratives and narratives of aging was determined with SPSS, version 23, based on Kendall’s tau-b, a nonparametric test that is appropriate for small data sets (Field, 2013). Based on 1,000 bootstrap samples the bias corrected and accelerated (BCa) 95% confidence intervals of \( \tau_b \) were determined, which do not rely on the assumption of normality (Field, 2013).

**Results**

The qualitative analysis indicates three master narratives of aging: active aging, aging as decline, and aging as inner growth, each having four sub-narratives. It also indicates three groups of religious narratives: experiential, ontological, and critical narratives, each consisting of three narratives. First these narratives will be described, and then their correlations will be presented.

**Active aging**

All participants voiced the master narrative of active aging, which emphasizes the need to keep doing things when growing older. They expressed this narrative by mentioning doing purposeful and/or pleasant activities, such as housekeeping, voluntary work, shopping, traveling or making short trips, following the news, painting, handicrafts, reading, writing, working, physical exercise, going outside, following courses, being members of a club or group, taking part in organized activities, and using modern media. Many participants also mentioned being and/or intending to stay busy: “Like I am now, to keep doing quite a lot of things. Not to sit around idly, because I really hate that” (p10). Some also mentioned keeping in touch with and/or still belonging to society or feeling younger than their age: “Well, sometimes I also say that: ‘God, the old soul!’ And then I think: Old soul? Maybe she is younger than me” (p8). The master narrative of active aging has four subnarratives: positive aging, independence, generativity, and enjoyment.
Positive aging

All participants uttered the narrative of positive aging, which expresses a positive evaluation of old age. This narrative was voiced as staying positive, making the best of things, and/or not complaining or nagging: “I always say: every day I live is so much gained. So I am not grumpy, I am optimist … optimistic” (p1). This optimism was also expressed in the face of the challenges of aging: “But, that’s why, I don’t find it a decay. Yes, you can no longer do certain things. But I can still laugh!” [laughs] (p14). Participants also expressed this narrative by evaluating their present life positively: “I am a content, happy person to this day. So what else could I wish for?” (p1). Additionally, participants expressed positive aging by laughing or joking about the trials and tribulations of growing old and/or stressing the importance of humor: “He walks very poorly as well. So, in that respect we are a match for each other!” [laughs] (p21). Likewise, they expressed this narrative by laughing or joking about approaching death:

I say, well, for me you don’t have to make such a fuss about it. I say to my daughter, I say, at IKEA you can rent such big cardboard boxes, I say, just shove me in there, then you can later return the box. (p4)

Independence

Twenty-four participants conveyed the narrative of independence, which affirms staying an independent agent. They expressed this narrative by mentioning still doing things by themselves; their wish to keep doing things by themselves or without aids and to stay independent as long as possible; having their own responsibility; managing well on their own; making their own choices; and/or by stressing the importance of independence in later life: “What’s very important to live a bit … pleasantly, I find freedom very important. So if rules are promulgated here I try to find my own way to interpret these. And then I feel most comfortable” (p12). The story of a participant who preferred a constant nagging pain in his back over an operation that would alleviate his pain but decrease his independence emphasizes the importance of independence:

Imagine I would take this operation. And then I would have to let somebody come in the mornings to put me on the toilet, because I could not put on and take off my underpants. That I could not reach it. Or would have to put on my socks and tie my shoes. No, then I prefer this handicap of some pain. And that I still can say myself: Well, put the foot on the chair and tie that shoe. (p18)

Generativity

The concept of generativity was introduced by Erikson (1977, p. 240) as “the concern in establishing and guiding the next generation.” Although Erikson originally viewed generativity as a developmental task in midlife, he later
emphasized that older people should maintain a grand-generative function (Erikson, 1982, p. 63). Generativity is by no means limited to parenthood and can be expressed in a variety of domains, such as professional activities, volunteer endeavors, religious and political activities, neighborhood and community activism, and friendships (McAdams & de St. Aubin, 1992). Twenty-two participants voiced the narrative of generativity, which emphasizes contributing to society. They expressed this narrative as creating, doing, and accomplishing things that contribute to society; being an example for the next generation; caring for others; and passing on things, their viewpoints, and even (in two cases) their organs to others:

But if you get old and the fact that you still try to bring something positive for a younger generation, then that is much more mature. Much more valuable. And mature, and such. (p14)

We have passed it on to the children, and the children have taken it over. And have also started doing that. And they have also passed that on to their children. And that’s what you see then. You see that developing in front of your eyes. And then that only gives you pleasure. That’s what you did it for. (p7)

**Enjoyment**

Seventeen participants articulated the narrative of enjoyment, which accentuates enjoying old age. They expressed this as enjoying pleasant things in old age, stressing the importance of enjoyment in old age, and/or enjoying the time they have been given. Many participants enjoyed traveling, short trips, and/or organized activities: “But, I mean, well, then I enjoy myself so immensely! Then, then I think, gosh, I have still been allowed to experience this as well. Lived to experience this, you know?” (p23). Enjoyment of ordinary things was also mentioned: “Yes, I try to do so every day. Yes, surely. I want to enjoy all things. Yes. Whether I am eating, or, well, drinking coffee, or other things, or having conversations, just enjoy it” (p16). Some participants mentioned enjoying their old age in general: “I had never thought I would have such a rich carefree old age! Because we don’t have to worry about a thing, right?” (p23). Another stated about his last stage of life: “And now celebrating with the children, with the grandchildren. Celebrating. I’m not yet at the end. No.” (p7).

**Aging as decline**

The master narrative of aging as decline, which was conveyed by all participants, stipulates that old age brings deterioration. Participants expressed this narrative by mentioning being ill; having (had) certain diseases, disorders, or fractures; having (had) a stroke or TIA; needing medicine or physical aids; having pain; suffering from forgetfulness or mental decline; having certain
disabilities; suffering from vision, hearing, or speech impairments; no longer being able to do certain things and/or feeling tired:

Yes, so that is a getting slow. I’m also becoming stiffer. And, well, I’m more quickly overloaded, mentally overloaded. That, that, I really notice that. I cannot take in many things at the same time any more. That, well, so that is a process of aging. (p12)

This narrative was also expressed by describing the awareness of decline in old age and/or the decline of others. The master narrative of aging as decline has four subnarratives: isolation, dependence, sad old age, and (not) being a burden.

**Isolation**
Twenty-five participants voiced the narrative of isolation, which revolves around the loss of social connections in old age. They expressed this as having experienced the decline and/or death of their partner:

You live a life, together, you build it up together, together you, well, had children. You raised them together. And then one drops out. Starts to drop out. And then falls out to such extent that, that suddenly she’s lost everything. That she thought to control. Especially her, well, her, her mind. (p7)

They also expressed this narrative as (greatly) missing their partner; having divorced; having lost many friends, siblings, neighbors, or other family members; and/or having little family (left): “And I do, do find that unpleasant. I’m the only one. And I am the youngest. And I am the only one who’s left. The rest have all gone” (p15). Additionally, participants mentioned worrying about and/or having lost (adoptive/foster) (grand-)(step-)(grand-)children or finding it more difficult to make new friends in old age:

But well, I buried 12 friends. In my time. And I’m left. And in old age it is harder to make friends. Youngsters don’t come, and that’s logical. When I was young I would not sit with an 80-year-old woman, right? Maybe a small visit, but surely no friendship. (p1)

Moreover, participants mentioned feeling lonely, the loneliness of older people around them, no longer feeling fully engaged in society, feeling misunderstood, missing people, lacking support from others, and/or having difficulty communicating with fellow residents: “I cannot make contact with them. I, well, it’s terrible. I cannot have a conversation with them. I … they don’t understand you” (p4).

**Dependence**
Twenty-two participants uttered the narrative of dependence, which expounds dependency on others. Participants expressed this as being dependent on professional care, home help, or traveling assistance:
But also at a certain moment you have to set aside your pride and then indeed say: “I cannot do that, will you help me?” You have to learn that. You really have to learn that. If you, well, you wish to stay independent, right? Of course! (p6)

They also expressed it as not daring or not being allowed to do certain things:

I really had to get used to the fact that the medicines you take are under lock and key. […] Well, I really had to get used to not being able to arrange that myself. […] That takes getting used to. Because at home you did it yourself, right? (p21)

Sad old age
Twenty participants articulated the narrative of a sad old age, which portrays old age as sorrowful. They described this as feeling or having felt sad, down, or depressed, having wished to be dead (see also Fortuin, Schilderman, & Venbrux, in press), not much liking growing old, and/or not seeing a positive side to growing old: “Let’s get this straight right away: Everybody wants to grow old, but nobody wants to be old” (p17). Only one participant explicitly referred to her old age itself as sad: “Such a pity that these are my last years, so sad” (p3). Further in the interview she mentioned: “They shouldn’t say: a blessed old age. Because you don’t have it” (p3).

(Not) being a burden
Ten women expressed the narrative of (not) being a burden, which recounts the wish not to burden others. While nine expressed their intention not to be or become a burden on others (especially on their children or other family members), one felt like a burden upon her nephews:

I do have, yes, some family, but that are a few, two nephews, I have. And they care for me quite well. And, well, but it is quite unpleasant for them. They always have to, well, of course every once in a while, come here. Both of them. (p15)

For four women their intention not to burden their family influenced their decision or willingness to live in a care home or serviced apartment: “I really would no longer wish to live by myself anymore. That’s much too … You burden the children. And they have a whole life of their own, right?” (p23). Also, for five women their wish not to be a burden on others influenced their arrangements for after death or their preferences concerning euthanasia (see also Fortuin, Schilderman, & Venbrux, in press).

Aging as inner growth
The master narrative of aging as inner growth, which was voiced by 18 participants, portrays aging as bringing about inner development.
Participants expressed this narrative by describing phases of growth in their life story; having gained a new outlook on things due to aging and/or benefiting from their life experience; telling how going through a difficult experience strengthened them; mentioning being interested in and/or studying religious, philosophical, or spiritual books or themes; practicing meditation, yoga, or other alternative spiritual practices; telling about (the importance of) living consciously, introspection and inner growth; and/or viewing the process of aging as ripening:

And actually it is only now that I also had more time to read, and such, that I have realized, yes, actually I wanted to have a, well, spiritual content in my life. (p12)

Well, I … I think that you, that is of course a form of wisdom, that you have naturally seen many things already, so to speak. Right? So the … I think that there you learn that a diversity of life is possible. (p22)

We, we grow from day to day. Only, please, keep the, the door towards growth open. (p14)

The master narrative of aging as inner growth has four subnarratives: interdependence, gratitude, acceptance, and repose.

Interdependence
The concept of interdependence is grounded in the realization that in intimate relationships dependency should not be associated with incompetence. On the contrary, intimate relationships are fundamentally interdependent: They are mutual personal connections both having an effect on the partner and on the person involved (Baltes, 1996, p. 11). All participants uttered the narrative of interdependence, which emphasizes the importance of reciprocal social connections in later life. They expressed this narrative by describing care and support given to or received from their partner, children or other family members, friends, neighbors, strangers, or pets; by saying they value communication and contact with others; and also by describing reciprocity, affection, good contact, and/or friendship in the relationship with their caregivers. Participants mentioned reciprocity in the contact with caregivers by giving help, consideration, gifts such as cake or self-made paintings, or advice to their caregivers and expressing their gratitude toward them: “I mean, if yesterday they gave my room a thorough cleaning, so to speak: ‘Oh, awfully great! I’m so happy that you nicely cleaned it!’ That cheers a person up, doesn’t it?” (p11). Concerning the reciprocity in the relationship between participants and their (grand-)children, one participant stated: “And we notice that we can still mean something for those children” (p14). Another mentioned that her children said to her: “You have done enough for us, now it’s our turn” (p23). About the reciprocal support exchanged between neighbors one participant mentioned:
But once I painted a cow. A big cow. And during the night I place it in front of the window in that room. And my neighbor, she has a goose but she always forgets it. And she looks in the morning whether my cow is still there, and if it is still there at 10 o’clock in the morning she enters my apartment. I find that a safe idea, right? (p8)

**Gratitude**
Twenty-five participants conveyed the narrative of gratitude, which emphasizes gratefulness for the life that has been given. Participants expressed this narrative as being grateful for the long life they have been given, for their health, for certain experiences, for the care and support given by others, for their partner or children, for their living conditions, and/or for their life: “I have every reason to be grateful at my age. I can still walk well, the brains still function. What else could I wish for? That’s something to be grateful for, isn’t it?” (p1). Participants also voiced this narrative by looking back positively on their life or on certain periods in their life: “Had a very nice childhood. With great parents” (p1). While many participants mentioned being grateful in general or toward other people, some expressed their gratitude toward God, Mary, other saints, or angels:

Be grateful for every day you may open your eyes. I had never thought, after everything I have had, madam, that I would live to be this old! Because sometimes my children say that: Mum, you have a guardian angel. And now I felt that again. (p23)

**Acceptance**
Twenty-four participants articulated the narrative of acceptance, which encourages embracing the difficulties and challenges in later life. They expressed this as accepting, doing their best to accept and/or having adapted themselves to the loss of abilities, accepting other difficulties in later life, accepting certain difficult life experiences, accepting people and/or things as they are, and/or accepting the approach of death. Concerning acceptance of the loss of abilities, participants narrated:

It’s just part of your age, I think, that every time you take a step down. That’s just how it is. Yes. So, no, that doesn’t trouble me. (p8)

You know, of course you encounter things that you think: That’s no longer possible. I think, ‘Oh, well, that’s no longer possible. Well, all right then.’ You just have to adjust to that. (p11)

But in the end, you know, you lose many things, eh? When you get older. You sometimes, and you sometimes get lost. [laughs] But that is not so important. (p15)
Repose
Eleven participants voiced the narrative of repose, which portrays old age as bringing rest. Participants expressed this as not having to do so many things anymore and/or having a peaceful life. One expressed this as: “Well, yes, of course you have more time. I’ve got plenty of time. But, well, but I don’t have to do anything anymore” (p24). Another said: “And that is old age: rest” (p23).

Experiential religious narratives
Experiential religious narratives refer to how participants experience God or the supernatural in their lives.

God helps/guides/saves me
Fifteen participants uttered the narrative “God helps/guides/saves me,” which expresses a beneficial personal experience ascribed to God or other supernatural beings. Participants expressed this as feeling guided, helped, or protected by and/or trusting in God, Jesus, Mary, other saints, angels, or the Holy Spirit, feeling grateful toward them and/or feeling supported by their faith:

That God figure is number one for me. I mean, that is, that is … also my help. God, I’ve had that often enough. That sometimes you say: “Jesus, now you must help me once more.” And then it happened, or sometimes it didn’t, but at least, I have that. (p17)

I say, do you know how I experience Easter? Sunday morning, when I arrive in church, I say: “Hello Lord, we are, you are back again, fortunately. We are happy again. Because you have risen for us.” (p23)

Also in that I saw the guidance of the Holy Spirit. Yes. That’s, that’s my idea. That’s my idea. But I live in that. And I feel happy with that. (p7)

God listens to me
Fifteen participants voiced the narrative “God listens to me,” which articulates communication with God or other supernatural beings. This was expressed by participants as talking to God, Mary, other saints or angels, and/or praying. One participant described God as “Well, just someone you can talk to” (p9). Another mentioned talking about everyday matters: “Oh, good Lord, how well I have eaten today. So I sometimes talk then, in myself, right?” (p23). Two Catholic women mentioned pouring out their heart before Mary: “Well, then I say that to Mary. Then I say: ‘Well, just tell your son that I find it no good at all’” (p6).

Things happen for a reason
Thirteen participants stated the narrative “Things happen for a reason,” which refers to destiny. They expressed it as the feeling that things are
predestined, that things are not a coincidence, that (certain) things had to happen, and/or that things happen for a reason: “Yes, strange things can happen in life. I think, that must be predestined, such a thing. It must be so” (p1). Another mentioned: “And then, well, I think to myself, then it must be so, because nothing happens by chance” (p6). Although this narrative was mostly expressed by religious participants, it was also expressed by one participant who doubted her faith and two who were not religious:

What was, let’s say, at that moment a kind of disastrous situation, that, well, turned out, in the course of history, to have been a lucky number. [laughs] Sometimes I must think about that. How is it possible, right? That something that is really not funny was later, well, predestined … not to get bombed flat. (p21)

**Ontological religious narratives**

Ontological religious narratives refer to the nature of God and/or the origin of life and death.

**God/(after-)life is a mystery**

Thirteen participants expressed the narrative “God/(after-)life is a mystery,” which refers to a cosmic mystery. Five religious participants stated not knowing, not being able to know, or not having to know who God is: “And I don’t have an image of Jesus or of God either. Whether it is a man with a beard, or a woman. I don’t know” (p23). Two religiously unaffiliated and one religious participant referred to the origin of life in general or their life in particular as a mystery: “That’s just a mystery you will never ever solve” (p25). Nine participants who believed in an afterlife and two who doubted the existence of an afterlife said they could not or did not have to know the nature of this afterlife: “Just let it remain a secret… . Isn’t it interesting, that there is still something, well, something mysterious?” (p6).

**God gives and/or takes life**

Eleven participants expressed the narrative “God gives and/or takes life,” which portrays life and death as determined by God. Five participants only mentioned the life-giving part of this narrative, by portraying God as creator, manager of nature and/or giver of life. Three participants only mentioned the life-taking part of this narrative, by referring to dying as being taken by the Lord or by “them” or by expressing their hope to feel that God exists when they die. Three expressed both aspects of this narrative. One of them expressed the life-giving part as: “I only know that, well, my Creator is a Spirit, a Father, a Son, and a Holy Spirit. In spiritual form. I think” (p7). Referring to the life-taking part, he mentioned about his wife: “She has been taken by the angels from Ephrata” (p7).
**God embraces all**

Four participants expressed the narrative “God embraces all,” which stipulates that all creatures are embraced by God. They expressed this narrative by referring to God as “all-embracing spirit” (p7) or “total animation of my existence” (p14), by expressing their belief that everyone forms the Godhead together or that every creature is contained in God (see also Fortuin, Schilderman, & Venbrux, 2018).

**Critical religious narratives**

Critical religious narratives express the encounter between critical thinking and religious beliefs or practices.

**Why is religion acted out thus?**

Twenty participants uttered the narrative “Why is religion acted out thus?,” which criticizes human performance of religion. They expressed this by criticizing religious precepts, dogmas, interdictions, practices, old-fashionedness, religious conflict and violence, and/or misconduct of clerics or religious teachers:

Previously the church books had to be black. Right, because they used to have red church books, and someone said, no, it has to be black, because that’s, well, that, well, why I don’t know either. And, well, all those, those outward appearances that are not important, I think, right? (p8)

**Why doesn’t God act?**

Six females and two males expressed the narrative “Why doesn’t God act?,” which questions how a loving God can allow so much suffering in the world. Participants expressed this by doubting whether God exists because of all the suffering in the world or their personal suffering, wondering why or being angry that God doesn’t do anything about this suffering, feeling sad because God doesn’t answer their prayers, or not believing in God because of the suffering in the world. Of the participants who expressed this narrative, five believed in God: “Sometimes I’m also angry, and, well … just do something about it!” (p9). Also, two doubted the existence of God, and one did not believe in God:

The God who is supposed to be almighty, and who, well, why doesn’t he do something about it? Right? All, all those wars. All those people dying from hunger. Yes, all those terrorist groups. Look at all the things going on in Africa. About which nothing is being done. Right? And if you are such a loving God, then I would say: Do something about it! And, er, but that doesn’t happen. (p21)
**How can God be explained?**

Six males expressed the narrative “How can God be explained?,” which articulates critical thinking about the existence (or nonexistence) of God. They expressed this as having formed or modified their image of God based on their scientific or scholarly knowledge, doubting, defending, or refuting the existence of God based on such knowledge, and referring to historic sources concerning the existence of Jesus. One male who expressed this narrative did not believe in God, one doubted his belief, and four believed in God:

I feel, do feel it as God, God exists. But … whether it is true like that? That’s past. I, I greatly love history, right? From, from long ago, before the years of Christ, right? And then, well, let’s say, that Christ was crucified, that, that was with Pontius Pilate. Why, why, that’s already so long ago now, isn’t it? And still … nothing happens anymore, does there? You’re not allowed to doubt. But it’s like that, isn’t it? (p20)

**Correlations**

Table 2 shows Kendall’s tau-b correlation coefficients ($\tau_b$) for the correlation between the relative use of narratives of aging and of religious narratives ($N = 26$). For all significant correlations ($p < .050$) BCa bootstrapped 95% confidence intervals of $\tau_b$ are shown. None of these confidence intervals cross zero, except for the correlations between the narrative of gratitude and of “God embraces all” (which crosses zero by .04; $p = .048$) and between the narratives of repose and “God gives and/or takes life” (which crosses zero by −.02; $p = .042$). These two correlations are the only significant correlations for which $p > .040$; for all the other significant correlations $p < .040$. This gives confidence that, at least for the other significant correlations, there is a genuine effect in the population. Our analysis shows that the most significant relationship ($p < .001$) is a positive relationship between the narrative of inner growth and the religious narrative “God/(after-)life is a mystery.” Three relationships have a significance of $p < .010$: the positive relationship between the narrative of inner growth and the religious narrative “Things happen for a reason” and the negative relationships between the narrative of active aging and “God gives and/or takes life” and between the narrative of isolation and “God gives and/or takes life.” Other significant positive relationships (at $p < .050$) were found between generativity and “Things happen for a reason”; between enjoyment and “God listens to me”; and between repose and “God gives and/or takes life.” Other significant negative relationships (at $p < .050$) were found between positive aging and “Why doesn’t God act?”; between dependence and the religious narratives “God listens to me” and “How can God be explained?”; between (not) being a burden and “How can God be explained?”; between sad old age and the four religious narratives “God helps, guides, or saves me,” “Things happen for a reason,” “God gives and/or takes life,” and “God/(after-)life is a mystery”;


Table 2. Kendall’s tau-b correlation coefficients (τb) for the correlation between the relative use of narratives of aging (vertical) and of religious narratives (horizontal) (N = 26). For significant correlations (p < .050) bias corrected and accelerated (BCa) bootstrapped 95% confidence intervals based on 1,000 bootstrap samples are reported in square brackets.

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<tr>
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<th>God helps, guides or saves me</th>
<th>God listens to me</th>
<th>Things happen for a reason</th>
<th>God gives and/or takes life</th>
<th>God/(after-) life is a mystery</th>
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<td><strong>Sad old age</strong></td>
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<td>−.37*</td>
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*p < .05; **p < .01; ***p < .001.
between inner growth and “Why doesn’t God act?”; between interdependence and “Things happen for a reason”; and between gratitude and “God embraces all.”

Discussion

In the introduction we stated that the cultural narratives of aging offered by contemporary Western societies may complicate the task of keeping a satisfying life story going throughout the entire life course (Bohlmeijer et al., 2011; Freeman, 2004; Laceulle & Baars, 2014). The qualitative analysis indicates three master narratives of aging: active aging, aging as decline, and aging as inner growth. The master narratives of active aging and aging as decline have been mentioned extensively in previous research (Biggs, 2001; Bohlmeijer et al., 2011; Freeman, 2004; Gullette, 2004; Kesby, 2017; Laceulle & Baars, 2014; Liang & Luo, 2012). As subnarratives of active aging, we found positive aging, independence, generativity, and enjoyment, and as subnarratives of aging as decline we found isolation, dependence, sad old age, and (not) being a burden. Because the latter narrative reflects a view on older people as a burden on society (Biggs, 2001; Kesby, 2017), we considered it a subnarrative of aging as decline, although the wish not to be a burden in itself emphasizes the intention to stay independent. The master narrative of aging as inner growth resembles the counternarrative of self-realization proposed by Laceulle and Baars (2014), which is grounded in attention for human growth and flourishing throughout the life course. As subnarratives of aging as inner growth we found interdependence, gratitude, acceptance, and repose.

The master narrative of active aging, which emphasizes an active, positive, independent, productive, and joyful image of old age, may strengthen older people’s pursuit of a good life. However, by presenting an independent and healthy agent as its ideal (Laceulle & Baars, 2014), this narrative doesn’t help older adults to embrace the setbacks that may accompany old age—except for the subnarrative of positive aging, which puts the challenges of later life in perspective with humor. The master narrative of decline, on the other hand, does acknowledge the drawbacks of aging. However, it does not offer any consolation or alleviation in the face of the hardships of later life. The narrative of aging as inner growth offers a way out of the polarity between active aging and aging as decline. Instead of focusing on either independence or dependence, the narrative of aging as inner growth focuses on interdependence. This emphasis on interdependence resembles the proposed counternarrative of vulnerability by Kesby (2017), which stresses that human dependence and interdependence are inevitable and arise from a fundamental human vulnerability that characterizes all age groups. Instead of emphasizing either positivity and enjoyment or sadness, the narrative of inner growth emphasizes acceptance of those things that cannot
be changed and gratitude for the blessings that have been given. Instead of either focusing on activity and generativity or on the loss of abilities, the narrative of inner growth perceives the opportunity of repose that emerges in later life as a possibility for inner growth and reflection. The narrative of aging as inner growth, with strives for a balance between two opposites, is in line with the discourse of harmonious aging proposed by Liang and Luo (2012). Harmony emphasizes the significance of maintaining a dynamic balance in all spheres of life and addresses the importance of the interdependence of human relationships (Liang & Luo, 2012). The aim to transcend the dualism of activity and disengagement in the evaluation of aging was also formulated by Tornstam (2005, p. 4) when describing his theory of gerotranscendence. Certain aspects of gerotranscendence (Tornstam, 2005, p. 41), such as a new perception of time, space, objects, life, and death and an increase in time spent in “meditation” resemble elements of the narrative of inner growth as expressed by our research participants.

In the introduction we stated that religions offer worldviews—created through narrative and portrayed in stories and symbols, rituals, and moral guidelines—that have the potential to account for, and even celebrate, the perceived ambiguities, puzzles, and paradoxes that accompany human aging (Ganzevoort, 2014; Geertz, 1973). Therefore, we investigated the correlation between the relative use of narratives of aging and religious narratives. The most significant positive correlations we found are between aging as inner growth and the religious narratives emphasizing cosmic mystery ($p < .001$) and destiny ($p < .010$). Indeed inner growth, or transformation of the self, may be an expression of what is involved in being religious (Goodenough, 1999). Other positive correlations we found (at $p < .050$) indicate that mentioning of generativity is positively correlated with mentioning of things happening for a reason, mentioning of enjoyment with mentioning of communicating with God, and mentioning of repose with mentioning of God as giving and/or taking life. The most significant negative correlations we found ($p < .010$) are between the religious narrative “God gives and/or takes life” and the narratives of active aging and isolation. Other negative correlations we found (at $p < .050$) indicate that mentioning of positive aging is negatively correlated with mentioning of God’s failure to act; mentioning of dependence is negatively correlated with mentioning of communication with God and critical thinking about the (non-)existence of God; mentioning of (not) being a burden is negatively correlated with critical thinking about the (non-)existence of God; mentioning of a sad old age is negatively correlated with mentioning of supernatural help or support, destiny, God giving and taking life, and cosmic mystery; mentioning of inner growth is negatively correlated with mentioning of God’s failure to act; mentioning of interdependence is negatively correlated with mentioning of destiny; and mentioning of gratitude is negatively correlated with mentioning of God embracing all.
When evaluating the correlation between the relative use of religious narratives and narratives of aging, it turns out that the relative use of affirmative religious narratives (“God listens to me”; “Things happen for a reason”; “God gives and/or takes life”; “God/(after-)life is a mystery”) tends to be positively correlated with the relative use of supportive narratives of aging (generativity, enjoyment, inner growth, and repose). On the other hand, the relative use of affirmative religious narratives (“God helps, guides, or saves me”; “God listens to me”; "Things happen for a reason”; “God gives and/or takes life”; “God/(after-)life is a mystery”) tends to be negatively correlated with the relative use of enfeebling narratives of aging (dependence, isolation, and sad old age). The religious narrative “How can God be explained?,” which is in itself neither affirmative nor negating but inquisitive, was also found to be negatively related to two invalidating narratives of aging (dependence and [not] being a burden). The latter relationship can probably be attributed to gender effects because (not) being a burden was only expressed by females, and critical thinking about the (non-)existence of God was only expressed by males. Moreover, the relative use of the negating religious narrative “Why doesn’t God act?,” which reflects anger, doubt, frustration, and/or disbelief, is negatively correlated with the relative use of two supportive narratives of aging (positive aging and inner growth). The critical religious narrative “Why is religion acted out thus?” was not found to be significantly correlated with narratives of aging. Probably this can be explained by the observation that this narrative does not so much negate (the experienced relationship with) God or the supernatural but merely criticizes the way religion is performed by humans.

We found three exceptions to the observation that affirmative religious narratives tend to be positively correlated with supportive narratives of aging and vice versa. First, the affirmative religious narrative “God gives and/or takes life” is negatively related to the inciting narrative of active aging. This suggests that more mentioning of the agency of God (as bringer of life and death) hangs together with less mentioning of individual agency. Second, the affirmative religious narrative “Things happen for a reason” is negatively related to the reciprocal narrative of interdependence. This suggests that a greater emphasis on transcendent determination (by God or fate) hangs together with less emphasis on immanent reciprocal relationships. Third, the affirmative religious narrative “God embraces all” is negatively related to the supportive narrative of gratitude. Apparently, more mentioning of a holistic image of God hangs together with less mentioning of gratitude, although this relationship is only just significant ($p = .048$), and the BCa bootstrapped 95% confidence interval of $\tau_b$ crosses zero, indicating that there may not be a genuine effect in the population.
Although there are some exceptions, overall affirmative religious narratives were found to be positively correlated with supportive narratives of aging and negatively correlated with invalidating narratives of aging, and negating religious narratives were found to be negatively correlated with supportive narratives of aging. This stresses the importance of pastoral counseling and spiritual care in geriatric settings. Pastors and chaplains can help older adults reflect on their internalized narratives of aging and religious narratives. Such reflections may help older adults to embrace more supportive images of aging that, for their part, can be strengthened by affirmative religious narratives.

**Limitations**

This study is based on a purposeful sample, which was not statistically representative. Factors such as the geographical location of the study, the voluntariness of participation, and the focus of intermediaries who contacted participants may have biased the results. Moreover, the correlation analysis is based on the relative use of religious narratives and narratives of aging. Such a procedure disregards the observation that the frequency of utterance of narratives does not always correspond with the salience of these narratives for the people expressing them.

**Notes**

1. In two cases, the information letter had to be read aloud to participants because of visual impairments.
2. All presented quotes were translated from Dutch into English by the first author. Code p10 indicates a quotation from participant number 10.
3. For the relationship between “God gives and/or takes life” and repose ($p = .042$), the BCa bootstrapped 95% confidence interval of $\tau_b$ crosses zero, indicating that there may not be a genuine effect in the population.
4. BCa confidence interval based on 997 samples.
5. BCa confidence interval based on 997 samples.
6. BCa confidence interval based on 991 samples.

**Declarations of interest**

None.

**Disclosure statement**

No potential conflict of interest was reported by the authors.

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