

An Exploration of Body Image and Psychological Wellbeing in
Older Maltese Men

A Qualitative Study

Adriana Vella

A dissertation submitted in partial fulfilment of the requirements
of the Master of Gerontology and Geriatrics

Department of Gerontology
Faculty of Social Wellbeing
University of Malta

May 2018



L-Università
ta' Malta

University of Malta Library – Electronic Thesis & Dissertations (ETD) Repository

The copyright of this thesis/dissertation belongs to the author. The author's rights in respect of this work are as defined by the Copyright Act (Chapter 415) of the Laws of Malta or as modified by any successive legislation.

Users may access this full-text thesis/dissertation and can make use of the information contained in accordance with the Copyright Act provided that the author must be properly acknowledged. Further distribution or reproduction in any format is prohibited without the prior permission of the copyright holder.

Faculty of Social Wellbeing**DECLARATIONS BY POSTGRADUATE STUDENTS**

Student's I.D: 51992(M)

Student's Name & Surname: Adriana Vella

Course: Master of Gerontology and Geriatrics

Title of Dissertation: An Exploration of Body Image and Psychological Wellbeing in Older Maltese Men

(a) Authenticity of Dissertation

I hereby declare that I am the legitimate author of this Dissertation and that it is my original work.

No portion of this work has been submitted in support of an application for another degree or qualification of this or any other university or institution of higher education.

I hold the University of Malta harmless against any third party claims with regard to copyright violation, breach of confidentiality, defamation and any other third party right infringement.

(b) Research Code of Practice and Ethics Review Procedures

I declare that I have abided by the University's Research Ethics Review Procedures.

As a Master's student, as per Regulation 58 of the General Regulations for University Postgraduate Awards, I accept that should my dissertation be awarded a Grade A, it will be made publicly available on the University of Malta Institutional Repository.



Signature of Student

ADRIANA VELLA

Name of Student (in Caps)

2nd May 2018

Date

ABSTRACT

Given global population ageing and the fact that Malta is experiencing a significant increase in the proportion of older adults in its population, research into ageing issues has become a national priority. Although empirical evidence illustrates the correlation between body-image, self-esteem and quality of life, the relationship among older adult men has been highly neglected. The aim for this study was to explore the relationship of body image and psychological wellbeing through the lived experience of older Maltese men. By exploring the participants' individual experience it was possible to delve into a deeper understanding of how older adults perceive their own ageing body and how such changes influence one's physical and psychological quality of life. A qualitative research design was used and a total of 12 participants aged between (64-87) participated in audio-recorded semi-structured interviews. Interpretative phenomenological analysis was used to interpret the data. Several influential factors were highlighted within this study and were grouped into six superordinate themes: psychological well-being in late adulthood, physical wellness in later life, appearance investment in old age, the influence of personal attributes on psychological well-being, active involvement within society and social influence at older ages. The results suggested that older adult men participate in diverse practices in order to maintain their appearance and image. Moreover, for these older men, it was evident that age and appearance do not influence an individual's ability to participate in social and personal activities. Although physical constraints were demonstrated to be highly influential on one's quality of life, ageing changes and other related issues were suggested to postulate positive emotional wellness, self-confidence and positive portrayal of self-esteem. In addition, societal influences, such as family roles, media and peer comparison were suggested to play a vital role in maintaining one's appearance and image. Thus, these findings support the idea that body image is a complex phenomenon, influenced by diverse factors, such as individualistic perceptions and social pressures, which in turn influence an individual's physical and psychological well-being.

Keywords: Maltese older men, body image, self-esteem, self-satisfaction, psychological well-being, physical wellness.

ACKNOWLEDGEMENTS

I would like to express my gratitude towards my tutor, Dr. Christian Borg Xuereb, for his constant support, guidance and constructive feedback. I also appreciate his willingness and patience to offer his time, especially nearing the end of this work.

Furthermore, I would sincerely like to thank my respondents, I am grateful for the time and patience they put aside to contribute to my research.

A special thanks goes to my fiancé, whose guidance and patience throughout these past months inspired and motivated me in order to complete this project.

Finally, I would like to thank my Mum and Dad for their unconditional support and unwavering confidence in my abilities through the duration of my studies.

TABLE OF CONTENTS

DECLARATION OF AUTHENTICITY	i
ABSTRACT	iii
ACKNOWLEDGEMENTS	ii
LIST OF TABLES.....	vii
CHAPTER 1.....	1
INTRODUCTION.....	1
1.1 Background of Study	1
1.2 Older Adults in Malta.....	3
1.3 Aims and Significance of Study	3
1.4 Overview of Chapters	4
CHAPTER 2.....	5
LITERATURE REVIEW.....	5
2.1 Introduction.....	5
2.2 Defining Body Image and Well-being	7
2.3 Ageing Body and Body Image	8
2.4 Body Satisfaction	9
2.5 Bodily Concerns and Dissatisfaction.....	10
2.6 Social Pressures.....	11
2.7 Spousal Relationships	12
2.8 Self-Esteem	13
2.9 Body Image and Psychological Well-being.....	14
2.10 Experiencing Body Image in Later Life	16
2.11 Body Image Development throughout the Lifespan.....	17
2.11.1 Late Adulthood	17
2.12 Conclusion	19
CHAPTER 3.....	20
METHODOLOGY.....	20
3.1 Introduction.....	20
3.2 Aim	20
3.3 Research Questions.....	20
3.4 Research Plan.....	20
3.5 Rationale for Qualitative Research	21
3.6 Rationale for Interpretive Phenomenological Approach.....	21
3.7 Research Design	22
3.8 Research Participants.....	23
3.9 Method of Data Collection	24
3.10 Method of Data Analysis	25
3.11 Reflexivity.....	26
3.12 Ethical Considerations	27
3.13 Trustworthiness and Rigour.....	27
3.14 Conclusion	28
CHAPTER 4.....	29

RESULTS.....	29
4.1 Overview.....	29
Table 1: Participant Demographic Background.....	30
Table 2: Participant Characteristics.....	30
4.2 Presentation of Analysis.....	31
Table 3: Summary of Superordinate and Subordinate themes.....	31
4.3 Psychological Well-being in Late Adulthood.....	32
4.4 Physical Wellness in later life.....	39
4.5 Appearance Investment in Old Age.....	45
4.6 The Influence of Personal Attributes on Psychological Well-being.....	50
4.7 Active Involvement within Society.....	55
4.8 Social Influence at Older Ages.....	60
4.9 Conclusion.....	67
CHAPTER 5.....	68
FINDINGS AND DISCUSSION.....	68
5.1 Psychological Well-being in Late Adulthood.....	68
5.2 Physical Wellness in Later Life.....	70
5.3 Appearance Investment in Old Age.....	72
5.4 The Influence of Personal Attributes on Psychological Well-being.....	74
5.5 Active Involvement within Society.....	75
5.6 Social Influence at Older Ages.....	76
5.7 Conclusion.....	79
CHAPTER 6.....	80
CONCLUSION.....	80
6.1 Summary of Findings.....	80
6.2 Strengths of this Study.....	81
6.3 Limitations.....	81
6.4 Implications for Future Research.....	82
6.5 Recommendations to Education.....	82
6.6 Implications for Practice.....	83
6.7 Recommendations to Policies.....	83
6.8 Concluding Thoughts.....	84
REFERENCES.....	85
APPENDIX A.....	108
Research Ethics Proposal Acceptance Letter.....	108
APPENDIX B.....	109
Consent Form.....	109
APPENDIX C.....	110
Participant Information Sheet.....	110
APPENDIX D.....	112
Participant Debrief.....	112
APPENDIX E.....	113
Demographic Background Profile.....	113
APPENDIX F.....	114

Figure Rating Scale	114
APPENDIX G	115
Participant Body Image perceptions	115
APPENDIX H	116
Interview Schedule	116
APPENDIX I	119
Phenomenological participant description	119
APPENDIX J	122
Transcript Samples	122

LIST OF TABLES

Table 1: Participant Demographic Background.....	30
Table 2: Participant Characteristics	30
Table 3: Summary of superordinate and subordinate themes	31

CHAPTER 1

INTRODUCTION

1.1 Background of Study

Older individuals comprise a rapidly increasing proportion of the world's population. According to the World Health Organisation (WHO, 2011, p.2) "The number of people aged 65 or older is projected to grow from an estimated 524 million in 2010 to nearly 1.5 billion in 2050". With increasing age, social and physical changes are highly influential on one's self-regard and overall well-being (Cho, Martin, Margrett, MacDonald & Poon, 2011). Manifested in many ways, several changes are experienced in later life, including changes in the skin, such as wrinkles and age spots, hair loss and greying hair, decline in overall physical function and onset of various health conditions. Complementing such changes, societal adjustments are also evident, including decrease in social participation, social interactions and the experience of age related discrimination (Steptoe, Deaton & Stone, 2015). Moreover, although such alterations represent the normal experiences of ageing transformations, individuals are predisposed to the influences of modern cultures that highly regard the importance of youthfulness and attraction (Jankowski, Diedrichs, Williamson, Christopher, & Harcourt, 2014).

Becker and colleagues (2013), illustrate the experience of sociocultural pressures on older adults in order to conform to societal ideals of maintaining a youthful appearance. Such social demands, may influence an individual's self-regard and overall body image, which in turn impact one's thoughts, feelings, behaviours and their overall attitude towards their physical appearance and function (Cash, 2002). Body image is a multifaceted psychological experience, involving an individual's physical appearance and body related self- perceptions and self-conscious emotions (Cash, 2004; Grogan, 2008).

Studies have shown that body image plays an important role in building an individual's self-concept (Kékes-Szabó, 2015; Stowers & Durm, 1996; Janelli, 1993). Body dissatisfaction is illustrated as the negative emotional and psychological consequences of an individual's evaluation of their body shape, weight and body parts (Bearman,

Martinez, Stice & Presnell, 2006). Furthermore, body dissatisfaction has been associated with an increased likelihood of developing various psychopathologies, such as depression and anxiety. Davison and McCabe (2005), suggest that such disturbances in body image impact one's psychological well-being, self-esteem and quality of life as illustrated in their study amongst adults aged between 50-86 years of age.

Peat, Peyerl and Muehlenkamp (2008), conducted a review of available literature on body image and eating disorders in older adults, their findings suggest that research on body image has mainly focused on young adults and few have focused on the impact of body image throughout the lifespan, especially in older adults. Findings on older male adult experiences on body image have not been well documented (McCabe & Ricciardelli, 2004), especially those in Maltese adult men. However available research proposes that body dissatisfaction is not uncommon amongst men, particularly with body weight and muscularity (Clarke & Korotchenko, 2011; Furnham, Badmin, & Sneade, 2002).

Men's body image may be described as a complex phenomenon with body image concerns becoming more prevalent throughout the life course, resulting from an accumulation of negative health and psychological consequences (Grogan, 2008; McArdle & Hill, 2007). Further research suggests that older men are more likely to experience decrease in self-esteem and feelings of attractiveness with later life (Baker & Gringart, 2009; Paxton & Phythian, 1999). In contrast some studies postulate that older men are less concerned about their physical well-being and age-related bodily transformations, displaying a higher sense of self in comparison to older women, (Demarest & Allen, 2000; Ferraro et al., 2008). Furthermore, McCabe and Ricciardelli (2004), suggest that appearance and image in older adult men are not only associated with physical looks but also related to overall health, function and general wellbeing.

In addition, body image assessment in men often suggests a heightened desire for increased muscularity together with a decrease in body fat, in order to attain their ideal muscular physique, highlighting the dissimilarity to women's desire for weight loss (Nowell & Ricciardelli, 2008). Moreover, Reddy (2013), suggests that men often consider themselves of normal weight regardless of their present shape and figure.

Focusing on body image in older Maltese men will provide an opportunity to investigate the individual's experience with regards to body image and psychological well-being, thus allowing to expand, the knowledge on age-related issues which in turn will benefit service providers and health promotion in older adults.

1.2 Older Adults in Malta

An ageing population has shown great development in social and demographic aspects of society. In Malta 26% of the population is aged over 60 years (National Statistics Office, 2016). The National Elderly Needs Assessment Survey (2012) states that 14.6% of those aged 75 years and over are living within an institution or rehabilitation hospital. An increase in life expectancy and other social improvements such as welfare policies, pension schemes, improvements in health and positive attitudes towards the ageing population have allowed older individuals to improve their quality of life, as they grow older (Directorate for Health Information and Research, 2012). Moreover, several strategies have been developed in order to aim to improve the lives of the older population, including, National Dementia Strategy, Malta National Life Long Learning Strategy and National Strategic Policy for Active Ageing (Ministry for Education and Employment Malta, 2014; Parliamentary Secretariat for Rights of Persons with Disability and Active Ageing, 2014).

A lack of research on the Maltese population is evident, especially those concerning older Maltese men. Exploring this lacuna is of the essence in order to be able to understand further the experience of body image and psychological well-being in older adult men. This will allow to acquire a better understanding on age-related issues and their psychological influence, moreover such research will enhance practices to promote overall well-being in later life.

1.3 Aims and Significance of Study

The aim of the study is to explore the relationship of body image and psychological wellbeing through the lived experience of older Maltese men. For this study a

qualitative approach will be chosen in order to delve into the ‘how’ and ‘what’ of research (Smith, Flowers & Larkin, 2009). Moreover, the study will be complimented with an Interpretive Phenomenological Analysis as a methodology and semi-structured interviews will be appointed as a method of data collection. As this study will focus on the individual’s experience of body image and psychological well-being, the following questions will be further investigated: A. How do older Maltese men experience and perceive their body image and how are their experiences related to their psychological well being? B. How does body image influence older Maltese men’s self-esteem and quality of life? The main objective will focus on understanding how older adult men experience changes in appearance, and how they cope with the aging process. The relationship between, body dissatisfaction and its impact on psychological well-being, self-esteem and quality of life will also be studied. Additionally, the roles of social pressures will be addressed. It is of significance to focus on the individual’s experiences, personal attitudes, beliefs and behaviours towards appearance and physical changes involved in the ageing process. This will be able to postulate an in-depth perspective of such age- related issues, which will lead to greater awareness to health professionals and the general public. Furthermore, this will provide a comprehensive understanding of the body-image constructs in older Maltese men thus being able to stimulate better-aging practices.

1.4 Overview of Chapters

This dissertation will be structured into six chapters. Chapter one will introduce the topic being explored. Chapter two illustrates the literature on the ageing body and body image, bodily concerns and satisfaction, social pressures and psychological well-being, in relation to the experience in older adulthood. Chapter three will explore the research process and method used to analyse the findings acquired through interviews. Chapter four will depict a detailed account of the participants’ experiences of body image. Chapter five will discuss the results in view of previous literature. As a final chapter, Chapter six will present the limitations of the study, its implications, recommendations for future research and final reflections.

CHAPTER 2

LITERATURE REVIEW

2.1 Introduction

Throughout the ageing process, older adults experience significant changes to their physical appearance and functionality, such as hair loss, change in hair colour, weight changes, use of dentures, hearing and mobility aids and also changes in body shape and skin elasticity. Although such changes represent the normal ageing process, individuals are often influenced by modern cultures that highly value the importance of youthful appearance and attraction (Palmore, 2003).

Moreover, older adults often experience sociocultural pressures in order to conform to ideals of a youthful appearance (Becker et al., 2013). Such social demands may impact one's body image, including thoughts, feelings, behaviours and overall attitude towards their physical appearance and function (Cash, 2002). Furthermore, such sociocultural pressures may cause a significant and detrimental influence on the individual's overall psychological and physical wellbeing, including, depression, low self-esteem, social anxiety, steroid drug abuse, disordered eating and suicide (Cash, 2002; McKinley, 2006; Jankowski, et al., 2014; Rumsey, 2008).

The construct of body image is a multifaceted experience which includes the individual's physical appearance, self-perceptions related to the body, together with attitudes towards one's self, including personal thoughts, beliefs, feelings and behaviours (Reddy, 2013; Cash, 2002). Body Functioning and physical appearance are a central component of body image, which in turn influences the individual's psychological well-being and satisfaction with life (de Souto Barretto, Ferrandez & Guihard-Costa, 2011; Arbour & Martin Ginis, 2008).

The majority of studies on body image and body satisfaction have mainly focused on younger generations and mainly women, with little attention to older men's body image (Meadows, 2011). Media often portrays great emphasis on youthfulness and beauty overlooking the older cohorts, influencing societies perceptions and attitudes (Grogan,

2008). Findings on older male adult experiences on Body Image have not been well documented (McCabe & Ricciardelli, 2004). However available research proposes that body dissatisfaction is not uncommon amongst men, particularly with body weight and muscularity (Clarke & Korotchenko, 2011; Furnham, Badmin, & Sneade, 2002).

Cultural transformations have brought about changes in ideals in preference of a muscular male physique, thus men are becoming more concerned in attaining culturally approved slim and well-toned figures (Clarke & Korotchenko, 2011; Strickland, 2012). Thus, illustrating that body image assessment in men mainly focuses on desire for improved and increased muscular physique and reduction in body fat (Nowell & Ricciardelli, 2008).

Research, which includes older men illustrate several differences from their female counterparts (Kaminski & Hayslip, 2006; Tiggemann, 2004; Rocha & Terra, 2014). Older men are most often less concerned about their physical well-being and age-related bodily transformations and display higher sense of self in comparison to older women (Demarest & Allen, 2000; Ferraro et al., 2008). In contrast some research suggest that older men are more likely to experience decrease in self-esteem and feelings of attractiveness with later life and thus are susceptible to cultural pressures of youthfulness as older adult women (Baker & Gringart, 2009; Paxton & Phythian, 1999).

Moreover, Paxton and Phythian's (1999) study further suggests that older men have less positive attitudes about their body, especially in terms of factors associated with body functioning including physical functioning and decline, co-ordination, agility, and onset of disabling health conditions. Such factors have been found to influence older men's negative perceptions about their body image and thus influencing their psychological well-being (Baker & Gringart, 2009; Hurd-Clarke & Griffin, 2008). In a study conducted by Janelli (1993), men were found to be dissatisfied with their eyes, legs, teeth and health, which were found to be directly linked to body functioning. In Addition, Halliwell and Dittmar (2003) indicate that men often conceptualize their body in a general and holistic manner in comparison to their female counterparts who place their focus on specific parts of their body.

Such functional decline may negatively influence men due to the fact that strength, independence and physical function are highly related to masculinity and male self-esteem (Clarke & Korotchenko, 2011). Changes in roles such as retirement, decreased social support, and changes in socioeconomic status also influence older men's sense of self and self-esteem in later life (Baker & Gringart, 2009.)

Moreover literature illustrates that men's body image and embodied experiences are a complex phenomenon, and body image concerns have become more prevalent throughout the years resulting in a vast array of negative health and psychological consequences (Grogan, 2008; McArdle & Hill, 2007). In addition Davison and McCabe (2005) demonstrate that disturbances in body image impacts one's psychological well-being and thus results to symptoms of depression and anxiety amongst older adults aged between 50-86 years of age.

2.2 Defining Body Image and Well-being

Body image has been defined as "an individual's appraisal of and feelings about the body" (Cornwall & Schmitt, 1990, p.100). Perceptions and attitudes towards one's body appearance and functioning is central to development of body image (Reboussin et al., 2000), moreover, it formulates an important aspect of our identity and self-concept, as personal feelings about the body may impact the way in which individual's regard themselves and their abilities (Chrisler & Ghiz, 1993). Body image is a multidimensional construct consisting of many different components, including weight satisfaction, body consciousness, appearance and body satisfactions, body schema and body esteem (McCabe & Ricciardelli, 2004; Miller, Murphy & Buss, 1981; Thompson, Heinberg, Altabe & Tantleff-Dunn, 1999). Moreover, Sabik (2012), illustrates a relationship between feelings about one's body and self-worth and overall well-being.

Empirical research devoted to well-being has been highly recognized (Strack et al., 1991; Eid & Larsen, 2008). However, no consensus regarding an ideal definition has been established (National Center for Chronic Disease Prevention and Health Promotion, 2016; van Dijk, 2012). Vaarama, Moisiö and Karvonen (2010) divide well-

being into three different aspects, including health, material and subjective well-being. Diener and Seligman (2004, p.1) define wellbeing as “people’s positive evaluations of their lives” including positive emotion, engagement, satisfaction and meaning in life. Marks and Shah (2004), further include personal development and social functioning. Corbin and Pangrazi (2001) further describe wellness as a holistic concept, involving positive health, which enriches one’s sense of well-being and quality of life.

Moreover, in addition to such intangible life concepts, other influencing factors which enhance an individual’s overall well-being include, the impact of occupation and marital status on subjective well-being (Pawlowski, Downward & Rasciute 2011), physical health (Lee & Russell, 2003; Strine, Chapman, Balluz & Mokdad, 2008), domiciliary environments, level of education and social involvement, (Bourke & Geldens 2007). Moreover, Müller and Kaufmann (2001) further include nutrition and beauty care in providing a holistic perspective of one’s overall well-being. Thus, well-being may be described as “a multidimensional state of being describing the existence of positive health of body, mind and soul.” (Hjalager et al., 2011, p.10)

2.3 Ageing Body and Body Image

Research illustrates that physical changes of the body in later life influence an individual’s body image and personal perceptions and attitudes towards oneself (Kreuger, 1989; Oh, 1999). The ageing process and physical transformations associated with later adulthood often causes susceptibility of the older adult to develop problems associated with body image since generally such changes are perceived as undesirable or unattractive (Hurd-Clarke & Griffin, 2008; Kaminski & Hayslip, 2006). Nemiroff and Colarusso (1985) suggest that older individuals experience conflicts with their ageing body and their younger inner self, which may lead to reshaping of their body image and thus participate in behavioural activities, which will aid in adjusting such inevitable changes.

Further research portrays that older adults experienced higher levels of concern and where more conscious to physical changes associated with ageing such as wrinkling of the skin and hair loss (Harris, 1994). However older adults expressed positive levels of

self-evaluation of the body in comparison to younger counterparts (Ross et al., 1989). The authors further illustrate that such increase in self-consciousness regarding changes in physical appearance may reflect internalized attitudes of social stigma associated with older adults and loss of attractive appearance.

Research shows that older adult men participate in the use of anti-ageing products and services, however methods are used in ways to retain elements of masculinity, which emphasizes the differences from their female counterparts, by focusing on performance and function rather than appearance and image (Gough, Matthews & Seymour-Smith, 2016; Ojala, Calsanti, King & Pictila, 2014). Furthermore, men have also been found to resort to aesthetic surgery in order to alleviate the physical changes associated with later life, such as balding, spreading and greying of hair, in order to be able to represent themselves as more slender, younger and successful (Holliday & Carnie, 2007). Miller (2005) suggests that several corporations are encouraging employees to adapt body shapes and images according to their company ethos, such as encouraging weight loss or hair colouring, as grey haired and un-groomed men may be perceived as less successful and intelligent which may hinder the success of the company.

Few researchers have examined the relationship between body image and body dissatisfaction and other age-related concerns about appearance and a lack of literature is evident regarding such experiences in later life (Griffits et al., 2016). Thus, there is a greater need to examine older adult's experiences and perceptions (Grogan, 2012, McCabe & Ricciardelli, 2004; Liechty, Ribeiro, Sveinson & Dahlstrom, 2014).

2.4 Body Satisfaction

Body Satisfaction is a complex and multidimensional concept constituted by several elements including: socio-demographical factors such as age, gender, marital status and social class; anthropometric aspects such as Body Mass Index, body fat and muscle; health related well-being including functional decline, debilitating conditions; and sociocultural aspects such as societal norms, ideals and values (de Souto Barretto, et al., 2011). Cash (2002) illustrates that body image may be influenced by historical and developmental factors, personal life events and experiences. The individual's

perceptions, personality and physical characteristics may also affect one's attitude towards themselves. Current life scenarios may also influence an individual's body image experience, such as body related emotions, internal dialogues and self-control and regulations.

Although there is a lack of research entailing the relationship between older men, age and body satisfaction, the level of education has been found to be an influencing factor on body weight satisfaction, suggesting that individual's with higher levels of education have shown dissatisfaction with one's appearance and weight (Reboussin et al., 2000). The Body Mass Index has been found to be a reliable biological correlate of body image and body satisfaction (Zawawi, 2014; Pop, 2017). Fredrick, Peplau and Lever (2006), suggest that men with higher and lower levels of BMI tend to express dissatisfaction with body image.

Functional limitations, medical disorders and pain have also been characterized as important physiognomies, which influence an individual's body satisfaction. Such loss in function may require body image adaptation leading to impede on one's quality of life (Pruzinsky, 2004). As previously discussed body dissatisfaction in men is mainly associated with desire for loss of body fat and gain in muscle mass (Nowell & Ricciardelli, 2008; Reddy, 2013). While research suggests that younger men focus on improving appearance for social investments, older men prioritize health and fitness, thus suggesting that older men's desire for a healthy body does not necessarily require the need to look good (Halliwell & Dittmar, 2003). However, Reddy (2013) established that older adult men experienced dissatisfaction with aspects of their appearance including, lack of height, muscle, loss of skin firmness, loss of hair and weight.

2.5 Bodily Concerns and Dissatisfaction

Body dissatisfaction may be defined as a negative self-evaluation of weight and shape of one's own body. Resulting in dissatisfaction with specific body attributes and overall appearance (Joseph & Shiffrar, 2011). In their research McCabe and Ricciardelli (2004) suggest that literature exploring body dissatisfaction mainly regards issues

pertaining women such as strategies for weight loss, furthermore concerns related to men such as muscle and weight gain have been ignored.

However, Mintz and Betz (1986), who examined the gender differences in body image correlates, established that women mainly perceived themselves as overweight with a constant desire to lose weight, whilst men who experienced body dissatisfaction tended to regard themselves as underweight and thus desired to gain weight. Moreover such results suggest, that for both sexes, body dissatisfaction was associated with lower levels of self-esteem and had an increased likelihood of depressive symptoms.

Furthermore, literature suggests that body image dissatisfaction may increase with increasing age (Tiggemann, 2004; Guegan, 2006). Changes in physical appearance such as wrinkles, loss of skin elasticity, decline in physical function together with gaining weight, which is common in later adulthood, may cause increasing difficulties in attaining such an ideal body in later life (Tiggemann, 2004). Further more, Guegan (2006) suggests that older men may experience complicated associations between their ageing bodies and their sense of self.

Moreover, research argues that issues pertaining to bodily concerns in men especially in the older cohort, are often ignored due to social constructs that suggest that body image is primarily an issue related to women (Hargreaves & Tiggemann, 2006; Liechty, et al., 2014). Moreover, instruments measuring body image in older men are lacking and have mainly been developed for young women, thus this suggests the need to provide more thorough literature on such issues in order to provide an understanding on men's perceptions and attitudes of their body image (Slevin & Linneman, 2009).

2.6 Social Pressures

Although research postulates that men experience significant pressures resulting from societal factors in order to reach a muscular ideal, older men less likely require the need to be validated by others (Mishkind, Silberstein & Striegel-Moore, 1986). Furthermore, Arbour and Martin Ginis (2006), illustrate that older men are less likely to compare themselves to unachievable social and media validated images, and thus are more likely

to compare oneself to more realistic and attainable objectives. This is further supported, by Davison and McCabe (2005) who postulate that older individuals express less concern about others evaluations and are less likely to compare their self and body image with that of others. However, Adams, Turner and Bucks (2005) suggest that societal pressures influences body dissatisfaction in older men. This is further supported in the study by Reddy (2013) who, postulates that verbal and non-verbal feedback postulated by family members and outsiders may influence an individual's perceptions, attitudes and behaviours related to one's appearance and body satisfaction. In addition, research suggests that although older adults are aware of the sociocultural pressures of youthful appearance ideals, injustices of ageism and inevitability of ageing, individuals continue to participate in actions and behaviour in an effort to conceal physical signs of ageing (Hurd-Clarke & Griffin, 2008; Jankowski, et al., 2005; Muise & Desmarais, 2010).

Sociocultural theories of body image describe how cultural ideals on appearance, influence individuals to compare themselves with others, leading to enhance efforts to meet such societal expectations of beauty, regardless the methods and costs (Fallon, 1990, Heinberg, 1996; Harding, 2009). Moreover, such theories postulate that body image disturbance may result from inappropriate influence of unrealistic ideals of beauty and attraction depicted by the media. Studies show that expectations and beliefs about beauty and attraction are often internalized and are used as the norm for which one is to look up to (Agliata, 2005; Higgins, 1987; Stice, 1994). Furthermore, such socio-cultural ideals lead individuals into making assessments of their own physical characteristics, which are often disappointing in such a comparison process. Such discrepancies in self-ideals are often strong predictors of development and maintenance of body image disturbance and eating disorders (Agliata, 2005; Heinberg, 1996; Thompson & Heinberg, 1999). Similarly, studies suggest a connection between exposure to media ideals and body dissatisfaction amongst men (Leit, Gray, & Pope, 2002; Lorenzen, Grieve, & Thomas, 2004).

2.7 Spousal Relationships

An older adult's adaptation with the physical changes associated with later life is influenced by the individual's perception of support provided by their spouse or

significant others (Hennessy, 1989). Furthermore, An individual's self-perception and evaluation on one's own body is influenced by the quality of relationship with one's spouse together with the significant other's reaction to the individual's physical appearance (Garner, 1997).

Research on spousal relationships illustrates the significance of physical appearance and husband attractiveness in long-term marital relationships (Peterson & Miller, 1980; Murstein & Christy, 1976; Bégin & Gagnon-Girouard, 2013). Oh and Damhorst (1999), further illustrate that within the marital relationship men experience more pressure throughout the ageing process especially in retaining a youthful appearance. Additionally, a decline in woman's, physical attractiveness was associated with sexual disinterest and marital problems within the couple. Moreover, studies show that bodily concerns are influenced by several factors, including sexual intimacy in romantic relationships (Goins, Markey & Gillen, 2012; Ryan & Morrison, 2009).

2.8 Self-Esteem

In a study conducted by Abadie and his colleagues (1996) a sample of 110 men aged 55-90 years were investigated, and discrepancies between current and ideal body shape were examined. Results showed that older men aspired to be thinner. Furthermore it was suggested that older men participating in physical activity expressed increased interest in maintaining an ideal body shape, depicting that general physical appearance influences older adult's sense of body image and self-esteem. Further research also illustrates that older men perceived an increase in body attractiveness following an exercise program (McAuley, Blissmer, Katula, Duncan & Mihalko, 2000).

Self-Esteem, which can be defined as "the overall affective evaluation of one's worth, value or importance" (Blaskovich & Tomaka, 1991, p.115), is regarded to play an important role in influencing the development of body image (Cash, 2002). Furthermore body image and self-esteem are highly influential in predicting quality of life. Body image dissatisfaction has been associated with psychological consequences including depression and low levels of self-esteem (Guegan, 2006).

Self-esteem has been a highly regarded construct within psychological research, relating to diverse domains including, personality, behavioural and cognitive attributes,

clinical concepts together with gender and age differences (Bleidorn et al., 2015; Strickland, 2004). Moreover, several studies have shown gender and age differences in self-esteem, such findings have illustrated that men tend to have higher levels of self-esteem than their female counterparts and that both males and females demonstrate age-related increases in self-esteem from late adolescence to middle adulthood (Bleidorn et al., 2015; Huang, 2010; Orth & Robins, 2014; Robins & Trzessniewski, 2005; Trzessniewski, Donnellan & Robins, 2013). Similarly, in a study examining self-esteem in men and women, Brownell (1991) found that women's self-esteem was influenced by their beauty ideals, whereas men's self-esteem tended to be determined by several distinctive factors including, intelligence, economic status and physical prowess.

Gosling, Potter, Robins, Trzessniewski and Tracy (2002) suggest that when reaching seventy men and women experience comparable levels of self-esteem. However results show a shift in older women aged in their eighties, who experience higher levels of self-esteem in comparison to males of the same age group. Several hypothesis have been postulated regarding such dissimilarities with regards to age and gender, these include bereavement and spousal loss, decrease in social support and contact and decrease in socio-economic status. These factors have shown to contribute to the decline in levels of self-esteem in later life (Baker & Gringart, 2009; Baltes & Mayer, 1999).

2.9 Body Image and Psychological Well-being

Body dissatisfaction has been related to poor psychological well-being and unhealthy behaviours, in younger generations (Bedford & Johnson, 2006). Various negative mental and physical consequences have been associated with body image and dissatisfaction however depression poses particular concern in later life. Depression is acknowledged as a main cause of emotional distress in older adults influencing their quality of life (Blazer, 2002).

In later life mental health may be influenced by bodily changes specifically those hindering physical function and ability. A study investigating body image and psychological characteristics in men suggests that body dissatisfaction is associated to

depression, low self-esteem and disordered eating pathologies (Olivardia, Pope, Borowiecki & Cohane, 2004). Moreover research suggests a relationship between negative body image and psychological distress, physical distress and aggression in males (McCabe & Ricciardelli, 2004; Olivardia, Pope, Borowiecki, & Cohane, 2004; Tager, Good & Morrison, 2006).

Body image has been highly correlated with diverse negative mental and physical health outcomes, with depressive symptoms being the main concern among the ageing population. Depression has been described as being one of the main causes of emotional distress in later life, often causing negative consequences on quality of life and ability to age successfully among older individuals (Blazer, 2002; Blazer, Burchett, Service & George, 1991; Blazer, Hughes, & George, 1987; Doraiswamy, Khan, Donahue, & Richard, 2002). Moreover, Depression has been found to increase prevalence of certain risk factors offsetting negative health outcomes, such as increased risk of pre-mature death, decline in immune function, and reduced ability to recover from sickness and diseases (Fiske, Wetherell & Gatz, 2010; Glass, De Leon, Bassuk, & Berkman, 2006). Despite the increased risk of depression among older adults, Karlin, Duffy and Gleaves (2008), illustrate that older adults were three times less likely than younger individuals to receive outpatient mental health care, suggesting that several older individuals with depressive symptoms are often untreated (Sabik, 2012).

In later life, mental health may be highly influenced by the diverse changes associated with the ageing process, including changes in physical functioning, abilities, health and strength. Preserving physical functionality has been correlated with enhanced physical and psychological well-being. Additionally, physical activity has been found to enhance mood, mental health and overall well-being, (Blake, Mo, Malik, & Thomas, 2009; Chodzko-Zajko, Schwingel, & Park, 2009). Moreover, depressive symptoms have been also been linked to reduced physical functioning and aptitude, particularly through lack of interest and involvement in activities of daily living (Covinsky, Fortinsky, Palmer, Kresevic & Landefeld, 1997; Kempen, Sullivan, van Sonderen & Ormel, 1999; Penninx, Leveille, Ferrucci, van Eijk, & Guralnik, 1999).

2.10 Experiencing Body Image in Later Life

Masculinity has been found to play an important role in shaping body image and embodied experiences in older men mainly because, (a) masculinity often prioritizes youth and vitality and thus has an integral connection to experiences related to the aging body; and (b) perceptions and beliefs related to manhood are highly correlated to age and may be altered throughout the life course (Drummond, 2002). Moreover, as an individual ages, physical changes to the body may be detrimental, and may cause to experience decline in masculinity related to hegemonic ideals of independence, power, self-reliance, physical and sexual competence and immunity to pain (Kimmel, 2007; Oliffe, 2006; Rand & Wright, 2000; Tannenbaum & Frank, 2011). In addition, in a study conducted on a group of Australian men aged between (58-85 years), Drummond (2002), illustrates that men often correlated later life with a decline in physical function, intimidating their masculinity and societal devaluation. However, Slevin and Linneman (2010) suggest that although men may experience such declines in masculinity, men become more accepting of themselves and their image. Further studies, also suggest that with increasing age, some individuals portray less importance on image and pressures to conform to socio-cultural appearance ideals (Hogan & Warren, 2012; Jankowski, et al., 2005; Tunaley, Walsh & Nicolson, 1999).

Drummond (2002) suggests that men often negotiate changes related to physical characteristics and masculine identity by focusing on their abilities and functionality of their bodies and by grouping parts of the body with declined capacity, participation in physical activity and attitudinal changes. Body image and embodied experiences of men are two complex concepts, which share a strong connection, although are often studied independently. Grogan (2008) describes body image as an individual's feelings, attitudes and evaluations of his or her body. Moreover, embodiment is described as the experience of inhabiting the body (Tulle, 2008). In addition, embodiment is found to play an important role in understanding body image in older adults as the ageing process is an intrinsic and embodied process (Tulle, 2008).

In later life, older adults experience physical (such as illness or disabilities) and identity changes (such as the experiences of discrepancy between youthful felt identity and chronological age) as part of the ageing process (Clarke & Korotchenko, 2011). Older

adults experience embodiment in diverse ways, in frail older adults, ageing may be experienced through the body, as they receive care and support from others, due to loss of function and independence (Twigg, 2007). Older adults living within the community experience embodiment of ageing through practices of body management, including diet and exercises, which aid in reducing ageism and thus allow to preserve cultural capital centred around youthfulness (Slevin, 2010). Focusing on such concepts of men's bodily experiences of body image and male embodiment may aid researches to further understand the complexity and diversity of different age groups together with understanding changes among individuals (Leichty, et al., 2014).

2.11 Body Image Development throughout the Lifespan

The study of lifespan development is highly investigated in psychological research (Blanchard-Fields, 2007; Eysenck, 2004). The lifespan is regarded as a lifelong process influenced by specific theories, which surround each stage of development (American Psychological Association, 2006). Furthermore, there are several other theories, which also influence the developmental process throughout an individual's lifespan, including nature and nurture theories, biological implications, physical and cognitive development, together with socio-emotional developmental factors.

Although an abundance of information regarding body image and dysfunctions are highly available with regards to teenage girls and women, a lack of research on men especially older men is highly evident (Rocha & Terra, 2014). Erikson's psychosocial theory, examines eight stages of developmental, physical, social and psychological changes, which are experienced throughout the lifespan (Erikson, 1950). The eight stages included in Erikson's psychosocial theory span across, infancy, middle and late childhood, adolescence and early, middle and late adulthood. As this study focuses on the experiences of older adult men, emphasis would be made on late adulthood.

2.11.1 Late Adulthood

The last phase of Erikson's life span development stages, Ego integrity vs. Despair, includes the ability of individuals to come to terms with their own life. Within this stage older adults are able to achieve a sense of integrity together with achieving the ability to view their own life in the larger context, contributing to contentment, and

serenity (Erikson, 1950). Moreover, this stage includes the acceptance of one's own life, which was shaped by choices, responsibilities and experiences of both triumphs and disappointments which were all necessary in creating a meaningful life path. Cha, Seo and Sok (2012) suggest that achieving a sense of self-achievement increases feelings of self-worth and self-efficacy, which in turn improve positive mental health status and psychological well-being necessary for successful ageing.

The alternative attitude to the final phase, despair, portrays an individual's failure to accept one's life choices and wrong decisions. Erikson (1950) suggests that despair "expresses the feeling that time is now short, too short for the attempt to start another life and to try out alternate roads to integrity" (20, p. 269). Furthermore, Erikson elaborates that one's fear of death signifies lack or loss of ego integration

Several authors have elaborated upon Erikson's personality development theory, Peck (1968) enhanced Erikson's last stage of ego integrity versus despair by categorizing three elaborate challenges, including ego differentiation versus work role preoccupation, body transcendence versus body preoccupation, and ego transcendence versus ego preoccupation.

The first stage of Peck's theory, describes how older adults identify themselves in order to acquire feelings of worth and identity from different sources other than their occupational role. The transition of retirement and change in roles may lead individuals to experience loss of self-worth and identity. However, individuals who are defined by several different dimensions, and who have developed a well-distinguished ego, may easily replace their work role as their main foundation for self-esteem (Lueckenotte, 2000).

The second stage body transcendence versus body preoccupation, focuses on the older adult's views of their physical and mental limitations associated with the ageing process. Within this stage older adults require to make adjustments or transcend to the limitations and declines associated with later life, allowing to maintain well-being and positive psychological health. In order to achieve personal satisfaction, individuals should focus on their interests, interpersonal relationships and psycho-social related activities allowing individuals to obtain a positive aspect on their life (Aitken & Rudolph, 2012; Lueckenotte, 2000). The third stage of ego transcendence versus ego

preoccupation concentrates on life reflection and acceptance of eventual death. Individual's should focus beyond mortality and remain active and involved in order to achieve ego-transcendence (Thimann, 2013).

Additionally, the life span theory in developmental psychology illustrates strategies in order to improve health and wellbeing in later life and formulates as a psychological model of successful ageing (Baltes, Featherman & Lerner, 1986). The main aim of this theory involves development of certain strategies in order to compensate for the losses and decline in function that occur throughout the lifespan. This adapting process encompasses three main interrelating constituents. The first includes the selective element, signifying experiences of restriction in one's life into limited domains of functioning due to age-related declines. The second element, which constitutes of optimization, involves the participation in actions and behaviours in order to enrich their lives. The last element of the theory, compensation, suggests the ability for older adults to develop suitable, and alternative adaptations in order to, 'compensate' for any losses or restrictions experienced in later life (Leuckenotte, 2000; Schroots, 1996). Such Psychological theories aid in further understanding values and beliefs of older adults together with providing a greater understating of the psychosocial aspects of later life.

2.12 Conclusion

In conclusion, although research conducted on older women has been thoroughly explored, studies on older men have been limited. Studies focusing merely on older men are lacking and have mainly been conducted through a mixed gender or multi age approach. Moreover, a lack of research on the Maltese population is also evident especially those concerning older Maltese men. Further research is required in order to explore individual perceptions and attitudes in later life.

CHAPTER 3

METHODOLOGY

3.1 Introduction

This chapter will illustrate the qualitative approach chosen for analysis of this study; it will also demonstrate the procedure used to collect data for the research questions. Furthermore, this chapter will also include, instrumentation, providing a description of the interviews conducted and a description of the research sample. Ethical considerations and data analysis will also be explored.

3.2 Aim

To explore the relationship of body image and psychological wellbeing through the lived experience of older Maltese men

3.3 Research Questions

- A. How do older Maltese men experience and perceive their body image and how are their experiences and perceptions related to their psychological wellbeing?

- B. How does body image influence older Maltese men's self-esteem and quality of life?

3.4 Research Plan

For this study a qualitative approach was chosen, in order to delve into the 'how' and the 'what' of research (Smith, Flowers & Larkin, 2009). Complimented with an Interpretive Phenomenological Analysis as a methodology. Semi-Structured interviews were appointed as a method of data collection. This method was chosen, as interviews were the most effective technique, which enabled to elicit individual accounts about personal experiences on body image and the ageing process, together with providing a better understanding of their influence on self- esteem and quality of life (Pietkiewicz & Smith, 2012),

3.5 Rationale for Qualitative Research

Qualitative Research is described as “a direct window on the lives of the participants ... and is concerned with individuals’ own accounts of their attitudes, motivations and behaviour. It offers richly descriptive reports of individuals’ perceptions, attitudes, beliefs, views and feelings, the meaning and interpretations given to events and things, as well as their behaviour” (Hakim, 1987, p.26). Qualitative data is also highly useful when defining feelings and attitudes (Harvard University, 2015).

As this study attempted to identify the unique experience of older adult Maltese men, qualitative research provides a central purpose to identify causes, meanings and traits that define the characteristics of the individual’s experience, rather than facts and truths. This allowed the researcher to understand the participants’ own experiences of their world (Smith & Osborn, 2003).

Qualitative research encompasses an engagement with exploring, describing and interpreting the personal and social experiences of participants (Smith & Osborn, 2003). Quantitative research is considered to be a more scientific approach, focusing on definitions, particular concepts and variables. Therefore, it limits the ability to delve into an in depth understanding of concepts, together with an interpretation of the participants experience (Tewksbury, 2009). Thus, the qualitative research method was consistent with the aim of this research, which endeavoured to seek a deeper understanding of the experience of body image and psychological well-being in older adult Maltese men.

3.6 Rationale for Interpretive Phenomenological Approach

An Interpretive Phenomenological Analysis was chosen to evaluate the data collected. IPA provides a detailed examination of an individuals lived experience together with an understanding of how they make sense of their personal and social world (Smith, 2010). IPA also regards a phenomenological thought by which it explores in detail intimate experiences including the individual’s personal perceptions (Smith & Osborn, 2003). Moreover, Smith, Flowers and Larkin, (2009, p.172) state that “such idiographic

theorizing is concerned with documenting the existence of actual patterns of life, not with measuring actuarial incidence”.

IPA facilitates an understanding of an individual’s personal world through interpretation (Smith, Jarman & Osborn, 1999). This interpretive stance provides an acknowledgement of the researcher’s own perception together with an interaction between the participant and researcher. Thus IPA was employed to interpret the participant’s perception of their experience with body image and their psychological well-being. As participants may have found difficulties to convey personal thoughts and feelings the researcher interpreted their thoughts and feelings from their narratives.

3.7 Research Design

Smith (2004) described three philosophical pillars of IPA, Idiography, Phenomenology, and Hermeneutics. In describing a primary key area of the philosophy of knowledge that applies to IPA, Smith et al., (2011, p.29), compare idiography the study of the ‘particular’, with nomothetic research, which is ‘concerned with making claims at the group or population level, and with establishing general laws of human behaviour,’ An idiographic approach entails a commitment to the particular in terms of detail, depth of analysis, and description of ‘particular experiential phenomena from the perspective of particular people in a particular context’ (Smith et al., 2011, p.29; Larkin, Watts & Clifton, 2006;). Due to such commitment to the particular, ‘IPA utilizes small, purposively-selected and carefully-situated samples’ (p. 29). Such an idiographic stance allowed the researcher to conduct cross-case analysis, which in turn provided meaningful emergent themes together with providing a deeper understanding of the participant’s experiences and life perceptions.

Husserl can be described as the founder of the phenomenological approach and his endeavour has been labelled as transcendental phenomenology (Larkin et al, 2011). As the originator of descriptive phenomenology, Husserl, suggested that during data collection and analysis the researcher should ‘bracket,’ or leave aside presuppositions and preconceptions (also known as ‘epoche’ and ‘phenomenological reduction’) (Giorgi, 1997) and also the taken-for-granted world, in order to see phenomena as

experienced. Crotty (1996) illustrates phenomenology as a description of the experience lived by the individuals. Phenomenology attempts to delve into a deeper understanding of the experience as understood from the individual's perspective (Landridge, 2007). The researcher strived to understand and interpret the individual's experience as much as possible and thus sought to minimize the effect of one's own values and knowledge of the topic or existing theories on the participant's responses. Furthermore, the researcher aimed to understand the participant in novel and unanticipated manners as the individual's story of their experience progressed (Smith & Osborn, 2008).

Hermeneutics is defined as the theory of interpretation (Smith, Flowers & Larkin, 2009). Heidegger, a student of Husserl, further complemented phenomenology by adding an interpretative (hermeneutic) element and thus initiated a more existential approach. This suggests going beyond the description of lived experience to interpreting the hidden or underlying meaning behind the descriptions (Grbich, 2007). Throughout the research a dynamic process was formed, between the participant and the researcher. Thus, a dual interpretation was formed; the participant expressed his perceptions of his own world by explaining and interpreting their own experience (Smith et al., 2009). Furthermore the researcher explained and interpreted the meaning of the participant's account. This is known as double hermeneutic, which describes the two interpretations involved throughout the process (Smith & Osborn, 2003). Circularity is observed, which highlights the relatedness of the phenomena under investigation to its surroundings, this is also known as the hermeneutic circle (Smith, Flowers & Larkin, 2009). This conforms to, Palmer (1969, p.77) who states that 'The part is understood from the whole and the whole from the inner harmony of its parts'

3.8 Research Participants

Potential interviewees were chosen from individuals accessing health care services at the Qawra Clinic. Health Professionals working at the Qawra Clinic, were appointed the role of gatekeeper, in which they provided interested participants with information sheets about the presented study. Interested participants contacted the researcher and further details were provided. The participants were selected using purposive sampling,

as it involves appointing the most convenient individuals to participate in the interview who are able to share their lived experience on their body image, ageing process and psychological well-being. Lyons and Coyle (2007, p.40) discuss that the use of purposive sampling when conducting an IPA approach will provide a “more closely defined group for who the research questions will be significant”.

Inclusion criteria for participating in this study included, older adult Maltese men, aged between 60-85. Smith et al., (1997) suggest that six to eight participants will be ideal for postgraduate level. Lyons and Coyle (2007) argue that, this will allow the researcher to examine similarities and differences between the participants but reduce the risk of being astounded with the amount of data collected. The participants completed an audiotaped face-to-face interview, in locations convenient for both the researcher and the participant. As selected by the participants, interviews were conducted in English, this enabled the participants with a better understanding of the questions, which in turn allowed them to express themselves freely. The purpose of the study and reassurance of confidentiality were communicated with the participants.

3.9 Method of Data Collection

Semi-structured audio-recorded interviews were considered to be the most fitting to the research question and to IPA and thus were chosen as a method for data collection. Although, novel ways of collecting data in IPA research are being tried and tested, (Smith, 2004), semi-structured interviews, a widely adopted method for IPA, allow the participants to speak freely and openly about subjects, which they feel are pertinent, whilst also ensuring that areas relevant to the research question are covered (Smith et al, 2009). Another method that was considered was a focus group approach however research suggests a lack of focus on detailed exploration of personal experiences (Smith, 2004; Newton, Larkin, Melhuish & Wykes, 2007). In accordance, it was considered that a focus group may produce more generic results overriding the meaning of personalised accounts. The comparison of individual interviews for exploring shared meaning was considered to be more appropriate for providing an idiographic focus.

The interview schedule was based on available literature concerning body image in older adults, physical changes of the ageing process, body dissatisfaction and psychological well-being in older adults. Care was taken to include questions that explored the experiences of the participants. Open-ended questions were used, this allowed the participants to be able to express themselves freely (see appendix H). A demographic background profile was included, which contained questions regarding age, education level, marital status, occupation, health, weight and locality (see appendix E). Also, The participants were provided with a figure rating scale, where each participant was to point out the most and least desired body composition, this allowed to focus on body image perceptions (see appendix F).

The first draft interview schedule was piloted in order to verify that the questions developed are understandable and salient. This allowed for the modification of questions prior to conducting the interviews. Piloting the interview was essential as it allowed the researcher to become more acquainted with the interview schedule and practice personal interview techniques.

3.10 Method of Data Analysis

Once all interviews were conducted, the process of analysis was initiated by, transcribing the audio-recordings collected verbatim. As the method of analysis chosen was IPA, five stages of analysis were followed as suggested by Smith et al., (2009).

In the first stage, which is an initial level of analysis, points were taken during the process of transcription. Any comments, thoughts and notes of potential significance were recorded on the right-hand margin, in order to be able to familiarize further with the participant. Also, key phrase, explanations, descriptions and emotional responses were included. Such notes aided to develop and understand further the participant during analysis.

Re-reading each transcript over and taking further notes formed part of the second stage. Any notes which were of importance and interesting, where recorded in the right hand margin. Exploring and commenting on the data enabled further engagement with

the information gathered. This led the researcher to be more responsive and understand better to what each participant was disclosing. Linguistic comments were also noted paying particular attention to pauses, laughter, repetitions and metaphor use (Smith, Flowers & Larkin, 2009).

The third stage, consisted of a more interpretive stage, developing emerging themes, which best capture, the essential qualities of the interviews recorded. Once all transcripts were read and notes were recorded, a process of mapping interrelationships and connecting exploratory notes was initiated (Smith, 2010). This allowed to further reflect on each participant's thoughts, however care was taken not to deflect from the individual's own words with the researcher's personal interpretations. Suspending presuppositions and judgments was necessary in order to focus on what is actually presented in the transcript data (Biggerstaff & Thompson, 2008). However, the themes did not only reflect the participants' original words and thoughts but also included the researchers' interpretations. The themes were noted on the left-hand margin (see appendix J).

The fourth stage encompassed the reduction of data by providing an overall structure to the analysis and thus connecting the identified themes into appropriate clusters. The grouping of themes allowed to identify, super-ordinate categories that illustrate hierarchal relationships between them.

Through the final stage a table of themes was developed. Each major theme together with their sub-themes were listed.

3.11 Reflexivity

Reflexivity encompasses the impact of the researcher on the research process (Spencer, Ritchie, Lewis & Dillon, 2003; Yardley, 2000). In qualitative research it is highly recognized that the beliefs and assumptions of the researcher may influence data collection and data analysis, thus it is imperative to maintain a clear understanding of one's beliefs, assumptions and perspectives. Given the importance of reflexivity, the section will delve further into the personal attributes of the researcher. Being a female

post-graduate psychology student, I have participated in the field of psychology for the past seven years. Throughout, my experiences, I have become aware of the diverse physical and mental implications, which in turn influence one's psychological well-being. Involvement with older generations in the community and institutionalisation allowed me to understand the ageing process and associated adjustments. Having, been highly sensitive to my personal body image, choosing this topic provided me with the opportunity to further understand the impact of body image on one's psychological well-being. Although my experiences could have had a biased effect on my research, I followed a researchers stance with a clean slate to enable me to learn more about the experience of older men

3.12 Ethical Considerations

As part of my dissertation, a proposal of my presented study was submitted to the University Research Ethics Committee. This study was primarily, granted approval by UREC prior to initializing my research (see appendix A). Prior to each individual interview participants were given an information sheet and consent form, emphasizing the conditions of the study, the voluntary nature of participation, the steps taken to assure confidentiality and informed the participants of their rights to withdraw from answering questions (see appendix B & C). The participants were also informed about the use of anonymized quotes, which may be used in the dissertation and the dissemination of the research findings. Signatures were acquired for the consent form. Sensitive questions, which may cause emotional discomfort to participants, were avoided. Non-maleficence and beneficence were regarded. Participants were forewarned that all data would be destroyed after completion of the Masters Degree and provided with a debrief letter (see appendix D).

3.13 Trustworthiness and Rigour

In order to establish the trustworthiness of the findings, four criteria were considered, credibility, transferability, dependability and confirmability (Lincoln & Guba, 1985). Credibility, which refers to the confidence in the truth of findings, was established by conducting a thorough examination of research findings to assess the degree of congruency with past studies. Transferability, is concerned with the ability to transfer

findings to other situations. Thus this study presented findings with rich contextual descriptions and perspectives surrounding participants' experiences. Dependability depicts the stability of findings over time and confirmability referring to coherence of data in relation to findings. To address dependability in this study a detailed report of processes followed was depicted. Confirmability was enhanced, by stating assumptions explicitly, in relation to own contributions.

It is of vital importance to consider the methodological rigour of the research to be able to highlight the significance of the results obtained, and assess its usefulness to other researchers (Priest, 2002). Four criteria were followed to provide an assessment of the quality of IPA: a clear link to the theoretical principles of IPA and transparency to allow the reader to follow what has been done. Also, provision of coherent, plausible and interesting analysis together with a sufficient sampling from the transcripts to show detailed evidence for each theme, adapted for every participant for each theme (Smith, 2011).

3.14 Conclusion

A qualitative design was the most appropriate for this dissertation, which was successful in gaining a greater detailed understanding of the experience of Body Image and psychological well-being in older adult men. The ensuing chapter, Results, illustrates the emergent themes from the interviews.

CHAPTER 4

RESULTS

4.1 Overview

The aim of this chapter is to provide a phenomenological and interpretative narrative of the research findings. Six superordinate themes emerged from the interpretative analysis and these were shared by all twelve participants: comprising of, Psychological Wellbeing, including, self-esteem, self-confidence and emotional wellness; Physical Wellness including, health, strength and medical concerns, Social influences, Social participation, Personal attributes, including age influences and adjustments and personality, and individualistic impact of Appearance, including self-care, eating behaviours and cleanliness. Thus the superordinate and subordinate themes were in turn presented and discussed, transcript extracts from participant quotes were encompassed to further present the phenomenological core from which the researcher's interpretations were developed.

In total twelve male participants, all between the ages of 64 and 87 participated in the interviews conducted. The average time of interviews, being 45 minutes. Nine of the participants were retired. Four of the participants were widowed; moreover most participants were married with children (see Tables 1 and 2). Furthermore, the majority of participants displayed a desire for a thinner frame and weight loss from their current body image, when presented with a figure rating scale, (see appendix G). For a more in-depth phenomenological description on each participant, (see appendix I).

The themes highlighted in this chapter are central to the experience of body image and psychological well-being, and thus provide significant answers to the research questions. Although the experiences contained similar themes, the stories were also unique to each participant.

The tables below provide a basic illustration of participant characteristics and demographics.

Table 1: Participant Socio-Demographic Background

Pseudonym	Age	Locality	Marital Status	Children	Level of Education	Employment
Mark	64	Attard	Married	2	Secondary	Self-Employed
Joshua	65	Qawra	Married	3	Secondary	Shop Owner
Peter	65	Qawra	Single	0	Secondary	Retired
Larry	66	Qawra	Widow	2	Secondary	Business/Retired
Chris	69	Qawra	Married	3	Secondary	Business Director
Jonathan	71	Qawra	Widow	0	None	Ward man/Church
Vinnie	71	St. Venera	Married	2	Secondary	Aluminium
Alfred	72	St. Paul's Bay	Separated	2	Primary	ECG Technician
Mario	75	St. Venera	Married	5	Primary	Glass making
Pablo	78	Qawra	Married	1	Secondary	Hairdresser
Elijah	84	Qawra	Widow	4	Secondary	Taylor/Printer/Films
Victor	87	Qawra	Widow	5	Technical School	Engineer

Table 2: Participant Characteristics and Physical Measurements

Pseudonym	Smoke	Alcohol	Height (ft)	Weight (Kg)		
				Highest	Lowest	Current
Mark	No	No	4,9	105	87	90
Joshua	No	Yes	5,7	87	83	86
Peter	No	Yes	5,10	90	85	90
Larry	Yes	Yes	5,10	95	89	80
Chris	Yes	Yes	5,5	73	67	70
Jonathan	No	Socially	5,6	80	55	70
Vinnie	No	No	5,4	90	90	90
Alfred	No	No	5,8	82	74	82
Mario	No	No	5,1	75	70	73
Pablo	No	Yes	5,6	70	70	70
Elijah	No	No	5,5	80	80	80
Victor	No	No	5,2	62	60	62

4.2 Presentation of Analysis

The analysis identified six main themes. Each main theme is divided into different subthemes, presented below.

Table 3: Summary of Superordinate and Subordinate themes developed from analysis

Superordinate Themes	Subthemes
<i>Psychological well-being in late adulthood</i>	<ul style="list-style-type: none"> •Body satisfaction and emotional well-being •The impact of body image on self-confidence. •The influence of age related changes on self-esteem •The relationship between body image and self-consciousness •Self-Satisfaction and Acceptance in late adulthood •Self- assurance and psychological empowerment
<i>Physical Wellness in later life</i>	<ul style="list-style-type: none"> •Physical strength and muscle loss through the ageing process. •Health related concerns amongst older men •Health prioritization in late adulthood •Barriers and Motivations for Physical Activity •Sexual needs and intimate relationships
<i>Appearance investment in old age</i>	<ul style="list-style-type: none"> •Self- care practices in older adult men •Personal grooming and hygiene •The quest to maintain a healthy physique •The value of self-presentation
<i>The influence of personal attributes on psychological well-being</i>	<ul style="list-style-type: none"> •Age related adjustments in late adulthood •Personality traits and its influence on overall image •Personal life path and its impact on psychological well-being
<i>Active Involvement within Society</i>	<ul style="list-style-type: none"> •Instrumental activities of daily living •Meaningful ageing through Social involvement •The importance of social connections in older adults
<i>Social Influence at older ages</i>	<ul style="list-style-type: none"> •Family Influence on body image •The impact of media exposure on personal appearance •Perceived age discrimination in older adults •Social comparison and its impact on self-evaluation •The influence of societal factors on older male body image

4.3 Psychological Well-being in Late Adulthood

Several concepts were developed throughout analysis with regards to the influence of body image and age on the participant's psychological well-being. The most common sub-themes that emerged included, emotional well-being, self-confidence, self-esteem, self-consciousness, self-satisfaction and acceptance and self-assurance and psychological empowerment.

Body satisfaction and Emotional Well-being

Most of the participants manifested positive *emotional wellness*, were they suggested that body dissatisfaction is not a concern, as long as they are feeling healthy and functioning, thus prioritizing health and functionality over appearance.

“As, I said if I'm feeling good and healthy, I see myself in a good way, you know, I feel good” (Peter)

“I don't think about these things... as long as I can do what I want, these things don't affect me...” (Mario)

However, several of the participants also expressed negative emotional wellness in their experience. Participants illustrated how body dissatisfaction may often impact one's psychological well-being especially through experiencing negatively related emotions, this suggested a heightened importance for maintaining one's appearance and overall look.

“If you're not, satisfied with the way you look and with your body, I think, that it gives you dissatisfaction, and may lead to negative thoughts and things ...” (Joshua)

“I think that if you're not happy with the way you look and with yourself, you're going to start having problems, like bad thoughts...” (Larry)

Moreover, two participants communicated their personal accounts, of experiencing negative emotions in later life,

“Yes you get like this feeling in your stomach, like you feel uncomfortable... and thoughtful... it depends on how you're feeling on that day, sometimes you feel good, sometimes not, its not always the same” (Vinnie)

“Sometimes they ask me how I'm feeling I tell them you know how I'm feeling, like an empty can of peas under the double wheel, like not good, they tell me, come on, come on, but I don't feel good at times...” (Elijah)

The Impact of Body Image on Self-confidence.

Self-confidence was another psychological implication, which emerged among the participants. In the interviews, most of the participants expressed self-confidence, with regards to their appearance, (Vinnie) disclosed a heightened self-confidence, “at times I do feel like for example I'm better than others, in the way I take care of myself, dress, you know”.

Similarly, (Joshua, Alfred and Victor) expressed self-confidence and satisfaction with their appearance and personal look, suggesting that regardless of their age and physical related changes, participants expressed personal fulfilment and heightened contentment with their overall appearance.

“With the way I look, I think I'm satisfied...For me my appearance is okay, I'm happy with the way I am, I like my persona, I like the way I look ...” (Joshua)

“No I don't want to look different, take me as you see me, if you don't like it bugger off... I think I feel confident, because let me tell you when I was in the UK, there was an actor, and I was at the market, we were

shoulder to shoulder, and I didn't bother, because he's a person just like me..." (Victor)

"I feel that I still look attractive... No, No, I was, I am and I will always be confident, I'm satisfied with myself, ill keep going abroad...I'm not going to give up, not any time soon" (Alfred).

However, some of the participants portrayed a lack of confidence with their appearance and body image, especially in social environments. Thus, indicating, that an individual's personal assertiveness may be influenced by one's perception of their overall image.

"I'm not really confident, I'm quite a shy person, even with my wife..."(Pablo)

"If you don't like something about how you look you can easily loose your confidence you know and not be happy" (Chris)

Although (Jonathan) disclosed, "I feel good, I like what I see" when looking at himself in the mirror, he expressed discomfort and concern when asked about being at the beach, "Not good, I don't like this, no".

The Influence of Age Related Changes on Self-esteem

Self-esteem was another sub-theme, which emerged throughout analysis. Several participants exhibited positive self-esteem, with regards to their appearance and age. One participant expressed a positive portrayal of self-esteem and self-confidence with regards to attitude and appearance, especially in social contexts,

"I feel that till now, with whomever I spoke to, I feel that they liked me, I think my attitude and the way I approach people I think it helps me, ... and all of them told me that they feel, that I have certain abilities, and I look good a lot..." (Alfred)

Although (Victor) communicated about his experiences due to physical constrains, he displayed a positive self-approach and self-esteem, suggesting that physical setbacks and age related physical changes do not influence one's self regard and body related confidence,

“The only thing is my knee, but otherwise nothing influences me at all, sometimes I look at the mirror and I say, that's me? I think I look good for my age...” (Victor)

Similarly (Larry) expressed that “when I get some of these thoughts I try to push it away so I don't fill my mind with these negative things, I try to be positive as much as I can... I think I feel good, and my appearance that's how I am, and I'm happy with the way I look, I don't have any worries, till now, as I said I live day-by-day.”

In contrast two participants portrayed lower levels of self-esteem. One participant expressed the influence of appearance on self-esteem. This highlighted the influence of negative body image perceptions on one's psychological wellbeing, which in turn may cause emotional distress and lack of self-confidence,

“I was always shy and always kept to myself, you know ...I was shy, as a kid, aha, I think due to my appearance I may have been like that, you know, shy, always keep a step back... sometimes I feel a bit sad you know, but...Yes, sometimes, I do feel anxious, and sometimes sad but I don't think too much about it...” (Chris)

Moreover, the other participant expressed the influence of his wife's loss, thus demonstrating the emotional consequences on one's psychological health,

“As soon as my wife passed away, I've got this nervous breakdown, I went backwards, and like I don't know I'm not me like, I didn't see myself as the same” (Jonathan).

The Relationship between Body Image and Self-consciousness

Another sub-theme that emerged was *self-consciousness*. The majority of participants showed to be self-conscious with regards to their appearance, age, and bodily age related changes, including gaining weight, hair loss and changes in hair colour. This highlighted the participants concerns with regards to maintaining an ideal body image, and a heightened awareness of increased body weight which impacts on their overall appearance. Furthermore, this also portrayed a sense of apprehensiveness in social environments.

“But I remember I used to look better now, I'm not comfortable... I mean how I am I'm comfortable but if I didn't have my stomach I'd be much better” (Mario)

“I don't really like staying with my shirt off... I think yes, with age I've become more conscious you know, I'm more careful about things... I'm careful because of my weight... aha due to my appearance how I look in front of others ...” (Peter)

“I weigh myself everyday, but it hasn't changed, so I changed the weighing scale to tell you the truth... I don't want to get fat...it's a nice thing aye, to look good...” (Vinnie)

“I don't want to be fat for sure, no no no, no way, I don't want to be fat I want to be fit” (Alfred)

One participant expressed a heightened concern with regards to his age, which suggested personal discomfort and self-consciousness due to age and associated changes and also expressed a positive regard towards youth,

“If I was younger I think it would be better...I don't feel comfortable telling my age, I don't like showing even if someone asks me for my id card, I don't feel comfortable showing my age”(Chris)

Another participant showed particular concern about his change in colour of hair and facial hair, highlighting the influence of age related physical changes,

“Sometimes you know, I look at myself and say look how my hair has changed, look how much it’s turning white... like for example, my moustache my hair they're all greying you know” (Larry)

Moreover, although (Victor) illustrated the importance of facial hair removal as an important personal factor “I wont go out if I don't shave my face” he suggested a positive approach to his appearance and age, thus signifying that self-care and social contact positively influence one’s emotional wellness and ability to embrace old age,

“I enjoy keeping my appearance, I say look I have a good look...let me tell you when you're always in contact with people, you don't realize that you're growing older, as long as you don't stop talking and meeting people, you wont realize or think about growing older”(Victor)

Self-Satisfaction and Acceptance in Late Adulthood

Self-satisfaction and acceptance was another psychological related theme. Although the majority of the participants portrayed high levels of self-satisfaction and acceptance, health constrains loss of spouse and desire for a female partner were also evident. Participants expressed positive emotional well-being and contentment with regards to their overall appearance and image in later life,

“With the way I look, I'm satisfied...actually the older I get the more relaxed I feel about myself and my appearance” (Joshua)

“I'm happy, happy, I'm good how I am” (Vinnie)

“I think I feel good, and my appearance that's how I am, and I'm happy with the way I look, I don't have any worries, till now, as I said I live day-by-day” (Larry)

One participant expressed personal satisfaction, however also portrayed the impact of physical constraints and ability to participate in activities, “I don't want to change anything, I'm happy with the way I am...Just my knee so I can do more things” (Victor).

Furthermore, although (Elijah) showed positive self- acceptance, he illustrated the impact of the loss of his wife, “I'm happy the way I am and my look only the loss of my wife makes me upset.”

Additionally, another participant expressed, self-satisfaction, with a desire for a female partner, this demonstrated the importance of self-gratification regardless to one's age and physical aptitude, “For me I think I'm confident, and I'm satisfied with myself...although I'm separated I still feel that I need a women, or a lady with me, at least not living with me but I could be satisfied, you know, I still feel these things”(Alfred).

Self- assurance and Psychological Empowerment

The final sub-theme, which emerged in relation to psychological well-being was *self- assurance and psychological empowerment*. Mainly three participants between the ages of 66-71, expressed a sense of self-encouragement and composure. This portrayed a sense of motivation and continuation in later life, embracing age and associated life changes,

“I'm not giving up, cause if you give up it would be a big problem, I'm going to keep going.” (Jonathan)

“So I think, the best thing is to keep your thoughts and values for yourself and appreciate who you are. You can't be, like, if someone comes to tell you about others, you shouldn't care, you should care about yourself and your happiness...”(Larry)

“I think its good to do things at this age, to make yourself feel like you're the same, not feeling old, continuing in life...”(Vinnie)

4.4 Physical Wellness in later life

With increasing age, physical and medical repercussions are highly evident. Throughout the study, participants illustrated a variety of physical related concerns including strength, medical constrains and pain, health, physical function and sexual intimate relationships. These were each categorised into sub-themes and participant illustrations were used where appropriate.

Physical Strength and Muscle Loss through the Ageing Process

Participants demonstrated a concern in loss of *physical strength* and muscle due to their increasing age; this further manifested the influence of physical setbacks with increasing age, which in turn impacts one’s sense of ability and confidence,

“Like now I'm aware that I'm not strong anymore, it's the first time were I'm actually allowing my wife to help as I don't have much strength anymore, but I still have works here and there...” (Pablo)

“I think a bit, you think about it like, I'm not the same as I was before, like I used to carry things here and there and even to myself I say my health is not the same, like you notice these things, eee...”(Mario)

“Like my body physique, like I'm not what I was you know... aha, I do feel, like physically you know, like I feel the age you know.”(Joshua)

Additionally, although one participant also portrayed his concern regarding his physical strength and age related changes,

“The only thing that concerns me is my strength, and my knees, it’s not going to stay the same aye, before I used to climb walls, now I cant even lift my leg too high...”(Vinnie)

He further expressed his desire to become more fit, and strong through gaining muscle in order to improve his overall masculine appearance “a body builder that's how id like to be” (Vinnie)

Health Related Concerns Amongst Older Men

Another sub-theme, which emerged was *medical concerns*. Participants all illustrated personal worries with regards to experiencing physical set backs in their daily life, including physical pain, physical mobility restrictions, and decrease ability to participate in social and personal activities. One participant portrayed the negative implications of physical setbacks and the impact on one’s ability to participate in social and physical activities,

“The only thing is my knee, and my shortness of breath...before I used to walk from the my house to Gillieru and back in 20 minutes, all the Bugibba front... and before my knee, I used to go 2 hours at the gym...but you have to stop from certain activities if you're in pain...”(Victor)

Moreover, (Victor) further illustrated how his physical setbacks led him to withdraw from social activities such as travelling, and going to the city, thus such hindrances influenced on one’s perceived self-efficacy,

“I used to go and spend all day outside going around, but now what am I going to... because I can’t stay long for a long time, cause after 15 minutes I need to sit down.”

Similarly another two participants expressed how their physical constraints influenced their daily activities, this suggested that physical functionality and pain often impacted on one's emotional well-being and social functioning,

“I don't go to a lot of places cause of my knee... I used to go walk my horses and sheep, and do things at the farm, but now I can't aye.”(Vinnie)

“But, you have to be careful, cause you catch the bus and you have to stay standing up all the way to Valletta... its too long, I have a bad hip so I have to be careful I cant stay up for long periods of time... its hurts, so I hesitate to go to these places...”(Jonathan)

Similarly, one participant expressed the impact of physical restraint, on his daily routine especially at work; which suggested a decrease in bodily satisfaction and thus experiencing a decrease in emotional wellness,

“When I feel the pain in my knee I'm not really happy... Cause it's like I want to do things but I can't you know, like even in the morning to start up the oven I need to lay down on the floor, and I cant kneel down and to get up it hurts a lot so... Even if I want my clothes to have a shower and stuff my wife brings me everything...also I try to avoid stairs as much as possible...”(Mark)

Moreover, one participant communicated the influence of physical concern, and his experience with multiple set-backs, thus suggesting a heightened influence of age related physical implications on one's psychological and physical wellness,

“Always with something I was worse than I am today, but I'm always going to hospital either for this thing or another... like I have bad coughs, pacemaker, I also I did my eye surgery, but to tell you the truth I'm seeing worse than I was before...” (Pablo)

In contrast, one participant portrayed a positive regard towards his physical health, expressing self-satisfaction and contentment,

“I didn't have any physical changes... medically, I don't have anything” (Alfred)

Health Prioritization in Late Adulthood

Throughout analysis, *Health* was found to be an important aspect for most of the participants. The majority of participants illustrated the importance of health in relation to personal happiness, together with being a main priority in their daily life. Thus physical health was associated with improved quality of life, positive mental health and an improved ability to cope with age related transformations,

“It's important to keep looking fresh and good, but also to keep your body up to date, and a good and healthy physique I think these are really important to me.” (Joshua)

“Medical, I'm always on top of things, I try to keep up to date, like, when I have a doctors appointment I try to keep it, even I take care of the things that don't show like, for example, at the end of the month I go see the doctor to trim my nails, next Tuesday I'm going to see the neurologist” (Jonathan)

“The most important is Health, you know and that you keep active and not like lay around doing nothing and feeling sorry for yourself...health is always a priority...”(Larry)

Similarly, one participant portrayed the importance of health together with being highly cautious of medicine and medical treatments; “not to take medicine as much as possible, I don't like putting things in my body, I try to be as natural as I can, I like to feel healthy...”(Chris)

However, in contrast one participant showed a concern of health constrains due to increasing age, this suggested that the participant portrayed an increased sensitivity towards age related implications and health related repercussions associated with increasing age,

“Like you start thinking more about illness and stuff, like you start thinking that you will be ill due to age, like you know... like only cause you stay thinking of becoming sick, like if you feel a bit unwell, you start to think that you have something serious or bad, you know you start worrying cause of the age aye, like when you're young you don't think about these things” (Peter)

Barriers and Motivations for Physical Activity

Physical Activity was a common concept, which emerged throughout analysis. Although most participants illustrated the influence of physical restrains on the ability to participate in such activities, most participants showed preference for walking as part of their daily routine. This highlighted the importance of maintaining physical activity in later life, in order to improve one’s quality of life, and overall appearance,

“Sometimes when it's a bit warm I go for a walk... I like to go out and walk, even now when its summer I'll start walking around you know.”(Jonathan)

“Exercise...I always did something, I love to walk, I used to play football, but these past years I walk a lot, yes I love walking”(Peter)

“I go walking, I try to keep myself active and going” (Larry)

Furthermore, one participant showed particular interest in exercising and keeping fit, expressing the importance of exercise and health; thus one observed an emphasis on maintaining a healthy lifestyle to enhance one’s health and overall well-being,

“I go to the gym everyday for an hour and a half, I go walking... I exercise a lot, I want to keep fit”(Chris)

Sexual Needs and Intimate Relationships

The final sub-theme that was established in relation to physical wellness was *sexual needs and intimate relationships*. Most, participants stated that with increasing age, intimate relationships were no longer a priority, especially due to physical constraints. This highlighted the various implications associated with age related changes, including physical limitations and a decrease in behavioural manifestations such as openness to experiences, including participating in sexual activities,

“...At the moment its like I don't have anything to tell you the truth, my health doesn't help either.”(Vinnie)

“Right now for sure not, as I take these pills for my prostate... with my wife, I told you nowadays, its not about the bed, were both getting ugly, for example, were always getting older...”(Pablo)

“I don't think so no, not at all my looks no, maybe my age” (Peter)

“Mmm, like, you're more reserved like you know, you stay a bit back...” (Mario)

In contrast, one participant illustrated that regardless of his age, he still feels the need for intimate relationships and a desire for female companionship, highlighting a significant presence of sexual desire and functionality, regardless of any age related alterations,

“I still want a woman, I don't know if you're understanding me... I feel that I'm still a man, and I'm still active but I don't stay hiding these things, I feel that I'm still active, why should I stay sacrificing myself... I still feel I need these things, even with my age.” (Alfred)

4.5 Appearance Investment in Old Age

Throughout analysis several concepts emerged which highly relate to appearance and image. Self-care, cleanliness, apparel and self-presentation were amongst the most common sub-themes that were developed.

Self-care practices in older adult men

Self-care was a common concept illustrated by most participants. Although participants portrayed a low maintenance self-care routine, all participants suggested the importance of keeping up their appearance together with their personalized care routines. This illustrated, that maintaining a healthy body image, influences an individual's self-esteem and emotional wellness,

“I shave my face and I take a shower, those are the only things I do to take care of the way I look I think” (Peter)

“I shave my face, do it quickly and that's it, I'm not one of those tal-pepe... but I take care of myself as a whole...” (Mario)

Moreover, participants suggested, age reducing techniques within their self-care routine. This suggests that participants portrayed an incline towards attaining a youthful appearance, and thus such anti-ageing strategies implicated ways in enhancing one's appearance and self-esteem,

“I like appearance and like you're careful and try to take care of the way you look... Like I take a shower, I change my clothes, and shave...I try to do something, yes all the time... at times I used to do some creams for my face...”(Pablo)

“I need to shave, I need to keep clean...I enjoy keeping my appearance, I say look I have a good look, like my hair, if its starts

growing I have to cut it cause I feel that it makes me look older, like 10 years older, I cut it every 3 weeks, or so I make an appointment to do my hair and keep it good.” (Victor)

“I try to keep my hair healthy so I don't go bald... I try to keep my appearance as much as I can” (Chris)

Other participants illustrated a more elaborate personal care routine, this highlighted that the actions involved in such practices aid in maintaining one's appearance and overall well-being, particularly influencing self-presentation in social scenarios.

“But my appearing's I try to keep them up...you know. I take a shower, I wash my teeth, I gargle and all that cause your breath needs to be not smelling and all that...so yes these things I take care of them, deodorant, after shave, perfume and stuff so you don't smell, these things you know I use everything.” (Jonathan)

“I like my routine, I shave everyday, I shower everyday, I change my clothes everyday, you know...I'm that type of person that whenever I shower I'm not going to wear the same of clothes, every time I want a new change of clothes, I want to keep clean... I try to keep the way I look as best I can.” (Chris)

“I do facials, yes so I remove my blackheads, cause the face is important... I go often to the beautician... if I don't keep up my appearance, at least I say, I give 90%, for my appearance, I think its important...”(Alfred)

Personal Grooming and Hygiene

Cleanliness and apparel were two common elements, which emerged throughout analysis. Most participants illustrated the importance of cleanliness and smart apparel; such factors were highly influential especially with maintaining their ideal body image.

This portrayed the positive effect of personal grooming practices on self-perceived body image,

“To keep up to date with fashion and how I keep up my appearance you know. Like when I buy something, I'm careful it has to be with the trend and fashionable...” (Joshua)

“Cleanliness for sure and to keep fit aye, for me they're important.”
(Larry)

“As long as I look clean and dressed well I think that's what's important... I used to love changing and choosing outfits to look good you know, and look smart... but my priority is to be clean...”(Peter)

One participant illustrated the importance of cleanliness, and keeping up ones appearance, regardless of ones age, this suggested an association between one's ability for self-care and bodily maintenance and societal influences.

"I shower, cause there are people who don't wash... its important to me, for social purposes, like you see certain people like even the way they dress, they're like careless, and dirty, because they're old, like what do you mean, you dress up smart and clean irrelevant to our age.”
(Victor)

Moreover, although (Mark) demonstrated the importance of cleanliness

“I go home take a shower, change and that's it, that's what's important for me, cleanliness, that's all I really care about, I'm like a duck always taking showers....” (Mark)

He suggested that comfort plays a more important role when choosing clothing rather than appeal and trend, this suggested a sense of self-acceptance and ability to experience appearance and image in a comforting manner, in later life.

“I’m not those type of men who needs like 6 pairs of trousers... if you give me a blue pair of trousers and a light blue shirt for me its fine, or a yellow shirt its still fine for me as long as I’m comfortable.” (Mark)

The Quest to Maintain a Healthy Physique

Throughout the interviews, weight management and physique, were common concepts that emerged amongst most participants. Most participants were cautious with their dietary intake, some had also tried multiple attempts at weight loss using different methods of dieting. Moreover, almost all participants participated in exercise regimens, however this was highly influenced due to their physical restraints. This highlighted the importance of maintaining one’s overall appearance and physique, which in turn impacts on one’s body satisfaction.

“Like I don’t eat bread, any pizza or junk food. I’m careful and choose what to eat.”(Chris)

“Although I like to eat, I try and eat vegetables...I like it but its not fattening...cause I don't want to get fat... I like to eat fruit a lot, and even bread I don't eat too much, like if I take a baguette in the morning, I wont eat bread again in the day...” (Vinnie)

Two participants illustrated the importance of diet and being slim. Furthermore, the participants also expressed a concern for gaining weight, suggesting that they weigh themselves on a daily basis. This illustrated the importance of weight management in obtaining an ideal and satisfactory body image.

“Before I came here I used to follow a diet, I was not fat like this when I came here, I was slim... I wanted to feel good, I used to weigh myself-often, also fats I don't eat too much, when I cook I don't use oil... like I don't eat too much sweets...”(Jonathan)

“I try diets from time to time, mhm, and I watch what I eat... I'm quite cautious of what and how much I eat as I said I weigh myself everyday just to see if the number is still the same.”(Joshua)

In addition, two other participants expressed the role of their spouse on their eating behaviours, and her influence on their weight management. Thus spousal involvement suggested an influence on one's ability to maintain a healthy lifestyle together with achieving one's ideal physique and overall appearance.

“Even my wife you know she does everything healthy and stuff even to cook, she tells me don't take too much salt, don't take too much bread as your growing old, she's always telling me things.”(Mark)

“Yes of course and with my wife she's like a soldier, with my wife, no bread, and she cooks nutritious, not like for pleasure and for me if I don't eat with a peace of bread its like I didn't eat well.”(Pablo)

In contrast one participant illustrated a lack of influence of weight management techniques, such as diets, this suggested a positive outlook towards one's overall weight and appearance,

“Diet... No, I don't believe in diets, morning I have a coffee, tea and one biscuit, at noon, I make soup everyday, and then in the evening I have the main meal, and if I eat at lunch, I need another main meal at night cause I wont sleep...I love chocolate too...” (Victor)

The Value of Self-presentation

Although several physical attributes were discussed with regards to body image and appearance, *self-presentation* was a common sub-theme, which emerged throughout analysis. This suggested that body image is not only influenced by physical attributes but also included ways by which individuals present them self in social scenarios. Moreover, maintaining an overall positive image including both physical and

personality traits, is suggested to be highly correlated in encouraging social interactions and attaining positive emotional wellness.

“I think its important to look nice and smart in front of people and keep a nice image of yourself... that you keep a smart image its important, like even the way you talk to someone... I think so, if someone looks at you and sees you as a smart and honest person, even the way you speak and things I think that others will have a good impression”(Elijah)

“Its my personality...as they say, that's I think, that's what you need the most, how you act in front of others, to take care of yourself, and how you behave and treat others, if you don't show respect, they wont show you respect, so you have to use one to compliment the other, as they say” (Jonathan)

“Cleanliness, what you wear, how you act, the way you speak, these things I think they're important... its important the way you present yourself to others aye, I think its important even to approach others...”(Peter)

“I think that it depends on the way you act in front of others... sometimes I say how come no one fights with me, I think cause its how you act and respect others.”(Victor)

4.6 The Influence of Personal Attributes on Psychological Well-being

In addition to physical characteristics, personal attributes such as life experiences, personality traits and age related adjustments were found to influence individual's psychological well-being and personal regard.

Age Related Adjustments in Late Adulthood

Throughout analysis, one observed the influence of age related changes on the participant's well-being. Participants aged between 71-87 expressed a heightened concern with regards to age related adjustments, thus expressed a more concerned approach towards age.

“When I was younger I used to go out and go swimming and do things, like now I stopped doing certain things, like with age you have to...”

(Mario)

“I think my age, you feel some things, like they're not there...they're missing...certain things for sure they're going to slow down or stop”

(Vinnie)

Moreover, two participants further manifested concerns, with regards to age and expressed a heightened awareness of death; this in turn influenced their overall psychological well-being,

“I think you start counting the days, like everyday, sometimes, I think about it like, another day passes and I say, another day towards death...” (Elijah)

“I don't have too much time left, I'm 71 now.”(Jonathan)

(Jonathan) further elaborated the influence of age related adjustments especially in socially related practices, this demonstrated acknowledgement of age related changes and associated consequences, which in turn hinders one's ability to participate independently within society,

"I don't have a licence anymore, I gave it up you know, cause of my eyes, and I think ahead, cause I don't want to be driving and something happens.” (Jonathan)

However, on a more positive note, he suggested the importance of keeping up his appearance regardless to his age. He also expressed a heightened emphasis on maintaining an appealing self-image especially in comparison to others,

“The way you dress, of course, cause since you're always out...you see people around you, and you see people younger than you, and they dress up derelict, you don't want to be like them, you want to dress properly, so you're always careful with the way you look aye...”
(Jonathan)

Similarly, several participants portrayed a more positive approach towards such age related adjustments, which illustrated self-confidence and body satisfaction regardless of one's age,

“Although I'm 72, I always feel like I'm 55... so when you keep yourself at an age of 65, you need to keep your appearance...”(Alfred)

“I think I matured, I think you mature with age... you need to keep up with your age you know...but, I'm still the same, I'm still as I was before age hasn't effected me...”(Larry)

“The only thing that's change is the numbers... ageing doesn't stop me from anything.”(Mark)

“I still feel and look okay, even I mentioned I'm not missing anything due to my age...”(Joshua)

Personality Traits and its Influence on Overall Image

Although physical attractiveness is suggested to aid with initial impressions, physical looks change overtime; furthermore, participants suggested the importance of *personality* and character as part of an individual's image. This suggested that in later

life, personality traits are often considered with greater regard than physical characteristics; moreover, illustrations representing the importance of personality were outlined;

“First impressions suggest a lot about someone... I think it's the character that says it all, you can have the most beautiful face but if you don't know how to go with people its not enough... everyone has imperfections, who's too tall, who's too short, but I think as I keep saying it depends on the character, someone's character is important...”(Alfred)

“But like its not only about the appearance, how you look physically from the outside, you need to get to know the person.” (Chris)

“Like I think for someone to be attractive it depends more on the personality...” (Joshua)

Personal Life Path and its Impact on Psychological Well-being

Moreover, from the interviews one observed the impact of *personal life experiences* on psychological wellbeing, with each participant having a unique representation.

Spousal loss was highly influential on widowed participant's psychological wellbeing which suggested alterations in one's emotional stability, however they portrayed that this did not influence their appearance and self-care routines, which demonstrated heightened coping abilities in adjustment to spousal loss,

“Yes sometimes you get those feelings...like for example, my first wife passed away, before this one I had another wife, and sometimes you get those feelings where you feel her loss...but no I've always continued to take care of myself.”(Vinnie)

“Being upset? Well cause of my wife of course, I mean her loss was too much...but, I'm the same you know, I still do the same things, I still take care of how I look.” (Larry)

Work experiences and achievements also played a role in influencing one's thoughts about appearance and image, moreover, one participant highlighted the influence of identifying with younger adults, which suggested an inclination towards maintaining a youthful appearance and overall image,

“I always worked with people younger than me, and like I've always worked in clothing, so its like part of me you know, even like its important to keep up with trends etc. to keep like a smart image.” (Joshua)

When discussing emotional experiences with regards to age related physical changes, (Elijah) expressed “not that I'm going to commit suicide...” however he further illustrated that when experiencing such emotions he reminisces on his work achievements and thus allowing himself to maintain self-compassion together with achieving a healthy attitude towards oneself “for me when this happens and I think about all the work I've done and all the movies I made, by which I made people happy, cause I think with my work I gave a lot of pleasure and happiness to people with my work, so I say it could have been worse, so I thank God.”

Additionally, another participant demonstrated the influence of lack of education and self-confidence; this illustrated a sense of decreased self-efficacy, which may have impacted on one's personal behaviours, emotional patterns and social participation,

“I was very nervous, you see my nails you would never have seen them this long, I used to bite them off, and always I keep thinking, that because I didn't have an education, its like I always stayed backwards...I'm not educated, you know and to join groups or clubs, you need to have some education, so, I don't make a move, I stay back.” (Jonathan)

Moreover, the participant also suggested that travelling and living overseas allowed him to maintain a younger looking appearance, emphasising the influence of personal life experiences in maintaining one's overall look,

“Someone told me how young I look for 70, and I said maybe because I was abroad, maybe the air is better there than here, cause of the sun we become more dry here in Malta, so we age quicker...”(Jonathan)

4.7 Active Involvement within Society

Social participation is regarded as an important criterion of quality of life. In later life, social involvement often changes due to life transitions such as retirement, and decline in individual capacities both physical and mental. Throughout analysis, several relating factors emerged, including active involvement, social activities, and social contact.

Instrumental Activities of Daily Living

Most participants, illustrated the importance of participating in *daily activities*, and involving oneself in diverse activities, this suggested that age does not restrict their active involvement. This demonstrated that active involvement improved one's quality of life, and thus aided in maintaining positive emotional wellness.

“In the morning I don't have enough time, its runs out too quickly, I go to mass, I go shopping, you have to see what you're going to cook for the day, and then I eat, watch TV till like 3, and then I rest for an hour... but then from 4 onwards I don't know what to do... sitting down from 4-12? No, no on the sofa? So I go out...”(Victor)

“I go out for a walk...of course of course no way I'm no going to stay at home and watch TV, then like from here ill go cook something to eat, rest maybe till 4 and ill go out again ill stay out till 7-8” (Alfred)

One participant, illustrated his passion in writing novels, “I have a lot of hobbies, now at the moment I'm writing a novel about a movie which I had produced and directed, I'm on page 103” (Elijah)

Moreover, although most participants were retired, three participants aged between (64-70) continued to participate in work environments, expressing a positive impact on their psychological well-being. This was portrayed as a fulfilling experience, which in turn reinforces meaning in later life,

“I love to work...I'm a workaholic... mmm anything actually, whatever, as long as I'm doing something and I'm on the go... Yes, I need to be active or else I'll end up sleeping if I sit down”(Mark)

“I keep going to work I go with my kids, and do light work, drive and carry light things, even in the evening when I go home, I stay working on jigsaw-puzzles... sometimes I don't do anything but as long as I get out of the house you know.”(Mario)

“I'm still very, very active, everybody shouts at me while I'm still working so hard.”(Joshua)

The participant further suggested how age has not influenced his active involvement, thus demonstrated that age and associated changes do not hinder one's ability to participate within society, allowing to maintain positive sense of well-being,

“I mean I go out, I can go anywhere, I don't feel any different, no no, I can go anywhere.” (Joshua)

Meaningful Ageing through Social Involvement

Social involvement, was another common concept, which emerged throughout analysis. Regardless of the diverse implications related to the ageing process such as physical

constrains, participants demonstrated social involvement, with each participant expressing their own personal account.

Travelling was a common notion discussed throughout the interviews, several participants illustrated that regardless of their age and physical constrains, exploring other countries was of importance in order to continue to participate within society. This highlighted the importance of social inclusion and its influence on one's quality of life and self-satisfaction,

Although (Jonathan) expressed his interests in travelling;

“I want to go overseas I want to go to the UK, or France or Italy, I already went to Italy once, and I'm going again this year...”

He further communicated that regardless of his age and appearance, loneliness is a significant factor, which influenced his ability to participate in social activities. This in turn disturbed his psychological well-being leading to lack of self-confidence and contributing to life dissatisfaction,

“But if I have someone to go out with, or go places together, but going alone I don't know, even going out to eat there's someone with you... you go to a restaurant alone, its like everyone starts looking at you so... I have to be careful where I go... its not that I have something to hide or cause of my age but like... the consideration that comes from within you, but otherwise I enjoy going out... but cause I don't have anyone to go out with, I stay at home cause then you become more depressed.” (Jonathan)

In addition, Vinnie expressed that although encountering physical constrains, he is optimistic about travelling, thus illustrated a sense of contentment and determination,

“I'm waiting for my knee, to check with my doctor if I can go abroad... every year I go to Thailand...I love to travel, Ill be waiting for it, even

though its 2 planes to get there, but firstly I find it comfortable relaxing you know..." (Vinnie)

Moreover, he further suggested that regardless of his physical pain, being active and participating within society plays an important role in his daily life. Active involvement and integrating with younger adults were demonstrated as contributing factors towards positive emotional wellness, and quality of life,

"I always want to do something, I don't like to do nothing, I have to be in a lot of pain not to do things...where there are young people the more I go" (Vinnie)

One participant illustrated that participating in social environments aids in keeping up one's appearance and image, which highlighted the importance that with age life must continue to progress in order to achieve life satisfaction and overall well-being,

"I think doing a lot of activities helps you to keep up with your appearance, like it doesn't mean cause you're older you sit down and do nothing..."(Victor)

He further communicated his involvement in social activities, this suggested a heightened regard for self-independence and development in later life, "I like to go out and go to the casino, I go with my car, its more comfortable like that and I'm more independent..." (Victor)

Similarly (Alfred) demonstrated his involvement and desire to continue to be active within society, "I try to engage in a lot of different things." Moreover, he further emphasised the importance of progression in life regardless of age, this suggested positive self-regard and self-motivation,

"I'll keep going abroad, I'm going to Hungary, now, alone with my wife or with someone else, I'm going to go, I'm not going to give up, not any time soon... cause age, I think, I've always believed that time

passes and will not ever come back...so you cant say, listen, now I'm old, I'm 72, so I'm not going to go anywhere... No..." (Alfred)

In addition, another participant demonstrated that in later life social involvement provided greater satisfaction in comparison to his younger years, thus illustrated a sense of life self-contentment and life-satisfaction,

"When I used to work I worked for 16 hours a day on my feet, always tired and not feeling like doing other things, but now my life is like full of things, I move around all the time..." (Pablo)

The participant further highlighted, his involvement in social activities and the importance of maintaining an active role within society,

"For example I go drive my sons kids 3 times a day, I go eat in Mġarr, I go to Żebbiegħ, I talk to local people, but like if I don't have these things ill go crazy, I don't want to stay at home.... I still have works here and there, for example I rent places, my shop I still go and see how it's doing..." (Pablo)

The Importance of Social Connections in Older Adults

Social contact was also a common factor, related to social involvement. Several participants expressed a heightened interest in meeting and communicating with others, this highlighted the positive effects of social connections on mental health and well-being,

"I'm a person who likes to talk to people, I go out, I stop people to talk with them... I enjoy it" (Alfred)

"The priest takes us out on these outings you know, I like to go as were a group you know, like we go for a breakfast, or for lunch, I enjoy it and I always go, cause we talk and we meet up, like people of my age..." (Peter)

“Let me tell you when you're always in contact with people, you don't realize that you're growing older, as long as you don't stop talking and meeting people, you won't realize or think about growing older.”(Victor)

One participant suggested that through his experience, in later life, social contact has become more challenging due to different life circumstances;

“I fight it everyday to try and find someone's company... you don't find people my age, like who's dying, who's sick, who's in a home...”
(Pablo)

4.8 Social Influence at Older Ages

Social influence often plays an important role in influencing individual's emotions, opinions and behaviours. Family, peers and media are all contributing factors which influence and shape individual's personal beliefs and values. Moreover, such influences often lead to age related and social comparison where individuals evaluate their personal worth in relation to others. Such concepts, which emerged throughout analysis, were illustrated with corresponding participant quotes.

Family Influence on Body Image

From the analysis, *family roles*, were found to be an influencing factor on participants, sense of appearance and body image. Most participants illustrated marital dependence with regards to apparel, including purchase, and preparation of outfits. Thus spousal involvement was portrayed as playing an important role in maintaining one's overall image and appearance,

“I'm those guys which my wife prepares everything for me...she prepares everything herself. Cause for me clothes for the morning and for the evening are all the same...”(Mark)

He further illustrated, his wife's involvement in taking care of his appearance. Moreover, spousal involvement may contribute to an individual's endeavour in acquiring ideal image and appearance,

“Cause she's always nagging, and saying how I don't care about these things, and that I'm way back in trends etc., and a lot of these things.”

(Mark)

Moreover, two participants expressed having to learn to prepare their own clothing and regard their own personal appearance after the loss of their spouse, suggesting a relationship between spousal involvement and one's ability in keeping up their appearance,

"We used to go together, but she used to prepare what I wear and stuff and even she would choose what to buy... now I've learnt from her you know, I'm alone so I have to do these things even if I don't want to.”

(Larry)

“My wife used to prepare everything, I used to find everything ready at home... now I iron my clothes, I wash them... eee ...” (Victor)

In contrast, one participant suggested the importance of independence and personal choice;

“I've always bought everything myself, and choose my own outfit, yes whatever I like I wear, I don't like people telling me what to do etc.”(Vinnie)

Moreover, other participants illustrated a sense of family involvement, with regards to keeping up their appearance, such involvement was regarded as a direct influence in attaining their overall look,

“If you have your wife like she pushes you aye to keep yourself looking good, like she tells me you have to shave before we go out, you have to do this and this or wear this not that (Laughs), like she tells me don't wear those shoes... even my kids sometimes they tell me, is this how you're dressing?”(Mario)

“Nowadays, my kids I mean they're always buying clothes and stuff, like for me they always keep up with trends and stuff, so like they influence me to keep up to date with fashion and how I keep up my appearance and look...”(Joshua)

Additionally, two participants described the influence of their childhood experiences with regards to their image and appearance; such roles influenced one’s development of self-regard and self-satisfaction,

“Like when you're young they teach you to better yourself and achieve a good well-being, yes and like even with my brothers like I used to see what they're wearing and like I used to copy them, I used to look up to my elder brothers you know its like I wanted to be like them and look like them you know”(Peter)

“I don't know compliments or these things, at home I never had and neither now with my wife, so I never really had this sense of high confidence, but if I see that you care for me and things I don't need these things after all” (Pablo)

The Impact of Media Exposure on Personal Appearance

The influence of *media*, on body image and appearance was commonly discussed throughout the interviews.

Several participants illustrated a lack of involvement in influence with regards to media. This illustrated a lack of regard towards the media's representation of ideal body image and youth,

“No they don't really influence me at all, well actually I don't really take notice of them you know. I watch the news, or like a movie, but not like too long... even my wife tells me, look at this and this, I don't really care at all” (Mark)

“No these things don't affect me at all...” (Peter)

“That's the least thing that will influence me, especially when I see all these contradictions,” (Alfred)

“I think 2 things, these things are fake and exaggerated, you have to check everything, I don't trust anyone especially these adverts we see,”(Victor)

In contrast, two participants presented a heightened interest in media, which was suggested as an influential factor with regards to appearance and self-care;

“There are some, which yes they do influence me... example hair shampoos, facial treatments, perfumes, yes I like to check out these things...”(Chris)

“I was seeing a program and the doctor was saying that people of my age shouldn't eat meat, and me in the morning I like to take tea and bread with ham, and like so today I didn't take ham...”(Elijah)

Furthermore, when asked to express their opinion with regards to the media's representation of older adults most participants demonstrated a positive viewpoint. This illustrated a sense of positive perceptions with regards to

ageing and in turn promoting social inclusion and positive regard for older adults,

“I think there's good information on elderly, and things have changed like they don't leave out elderly or ignore them like now we hear a lot of discussions about ageing and stuff people have become more outspoken on the topic...”(Larry)

“I think its good, they promote them nowadays I think, and they do programmes on a lot of things which are useful for people of our age, but I think its more directed to women you know.”(Vinnie)

“I think its important for media, to promote these things cause, there are some people who would need that boost or push so to speak you know, to make an effort, so if like you see adverts or things maybe he will try...”(Joshua)

Moreover the participant suggested, that media often tries to portray an ideal body image which may be influential on one's self-esteem and confidence,

“I imagine... with the way they try to portray men and women...they try to make this ideal I think, but it depends on you on how influenced you are by these things...” (Joshua)

Perceived Age Discrimination in Older Adults

Within social affairs, *discrimination*, amongst different categories of people, such as age, is often experienced. Throughout the analysis, several participants, especially participants aged between (71-87), illustrated their personal experiences with regards to age discrimination and its impact on their psychological well-being, this suggested a sense of apprehension and emotional distress,

“Sometimes they pass comments like, “cause you're growing older” and “ you did your time” or “ now its not like in your days” you

know... even sometimes ill be talking and they tell me “ aa, now you’re growing older” (Mario)

“Once I was walking I was telling him to drive slowly, he told me, buzz of you old man, and, yes one time I went to an office to help around, and there was a lady to told me, do you think we want old people like you... and I was so upset.”(Pablo)

In contrast, one participant suggested a more optimistic experience when reaching retirement;

“When I was going to receive my pension, and I used to work in Libya, they told me would you stay longer, they wanted me to stay longer, I told them yes but to Australia next to my brothers and sisters.” (Victor)

Social Comparison and its Impact on Self-evaluation

Social comparison, emerged to be a highly influencing factor, with regards to appearance and self-care. Most participants suggested evaluating personal characteristics in comparison to others, including attractiveness, apparel and cleanliness. Thus this highlighted the importance of maintaining one’s overall appearance especially in social scenarios, which in turn aids in achieving self-confidence and satisfaction,

“People of my age yes, and I compare as in, that they don't care about the way they look, they should make an effort... When I see others they don't shave, I say how do they go out like that dirty, cause for me that's dirty, I don't like it...I don't know the majority of men, don't care but then there are those who are too careless.”(Victor)

“Yes of course, I do, like I comment if someone is dressed smart and looking smarter than me, like in a way it helps me with ways I can improve the way I look you know, and yes sometimes the other way

like I see someone who's not clean or shaven and ill feel better in a sense... you know" (Peter)

"Yes, I do, like if I see someone dressed up nicely I comment and even if someone doesn't keep his appearance tidy I also comment about it, I think people should at least do the minimum to keep looking fit and good... I do compare myself to them, like I can do this to improve this... like even if I see someone who's looking good and smart, I sometimes also copy him not copy him but try to get his look, in the end to keep looking good aye."(Chris)

In contrast, only one participant illustrated a lack of interest in social comparison and personal influence;

"No, it's not my business on other people, no, no." (Elijah)

The Influence of Societal Factors on Older Male Body Image

Societal influence, was illustrated as a highly influential factor on personal perspectives, including emotional wellness and maintaining appearance. Although participants portrayed a minimal societal influence, several expressed their own personal encounters;

"I think my attitude and the way I approach people I think it helps me, I think you need to be capable to live with people, and speak and approach others, as I said no one is perfect but you have to accept others opinions"(Alfred)

"Like I can't compare a 25 year old with me, like you know. Like but someone of my age, and he's looking better than me I think that maybe I can do something to improve myself, like maybe lose some weight off my stomach, but I'm not going to do Botox, and all this you know, and hair implants and stuff..."(Larry)

“I think, the people around you, even if there's someone who says just a small word, I think it effects you... I point my hands in a horn to a lot of people, I try that whoever asks me about my age I don't know about it, I'm very superstitious, for example it happens a lot someone asks me my age and then like the day after I get sick or something” (Victor)

Two participants suggested that societal and peer influences do not affect their personal thoughts and beliefs, this illustrated personal autonomy and self-determination,

“I don't really bother about others opinions on me, I'm that type of guy whoever passes a comment I take it as a joke... I don't like people who stay commenting on others like look at this or this or this... I don't like this stuff...they don't actually influence me.” (Mark)

“If I don't like something that someone tells me I let it pass through my other ear... I don't say anything, I don't bother about it... I mean it depends on peoples character, like I was saying if someone tells me something and I don't agree with him, I let him be, I'm not going to let him change what I think.” (Chris)

4.9 Conclusion

Through this chapter, the different themes and sub-themes that were derived from analysis, through the researcher's interpretations, were explored in detail and any comparisons and similarities between participants were highlighted. The following chapter will delve into a more in depth discussion of results, which will analyse and evaluate the emergent themes and link them to relevant literature.

CHAPTER 5

FINDINGS AND DISCUSSION

This study investigated the experiences of older males in regards to body image and psychological well-being. Two research questions were addressed: a. How do older Maltese men experience and perceive their body image and how are their experiences and perceptions related to their psychological wellbeing? and b. How does body image influence older Maltese men's self-esteem and quality of life? Thus, the purpose of this chapter is to address how the key findings of this study advance or contradict previous literature.

5.1 Psychological Well-being in Late Adulthood

The experience of body image in later life, and its impact on psychological wellbeing has been highly evident within the findings. Emotional wellness was a common construct, which emerged throughout analysis, although several participants expressed positive emotional wellbeing with regards to the way they experience their ageing body and appearance, most participants expressed that negative emotions and thoughts concerning one's body and appearance may often impact the individual's psychological wellbeing. This is supported by, Davison and McCabe (2005) who demonstrate that disturbances in body image impacts one's psychological well-being and thus results to symptoms of depression and anxiety amongst older adults aged between 50-86 years of age.

Most participants in this study linked self-confidence and satisfaction with their appearance and personal look. Conforming to previous research which shows that older men are most often less concerned about their physical well-being and age-related bodily transformations and display higher sense of self in comparison to older women (Demarest & Allen, 2000; Ferraro et al., 2008). Moreover, Ross et al., (1989) further illustrate that older adults expressed positive levels of self-evaluation of the body in comparison to younger counterparts.

Self-esteem, was another concept, which emerged throughout analysis. Mirza, Davis, and Yanovski (2005), suggest a link between body image (i.e. appearance) confidence and self-esteem. Several participants exhibited positive self-esteem, with regards to their appearance and age, demonstrating a sense of self-confidence with the way they look. However, additional factors, including physical constrains, spousal loss and appearance, were found to exhibit a negative influence on participant's self-esteem. This is further supported through literature (Kreuger, 1989; Oh, 1999), which suggests that physical changes of the body in later life influence an individual's body image and personal perceptions and attitudes towards oneself, moreover they suggest that the ageing process and physical transformations associated with later adulthood often causes susceptibility of the older adult to develop problems associated with body image. Additionally, bereavement and spousal loss were found to contribute to the decline in levels of self-esteem in later life (Baker & Gringart; Baltes & Mayer, 1999).

Throughout analysis, self-consciousness was a common principle, which emerged amongst the participants. The majority of participants illustrated an increase in self-consciousness with regards to their appearance, and bodily age related changes including weight gain, and hair related issues such as change in colour and hair loss. Similarly, Harris (1994) suggests that older adults experienced higher levels of concern and where more conscious to physical changes associated with ageing such as wrinkling of the skin and hair loss. Additionally, several participants illustrated a heightened concern with regards to weight gain, demonstrating an increased self-consciousness. This is represented in present literature (Tiggemann, 2004) suggests that gaining weight, common in later adulthood, may often lead to increased difficulties in attaining an ideal body in later life. Moreover, body dissatisfaction in men has been associated with desire for loss of body fat and gain in muscle mass (Nowell & Ricciardelli, 2008; Reddy, 2013)

The ageing process brings about diverse physical and psychological changes, which often influence individual's self-satisfaction and emotional well-being. Although a lack of research is evident with regards to self-satisfaction and body image in later life, most participants within the study portrayed heightened levels of self-satisfaction and

acceptance. However, as perceived throughout analysis, several participants including Joshua and Victor, illustrate spousal loss, physical constrains and companionship as influential factors, which often lead to a decrease in self- satisfaction and contentment. Blazer (2002) illustrates that negative physical consequences have been associated with body image and dissatisfaction. Moreover, Clarke and Korotchenko (2011), state that functional decline may negatively influence men due to the fact that strength, independence and physical function are highly related to masculinity and male self-esteem.

Moreover, in relation to psychological well-being adults aged between (71-87), expressed a sense of self-assurance and empowerment, suggesting self-encouragement and optimistic future oriented beliefs, regardless of life setbacks, including age related hindrances, such as physical constrains. Although a lack of research is evident with regards to self-assurance and empowerment in older adult men, Cha, Seo and Sok (2012) suggest that achieving a sense of self-achievement increases feelings of self-worth and self-efficacy, which in turn improve positive mental health status and psychological well-being necessary for successful ageing.

5.2 Physical Wellness in Later Life

Throughout the ageing process, older adults experience significant changes in physical appearance and functionality. Participants illustrate their experience in later life, suggesting an increase in physical and medical constrains. From this study, the majority of participants exhibited several issues of concern, especially physically related constrains, including loss of strength, health, physical function and pain and influence on intimate relationships. Participants, including Pablo, Mario and Joshua, portrayed loss in physical strength as highly influential, illustrating a decrease in performance with increasing age. Drummond (2003) illustrates that men often correlated later life with a decline in physical function, intimidating their masculinity and societal devaluation. However, Slevin and Linneman (2010) suggest that although men may experience such declines in masculinity, men become more accepting of themselves and their image.

The likelihood of developing a health problem increases as people age. Moreover, functional loss in later life is often related to health consequences rather than normal ageing (Besdine, 2018). Health and medical concerns were principal factors, expressed throughout the research findings. Most participants expressed physical restrictions and repercussions including physical pain and mobility restrictions, which impede on one's ability to participate in social and personal activities. The majority of participants disclosed feelings of discomfort due to pain in their knees and legs. Such manifestations often led to experiencing walking restrictions and a reduced ability to stand up for long periods of time as illustrated by Mark and Jonathan. Moreover, Paxton and Phythian (1999) suggest that older men have less positive attitudes about their body, especially in terms of factors associated with body functioning including physical functioning and decline, co-ordination, agility, and onset of disabling health conditions. Such factors have been found to influence older men's negative perceptions about their body image and thus influencing their psychological well-being (Baker & Gringart, 2009; Hurd-Clarke & Griffin, 2008).

Additionally, one observed the importance of health and personal care in later life, manifested as being central in each participant's daily life, together with contributing to personal contentment and emotional wellness. This is further supported by Halliwell and Dittmar (2003), who illustrate that older men prioritize health and fitness, thus suggesting that older men's desire for a healthy body does not necessarily require the need to look good. In contrast Janelli (1993), demonstrates that men were often dissatisfied with their health, legs, eyes and teeth, which were found to be directly linked to body functioning.

Moreover, although most participants manifested the influence of physical and medical constrains on the ability to participate in physical activities, several participants expressed a preference for short distance walking as part of their daily routine. Moreover, in relation to physical activities, research suggests that older men participating in physical activity expressed increased interest in maintaining an ideal body shape, depicting that general physical appearance influences older adult's sense of body image and self-esteem. Further research also illustrates that older men perceived

an increase in body attractiveness following an exercise program (McAuley et al., 2000).

In relation to physical wellness sexual needs and intimate relationships were common concepts expressed throughout the interviews. In later life, the majority of participants described a decrease in sexual activities, suggesting that intimate relationships were no longer a priority within their marital relationships, especially due to physical and age related constraints. Moreover, one participant, (Alfred) portrayed a heightened emphasis on the need for intimate relationships and female companionship regardless of his age. Although a lack of relevant research is available (Kimmel, 2007; Oliffe, 2006; Tannenbaum & Frank, 2011), suggest that with increasing age, physical changes to the body may be detrimental, and may cause to experience decline in masculinity related to hegemonic ideals of independence, power, self-reliance, physical and sexual competence and immunity to pain.

5.3 Appearance Investment in Old Age

Appearance has been suggested to play a primary role in influencing an individual's body image and self-esteem. Within this study, several concepts relating to appearance were established. Amongst the most prominent factors, participants emphasized the importance of self-care, cleanliness, apparel and self-presentation. All factors were of high importance especially in presenting oneself in social situations together with enhancing self-satisfaction. Similarly, research suggests that, body functioning and physical appearance are a central component of body image, which in turn influences the individual's psychological well-being and satisfaction with life (Arbour & Martin Ginis, 2008; de Souto Barretto et al., 2011).

Although participants within the study portrayed a low maintenance self-care routine, all participants illustrated the importance of keeping up their appearance, together with communicating their personalised care routines. Lippa (2007) suggests that in comparison to women, men are more consciously aware of the importance of physical attractiveness. Davison (2002) further suggests that men are highly motivated to improve their overall appearance. However, in contrast Halliwell and Dittmar (2003)

illustrate that men are more focused and concerned on functionality rather than appearance.

Furthermore, several participants discuss age reducing techniques, which are incorporated within their daily routine, including hair care to prevent baldness and facial creams to improve the skin, as illustrated by Chris and Vinnie. Similarly, Reddy (2013) suggests that although some men were more hesitant towards the use of cosmetic procedures in order to improve one's appearance, others were more inclined in using cosmetic treatments to conceal the effects of ageing. However, in contrast to the findings, Holliday and Carnie (2007), demonstrate that men often resort to aesthetic surgery in order to alleviate the physical changes associated with later life, such as balding, spreading and greying of hair, in order to be able to represent themselves as more slender, younger and successful.

In addition, participants illustrated the importance of cleanliness and smart apparel. This suggested that such factors influenced in maintaining their ideal body image. Moreover, several participants communicated that such factors should be regarded in keeping a positive self-regard, regardless of one's age. Furthermore, findings of the study illustrate that older men are often aware and opinionated with regards to others capability of self-care and cleanliness. Although a lack of literature is evident regarding cleanliness and apparel in older adult men, Kaiser (1997) highlights the importance of personal appearance and apparel in social interactions. Moreover, Creekmore (1974) suggests that clothing may play an influential role on self-esteem. The author illustrates that in individuals with lower self-esteem, clothing enriches positive feelings about oneself, whilst in individual's with higher levels of self-esteem apparel acts as an expression of a positive self-regard.

Individuals experience diverse perceptions with regards to their own body weight. Although some may describe their weight as 'normal', others may express a desire for weight loss, whilst others may aspire to gain weight. Most participants within the study suggested an enhanced regard towards their dietary intake, with some participating in multiple attempts for weight loss. Moreover, most participants suggested that despite their lack of physical and medical constrains, physical exercise was incorporated within

their daily routine, mainly low intensity walking. In addition, several participants also highlighted the influence of their spouse on their weight management, suggesting a heightened involvement, in food choices and exercise regimen. Thus findings illustrated that most participants expressed discomfort with their current weight and concern for gaining weight, including desire for weight loss. Moreover, when participants were presented with a figure rating scale, responses suggested a desire for a thinner frame and weight loss from their current body image. Thus such results enhance the literature, which suggests, a lack of research regarding muscle and weight gain concerns in men (Ricciardelli, 2004). Furthermore, the findings contradict Mintz and Betz (1986) who suggest that men who experienced body dissatisfaction tended to regard themselves as underweight, thus portraying a desire to gain weight.

Furthermore, participants illustrate that body image is not only influenced by physical attributes but also include ways by which individuals present themselves in social scenarios. The findings highlighted demeanour, respect towards others and personality traits as factors influencing self-presentation and image. In relation to the findings, Abraham and Hansson (1995) demonstrate that in later life individuals perform various self-presentational strategies in order to minimize the impact of physical and functional losses, especially regarding the influence on other individual's evaluation of their abilities.

5.4 The Influence of Personal Attributes on Psychological Well-being

Several contributing factors are found to influence an individual's psychological well-being and personal regard. In addition to physical characteristics, personal attributes such as life experiences, personality traits and age related adjustments, influence individual's body image and appearance. Participants within this study who were between the ages of (71-87) illustrated a heightened acknowledgement of age related adjustments, suggesting an increased concern in relation to later life and anticipation towards later life. Moreover, although a lack of relevant literature is available, the third stage in Peck's theory, of ego transcendence versus ego preoccupation concentrates on life reflection and acceptance of eventual death. Which suggests that individual's should focus beyond mortality and remain active and involved order to achieve ego-

transcendence (Thimann, 2013). This was highlighted in the section related to self-assurance and psychological empowerment with the illustrations of Jonathan, Larry and Vinnie. Furthermore, several participants portrayed a more positive approach towards age related adjustments suggesting that age does not influence their personal attributes.

Participants suggested that physical attractiveness increased their sense of self-confidence and body satisfaction, which in turn influenced initial impressions in social environments. However physical attributes often change over time, due to the several impeding factors. Moreover, participants prioritised the importance of personality traits and individuality contributing to individual's image and self-presentation. Although a lack of research is evident with regards to influential factors of body image and appearance in older men, Cash (2002) suggests that individual's perceptions, personality and physical characteristics influence one's attitude towards themselves.

Throughout the results, personal life experiences have been illustrated as a predisposing factor on one's psychological wellbeing and emotional wellness. Each participant portrayed a unique representation, however, spousal loss, work experiences, lack of education and travelling were amongst the most common influencing factors. This is further supported by Cash (2002), who illustrates that body image may be influenced by historical and developmental factors, personal life events and experiences. Moreover, current life scenarios may also influence an individual's body image experience, such as body related emotions, internal dialogues and self-control and regulations.

5.5 Active Involvement within Society

Social participation is often regarded as an influential factor of quality of life in old age. In later life social involvement is often influenced due to life transitions, including retirement, and decline in physical and mental capacities. Regardless of their age and physical constrains, participants encompassed common factors in relation to social participation and highlighted the importance of active involvement, social activities and social contact. Participants demonstrated that active involvement played an important role on their psychological well-being, especially with regards to the influence of age.

Moreover, research suggests that although older adults are aware of the sociocultural pressures of youthful appearance ideals, injustices of ageism and inevitability of ageing, individuals continue to participate in actions and behaviours in an effort to conceal physical signs of ageing (Hurd-Clarke & Griffin, 2008; Jankowski, et al., 2005; Muise & Desmarais, 2010).

Moreover, throughout the findings, participants suggested that social involvement and continued participation allows one to maintain one's image and appearance. Moreover, this highlighted the importance on continued progression in life, regardless of one's age and physical functionality, thus empowering quality of life. In relation to the findings, research demonstrates that in order to achieve personal satisfaction, individuals should focus on their interests, interpersonal relationships and psycho-social related activities allowing individuals to obtain a positive aspect on their life (Aitken & Rudolph, 2012; Lueckenotte, 2000). Moreover, the second stage of the theory of selective optimization suggests that individuals should participate in actions and behaviours in order to enrich their lives.

Additionally, in relation to social involvement, participants portrayed a heightened interest in social contact and communication. Participants illustrated, social meetings and communication as vital components in attaining positive emotional wellness and quality of life. Moreover one participant, (Pablo), elaborated that with increasing age, social contact proves to be more challenging due to increase in life challenges such as, institutionalization, health constrains and death. Although less research has focused on the relationship between social contact and well-being in older men, Mitas, Yarnal, and Chick (2012) suggest that social environments enhances positive emotional wellness, humour and companionship. Moreover, research suggests that characteristics associated with social activities including laughter and enjoyment are influencing factors on older adult health (Cheang, 2002; Yarnal et al., 2008).

5.6 Social Influence at Older Ages

Societal influence is often portrayed as being highly influential on one's beliefs, attitudes and behaviours. Family, peers and media are all contributing factors which

impact and shape one's personal values and principles. Moreover, societal norms may play a vital role in development and maintenance of one's body image and self-esteem, as individuals often evaluate their personal worth in relation to others. Within this study several influential factors developed, including family roles, childhood experiences, media, and social comparison.

Within the findings, family roles were described as an influencing factor on one's sense of appearance and body image. The majority of participants illustrated marital dependence with regards to apparel, including purchase of garments, preparation and choice of outfits. Moreover, family involvement was suggested to contribute to keeping up one's appearance and image. Only one participant, (Vinnie), communicated the importance of independence and personal choice with regards to appearance and personal choice of clothing. Additionally, childhood experiences, as illustrated by Peter and Pablo, were suggested to influence one's personal development of body image and appearance. In accordance to the findings, research shows that both family and peers have a significant role in the development of one's body image (Ata, Ludden, & Lally, 2007; Grogan & Richards, 2002). Furthermore, Reddy (2013) demonstrates that verbal and non-verbal feedback postulated by family members and outsiders may influence an individual's perceptions, attitudes and behaviours related to one's appearance and body satisfaction.

Media has been often depicted to be highly influential on the development of body image and appearance. Within the findings several participants suggested a lack of involvement in media related influence, including adverts and other related content, emphasizing a lack of regard to such factors. In contrast, some participants illustrated a heightened interest in products and other associated content, which suggested an enhanced influence on one's appearance and self-care routine. Although a lack of related literature is evident, studies suggest a connection between exposure to media ideals and body dissatisfaction amongst men (Leit et al., 2002; Lorenzen et al., 2004). Furthermore, Agliata and Tantleff-Dunn (2004) suggest heightened levels of muscle dissatisfaction and depression following exposure to ideal male images in TV adverts. Moreover, participants within the study expressed a positive attitude towards the representation of older adults in local media.

Throughout the findings, participants aged between (71-87) communicated their experiences with regards to age discrimination and its impact on psychological well-being. Verbal insults and discriminating actions were amongst the experiences illustrated within the study. World Health Organisation (2016) suggests a generalized negative and ageist attitude towards older adults, which in turn negatively influences older adult's physical and mental wellbeing.

Participants within the study suggested social comparison to be a highly influencing factor with regards to appearance and self-care. Although findings suggested a lack of personal impact from social contexts, peers and other individuals, most participants demonstrated self-evaluation in comparison to others, regarding personal characteristics such as attractiveness, apparel and cleanliness. Most participants expressed a heightened confidence with their appearance in comparison to others, however they also suggested manifesting in behaviours to achieve other's looks and sense of style. In contrast to the findings, Davison and McCabe (2005) postulate that older individuals express less concern about others evaluations and are less likely to compare their self and body image with that of others.

Similarly, societal influences pertaining age and appearance were suggested to play an influential role on one's personal perspectives including emotional wellness and appearance. Most participants expressed minimal societal influence, however self-presentation, verbal communication, and opinions were demonstrated as contributing to one's image and appearance. However, in contrast to the study findings, Adams, Turner and Bucks (2005) illustrate that societal pressures and influences consequently impact body dissatisfaction in older men. Additionally, literature suggests that despite older adults being aware of sociocultural pressures of youthful appearance ideals, injustices of ageism and inevitability of ageing, individuals continue to participate in actions and behaviours in an effort to conceal physical signs of ageing (Hurd-Clarke & Griffin, 2008; Jankowski, et al., 2005; Muise & Desmarais, 2010). Furthermore, Fallon (1990), demonstrates how cultural ideals on appearance influence individuals to compare themselves to others, and thus enhancing efforts to meet such societal expectations of beauty, regardless the methods and costs.

5.7 Conclusion

The ageing process brings about several psychological and physical changes of the body and appearance. Although body image and appearance have been highly regarded, little is known about the changes in self-evaluations and personal attitudes towards one's ageing body and appearance. An individual's self-regard in relation to one's body and appearance may highly contribute to one's personal definition, including influence on one's self-esteem and self-confidence. Although several literature has been conducted in relation to body image and psychological wellbeing, research has mainly focused on younger adults and women, thus a lack of available research is evident on older adult men. This study sought to discover the relationship of body image and psychological wellbeing through the lived experience of older Maltese men. In conclusion, the findings of this study illustrate that older adult men, participate in diverse practices in order to maintain their appearance and image. Moreover, it is also evident that age and appearance do not influence an individual's ability to participate in social and personal activities. Although physical constrains were demonstrated to be highly influential on one's quality of life, ageing changes and other related issues were suggested to postulate positive emotional wellness, self-confidence and positive portrayal of self-esteem. In addition, societal influences, such as family roles, media and peer comparison were demonstrated to play a vital role in maintaining one's appearance and image.

CHAPTER 6

CONCLUSION

The findings obtained from this study propose ideas, which were illustrated in the literature review. The present themes enhanced the reviewed data in terms of the lived experiences of the participants. This process embellished anterior literature by highlighting new facets regarding the lived experiences of older adult men, which in turn responded to the research questions by contributing rich portrayals of the influences affecting the experience of body image and psychological well-being in late adulthood. The aim of this chapter is to present the main conclusions from the research and discuss the potential limitations. Moreover, the findings will be translated into recommendations for practice and future research into the area.

6.1 Summary of Findings

The results presented in this study, found support for the interrelationships between body image and psychosocial implications in later life. Personal attributes, physical and medical repercussions, societal influences, apparel, together with self- confidence and self-satisfaction all formed part of the personal experience of the influence of body image and the individualistic impact on one's psychological wellbeing in later life. Although each participant illustrated their unique life stories, similar lived experiences were demonstrated. Moreover, participants aged between (71-87), portrayed a heightened acknowledgement of age related adjustments, suggesting an increased concern in relation to later life and anticipation towards death. Moreover participants further expressed their experiences with regards to age discrimination and its impact on their psychological well-being. These findings explore the complex nature of body image, especially throughout the ageing process. Moreover, it illustrates the diverse factors involved in influencing one's perception of their own body which in turn impacts one's overall physical and psychological well-being.

6.2 Strengths of this Study

The main strength of this study is that it was the first qualitative study, with an IPA approach to attempt to explore the experiences of older Maltese men with regards to how they perceive their body image and how body image influences their psychological well-being and overall quality of life. This was of an advantage as it reinforced the available literature. The methodology chosen for this study allowed the participants to elaborate on their experience with body image in intricate detail. Moreover, this allowed the researcher to gain a deeper understanding of the subject. Focusing on interpersonal dynamics within the interview allowed for a flexible interview schedule, which was adapted to the individual experiences and interview style of the participants. This allowed a deeper data collection together with personal experiences, which provided the flexibility necessary for this study.

6.3 Limitations

Although the data collected was very rich, having a small sample size may have posed as a limitation to this study and is unlikely to reflect the experiences of the general population. However, qualitative research focuses on gathering an in-depth understanding of the lived experiences of the participants. Smith, Flowers and Larkin (2010) also note that having a smaller number of participants provides a detailed interpretive account of the individual.

This study may have been influenced by the possibility that individuals who agreed to participate, were mainly those who had fairly positive body images, as illustrated by Pope, Phillips, and Olivardia (2000) men who seek assistance for issues with negative body image and other implicating factors may be treated as though they are behaving in a non-masculine manner. This may suggest that several men may opt not to participate in such subject related studies.

An additional limitation of the current study would be, being a female researcher, the participants might have felt biased and self-conscious to answer in a certain way. Time

constraints and word limits, did hinder the amount of material that was able to be fully explored.

6.4 Implications for Future Research

It would be beneficial if more studies are conducted on the experience of body image and later life in Malta, especially considering the fact that the Maltese population has an increasing percentage of older adults. This will aid in raising awareness of the physical and psychosocial repercussions in later life. Studies entailing two homogenous groups would be highly beneficial in illustrating similarities and differences in community dwelling older adults and institutionalized older adults in relation to body image and overall well-being. Moreover, research on age discrimination will further aid to understand the implications on older adult's psychological well-being. This would not only provide future researchers with a base of knowledge but also it may bring forth awareness for the general population especially with regards to psychological well-being in later life.

Furthermore, the use of quantitative studies would also be of relevance as they could further confirm findings at a population level. In addition, longitudinal qualitative studies are scarce. Thus, a longitudinal methodology is recommended to supplement the findings of this study, these can provide important evidence in understanding and preventing psychological related implications in throughout the ageing process.

6.5 Recommendations to Education

The provision of education and training initiatives for health professionals, will allow to provide an integrated approach of health, wellbeing and care for older adults together with the understanding of social and psychological aspects of ageing. This will be beneficial in raising awareness about the physiological and psychological implications, especially those associated to age related changes. This in turn will aid in enhancing the quality of life and overall well-being in older adults. Furthermore, by educating the general population of the ageing process and associated changes, it may aid in reducing age related stigma and discrimination.

6.6 Implications for Practice

Providing the necessary support both physically and psychologically may aid in allowing older adults to continue living within the community and thus reduce the need for institutionalisation. Providing an improved understanding of the vulnerabilities and nature of psychological implications in later life may also be helpful in providing preventative strategies and thus enhance one's quality of life. Health promotion may also encourage self-care and personal hygiene education in order to enhance one's overall well-being and appearance. Although several social and welfare policies have been implemented in order to improve the quality of life of such an increasing ageing population further recommendations for future policies may be outlined.

6.7 Recommendations to Policies

A life course approach in health promotion should be established, this will aid to develop current policies to enhance awareness and education on preventable diseases throughout the life course, this will aid in reducing, premature deaths, disabilities and chronic illnesses, together with promoting positive physical and psychological well-being. Stereotypes and attitudes should be challenged and barriers towards resources and services should be removed.

A multidisciplinary team approach should be promoted, this will aid in developing prevention programs, older adult and caregiver education together with providing cooperative work with local health professionals. Further policies may include, integrating mental health services for older adults in primary care services in community and residential settings, strengthening geriatric education for recruitment of health professionals and expanding interdisciplinary training opportunities for mental health professionals, who can develop interventions to optimize novel ways to assist older adults to integrate changes related to age into their lives.

6.8 Concluding Thoughts

Through this research, despite the several limitations endured, a good insight on the individuals' experiences with body image and psychological well-being was provided. Further public awareness should be designed in order to educate the community about the ageing process and the several implications associated with age related adjustments. Several practices need to be implemented together with promoting acceptance to reduce discrimination and stigma. Moreover, health professionals together with the general population need to provide more continuous support and acknowledgement in order to improve the physical and psychological well-being of older adults.

REFERENCES

- Abadie, B., Schuler, P., Hunt, B., Lischkoff, N., Hallinan, C., & Wang, M. (1996). Perception of Body Shape in Elderly White and Black Men. *Perceptual And Motor Skills*, 83(2), 449-450. <http://dx.doi.org/10.2466/pms.1996.83.2.449>
- Abraham, J., & Hansson, R. (1995). Successful aging at work: An applied study of selection, optimization, and compensation through impression management. *Journal of Gerontology: Psychological Sciences*, 50B, 94–103.
- Adams, G., Turner, H., & Bucks, R. (2005). The experience of body dissatisfaction in men. *Body Image*, 2(3), pp.271-283.
- Agliata, D. (2005). *Assessing Male Body Image: Development And Validation Of The Appearance Inventory For Men (aim)*. (Doctoral Dissertation). University of Central Florida.
- Agliata, D. & Tantleff-Dunn, S. (2004). The Impact of Media Exposure on Males' Body Image. *Journal of Social and Clinical Psychology*, 23(1), pp.7-22.
- Aitken, M., & Rudolph, M. (2012). Biological and social theories of aging. In R. Padilla, S. Byers-Connon & H. Lohman (Eds.), *Occupational therapy with elders: Strategies for the COTA* (3rd ed., pp. 19-26). Maryland Heights: Elsevier/Mosby.
- American Psychological Association. (2006). Standard area: Lifespan development. *APA Online*. Retrieved January 6, 2007 from APA's databases.
- Arbour, K., & Martin Ginis, K. (2008). Improving body image one step at a time: Greater pedometer step counts produce greater body image improvements. *Body Image*, 5(4), pp.331-336.

- Ata, R., Ludden, A., & Lally, M. (2006). The Effects of Gender and Family, Friend, and Media Influences on Eating Behaviors and Body Image During Adolescence. *Journal Of Youth And Adolescence*, 36(8), 1024-1037. <http://dx.doi.org/10.1007/s10964-006-9159-x>
- Baltes, P., Featherman, D. & Lerner, R. (1986). *Life-span development and behavior*. Hillsdale, N.J.: L. Erlbaum Associates.
- Baltes, P., & Mayer, K. (Eds.). (1999). *The Berlin Aging Study: Aging from 70 to 100*. Cambridge, England: Cambridge University Press.
- Baker, L., & Gringart, E. (2009). Body image and self-esteem in older adulthood. *Ageing And Society*, 29(06), 977-995. <http://dx.doi.org/10.1017/s0144686x09008721>
- Bearman, S., Martinez, E., Stice, E., & Presnell, K. (2006). The Skinny on Body Dissatisfaction: A Longitudinal Study of Adolescent Girls and Boys. *Journal Of Youth And Adolescence*, 35(2), 217-229. <http://dx.doi.org/10.1007/s10964-005-9010-9>
- Becker, C., Diedrichs, P., Jankowski, G. & Werchan, C. (2013). I'm not just fat, I'm old: has the study of body image overlooked "old talk"?. *Journal of Eating Disorders*, 1(1), p.6.
- Bedford, J., & Johnson, C. (2006). Societal influences on body image dissatisfaction in younger and older women. *Journal of Women & Aging*, 18, 41–55. doi:10.1300/J074v18n01_04
- Bégin, C., & Gagnon-Girouard,, M. (2013). Physical appearance and spousal relationships. *Integrating Science & Practice*, 3(2), 5-7.

- Bergeron, D. (2007). *The relationship between body image dissatisfaction and psychological health: an exploration of body image in young adult men*. (The Degree Doctor of Philosophy). School of The Ohio State University.
- Besdine, R. (2018). *Overview of Aging - Older People's Health Issues - MSD Manual Consumer Version*. [online] MSD Manual Consumer Version. Retrieved from: <https://www.msmanuals.com/home/older-people's-health-issues/the-aging-body/overview-of-aging> [Accessed 14 Apr. 2018].
- Blake, H., Mo, P., Malik, S., & Thomas, S. (2009). How effective are physical activity interventions for alleviating depressive symptoms in older people? A systematic review. *Clinical Rehabilitation*, 23, 873-887.
- Blanchard-Fields, F. (2007). Life span development and the psychology of aging. *The Gerontologist*, 47(3), 404-408. <http://dx.doi.org/10.1093/geront/47.3.404>
- Blascovich, J., & Tomaka J. (1991). Measures of self-esteem. In J. P. Robinson & P. R. Shaver (Eds.), *Measures of personality and social psychological attitudes* (pp. 115–160). San Diego, CA: Academic Press.
- Blazer, D. (2002). *Depression in Late Life*. New York: Springer.
- Blazer, D., Burchett, B., Service, C., & George, L. (1991). The association of age and depression among the elderly: an epidemiologic exploration *Journal of Gerontology: Medical Sciences*, 46, M210–M215.
- Blazer, D., Hughes, D. & George, L. (1987). The Epidemiology of Depression in an Elderly Community Population. *The Gerontologist*, 27(3), pp.281-287.
- Bleidorn, W., Denissen, J., Gebauer, J., Arslan, R., Rentfrow, P. & Gosling, S. (2016). Age and gender differences in self-esteem—A cross-cultural window. *Journal of Personality and Social Psychology*, 111(3), pp.396-410.

- Biggerstaff, D., & Thompson, A. (2008). Interpretative Phenomenological Analysis (IPA): A Qualitative Methodology choice in Healthcare Research. *Qualitative Research in Psychology*, Vol 5(3), pp 214-224. Doi: 10.1080/14780880802314304.
- Bourke, L., & Geldens, P. (2007). What Does Wellbeing Mean? Perspectives of Wellbeing among Young People & Youth Workers in Rural Victoria. *Youth Studies Australia*, 26(1), 41-49. Retrieved from <https://eric.ed.gov/?id=EJ814942>
- Brownell, K. (1991). Dieting and the search for the perfect body: Where physiology and culture collide. *Behaviour Therapy*, 22(1), pp.1-12.
- Cash, T. (2002). Cognitive-behavioral perspectives on body image. In T. F. Cash & T. Pruzinsky (Eds.), *Body image: A handbook of theory, research, and clinical practice* (pp. 38-46). New York: Guilford.
- Cash, T. (2004). Body image: past, present, and future. *Body Image*, 1(1), 1-5. [http://dx.doi.org/10.1016/s1740-1445\(03\)00011-1](http://dx.doi.org/10.1016/s1740-1445(03)00011-1)
- Cash, T., Morrow, T., Hrabosky, J., & Perry, A. (2004). How has body image changed? A cross-sectional investigation of college women and men from 1983 to 2001. *Journal of Consulting and Clinical Psychology*, 72, 6, 1081–9.
- Cha, N., Seo, E., & Sok, S. (2012). Factors influencing the successful aging of older Korean adults. *Contemporary Nurse*, 41(1), pp.78-87.
- Cheang, M. (2002). Older adults' frequent visits to a fast-food restaurant: Non-obligatory social interaction and the significance of play in a “third place” *Journal of Aging Studies*, 16(3), pp.303-321.
- Cho, J., Martin, P., Margrett, J., MacDonald, M., & Poon, L. (2011). The Relationship between Physical Health and Psychological Well-Being among Oldest-Old Adults. *Journal Of Ageing Research*, 2011(605041), 1-8. <http://dx.doi.org/http://dx.doi.org/10.4061/2011/605041>

- Chodzko-Zajko, W., Schwingel, A., & Park, C. (2009). Successful aging: The role of physical activity. *American Journal of Lifestyle Medicine*, 3, 20-28. DOI: 10.1177/1559827608325456
- Chrisler, J., & Ghiz, L. (1993). Body Image Issues of Older Women. *Women & Therapy*, 14(1-2), 67-75. http://dx.doi.org/10.1300/j015v14n01_07
- Clarke, L., & Korotchenko, A. (2011). Aging and the Body: A Review. *Canadian Journal On Aging / La Revue Canadienne Du Vieillissement*, 30(03), 495-510. <http://dx.doi.org/10.1017/s0714980811000274>
- Corbin, C., & Pangrazi, R. (2011). Toward a uniform definition of wellness : a commentary. *Readers Digest*, 3(15). Retrieved from <http://www.fitness.gov/pcpfsdigest1201.pdf>
- Cornwell, C., & Schmitt, M. (1990). Perceived health status, self-esteem and body image in women with rheumatoid arthritis or systemic lupus erythematosus. *Research In Nursing & Health*, 13(2), 99-107. <http://dx.doi.org/10.1002/nur.4770130206>
- Covinsky, K., Fortinsky, R., Palmer, R., Kresevic, D., & Landefeld, C. (1997). Relation between symptoms of depression and health status outcomes in acutely ill hospitalized older persons. *Annals of Internal Medicine*, 126, 417-425.
- Creekmore, A. (1971). *Methods of measuring clothing variables* (pp. 96-101). Michigan Agricultural Experiment Station Project No.783. Michigan: Michigan State University, East Lansing.
- Crotty, M. (1996). *Phenomenology and Nursing Research*. Melbourne: Churchill Livingstone.
- Daley, M., & Spinks, W. (2000). Exercise, Mobility and Aging. *Sports Medicine*, 29(1), pp.1-12.
- Davis, K. (2002). A Dubious Equality!: Men, Women and Cosmetic Surgery. *Body & Society*, 8(1), 49-65. <http://dx.doi.org/10.1177/1357034x02008001003>

- Davison, T., & McCabe, M. (2005). Relationships between men's and women's body image and their psychological, social, and sexual functioning. *Sex Roles, 52*(7/8), 463-475.
- de Souto Barreto, P., Ferrandez, A., & Guihard-Costa, A. (2011). Predictors of Body Satisfaction: Differences Between Older Men and Women's Perceptions of Their Body Functioning and Appearance. *Journal Of Aging And Health, 23*(3), 505-528. <http://dx.doi.org/10.1177/0898264310386370>
- Demarest, J., & Allen, R. (2000). Body image: Gender, ethnic, and age differences. *The Journal of Social Psychology, 2000*;140(4):465–472.
- Directorate for Health Information and Research. (2012). *National needs assessment amongst the Maltese population aged 75 years and over*. Directorate for Health Information and Research ,Department of Health, Ministry for Health.
- Diener, E., & Seligman, M. (2004). Beyond Money Toward an Economy of Well-Being. *Psychological Science In The Public Interest, 5*(1), 1-31. <http://dx.doi.org/10.1111/j.0963-7214.2004.00501001.x>
- van Dijk, N. (2012). *Simply happy? Voluntary simplicity and subjective wellbeing* (Master in wellbeing and human development). University of Bath.
- Doraiswamy, P., Khan, Z., Donahue, R, & Richard, N. E. (2002). The spectrum of quality-of-life impairments in recurrent geriatric depression. *Journal of Gerontology: Medical Sciences, 57A*, M134–M137.
- Drummond, M. (2002). Sport and Images of Masculinity: The Meaning of Relationships in the Life Course of "Elite" Male Athletes. *The Journal Of Men's Studies, 10*(2), 129-141. <http://dx.doi.org/10.3149/jms.1002.129>
- Eid, M., & Larsen, R. (2008). *The science of subjective well-being* (1st ed.). New York: Guilford Press.

- Erikson, E. (1950). *Childhood and society* .5th ed. [Electronic Version]. New York, NY: Norton & Company, Inc. 140.50
- Eysenck, M. (2004). *Adolescence, adulthood, and old age*. Wales: Psychology Press Limited. Retrieved from https://moodle.gllm.ac.uk/pluginfile.php/94785/mod_resource/content/1/Amanda_Tillson/Unit_4/Book
- Fallon, A. (1990). Culture in the mirror: Sociocultural determinants of body image. In T. F. Cash and T. Pruzinsky (Eds.), *Body images: Development, deviance, and change*. New York: Guilford Press.
- Ferraro, F., Muehlenkamp, J., Paintner, A., Wasson, K., Hager, T., & Hoverson, F. (2008). Aging, Body Image, and Body Shape. *The Journal Of General Psychology*, 135(4), 379-392. <http://dx.doi.org/10.3200/genp.135.4.379-392>
- Fiske, A., Wetherell, J. & Gatz, M. (2009). Depression in Older Adults. *Annual Review of Clinical Psychology*, 5(1), pp.363-389.
- Frederick, D., Peplau, L., & Lever J. (2006). The swimsuit issue: Correlates of body image in a sample of 52,677 heterosexual adults. *Body Image*, 3, 413-419.
- Furnham, A., Badmin, N., & Sneade, I. (2002). Body image dissatisfaction: Gender differences in eating attitudes, self-esteem, and reasons for exercise. *The Journal of Psychology*. 2002;136(6):581–596.
- Garner, D. (1997). The 1997 Body Image Survey Results. *Psychology Today*, 30-44, 75-80, 84.
- Giorgi, A. (1997). The theory, practice, and evaluation of the phenomenological method as a qualitative research procedure. *Journal of Phenomenological Psychology*, 28, 235-260.

- Glass, T., De Leon, C., Bassuk, S. and Berkman, L. (2006). Social Engagement and Depressive Symptoms in Late Life. *Journal of Aging and Health*, 18(4), pp.604-628.
- Goins, L., Markey, C., & Gillen, M. (2012). Understanding men's body image in the context of their romantic relationships. *American Journal of Men's Health*, 6(3), 240-248.
- Gosling, S., Potter, J., Robins, R., Trzesniewski, K., & Tracy, J. (2002). Global self-esteem across the lifespan. *Psychology and Ageing*, 17(3), 423-434.
- Gough, B., Seymour-Smith, S., & Matthews, C. R. (2016). Body dissatisfaction, appearance investment, and Wellbeing: How older obese men orient to "aesthetic health." *Psychology of Men & Masculinity*, 17(1), 84e91.
- Grbich, C. (2007). *Qualitative data analysis: An introduction*. London: Sage Publications Inc.
- Griffits, S., Hay, P., Mitchison, D., Mond, J., McLean, S., & Rodgers, B., ... Paxton, S. (2016). Sex differences in the relationships between body dissatisfaction, quality of life and psychological distress. *Australian And New Zealand Journal Of Public Health*, 40(6), 518-522. <http://dx.doi.org/10.1111/1753-6405.12538>
- Grogan, S. (2008). *Body image: Understanding body dissatisfaction in men, women, and children*. (2nd ed.). New York: Routledge.
- Grogan, S. (2012). Body image development in adulthood. In T.F. Cash & L. Smolack (Eds.), *Body image: A handbook of science, practice and prevention* (pp. 93-100). New York, NY: Guilford Press.
- Grogan, S., & Richard, H. (2002). Body Image. *Men And Masculinities*, 4(3), 219-232. <http://dx.doi.org/10.1177/1097184x02004003001>

- Guegan, L. (2006). *The Relationship Between Body Image and Self-Esteem in Older Adulthood* (Bachelor of Arts Honours). Faculty of Computing, Health and Science, Edith Cowan University.
- Halliwell, E., & Dittmar, H. (2003). A Qualitative Investigation of Women's and Men's Body Image Concerns and Their Attitudes Toward Aging. *Sex Roles, 49*(11/12), 675-684. <http://dx.doi.org/10.1023/b:sers.00000003137.71080.97>
- Hakim, C. (1987). *Research design: Strategies and choices in the design of social research*. London: Allen & Unwin.
- Harding, L. (2009). *Media Use and Body Image Among Senior Participants of the World Senior Games* (Master of Arts). Brigham Young University
- Hargreaves, D., & Tiggemann, M. (2006). "Body image is for girls": A qualitative study of boy's body image. *Journal of Health Psychology, 11*(4), 567-576.
- Harris, M. (1994). Growing old gracefully: Age concealment and gender. *Journal of Gerontology, 49*(4). P149-P158.
- Harvard University. (2015). *Research Methods: Some Notes to Orient you* (pp.1-20). Cambridge: Harvard University. Retrieved from https://isites.harvard.edu/fs/docs/icb.topic851950.files/Research%20Methods_Some%20Notes.pdf
- Heinberg, L. J. (1996). Theories of body image: Perceptual, developmental, and sociocultural factors. In J. K. Thompson (Ed.), *Body image, eating disorders, and obesity: An integrative guide for assessment and treatment* (pp. 27-48). Washington DC: American Psychological Association
- Hennessy, C. (1989). Culture in the use, care, and control of the aging body. *Journal of Aging Studies, 3*(1). 39-54.

- Higgins, E. (1987). Self-discrepancy: A theory relating self and affect. *Psychological Review*, 94(1), 319-340.
- Hildebrandt, T., Langenbacher, J. & Schlundt, D. (2004). Muscularity concerns among men: development of attitudinal and perceptual measures. *Body Image*, 1(2), pp.169-181.
- Hjalager, A., Konu, H., Huijbens, E., Björk, P., Flagestad, A., Nordin, S., & Tuohino, A. (2011). *Innovating and re-branding Nordic wellbeing tourism. Final report from a joint NICe research project* (p. 10). Iceland: Norden.Nordic Innovation Centre. Retrieved from http://www.icelandofhealth.is/island/wp-content/uploads/2013/02/2011_NordicWellbeingTourism_report.pdf
- Hogan, S., & Warren, L. (2012). Dealing with Complexity in Research Processes and Findings: How Do Older Women Negotiate and Challenge Images of Aging?. *Journal Of Women & Aging*, 24(4), 329-350. <http://dx.doi.org/10.1080/08952841.2012.708589>
- Holliday, R., & Carnie, A. (2007). Man-made plastic: Investigating men's consumption of aesthetic surgery. *Journal of Consumer Culture*, 7, 57-78. <http://dx.doi.org/10.1177/1469540507073508>
- Huang, C. (2010). Mean-level change in self-esteem from childhood through adulthood: Meta-analysis of longitudinal studies. *Review of General Psychology*, 14(3), 251-260.
- Hurd Clarke, L., & Griffin, M. (2008). Failing bodies: Body image and multiple chronic conditions in later life. *Qualitative Health Research*. 2008;18(8):1084-1095.
- Janelli, L. (1993). Are There Body Image Differences between Older Men and Women?. *Western Journal Of Nursing Research*, 15(3), 327-339. <http://dx.doi.org/10.1177/019394599301500305>

- Jankowski, G., Diedrichs, P., Williamson, H., Christopher, G., & Harcourt, D. (2014). Looking age-appropriate while growing old gracefully: A qualitative study of ageing and body image among older adults. *Journal of Health Psychology*, 21(4), pp.550-561.
- Jones, W., & Morgan, J. (2010). *Eating disorders in men: a review of the literature*. *Journal of Public Mental Health*, 9(2), 23-31.
- Joseph, C., & Shiffrar, M. (2011). Do Observers' Negative Self-Evaluations of Their Own Bodies Mediate Their Visual Attention Towards Other Bodies?. *Journal Of Vision*, 11(11), 110-110. <http://dx.doi.org/10.1167/11.11.110>
- Kaiser, S. (1997). *The social psychology of clothing* (2nd ed.). New York: Fairchild Publications.
- Kaminski, P., & Hayslip, B. (2006). Gender Differences in Body Esteem Among Older Adults. *Journal Of Women & Aging*, 18(3), 19-35. http://dx.doi.org/10.1300/j074v18n03_03
- Karlin, B., Duffy, M. & Gleaves, D. (2008). Patterns and predictors of mental health service use and mental illness among older and younger adults in the United States. *Psychological Services*, 5(3), pp.275-294.
- Kékes Szabó, M. (2015). The Relationship Between Body Image and Self-esteem. *European Psychiatry*, 30, 1354.[http://dx.doi.org/10.1016/s0924-9338\(15\)32029-0](http://dx.doi.org/10.1016/s0924-9338(15)32029-0)
- Kempen, G. I., Sullivan, M., van Sonderen, E., & Ormel, J. (1999). Performance-based and self - reported physical functioning in low-functioning older persons: Congruence of change and the impact of depressive symptoms. *The Journals of Gerontology, Series B, Psychological Sciences and Social Sciences*, 54, P380–P386.
- Kimmel, M. (2012). *Manhood in America* (2nd ed.). New York, NY: Oxford University Press.

- Krueger, D. (1989). *Body self & psychological self* (1st ed.). New York: Brunner/Mazel.
- Larkin, M., Watts, S., & Clifton, E. (2006). Giving voice and making sense in interpretative phenomenological analysis. *Qualitative Research in Psychology*, vol. 3, p. 102-120.
- Laverty, S. (2003). Hermeneutic phenomenology and phenomenology: A comparison of historical and methodological considerations. *International Journal of Qualitative Methods*, 2(3), 21-35.
- Lee, C., & Russell, A. (2003). Effects of physical activity on emotional well-being among older Australian women. *Journal Of Psychosomatic Research*, 54(2), 155-160. [http://dx.doi.org/10.1016/s0022-3999\(02\)00414-2](http://dx.doi.org/10.1016/s0022-3999(02)00414-2)
- Leit, R., Gray, J., & Pope, H. (2002). The media's representation of the ideal male body: A cause for muscle dysmorphia?. *International Journal of Eating Disorders*, 31(3), pp.334-338
- Leit, R., Pope, H., & Gray, J. (2000). Cultural expectations of muscularity in men: The evolution of playgirl centerfolds. *International Journal of Eating Disorders*, 29(1), pp.90-93.
- Liechty, T., Ribeiro, N., Sveinson, K., & Dahlstrom, L. (2014). "It's About What I Can Do With My Body": Body Image and Embodied Experiences of Aging Among Older Canadian Men. *International Journal Of Men's Health*, 13(1), 3-21. <http://dx.doi.org/10.3149/jmh.1301.3>
- Lippa, R. (2007). The Preferred Traits of Mates in a Cross-National Study of Heterosexual and Homosexual Men and Women: An Examination of Biological and Cultural Influences. *Archives Of Sexual Behavior*, 36(2), 193-208. <http://dx.doi.org/10.1007/s10508-006-9151-2>

- Lorenzen, L., Grieve, F., & Thomas, A. (2004). Brief Report: Exposure to Muscular Male Models Decreases Men's Body Satisfaction. *Sex Roles*, 51(11-12), pp.743-748.
- Lueckenotte, A. (2000). *Gerontologic nursing* (2nd ed.). St. Louis: Mosby.
- Lyons, E., & Coyle, A. (2007). *Analysing qualitative data in psychology*. London, Sage.
- Marks, N., & Shah, H. (2004). A well-being manifesto for a flourishing society. *Journal Of Public Mental Health*, 3(4), 9-15. <http://dx.doi.org/10.1108/17465729200400023>
- Mauk, K. (2010). *Gerontological nursing*. 1st ed. Boston: Jones and Bartlett Publishers, pp.57-69.
- McArdle, K., & Hill, M. (2007). Understanding Body Dissatisfaction in Gay and Heterosexual Men: The Roles of Self-Esteem, Media, and Peer Influence. *Men And Masculinities*, 11(5), 511-532. <http://dx.doi.org/10.1177/1097184x07303728>
- McAuley, E., Blissmer, B., Katula, J., Duncan, T., & Mihalko, S. (2000). Physical activity, self-esteem, and self-efficacy relationships in older adults: A randomized controlled trial. *Annals Of Behavioral Medicine*, 22(2), 131-139. <http://dx.doi.org/10.1007/bf02895777>
- McCabe, M., & Ricciardelli, L. (2004). *Body image dissatisfaction among males across the lifespan: A review of past literature*. *Journal of Psychosomatic Research*, 56, 675-685.
- McKinley, N. (2006). Longitudinal Gender Differences in Objectified Body Consciousness and Weight-Related Attitudes and Behaviors: Cultural and Developmental Contexts in the Transition from College. *Sex Roles*, 54(3-4), pp.159-173.

- Meadows, A. (2011). *Men Feel it too: An Examination of Body Image and Disordered Eating among Older Males* (Degree of Master of Arts). Georgia State University.
- Miller, T. (2005). A metrosexual eye on queer guy. *GLQ: A Journal of Lesbian and Gay Studies*, *11*, 112–117.
- Miller, L., Murphy, R., & Buss, A. (1981). Consciousness of body: Private and public. *Journal Of Personality And Social Psychology*, *41*(2), 397-406.
<http://dx.doi.org/10.1037//0022-3514.41.2.397>
- Ministry for Education and Employment Malta. (2014). *Malta National Lifelong Learning Strategy 2020*. Malta.
- Mintz, L. & Betz, N. (1986). Sex differences in the nature, realism, and correlates of body image. *Sex Roles*, *15*(3-4), 185-195.
- Mirza, N., Davis, D., & Yanovski, J. (2005). Body dissatisfaction, self-esteem, and overweight among inner-city Hispanic children and adolescents. *Journal Of Adolescent Health*, *36*(3), 267.e16-267.e20.
<http://dx.doi.org/10.1016/j.jadohealth.2004.02.033>
- Mishkind, M., Rodin, J., Silberstein, L., & Striegel-Moore, R. (1986). The embodiment of masculinity: *The American Body in Context: An Anthology*, Wilmington, DE: Scholarly Resources, 103-121.
- Mitas, O., Yarnal, C., & Chick, G. (2012). Jokes build community: Mature tourists' positive emotions. *Annals Of Tourism Research*, *39*(4), 1884-1905.
<http://dx.doi.org/10.1016/j.annals.2012.05.003>
- Muise, A., & Desmarais, S. (2010). Women's Perceptions and Use of "Anti-Aging" Products. *Sex Roles*, *63*(1-2), pp.126-137.

- Mueller, H., & Kaufmann, E. (2001). Wellness tourism: Market analysis of a special health tourism segment and implications for the hotel industry. *Journal Of Vacation Marketing*, 7(1), 5-17. <http://dx.doi.org/10.1177/135676670100700101>
- Murstein, B., & Christy, P. (1976). Physical attractiveness and marriage adjustment in middle-aged couples. *Journal of Personality and Social Psychology*, 34, 537-542. doi:10.1037/0022-3514.34.4.537
- Naseem, O. (2015). *The Suffering Man: An Exploration of Body Image and Psychological Well-Being*. (The Professional Doctorate in Psychology). City University London.
- National Center for Chronic Disease Prevention and Health Promotion-. (2016). *Health-Related Quality of Life (HRQOL) - Well-Being Concepts*. Atlanta: U.S. Department of Health & Human Services. Retrieved from <https://www.cdc.gov/hrqol/wellbeing.htm>
- National Statistics Office. (2016). *Population and Tourism Statistics*. Valletta: National Statistics Office Malta.
- Nemiroff, R., & Coiarusso, A. (1985). *The race against time: Psychotherapy and psychoanalysis in the second half of life*. New York: Plenum Press.
- Newton, E, Larkin, M., Melhuish, R., & Wykes, T. (2007) More than just a place to talk: Young people's experiences of group psychological therapy as an early intervention for auditory hallucinations. *Psychology and Psychotherapy: Theory, Research and Practice* 80, pp127-149
- Nowell, C., & Ricciardelli, L. (2008). Appearance-based comments, body dissatisfaction and drive for muscularity in males. *Body Image*, 5(4), 337-345. <http://dx.doi.org/10.1016/j.bodyim.2008.06.002>

- Oh, K. (1999). *Body image and appearance management among older married dyads: factors influencing body image in the aging process* (Doctor of Philosophy). Iowa State University.
- Oh, K., & Damhorst, M. (2009). Co-orientation of body image among older married couples. *Body Image*, 6(1), pp.43-47.
- Ojala, H., Calasanti, T., King, N., & Pietila, I. (2014). Natural(ly) men: Masculinity and gendered anti-ageing practices in Finland and the USA. *Ageing and Society*. Advance online publication. <http://dx.doi.org/10.1017/S0144686X14001196>
- Oliffe, J. (2006). Embodied masculinity and androgen deprivation therapy. *Sociology Of Health And Illness*, 28(4), 410-432. <http://dx.doi.org/10.1111/j.1467-9566.2006.00499.x>
- Olivardia, R., Pope, H., Borowiecki, J., & Cohane, G. (2017). *Biceps and Body Image: The Relationship Between Muscularity and Self-Esteem, Depression, and Eating Disorder Symptoms*. <http://dx.doi.org/10.1037/1524-9220.5.2.112>
- Orth, U., & Robins, R. (2014). The development of self-esteem. *Current Directions in Psychological Science*, 23, 381-387.
- Palmer, R. (1969) *Hermeneutics: Interpretation Theory in Schleiermacher, Dilthey, Heidegger, and Gadamer*. Northwestern University Press: Evanston.
- Palmore, E. (2003). Ageism comes of age. *The Gerontologist*, 43(3), 418-420. <http://dx.doi.org/10.1093/geront/43.3.418>
- Parliamentary Secretariat for Rights of Persons with Disability and Active Ageing. (2014). National Dementia Strategy. Malta: Parliamentary Secretariat for Rights of Persons with Disability and Active Ageing.

- Parliamentary Secretariat for Rights of Persons with Disability and Active Ageing. (2014). *National Strategic Policy for Active Ageing: Malta 2014-2020*. Malta: Parliamentary Secretariat for Rights of Persons with Disability and Active Ageing.
- Pawlowski, T., Downward, P., & Rasciute, S. (2011). Subjective well-being in European countries—on the age-specific impact of physical activity. *European Review Of Aging And Physical Activity*, 8(2), 93-102. <http://dx.doi.org/10.1007/s11556-011-0085-x>
- Paxton, S., & Phythian, K. (1999). Body image, self-esteem, and health status in middle and later adulthood. *Australian Psychologist*. 1999;34(2):116–121.
- Peat, C., Peyerl, N., & Muehlenkamp, J. (2008). Body Image and Eating Disorders in Older Adults: A Review. *The Journal Of General Psychology*, 135(4), 343-358. <http://dx.doi.org/10.3200/genp.135.4.343-358>
- Peck, C. (1968). Psychological Developments in the Second Half of Life. In *B.L. Neugarten (Ed.). Middle Age and Aging*. Chicago: University of Chicago Press
- Penninx, B., Leveille, S., Ferrucci, L., van Eijk, J., & Guralnik, J. (1999). Exploring the effect of depression on physical disability: Longitudinal evidence from the established populations for epidemiologic studies of the elderly. *American Journal of Public Health*, 89, 1346–1352.
- Peterson, J., & Miller, C. (1980). Physical attractiveness and marriage adjustment in older American couples. *Journal of Psychology: Interdisciplinary and Applied*, 105, 247-252. doi:10.1080/00223980.1980.9915158
- Pietkiewicz, I. & Smith, J. (2012) Practical guide to the interpretation of phenomenological analysis in qualitative research in psychology. *Psychological Journal*, 18(2), 361-369.
- Pop, C. (2017). Association between Body Mass Index and Self Body Image Perception. *Iranian Journal Of Public Health*, 46(12), 1744-1745.

- Pope, H., Phillips, K., & Olivardia, R. (2000). *The Adonis complex: The secret crisis of male body obsession*. New York: Free Press.
- Primus, M. (2014). Body Dissatisfaction and Males: A Conceptual Model. *Scholarly Horizons: University of Minnesota, Morris Undergraduate Journal*, [online] 1(1), pp.1-24. Retrieved from: <http://digitalcommons.morris.umn.edu/cgi/viewcontent.cgi?article=1005&context=horizons> [Accessed 14 Apr. 2018].
- Pruzinsky, T. (2004). Enhancing quality of life in medical populations: A vision for body image assessment and rehabilitation as standards of care. *Body Image*, 1, 71-81.
- Rand, C., & Wright, B. (2000). Continuity and change in the evaluation of ideal and acceptable body sizes across a wide age span. *International Journal Of Eating Disorders*, 28(1), 90-100. [http://dx.doi.org/10.1002/\(sici\)1098-108x\(200007\)28:1<90::aid-eat11>3.0.co;2-p](http://dx.doi.org/10.1002/(sici)1098-108x(200007)28:1<90::aid-eat11>3.0.co;2-p)
- Reboussin, B., Rejeski, W., Martin, K., Callahan, K., Dunn, A., King, A., & Sallis, J. (2000). Correlates of satisfaction with body function and body appearance in middle- and older aged adults: The Activity Counseling Trial (ACT). *Psychology and Health*, 15, 239-254.
- Reddy, S. (2013). Understanding the Body Image Experiences of Older Men. *International Journal Of Humanities And Social Science*, 3(9)
- Robins, R., & Trzesniewski, K. (2005). Self-Esteem Development Across the Lifespan. *Current Directions in Psychological Science*, 14(3), pp.158-162.
- Rocha, L., & Terra, N. (2014). Body image in older adults: a review. *Sci Med*, 23(4), 255. <http://dx.doi.org/10.15448/1980-6108.2013.4.15357>

- Ross, M., Tait, R., Grossberg, G., Handal, P., Brandeberry, L., & Nakra, R. (1989). Age Differences in Body Consciousness. *Journal Of Gerontology*, 44(1), P23-P24. <http://dx.doi.org/10.1093/geronj/44.1.p23>
- Ryan, T.A., & Morrison, T. (2009). Factors perceived to influence young Irish men's body image investment: A qualitative investigation. *International Journal of Men's Health*, 8(3), 213-234.
- Sabik, N. (2012). *An exploration of body image and psychological well-being among aging African American and European American women*. (Doctor of Philosophy). The University of Michigan.
- Schroots, J. (1996). Theoretical Developments in the Psychology of Aging. *The Gerontologist*, 36(6), pp.742-748.
- Slevin, K. (2010). "If I had lots of money... I'd have a body makeover:" Managing the Aging Body. *Social Forces*, 88(3), pp.1003-1020.
- Slevin, K., & Linneman, T. (2010). Old Gay Men's Bodies and Masculinities. *Men And Masculinities*, 12(4), 483-507. <http://dx.doi.org/10.1177/1097184x08325225>
- Smith, J. (1996) *Beyond the divide between cognition and discourse: using interpretative phenomenological analysis in health psychology*. *Psychology & Health*, 11, 261-71
- Smith, J. (2004). *Reflecting on the development of interpretative phenomenological analysis and its contribution to qualitative research in psychology*. *Qualitative Research in Psychology*, 1, 39-54.
- Smith, J. (2010). *Interpretative Phenomenological Analysis. Existential Analysis: Journal of the Society for Existential Analysis*, 21(2), 186-192.
- Smith, J. Flowers, P., & Larkin, M. (2009). *Interpretative phenomenological analysis (1st ed.)*. Los Angeles: SAGE.

- Smith, J., Jarmin, M. & Osborn, M. (1999). Doing Interpretative Phenomenological Analysis. In M. Murray & K. Chamberlain (Eds) (1999), *Qualitative health psychology: Theories and Methods* (pp.218-240). London: Sage.
- Smith, J. & Osborn, M. (2003). *Interpretative phenomenological analysis*. In J.A. Smith (Ed.), *Qualitative psychology – a practical guide to research methods* (pp.51-80). London: Sage.
- Smith J. & Osborn, M. (2008) *Interpretative phenomenological analysis*. In Smith JA (Ed.) *Qualitative psychology: a practical guide to research methods*, 2nd edn. pp 53-80. London, Sage.
- Smith, J., Barley, V., Beail, N., Scaife, J., Slade, P., Turpin, G., & Walsh, S. (1997). *Standards for research projects and theses involving qualitative methods: suggested guidelines for trainees and courses*. *Clinical Psychology Forum*, 108, 3-7.
- Spencer, L., Ritchie, J., Lewis, J., & Dillon, L. (2003). *Quality in Qualitative Evaluation: A framework for assessing research evidence*. London: Government Chief Social Researcher's Office.
- Steptoe, A., Deaton, A., & Stone, A. (2015). Subjective wellbeing, health, and ageing. *The Lancet*, 385(9968), 640-648. [http://dx.doi.org/10.1016/s0140-6736\(13\)61489-0](http://dx.doi.org/10.1016/s0140-6736(13)61489-0)
- Stevens, J., Kumanyika, S., Keil, J., & Seibert, L. (1994). Body Size Perceptions and Eating Attitudes in Elderly Men. *Obesity Research*, 2(2), pp.127-134.
- Stice, E. (1994). Review of the evidence for a sociocultural model of bulimia nervosa and an exploration of the mechanisms of action, *Clinical Psychology Review*, 14(1), 633-661.
- Stowers. D., & Durm. M. (1996). Does self-concept depend on body image? A gender analysis. *Psychological Reports*, 78, 2, 643–6.
- Strack, F., Argyle, M., & Schwarz, N. (Eds.) (1991). *Subjective Well-being*. Oxford: Pergamon.

- Strickland, A. (2004). *Body Image and Self-Esteem: A Study of Relationships and Comparisons Between More and Less Physically Active College Women*. Doctor of Philosophy. The Florida State University College of Education.
- Strickland, A. (2012). Defining the new male ideal. *Cable News Network*. Retrieved from <http://edition.cnn.com/2012/03/23/living/male-ideal-body-image/>
- Strine, T., Chapman, P., Balluz, L., & Mokdad, A. (2008). Health-related quality of life and health behaviours by social and emotional support: Their relevance to psychiatry and medicine. *Social Psychiatry and Psychiatric Epidemiology*, 43(2):151–159.
- Stunkard Adult.Male Image. Adapted from Stunkard, A., Sorensen, T., & Schulsinger, F.(1983) Association for research in Nervous and Mental Disease, 60, 115-120.
- Tager, D., Good, G., & Morrison, J. (2006). Our bodies, ourselves revisited: Male body image and psychological well-being. *International Journal of Men's Health*, 5(3), 228-237.
- Tannenbaum, C., & Frank, B. (2010). Masculinity and Health in Late Life Men. *American Journal Of Men's Health*, 5(3), 243-254. <http://dx.doi.org/10.1177/1557988310384609>
- Tewksbury, R. (2009). Qualitative versus Quantitative Methods: Understanding Why Qualitative Methods are Superior for Criminology and Criminal Justice. *Journal Of Theoretical & Philosophical Criminology*, 1(1).
- Thimann, K. (2013). *A good old age: experiencing a satisfying life* (Master of Science). Boise State University.
- Tiggemann, M. (2004). Body image across the adult life span: stability and change. *Body Image*, 1(1), 29-41. [http://dx.doi.org/10.1016/s1740-1445\(03\)00002-0](http://dx.doi.org/10.1016/s1740-1445(03)00002-0)

- Tiggemann, M., & Lynch, J. (2002). Body image across the life span in adult women: the role of self-objectification. *Developmental Psychology*, 37, 2, 243–53.
- Thompson, J. K., & Heinberg, L. J. (1999). The media's influence on body image disturbance and eating disorders: We've reviled them, now can we rehabilitate them? *Journal of Social Issues*, 55(2), 339-353.
- Thompson, J., Heinberg, L., Altabe, M., & Tantleff-Dunn, S. (1999). *Exacting beauty: Theory, assessment, and treatment of body image disturbance*. APA PsycNET. Retrieved 19 April 2018, from <http://psycnet.apa.org/record/1999-02140-000>
- Trzesniewski, K., Donnellan, M., & Robins, R. (2003). Stability of self-esteem across the life span. *Journal of Personality and Social Psychology*, 84, 205–220.
- Tulle, E. (2008). Capturing Ageing Embodiment. *Ageing, The Body And Social Change*, (4), 61-76. http://dx.doi.org/10.1057/9780230227637_4
- Tunaley, J., Walsh, S., & Nicolson, P. (1999). 'I'm not bad for my age': the meaning of body size and eating in the lives of older women. *Ageing And Society*, 19(6), 741-759. <http://dx.doi.org/10.1017/s0144686x99007515>
- Twigg, J. (2007). Clothing, age and the body: a critical review. *Ageing And Society*, 27(02), 285-305. <http://dx.doi.org/10.1017/s0144686x06005794>
- Vaarama, M., Moisio, P., & Karvonen, S. (2010). Johdanto. In: Vaarama, M., Moisio, P. & Karvonen, S. (eds.) Finnish welfare 2010. Department of Health and Welfare. Helsinki: University Press.
- World Health Organization. (2011). *Global Health and Ageing* (p. 2). United States: U.S. Department of Health and Human Services. Retrieved from http://www.who.int/ageing/publications/global_health.pdf

World Health Organization (2016). *Discrimination and negative attitudes about ageing are bad for your health*. [online] World Health Organization. Retrieved from <http://www.who.int/mediacentre/news/releases/2016/discrimination-ageing-youth/en/> [Accessed 14 Apr. 2018].

Yardley, L. (2000). Dilemmas in qualitative health research. *Psychology and Health*, 15, 215- 228.

Yarnal, C., Chick, G., & Kerstetter, D. (2008). "I did not have time to play growing up ... so this is my play time. It's the best thing I have ever done for myself": What is play to older women? *Leisure Sciences*, 30(3), 235–252.

Zawawi, J. (2014). Relationships between Body Mass Index, Body Image Dissatisfaction and Psychological Distress among Fitness Center Female Users in Zarqa-Jordan. *International Journal Of Humanities And Social Science*, 4(11), 109-130.

APPENDIX A

Research Ethics Proposal Acceptance Letter

Reference Number: SWB 261/2017

Date: 12th December 2017

Dear Ms Adriana Vella,

I am pleased to inform you that your ethics proposal with regards to your research entitled *An Exploration of Body Image and Psychological Wellbeing in Older Maltese Men* **has been accepted**. Hence, you may now **start your research**.

You are kindly requested to pick up your documents from our office between 08:00-12:15 and 13:30-16:45.

Thanks and regards,
Charmaine

Faculty Research Ethics Committee (FREC)
Faculty for Social Wellbeing
Room 113
Humanities A Building (Laws & Theology)
University of Malta
Msida MSD 2080

APPENDIX B

Consent Form

I hereby consent that I am willing to participate in the study entitled “An Exploration of Body Image and Psychological Wellbeing in Older Maltese Men”, being carried out by Adriana Vella (I.D. 51992) as part-fulfilment of her Masters degree in Gerontology and Geriatrics at the University of Malta.

I have been informed on the study and I understand that:

- I must be at least 18 years of age
- I am participating freely, and I understand that I am allowed to withdraw without any explanation at any stage, without any consequences for other treatment
- I am aware that the interviews will be audio-taped and any personal information shall be disclosed and used for the purposes of the study only.
- All information I provide about myself or audio-taped about me during my participation is anonymous, any names will be converted into pseudonym and all information will be destroyed when the study is completed.
- Any information and discussion material from the interview may be included in the dissertation, however personal names and details are to be kept confidential.
- I may refuse to answer questions during the interview.
- I have been informed about the nature and the aims of the study, and that I am able to ask further questions and seek clarification.

I am satisfied by these conditions and consent to participate in this study.

Signatures: Participant _____ Date: _____
Researcher _____ Date: _____
Supervisor _____ Date: _____

For further information, kindly contact me on:

E-mail: adriana.vella.11@um.edu.mt
Mobile: 99670463

APPENDIX C

Participant Information Sheet

You are being invited to take part in a research study as part of Masters Degree in Gerontology and Geriatrics. Before you decide it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully and discuss it with others if you wish. Please ask if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part.

Thank you for your time.

Who will conduct the research?

My name is Adriana Vella and I am conducting this research in part of my Masters Degree in Gerontology and Geriatrics at the University of Malta.

Title of the Research

An Exploration of Body Image and Psychological Wellbeing in Older Maltese Men

What is the aim of the research?

The aim of this study is to examine and further understand how older adult men experience changes in appearance, and how they cope with the aging process. The relationship between, body dissatisfaction and its impact on psychological well-being, self-esteem and quality of life will also be studied. The roles of social pressures and other influencing factors will be examined. This will help to develop an in-depth perspective of such age-related issues, thus bringing about awareness to health professionals and the general public.

Why have I been chosen?

You have been approached because the study requires information from Maltese Men aged between sixty and seventy five years of age, in order to share your experience on the ageing process, body image and its psychological impact.

What would I be asked to do if I took part?

If you decide you would like to take part, you would be asked to discuss a set of questions which will help me develop results for my dissertation. The interview will be recorded on my digital recorder. Your name will be made anonymous to maintain maximum confidentiality.

What happens to the data collected?

Once all interviews are conducted, data will be analysed and discussed and audio-recordings will be transcribed verbatim. Findings will be debated with existing literature and future implementations will be considered.

How is confidentiality maintained?

In order to maintain the utmost of confidentiality, together with this information sheet a consent form will be presented prior to the interview, which will describe the

conditions of the study, the voluntary nature of participation and rights to withdraw from answering questions. In order to enhance my research and discussion, anonymized quotes will be used. Your signature will be required for the consent form. All your personal data will be confidential and will be kept separately from your interview responses. All data will be destroyed after completion of my Masters Degree.

What happens if I do not want to take part or if I change my mind?

It is up to you to decide whether or not to take part. If you do decide to take part you will be given this information sheet to keep and be asked to sign a consent form. If you decide to take part you are still free to withdraw at any time without giving a reason and without detriment to yourself

What is the duration of the research?

The duration of the research will include a one-hour semi-structured interview including open-ended questions, and a demographic background profile.

Where will the research be conducted?

The Research will be conducted at a location both convenient for you and the researcher. The Qawra Clinic may be suggested.

Will the outcomes of the research be published?

The results will be summarised and reported in my dissertation and may be submitted for publication in an academic or professional journal in the future.

Contact for further information

Should you require any further information about the study kindly contact me or my supervisor,

Email: adriana.vella.11@um.edu.mt

Phone: 99670463

Supervisor: christian.borg-xuereb@um.edu.mt

Adriana Vella

Thank you for taking the time to read this information sheet.

APPENDIX D

Participant Debrief

Thank you for your participating in this study. Your time and effort are much appreciated. This study focused on exploring the experience of body image and psychological well being in older Maltese men aged between sixty and eighty-seven years of age. All the information collected throughout the interviews will be confidential, and there will be no way of identifying your responses in the data archive.

Your participation has been highly appreciated and will help me in order to complete my research study as part of my Masters Degree. The results will aid to bring about awareness to health professionals and the general public which will allow to stimulate better ageing practices. If you have any questions or concerns, you are kindly asked to contact the Researcher, Adriana Vella at adriana.vella.11@um.edu.mt or her Supervisor, Dr. Christian Borg Xuereb at christian.borg-xuereb@um.edu.mt. If your participation in this study has caused you any concerns, anxiety or any other distressful emotions, you may contact, Dr. Christian Borg Xuereb who will provide a, free debriefing session in order to discuss your concerns. If you would like to learn more about the results of the presented study, kindly do not hesitate to contact the researcher.

THANK YOU AGAIN FOR YOUR PARTICIPATION.

APPENDIX E

Demographic Background Profile

Age: _____

Marital Status: _____ Children: _____

Level of Education: _____

Employment: _____

Do you smoke? _____

Do you consume Alcohol? _____

Locality: _____

Weight

Height: _____

Weight: (Current) _____ (Heaviest) _____

(Lightest) _____

General Information (How do you feel about your...)

Health (Illness, Symptoms) _____

Mood and Emotional Status _____

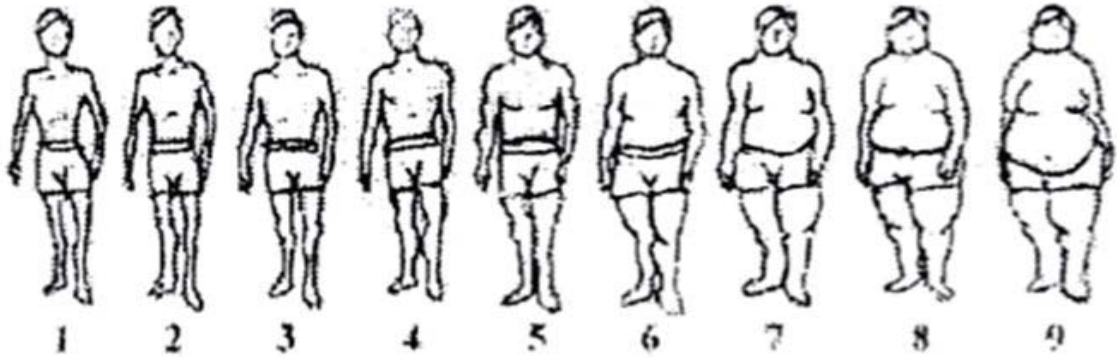
Appearance/Physical Function _____

Participation in Daily Activities _____

Participation in Social Activities _____

APPENDIX F

Figure Rating Scale



(Stunkard Adult Male Image, 1983)

1. Please indicate your current size and shape from the scale ranging from 1 (one) to 9 (nine), with 1 (one) being the thinnest body type and 9 (nine) being the largest.

Current figure (Circle One): 1 2 3 4 5 6 7 8 9

2. Please indicate the size and shape you would most like to be.

Ideal Figure (Circle One): 1 2 3 4 5 6 7 8 9

3. Please indicate the size and shape you feel women in general find most attractive.

Attractive Figure (Circle One): 1 2 3 4 5 6 7 8 9

APPENDIX G

Participant Body Image perceptions

Figure Rating Scale Results <i>(From 1(thinnest)- 9 (largest) body type)</i>		
Pseudonyms	Current Size and Shape	Ideal size and Shape
Mark	6	3
Joshua	5	3
Peter	3	1
Larry	2	2
Chris	2	1
Jonathan	6	4
Vinnie	5	1
Alfred	2	2
Mario	3	1
Pablo	2	2
Elijah	6	6
Victor	2	1

APPENDIX H

Interview Schedule

1. Can you tell me something about you?
2. What does the term body image mean to you?

Prompts:

- a. How important is your appearance to you?
- b. How invested are you in the way you take care of the way you look?
- c. What do you think makes an individual attractive?
- d. What factors or aspects do you think lead to shape an individual's body image?

3. How would you describe your current body image?

Prompt:

- a. Are you content or dissatisfied with the way you look?

4. How has the ageing process and physical transformations associated with later adulthood influenced your body image and esteem?

Prompts:

- a. Muscle Tone, Weight, Hair Loss, Fat, Wrinkles etc...
- b. Women's opinions on your appearance
- c. Men's opinions on your appearance

5. From your experience, have you tried to alter you appearance in any way?

Prompts:

- a. If so, why?
- b. What type of eating behaviours and physical activity have you participated in to alter your appearance?
- c. Have you tried any practices to prevent ageing changes to your body? (Mention Examples)

6. From your experience, have the transformations associated with the ageing process caused any concerns or caused to experience body dissatisfaction?

Prompts:

- a. Have you experienced any negative emotions throughout your ageing process?
- b. In your experience, do you think that your emotions may have been influenced by your body image/appearance? (Anxious, depressed, LSE)
- c. How have the physical transformations influenced your quality of life?
- d. In your experience, Do you think, body dissatisfaction can cause psychological problems?

7. How does your body image and esteem influence your activities of daily living and social relationships?

Prompts:

- a. Do you think that your body image or appearance influence the activities you choose to participate in during your free time?
- b. If yes, How?
- c. What aspects of your body image influence such activities or relationships (appearance, function, esteem)?

8. How do others' opinions influence your perception on your body image and body satisfaction?

Prompts:

- a. Do you feel that your relationships influence the way you perceive your appearance and self-esteem?
- b. What Role do you think family members played in shaping your body image?
- c. Do you feel that the influence is different from others (non-family members)?
- d. Can you describe any experiences were you may have experienced age related discrimination? (Especially due to appearance).

9. How does the media influence your attitude in achieving an ideal body type?

Prompts:

- a. What Role do you think society has on shaping your individual body image?
- b. From your experience, do you think that social media (such as Facebook ...) influence an individual's body image/ self-esteem?
- c. Do you think that the media's representation of older adults encourages seniors to have a positive self-esteem?
- d. In your experience do you think there are any differences in men and women?

10. What factors would you suggest mostly influence your self-esteem and body-confidence?

11. What body parts or aspects of appearance do you think most influence body image for Men?

Prompts:

- a. What aspects would you suggest are the most important to you?
- b. How important would you suggest are appearance and body image in your life?

- c. Do you think that you would be happier if you looked different?
 - d. Where there any times throughout your lifespan were you felt different feelings and emotions about your body image than your current experience? If so, how have they impacted your quality of life.
12. Can you describe some experiences that may have influenced the way you view yourself and image? (From childhood, adulthood or any other experiences)
- a. Do you think such experiences may have influenced the way you feel about your appearance or body?
 - b. Do you feel that such experiences may have impacted on the way you feel about yourself now? If so, how?
13. In your experience, Can body image affect an individual's personality/ attitude?
- a. If so, How?
 - b. In your experience, in what way do you think are your behaviours influenced by your body image (Avoidance, withdrawal, choices...)

APPENDIX I

Phenomenological participant description

A summary of the personal stories of the twelve male participants is presented. Their stories are presented as short vignettes and outline a brief description of their personal background. (Pseudonyms have been used to protect the identity of participants.)

Mark: is 64 years old, is married and has two children. He owns a restaurant, and works with his son and daughter in-law. He is very passionate about his work and enjoys being on-the-go. He likes to travel, as it allows him to explore other cultures. He also enjoys spending quality time, relaxing in quiet environments. He is also very passionate about football, and often goes abroad with his son to watch football matches.

Joshua: is 65 years old, is married and has three children. He owns a shop and works with his children. Prior to working at his shop, he worked for a clothing store for over fifty years, which he suggests influenced his desire to maintain his appearance and overall look. He enjoys going out and participating within society.

Peter: is a single 65-year-old man and recently retired. Peter used to live in London, and suggests that living abroad has influenced his life approach and provided him with a more open-minded approach towards life. He helps at the local parish, and at times aids at funeral services. He enjoys going out and meeting people especially in community related events.

Larry: is 66 years of age, recently widowed and has two children. Larry, used to own a business in catering, he used to work for long hours and recently decided to sell it and retire. He enjoys spending time with his dogs, swimming and participating within society especially meeting people.

Chris: is 69 years old. He is married and has three children. He is a business director and helps his children with their businesses. He also helps his wife with daily needs

since she recently fell ill. He is highly passionate about keeping fit and nutrition and enjoys going to the gym, walking and swimming.

Jonathan: is 71 years old and widowed. Jonathan recently returned back from Australia after his wife passed away. His prior occupation was as a ward-man and used to enjoy helping people with their gardening. He also helps in his local parish, and enjoys participating in community activities. He enjoys going abroad and going out to eat. He also likes to collect DVD's.

Mario: is 71 years old, married and has two children. He owns a business with his children. He attends everyday and enjoys doing light work such as driving and teaching them old techniques. Mario is very passionate about cars; he has a collection of model cars and enjoys cleaning them and admiring them. He also enjoys going to car activities, races and even goes abroad. He likes to spend time making jigsaw puzzles.

Alfred: is 72 years old, separated and has two children. However, he aids his wife on a daily basis and visits his family every Sunday. Alfred used to work as an ECG technician and illustrates that his work experience has provided him with several opportunities. He enjoys participating in society and likes to travel. He enjoys meeting new people and communicating with others.

Vinnie: is 75 years old, married and has five children. He often travels with his wife. Vinnie used to work in the glass industry. He enjoys spending time at his farm, taking care of animals and growing vegetables. He likes to go out and participate in society.

Pablo: is 78 years old, married and has a son. Pablo used to work as a hairdresser, but still enjoys participating in society by taking care of renting apartments and other family related businesses. He enjoys swimming and enjoys taking care of his grandchildren, driving them to school and other activities. He enjoys going out to eat and talking to people. He is very passionate about plants and taking care of his house and garden.

Elijah: is 84 years old and widowed. He has four children and a grandchild. He used to work as a tailor and had his own printing press. He is very passionate about films and novel writing.

Victor: is 87 years old, widowed and has five children. Victor used to work as an engineer and often travelled abroad due to his work. He is very passionate about cooking and often likes to explore new recipes. In his free time, he enjoys going to the casino and meeting with people. He highly values social involvement and keeping active.

APPENDIX J

Transcript Samples

Chris		
Emergent Themes	Original Transcript	Exploratory Comments
<p>Psychological well-being (<i>The impact of body image on self-confidence</i>)</p>	<p>P: I think with age, I'm 69 but I still feel, emm I think I feel good and fit</p> <p>R: From your experience, have you tried to alter your appearance in any way?</p>	<p>Positive Self –Regard</p>
<p>Appearance investment in old age (<i>Self-care practices in older adult men</i>)</p>	<p>P: Emm...aha, I had a small mole on my forehead I removed it as it used to bother me... the rest I don't know, I try to keep my hair healthy so I don't go bald, I try to keep my appearance as much as I can</p> <p>R: What type of eating behaviours and physical activity have you participated in to alter your appearance?</p>	<p>Physical Concern/ Appearance</p> <p>Attentive/ Concerned Appearance</p>
<p>Appearance investment in old age (<i>The quest to maintain a healthy physique</i>)</p>	<p>P: Aha, yes, and I still do...like I don't eat bread, any pizza or junk food</p> <p>R: So you're careful on what to eat</p> <p>P: Aha, I'm careful and choose what to eat</p> <p>R: But is it due to a certain medical condition or for your image and appearance?</p>	<p>Eating behaviours- conscious eating habits</p> <p>Eating Behaviours- Health conscious, mindful eating</p>
<p>Physical wellness in later life (<i>Health prioritization in late adulthood</i>)</p>	<p>P: Firstly, not to take medicine as much as possible, I don't like putting things in my body, I try to be as natural as I can, I like to feel healthy</p>	<p>Health-Cautious and Attentive</p>
<p>Physical wellness in later life (<i>Barriers and Motivations for Physical Activity</i>)</p>	<p>R: and do you exercise?</p> <p>P: Yes of course, I go to the gym everyday for an hour and a half, I go walking... I exercise a lot, I want to keep fit</p>	<p>Physical functioning- importance of exercise Emphasis on keeping fit</p>
<p>Psychological well-being in late adulthood (<i>The influence of age related changes on self-esteem</i>)</p>	<p>R: Have you experienced any negative emotions throughout your ageing process?</p> <p>P: Aha, mhm sometimes I feel a bit sad you know, but...</p>	<p>Psychological wellbeing- negative emotions</p>

Vinnie		
Emergent Themes	Original Transcript	Exploratory Comments
<p>Appearance investment in old age <i>(The quest to maintain a healthy physique)</i></p> <p>Psychological well-being in late adulthood <i>(The relationship between body image and self-consciousness)</i></p> <p>Social influence at older ages <i>(Social comparison and its impact on self-evaluation)</i></p> <p>Social influence at older ages <i>(Social comparison and its impact on self-evaluation)</i></p> <p>Physical wellness in later life <i>(Sexual needs and intimate relationships)</i></p> <p>Social Influence at older ages <i>(The impact of media exposure on personal appearance)</i></p> <p>Social Influence at older ages <i>(The impact of media exposure on personal appearance)</i></p>	<p>R: Does your body image affect the way you eat and how much you eat?</p> <p>P: Mmm, although I like to eat, I try and eat vegetables...I like it but its not fattig</p> <p>R: aha so you're concerned about gaining weight</p> <p>P: Yes, I don't want to get fat</p> <p>R: Do you comment or judge other people's appearance or the way they look</p> <p>P: Yes, Yes, I say I'm better than him or he looks better than me, or for example if he has something which I like...or he needs to take care more of himself</p> <p>R: and do you compare yourself to others...</p> <p>P: I say for example he's better than me, or I'm better then him, but I do yes comment on others I don't think I'm always the one looking good (Laughs)</p> <p>R: And how do you think that your age influenced your intimate relationship?</p> <p>P:at the moment its like I don't have anything to tell you the truth (Laughs)</p> <p>R: In your opinion what do companies do to promote positive body image in the media?</p> <p>P: Well, I think they do things to attract people,</p> <p>R: and for example what about products, how do you think they influence people?</p> <p>P: For me I'm not influenced from these things, I mean I see them but that's it, but and then I do whatever is in my mind (Laughs)</p>	<p>Self-conscious- Eating Behaviours</p> <p>Self-conscious- weight Importance of weight management</p> <p>Self-confidence/compare oneself to others/comments on others appearance and image</p> <p>Self-comparison to others, personal thoughts on others image, positive self-regard</p> <p>Lack of intimate relationships</p> <p>The influence of media</p> <p>The influence of media and adverts on personal attributes</p>