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Infantilisation among married couples in old age

Infantilizacija med poročenimi pari v starosti

Abstract

In the area of intimate partner abuse among older people, we encounter a theoretical and empirical void as regards the impact of retirement on the incidence of infantilisation. This paper looks at whether infantilisation occurs among married couples in old age and how it is perceived by older people and their formal carers. Infantilisation is a form of psychological abuse in which a person in a position of power treats another person as if he or she were a child. The use of childlike language, exaggerated intonation and a higher pitched voice are its most distinctive features. Although one can be infantilised anytime during adult life, infantilisation may have the most serious consequences for people in old age, especially if it is linked to excessive control and other actions that deny an old person autonomy and dignified treatment. This study builds upon the information obtained from 11 in-depth interviews with pensioners aged 70 and above and a focus group with four professional home carers. The data was analysed in accordance with the methodological guidelines of grounded theory, and the findings were clarified by two expert interviews. The results of the analysis indicate that infantilisation does appear among married couples in old age, but is perceived differently by formal carers and the older people themselves.

Keywords: old age, infantilisation, psychological abuse, perception, intimate partner relationships

Povzetek

Na področju partnerskega nasilja med starimi se srečujemo s teoretsko in empirično praznino glede vpliva upokojitve na pojavnost infantilizacije. Ta članek se osredotoča na vprašanje, ali se infantilizacija pojavlja med poročenimi pari v starosti ter kako jo dojemajo stari ljudje in njihovi formalni oskrbovalci.

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Infantilizacija je oblika psihološkega nasilja, pri katerem oseba s pozicije moči obravnava drugo osebo kot otroka. Najlažje jo prepoznamo po uporabi otroškega besedišča, pretirani intonaciji in visokem tonu glasu. Čeprav je človek lahko infantiliziran že prej v odrasem življenju, infantilizacija v obliki pretiranega nadzorovanja in v drugih interakcijah, ki človeku odrekajo avtonomijo in dostojanstveno obravnavo, prinaša najbolj nevarne posledice za stare ljudi. Raziskava temelji na podatkih enajstih poglobljenih intervjujev z upokojenci, starejšimi od 70 let, in fokusne skupine s štirimi oskrbovalkami na domu. Podatki so bili analizirani v skladu z metodološkimi vodili utemeljene teorije in dopolnjeni z dvema ekspertnima intervjujema. Rezultati nakazujejo, da se infantilizacija pojavlja med poročenimi pari v starosti, a jo stari ljudje dojemajo drugače od formalnih oskrbovalcev.

Ključne besede: starost, infantilizacija, psihološko nasilje, percepcija, intimni partnerski odnosi

Introduction

Intimate partner abuse is present in all societies. It affects everyone regardless of their gender, social status, ethnic or religious affiliation and age. Despite the fact that older people are one of the fastest growing vulnerable groups (Rener, 1997), abuse of older people still accounts for only a fraction of the studies on domestic violence. Furthermore, intimate partner abuse is underrepresented in studies of abuse of older people, and most of the literature on abuse of older people does not focus on abuse by intimate partners (Kosberg, 1998; Straka & Montminy in Roberto, McPherson, & Brossoie, 2013). Scarce and conducted on specific (most frequently clinical) samples, the literature on long-term intimate partner abuse does suggest, however, that psychological abuse in old age intensifies.

An analysis of drawings by battered women, for example, found that their perception of the perpetrators of abuse as powerful giants in threatening poses did not change even when the husband in question was crippled by illness in old age (Lev-Wiesel & Kleinberg, 2002), which indicates that the balance of power in abusive relationships is retained even when the perpetrators become weak or infirm. The fact that the pattern did not change even in cases where the perpetrators had become dependent on their partners indicates a certain continuity in patterns of intimate partner abuse throughout their lives (WHO, 2011). When the perpetrator cannot continue relying on their physical superiority to maintain their dominant position in the relationship, they intensify their controlling behaviour (Hightower, Greta, Smith & Hightower, 2006; Koenig, Terry, Rinfrette & Lutz, 2006; Montminy, 2005) by substituting physical abuse with various forms of psychological abuse (Fisher & Regan, 2006; Zink, Jacobson, Pabst, Regan, & Fisher, 2006; Lundy & Grossman, 2005; Mezey, Post & Maxwell, 2002).

One form of psychological abuse that has not yet received much scholarly attention is infantilisation. Most of what we know about forms of speech that could be characterised as infantilisation in old age comes from studies of communication (e.g. Ashburn & Gordon, 1981; Corporeal, 1981; Nussbaum, Pecchioni, Robinson & Tompson, 2013) and stereotyping (e.g. Hummert, Garstka & Shaner, 1995; McCann & Giles, 2002). The few studies that characterise infantilisation as a form of psychological abuse have been conducted in an institutional setting (e.g. Buzgová & Ivanová, 2009; Jongsma & Schweda, 2018; Marson and Powell, 2014). It is therefore not surprising that there is a knowledge gap with regard to infantilisation in old age in the context of intimate partner abuse.

Studies that treat infantilisation as a form of psychological abuse define infantilisation as a behavioural pattern in which a person of authority (social workers, medical personnel etc.) treats another person as if he or she were a child. In an institutional setting it is most easily identified by the use of secondary baby talk. Secondary baby talk is a patronising type of speech in which the speaker uses an exaggerated intonation, a higher pitched voice, and a childlike vocabulary (Marson & Powell, 2014). The origin of infantilisation in an institutional setting has been attributed to a perceived lack of independence of older people (Cuddy, Norton & Fiske, 2005; Salari & Rich, 2001), as the caregivers often rely on negative stereotypes (Corporeal, 1981) that "link the conceptualizations of children and childhood to the experience of old age and other contexts of dependency" (Salary & Rich, 2001, p.117). Studies have also shown that the majority of institutionalized older people consider infantilisation as disrespectful and patronising (Marson & Powell, 2014). It is the negative effects of infantilisation on behaviour, well-being, self-identity, relationship formation, and social interaction that distinguish infantilisation from poor quality of care and characterize it as a form of psychological abuse (Salari, 2006). Infantilisation is a subtle form of psychological abuse that occurs in later life and appears in settings with unequal power distribution.

By looking at infantilisation: (1) among married couples in old age this paper attempts to fill the gap in the literature on old age infantilisation (as this has focused mostly on institutional settings); (2) as a subtle form of psychological abuse in old age this paper aims to provide some clues about how infantilising

behaviour after retirement is perceived by older people and their formal carers.

Method

The data on which this paper is based comes from a qualitative study about negotiating marital conflicts after retirement that was conducted in Slovenia in 2016. The aim of the study was to gain a deeper understanding of intimate partner abuse in the context of the everyday life of older people. The results presented in this paper focus on two research questions: (1) does infantilisation occur among married couples in old age; and (2) how is it perceived by older spouses? We decided against representative sampling and statistical generalisation, opting instead for analytical induction using the grounded theory method. The results are based on 11 qualitative interviews with older people, a focus group consisting of four carers from a home care provider, and corroborated by two expert interviews.

Interviewees were invited to participate in this study via the Home Care Institute, a retirement home, and a psychiatric clinic. Individuals whom the above organisations considered might be willing to take part in the research received an invitation to participate, in which they were informed of the purpose and focus of the study. A condition for participation was that the interviewees did not report any serious cognitive disorders or suffering from mental illness and that they were married at least five years prior and five years after they both retired. Based on this condition we screened out four applicants. The final sample included seven women and four men from 70 to 95 years old. Nine of the interviewees were widowed at the time of the interview. All the interviews were recorded and transcribed in full. In the transcripts the names of the interviewees were changed to assure their anonymity. Before the start of the interview, the interviewees signed an informed consent to participate in the study.

The focus group was based on an informal and only partially structured spoken interview. The leader of the focus group (the author of the study) had a list of key points and directed the conversation towards them whenever the interview strayed from the purpose of the research. The conversation was spontaneous and the task of the leader was above all to ask participants follow-up questions when their observations approached the key research topics. Those invited to participate in the focus group were carers employed by a home care provider. The focus group participants were four middle-aged female carers;

the youngest was 41 and the oldest was 56. The conversation was recorded and transcribed in full. The names of the careers were changed to assure their anonymity. Before the start of the conversation, the participants all signed informed consent papers.

We carried out a qualitative analysis of the data in accordance with the grounded theory as developed by Glaser and Strauss (1967) while also taking into account the recommendations of other researchers (see Lindgren, Sundbaum, Eriksson, & Graneheim, 2014; Mesec, 1998). We edited the word-for-word transcriptions and systematically analysed them, focusing on differences and similarities between individual parts of the text. By categorising and classifying the different parts of the text, we formulated concepts, used these to create categories, and then linked these categories together to form a theoretical model.

Once the preliminary theoretical model was formed, we conducted two expert interviews to clarify the initial findings. For this purpose, we turned to psychiatrists Miran Možina and Breda Sobočan. They were informed of the purpose and focus of the research before signing the appropriate informed consent papers. Both experts were asked to base their answers on their everyday experience of therapeutic work and experience gained over the years through specific cases. The interviews were recorded and then transcribed word for word. Given that the purpose of the interviews was to deepen our understanding of the data already obtained, we did not analyse the texts using the qualitative data analysis method. We used the opinions of the experts to supplement our analytical interpretations of the results of the in-depth interviews and focus groups.

Findings

The results from the focus group suggest that infantilisation does appear among older couples. The carers describe the infantilisation they observed as follows:

> *Anja: I have one man who even had a little canopy over his bed. Yes. Really. Like a little baby. They [spouses] turned this into a project, and it is usually the women who do it. And a little pillow and lace. Personally I thought that was an exaggeration. She does it for her own sake, because he couldn't care less what kind of pillow he has. But she is in charge there. He is overlooked.*
> *Klavdija: Yes, that's right.*
> *Anka: Yes. She even chooses the colour of the bed linen...*
> *Nada: Today you'll wear this.*
> *Anja: And in half an hour you'll do this. No one asks him what he would like.*

Anka: She makes the decisions for him.

Nada: At nine o'clock you'll eat this and this, at 11 o'clock you'll have an apple.

Anja: And then she says that he really likes it. He doesn't say anything. She decides that he likes it.

Nada: And he sits there in silence and thinks to himself [...] "You do what you want".

Nada: Yes, as long as he is left in peace. He can't do anything else. This is often the case.

The observations from the focus group paint infantilisation as a mechanism of dominance that involves taking control over household arrangements, clothing, eating and answering questions intended for the spouse.

While the carers perceived infantilisation and described it as a problem, the interviewees (older people) did not state anything like that. Most of them recognized behaviour that is characteristic of infantilisation in their relationships but did not perceive it as a form of psychological violence as the following statements show:

Because men don't like that and they are allergic to it, because they say that after they retire their wives think of them as their children. That we carry on caring for them, tell them what to wear. [...] This is probably that female maternal instinct... You also pass it on to your partner and not only to the children. That's probably what it is. And men don't like this, because it is sometimes too much. [...] You mean well, but then he gets fed up of hearing it. Danica, 71

In a relationship... sometimes. I would say, don't be silly, dear, don't be childish, do this, do that. [...] But it has to be in a humane form, with conviction, with evidence, with arguments, not just any which way. Now it is a matter of the intelligence of the individual person. If he is able to deal with it, if he is able to explain: listen, don't do that. For example, I pleaded with my old dear about smoking. Three days before she died, she was smoking. What of it? Now, when you see that death is waiting for her, are you going to tell her she can't have the thing that was the greatest pleasure in her life – a cigarette? It isn't worth it, because you would come across as a tyrant, even though you love her. Milan, 92

My husband never treated me like a child. He was just as old as I was, older even. I never bossed my husband about. It is true, though, that I... They say that you shouldn't wear too many clothes in autumn. But once you put a hat on your head, you mustn't take it off until summer. Marjana, 90

A woman takes possession of you and you are the object of her treatment. But if she is able to tell you this in a nice way, that's a different story. Of course, sometimes she belittles you with her behaviour, but she doesn't mean anything malicious by it. Metod, 89

Female interviewees tended to perceive infantilisation as exaggerated maternal concern turned toward the partner, treating him as a child and bossing him around, while male interviewees saw it more as a consequence of bad communication skills. Only one participant in the study described infantilisation as a subtle form of psychological abuse. For example here is how he complained about his wife trying to interfere with his diet.

She also massages me now. She watches television and [hears about vitamins] B2 and B3 and I don't know what else, and apples are good for you... I don't want to hear that. I [eat] what I want. I don't care about that, not at all. But this food is good for you, that food is good for you... I eat what I feel like. For the moment, I am still fairly healthy, I have no complaints and I don't want to hear anything about it. And sometimes she loses her temper. Matej, 70

Data gathered from formal carers suggest that infantilisation-like behaviour does appear in the sphere of intimate partner relations in a way that can be characterised as psychological abuse. Most interviewees, on the other hand, attested to its presence but, apart from one, did not perceive it as a psychological form of violence. Their interpretations pointed more to the fact that infantilisation among older couples is more likely to be an expression of a lack of communication skills than a strategy to dominate and control a partner.

Discussion

According to the carers at the Home Care Institute infantilisation not only appears among some married couples in old age, but also takes the form of excessive control and the giving of orders, making decisions on behalf of an adult person and other actions that deny an old person autonomy and dignified treatment. Their description closely resembles the characteristics of infantilisation in institutions. Perhaps decision making on behalf of the spouse and answering questions that were intended for them, and not a babyish or high-pitched voice, are the clearest signs of infantilisation in the context of intimate partner relationships. This may be too difficult to distinguish from terms of endearment between spouses.

The fact that infantilisation was most commonly simultaneously indicated and denied (e.g. Danica, Marjana and Metod), points to the narrow boundary between well-intentioned and excessive care, since the first is a sign of a loving relationship, while the second is potentially a type of psychological abuse, at

the centre of which there lies a contempt for weakness that is disguised as well-meaning compassion (see Tornstam, 2017) and through which the victim is socially and individually degraded via paralysing attentiveness and ironic friendliness (de Beauvoir, 2018).

Infantilisation only appeared clearly in the interviews in reference to food or eating habits. This was also pointed out by Sobočan (2016): “Feeding is the topic of this generation. [...] This is their "issue", a powerful one, and they are extremely violent in this. [...] For them, the fact that you eat your fill, the fact that you eat, is a sign that you love them, and if you don't eat, you are rejecting them. And for them the two things are totally connected. Those who are able to look inside themselves see that this is related to the hunger they experienced when they were young. So they feed each other strongly and concretely too, not just symbolically.”

The differences in the accounts of the carers and the interviewees are likewise evidence of the fact that older people themselves are not aware of or they do not recognise infantilisation as being problematic. In contrast to the literature on infantilisation in an institutionalised setting, the interviewees did not consider infantilising behaviour as disrespectful and patronising (Marson and Powell, 2014).

Literature on long-term intimate partner abuse suggests that forms of psychological abuse in old age act as a substitute for previous physical abuse in order to maintain the dominant position in a relationship after bodily decline (Fisher & Regan, 2006; Zink, Jacobson, Pabst, Regan, & Fisher, 2006; Lundy & Grossman, 2005; Mezey, Post & Maxwell, 2002). In relationships with a violent history, infantilisation may appear as one of the many forms of psychological abuse. In couples without such history, infantilisation may not be a form of abuse, but more an indicator of the asymmetrical power balance within an intimate partner relationship.

Another way to think about infantilisation among married couples in old age is to see it as a sign of an immature partner relationship. Možina (2016) believes that a repeated childish, regressive, infantile attitude is a sign of a insecure attachment where one partner can be seen to constantly need the other to control, guide and advise him or her. The problem is not only in the fact that spouses "exploit the partner relationship as a substitute for personal development" (Možina, 2016), but also in the impact on health that the long-term treatment of a partner as a child can bring.

Marson and Powell (2014) believe that treating old people with pity and infantilising them can trigger responses that mimic cognitive impairment. A similar view is held by Nussbaum et al., who note that "[r]epeated use of patronising speech with older people constrains them from being able to interact at their actual level of competence, which can result in lowered levels of capability (Nussbaum, Pitts, Huber, Krieger, & Ohs, 2005, 146).

What is interesting in our sample is that infantilisation appeared as a female-specific form of abuse in old age. Neither the interviewees nor the carers reported on infantilisation being perpetrated by men. Although the design of the study does not allow for making any generalisations about the general perpetration of infantilisation in old age, the gender specifics noted in this study are interesting from the theoretical point of view. If infantilisation in old age is gender specific, then we can connect it via gender difference to the role of the woman as mother and caregiver, which can strengthen in later years as other identities are lost (Sobočan, 2016). Looking after grandchildren can be an important source of fulfilment for women in the first years following retirement, although after the age of 75, it can start to become a problem, if as a result of physical decline they are no longer capable of performing the role of grandmother (Možina, 2016). This can represent a risk factor if exaggerated maternal protectiveness is projected onto a partner, who can then quickly slide into the role of a child. Although some men may to a certain extent appreciate the increased care and attention, such attention can quickly cross over into giving orders and controlling behaviour, into deciding what they may and may not do, as we have seen in the case of Matej.

Since infantilisation is by definition perpetrated by a person in a position of power (see Marson and Powell, 2014) this finding suggests that in some married couples the power balance between men and woman may change in old age. The continuity of male dominance in intimate relationships may not be the only pattern in later years, despite what the majority of the theories on intimate partner violence suggest (Hightower, Greta, Smith & Hightower, 2006; Koenig, Terry, Rinfrette & Lutz, 2006; Montminy, 2005). The studies on abuse of older people were, however, conducted on clinical samples of couples with a long history of abuse (e.g. Lev-Wiesel & Kleinberg, 2002), so this possibility could also be the consequence of the fact that the couples in this study did not have such a history. Further research is warranted to clarify these questions.

Conclusion

The context of intimate partner relations in old age has been neglected by research on infantilisation. Similarly, there was little known about infantilisation from the literature on intimate partner abuse in old age. By looking at whether infantilisation as a psychological form of abuse occurs among married couples in old age and how it is perceived by older spouses, this paper has attempted partly fill this void and encourage future research on infantilisation.

Answers from both the formal carers and the interviewees suggest that infantilisation occurs among married couples in old age. However, they do not perceive it in the same manner. While the formal carers indicate that infantilisation is a form of psychological abuse in the sphere of intimate partner relations, older people themselves do not consider it psychological abuse.

The findings also point to the fact that it is difficult to distinguish between infantilisation as a form of psychological abuse and infantilisation as well--intentioned care, or in the worst case, a matter of bad communication. This raises an additional problem, since for many victims infantilisation can be so well hidden beneath the guise of well-intentioned care that it is difficult to recognise it as a form of psychological abuse (e.g. Danica). Apart from one exception, interviewees saw infantilisation not as a form of abuse but as the expression of a loving relationship. Most of the older people did not perceive infantilisation as psychological abuse or as having negative effects on their wellbeing. The presence of infantilisation among older couples indicates an asymmetrical power balance in the relationship and perhaps could be seen as a sign of poor relationship quality.

Since both unequal power structure in a relationship and an immature partner relationship may have detrimental consequences on the health and wellbeing of older people in the long-term, more research exploring the connections between infantilisation, the quality of intimate partner relationships and the power balance between spouses is needed.

Limitations of the research

When interpreting the conclusions of this article there are a few limitations that a reader must consider. Firstly, we only conducted interviews with individuals

who agreed to take part in the research. This resulted in a gender biased sample composed of almost twice as many women than men and a sample completely devoid of representatives of the lower classes of society, which is in part a consequence of sampling via paid-for services. All the interviewees and most of the people the carers from the home care institution were in contact with belonged to the middle to upper class, lived in an urban environment and were fairly well educated. Secondly, most of the interviewees were widowed (nine) and all of the interviewees answered retrospectively. The selective nature of memory makes it possible that the (especially widowed) interviewees suppressed the negative aspects of their relationship with their partner or idealised their late partners. Thirdly, since the phenomenon we are studying (abuse) is ethically unacceptable in our society, it is likely that interviewees consciously or unconsciously (self-deception) excluded from their narrative certain aspects of their intimate partner relationship which they did not see as being socially acceptable (Randall & Fernandes, 1991).Lastly, because carers talk to their charges during every visit, their relationship with the recipients of their care is characterised by a high degree of trust. Despite this trust, however, this "view from outside" has its limitations. It may be that they perceived problems linked to partner abuse where the interviewees themselves did not, since it is possible that they viewed abuse and partner relationships in a different manner than their older charges.

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