Studying Active Ageing at The Cordial Club

The active ageing discourse forms current European ageing policies. Rather than portraying old age as a life stage of passiveness and decline, the active ageing discourse transforms late life into a period of physical activities and opportunities. But at activity centres in Denmark, different forms of active ageing appear than in the European Union (EU) and the World Health Organization (WHO) policy papers. This article is about how older men playing billiards at the activity centre The Cordial Club challenge some of the configurations of late life inscribed into active ageing and how their practices suggest a different ideal of activity. Their practice raises questions about the ways in which active ageing is promoted, the kind of activities active ageing promotes (physical, social, mental, etc.) and how cultural difference engenders different kinds of activities that do not necessarily fit into the discourse of active ageing.

In Denmark, there are various kinds of activity centres for the retired. The centres have different characteristics depending on the types of activities they offer. Often, billiards is one of the most popular activities at the activity centres, and The Cordial Club in the capital area of Denmark is no exception. Almost all of the 110 active members participate in the club’s billiards tournament. While billiards is often the most popular activity at activity centres, it is also associated with the pubs of industrial society’s working class. The game seems somehow...
anachronistic and out of sync with the increasing focus on physical activity and self-care. At The Cordial Club, most members have a working-class background and have played billiards throughout their life course. Their life histories and traditions are amalgamated into the game and the table’s green cloth. In this way, billiards is a culturally specific form of practice.

I have studied how the active ageing policy and discourse unfolds in practice through ethnographic fieldwork at The Cordial Club. From January 2011 to May 2013, I spent approximately 13 weeks doing participant observations at The Cordial Club. Furthermore, I conducted nine semi-structured interviews, each ranging from one to four hours, with some of the centre’s members. I also followed three of the interviewees in their everyday activities, such as buying groceries, picking up grandchildren and participating in birthday parties and informal dinners. These everyday activities served as opportunities to observe different kinds of activities in a variety of settings.

The EU and the WHO have positioned active ageing as the solution to the demographic and economic challenges presented by the ageing European population (Zaidi et al. 2013; WHO 1999, 2008). Active ageing is a gerontologically-inspired political concept that aims to produce a more active late life for the elderly through a re-organisation of individual behaviour and societal structures (Lassen & Moreira 2014; Moulaert & Paris 2013; Boudiny 2013; Walker 2002). In particular, active ageing emphasises physical activity, social participation and a longer working life as central elements when it comes to improving the quality of life of older individuals as well as the economy (Stenner, McFarquhar & Bowling 2011). In this article, I regard active ageing as more than a policy tool and a gerontologically-inspired concept. It is also a discourse that produces ideals of the good late life; it is embedded in practice and forms differences and hierarchies amongst activities. With active ageing policies in mind, billiards is problematised as a physically passive activity. The older people’s billiards game is politicised because of the type of activity it lacks: physical activity conducted in order to lead a healthy and long life. The collective at The Cordial Club does not promote a healthy lifestyle according to the active ageing discourse, but rather emphasises cordiality and togetherness.

As part of active ageing policy, a range of national pension reforms and local initiatives have been launched to change retirement behaviour, encourage more people to lead healthy and active lives into old age, and delay older people’s dependence and need for care (EU 2012, 2011; WHO 2002). In Denmark, one of the local initiatives is the on-going development of activity centres like The Cordial Club. The centres are run by members and supported by the municipalities to varying degrees, and they offer facilities for – and/or instruction in – a range of activities during the week. These activities often focus on physical movement, such as Pilates, qigong, ping-pong, Zumba and gymnastics. However, the centres also offer different types of activities that are more focused on togetherness and conversation, such as billiards, knitting, stamp-collecting, and language classes, that is, activities that do not have physical fitness as the primary outcome.

The wide range of activities on offer suggests a comprehensive approach to active ageing. Indeed, as one of the slogans states, active ageing is both about “adding years to life and life to years” (European Senior Citizens Union 2003; WHO 2013). As global populations experience a radical growth in life expectancy (Christensen et al. 2009), it is crucial for healthcare systems and quality of life that individuals are free of disease during the extra years. Furthermore, as the slogan indicates, adding life to years also points to active ageing as more than a purely medical definition of health as absence of disease. The EU promotes a longer working life, but with regards to the post-retirement period, active ageing policy papers use a comprehensive terminology to describe the content of the extra years, including concepts such as “participation”, “social inclusion” and “independence” (EC 2011).

However, in national adaptations and local initiatives, active ageing is often condensed into the promotion of physical activity, which is considered to be central to maintaining a healthy and active old
age, according to the Danish Health and Medicines Authority (Sundhedsstyrelsen 2011). This complexity and contradiction between international policy apparatuses and their enactments in local practice has previously been the subject of ethnological studies concerned with the localisation of international conventions (Bendix, Eggert & Peselmann 2012) and Europeanisation as heterogeneous processes (Welz 2012; Sandberg 2009). While the condensation of active ageing policy into physical activity shows how Europeanisation is transformed in specific localities, it also reveals a hierarchy amongst different kinds of activities. Activities that offer cardiovascular exercise are valued higher than other types of activities. Whereas social activities were previously regarded as the most important type of activities and physical activities were regarded as dangerous for the old, physical activities are now thought to be integral to a healthy old age. An increasing scientific consensus that physical activity is the single most important factor for health (WHO 1996) enforces this emphasis on physical activity. Physical activity has become the main activity that other types of activity can flourish around.

Although billiards is a physically strenuous exercise for some of the men at The Cordial Club, who play billiards five to six hours a day in old age, they do not focus on the strenuous aspect of billiards. To them, physical activity is an added benefit; they focus more on the social aspects of the activity. As I argue in the analysis, the emphasis on constant physical activity creates blindness towards these types of activities. The active ageing discourse produces an ideal type of late life focused on health, activity and

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III. 1: The billiards room in The Cordial Club where the elderly men play billiards four days weekly. (Photo: Aske Juul Lassen 2011)
independence, in which constant physical activity is essential.

Stephen Katz has described the focus on activities for the elderly as part of a disciplinary management of post-retirement everyday life that creates independent “busy bodies” with less need for welfare support (2000). As suggested by David Ekerdt, there is a moral demand that the elderly remain busy (Ekerdt 1986). This “busy ethic” is a continuation of the work ethic into retirement. Retirees can use this to justify their leisure activities in retirement, and to defend themselves against being deemed obsolete. As long as their activities have a physical or productive aspect, then the specifics of what the retirees are busy with – that is, the content of the activities they engage in – are secondary to the fact that they remain busy. This establishes a certain hierarchy amongst post-retirement activities, in which physical activity is at the core of active ageing. In order to practise a normatively good type of ageing, the individual must engage in physical activity.

However, as shown in the analysis, for the players at The Cordial Club, the content of their activity is not secondary. To them, it is not about being active for the sake of activity and busy-ness itself. They cannot simply replace billiards with a more physically active type of activity. Billiards is an important and unifying aspect of their collective, as billiards materialises their life histories, family traditions, class affiliations and produces a particular rhythm in their everyday lives. However, the active ageing discourse disregards the cultural significance of billiards. The game of billiards illuminates some potential problems with the way the active ageing policies are configured locally: They must adapt to the rhythms of the everyday lives of older people, to the history and kind of collective in which they wish to intervene as well as to the cultural significance of the activities they try to promote. In order to do so, it is necessary to conduct ethnological analyses of older peoples’ everyday practices, and the cultural and socio-material specificities in which active ageing is embedded.

I start out by presenting a brief overview of the concept of activity in social gerontology. I demonstrate how the focus on the older individual has its roots in the emphasis on individual adjustment through activity in post-World War II social gerontology. I also illustrate how the anachronistic status of the billiards table is a consequence of changes to the concept of activity during the last fifty years. Furthermore, I describe how cultural gerontologists have previously criticised active ageing. I then present the theoretical framework of the article and show how I use actor-network theory (ANT) to focus on the collective rhythms in The Cordial Club, and to overcome the dichotomy between activity and passivity. Before turning to my empirical analysis, I describe how I have used billiards as the “kitchen entrance” (Ehn & Löfgren 2006) to active ageing, and how this analytical strategy has also been a methodological choice that has allowed me to use my difference from the interviewees and my inability to play billiards – my out-of-sync-ness – as a “productive disturbance”.

The Concept of Activity in Active Ageing and Social Gerontology

The concept of activity has been central to social gerontology since the birth of the discipline in the late 1940s (Cavan 1949; Pollak 1948). In the middle of the twentieth century – a time when pension reforms and compulsory retirement shaped “old age” as a new distinct period of life – activities were a way to organise schedules and older people’s everyday lives through the theoretical framework of activity theory, which highlighted the importance of activity to individual well-being in old age (Katz 2000). However, the concept of “activity” has profoundly changed from 1950 to 2014; specifically, the emphasis has shifted from the social to the physical.

In the 1950s, compulsory retirement was still new in most countries worldwide. The burgeoning discipline of social gerontology examined what happens to an older individual when he or she is released from the constraints and commitments of work and family (Havighurst 1969). At the time, the social sciences were strongly influenced by the functionalist currents from Talcott Parsons (1902–1979) and Emile Durkheim (1858–1917), who emphasised the
totality of society and the importance of individuals serving a specific function within this totality. An individual’s well-being was closely linked to the assignment of a social role, which changed with retirement. The individual needed to adjust to a new social role that was inferior to that of the working individual (Cavan 1949).

After retirement, activities were expected to compensate for the social relationships left behind at the workplace, and the elderly were expected to engage in new age-appropriate activities (Havighurst 1954). Social gerontology engaged in listing these activities, which ranged from taking care of grandchildren to playing bingo, billiards, cards and other games. These activities were meant to facilitate a new type of social life and should ideally be supplemented with an increased involvement in the church (Cavan 1949). In gerontological literature from that period, physical activity is rarely mentioned; when it is, the emphasis is on light physical activities appropriate for the age group, such as square-dancing or playing billiards and shuffleboard (Michelon 1954; Pressley & Simcoe 1950; Zahrobsky 1950). Billiards was suitable as a social activity for the elderly, as it only involves mild physical exertion and encourages conversation and togetherness.

By the 2000s, the range of appropriate activities for the elderly had become radically different. Social activities are still considered to be important, but the emphasis now is on physical and productive activity (Walker 2006; WHO 1998). Whereas the mild physical activity involved in playing billiards was an asset in the 1950s, it is now a detriment. This change has occurred due to a process of scientification and medicalisation of old age. The relationship between health and physical activity was only firmly established during the second half of the twentieth century (WHO 1996). Earlier medical studies did not focus on the possible benefits of physical activity for health and longevity. Instead, they sought to measure whether physical activity was dangerous and could cause strokes. This changed in the 1960s when studies showed a possible relationship between health and physical activity (e.g., Schnohr 1968). Physical activity as the key to remaining healthy throughout life has only been a scientific fact since the late twentieth century, and was not extensively promoted prior to that.

By the end of the 1980s, physical activity entered gerontology, due in part to Row and Kahn’s work on “successful ageing” (Rowe & Kahn 1987). The concept emphasised the individual’s influence on – and responsibility for – his or her own physiological ageing process. By the 1990s, senescence was becoming the result of an unhealthy individual lifestyle. This individualisation of the responsibility for a “good” ageing process also entailed what has been termed a “biomedicalisation of old age” (Estes & Binney 1989). Numerous studies showed that physical activity could prevent or delay multiple conditions – from cancer to dementia, as well as cardiovascular diseases, metabolic diseases, gout and arthritis. Physical activity is also believed to be beneficial for cognitive function (Angevaren et al. 2008), social relations and quality of life (WHO 1996). Physical activity was established as an integral part of health and successful ageing. As the components of what comprised an appropriate old age were transformed, billiards was deemed overly sedentary. It was part of a former ideal of old age.

The increased emphasis on physical activity has changed the typology of appropriate activities for the elderly. In the 1950s, strenuous physical activity was thought to be dangerous as it would put the elderly at risk of strokes and injuries, but now it is one of the most important factors in the “good life” of an older person (WHO 1998, 1999). And, to a certain extent, older people have adapted to this paradigm – studies show that more older persons are exercising (Pilgaard 2009). For an older person today, it is not only appropriate to engage in strenuous physical activity, the active ageing discourse includes a subtle demand for physical activity that will facilitate a long and healthy life. While this one-dimensional focus on physical activity might pave the road to a healthier old age, it risks overlooking that activities – physical and non-physical – are culturally specific forms of practice.

Cultural gerontologists have argued that this emphasis on physical activity leaves little space for other types of (in)activities usually related to old age,
such as napping (Venn & Arber 2011). In this way, constant activity is construed as the ideal, and inactivity is stigmatised as unproductive, sedentary and a negative sign of ageing. The healthy ageing process implies constant activity. In a British study of older peoples’ images of other older people, inactive older people are portrayed as the villains of old age and passivity is described as part of an antiquated image of old age associated with grumpiness and giving up (Townsend, Godfrey & Denby 2006). This stigmatisation has led to concerns that the “new old age” overly idealises old age, ignores the decline and hardship that can also be a part of the ageing process, and inserts normative and oppressive standards that most older persons cannot live up to (Holstein & Minkler 2007; Katz 2001).

However, this does not mean that older persons are not active, but rather that their activities often have purposes other than health, longevity or productivity. What active ageing policies define as good activities is different to the point of view of the elderly, who might perceive planning for death, entering residential care, or ordinary needs and deeds as good activities (Clarke & Warren 2007). Thus, there is a need for further research into the particularities of older peoples’ practices and experiences (Holstein & Minkler 2007). An ethnological approach can illuminate these particularities. For example, the present study shows how the active ageing discourse unfolds in the particular Danish, working-class collective of The Cordial Club, and how insights that can be transported to other kinds of activities appear through this collective.

**Theoretical Framework**

The problematisation of active ageing policies and “the new old age” has often been based on either a critical gerontological point of view, inspired by the theory of structured dependency² (Townsend 1981), or on a Foucauldian governmentality approach (e.g., Biggs & Powell 2001; Katz 1996). Although these approaches have been fruitful, I suggest another theoretical framework for studying how active ageing is negotiated and unfolds in socio-material practices.

By applying ANT (Latour 1987) to ageing studies, I am able to focus on the collective socio-material practice of playing billiards, dissolve the dichotomy between activity and passivity often present in active ageing policy, and suggest how the rhythms of the game hint at a different version of active ageing, which builds upon existing, functioning and specific forms of activities.

One of the major contributions of ANT to ethnology has been a renewed emphasis on the materiality of cultural processes. While this renewal cannot solely be ascribed to ANT, it is part of a larger “material turn” in ethnology with several theoretical sources of inspiration (Damsholt & Simonsen 2009; Otto 2005). Bruno Latour has suggested that the distinction between humans and things is highly anthropocentric, and that agency is always deeply entangled in networks of human and non-human actors, which he designates “actants” (1988, 1991). This entanglement suggests that practices are socio-material rather than solely social. When the older people at The Cordial Club play billiards, they do so in a meticulously composed collective rhythm wherein the human and non-human actants make the game run as smoothly as possible – they seem to dance with each other.

Following the same line of thought, in his analysis of patient collectives, Tiago Moreira defines collectives as “compositions of bodies, competences, artefacts, procedures and emotions gathered together by particular activities” (Moreira 2004: 35). In this article, billiards is the particular activity that gathers the collective in a composition of bodies (players), competences (billiards skills, tricks, social competences), artefacts (the table, beers, equipment), procedures (rhythms of the game) and emotions (life histories, class affiliations).

Whereas the older person is constantly urged to be active in the present active ageing discourse, there are different rhythms within the billiards game. This allows for moments of passivity, which is important for the players in their old age. In their article about drug users and music lovers, Emilie Gomart and Antoine Hennion suggest that it is a misunderstanding to construe activity–passivity as a dichotomy: rather, the states of activity and passivity constitute each
other – they are entangled. In order to be passively immersed in music, music-lovers have to actively arrange the passive immersion through socio-material practices, in order to create the perfect environment and sound system (1999). In the same way, billiards is composed of both activity and passivity, and allows for a rhythmic movement between the two. Billiards is both activity and passivity, and the separation of the two attenuates the active ageing policies by promoting constant activity.

Analytical Strategy and Methodology
The analytical strategy in this article resembles what Billy Ehn and Orvar Löfgren have termed “the kitchen entrance” of culture (2006). By paying attention to the seemingly insignificant trivialities of everyday life, such as morning routines, the cultural analyst can study how such everyday practices are entangled with larger cultural processes. In this regard, billiards is a specific and collective form of cultural practice that points to the way activities are usually limited to physical activities in the active ageing discourse. Billiards challenges the active ageing discourse by demonstrating the normative and individualistic aspects of the focus on physical activity and a healthy lifestyle. To play billiards is to be active, but in a different manner than suggested by the present active ageing discourse.

Participant observations at the activity centre allowed me to focus on the specific practice of playing billiards, and also served as a way to meet interview subjects. The interviews were conducted at the interviewees’ homes in order to gain a differently situated understanding of their practice. Although I also engaged with the interviewees at the centre during participant observations, the nine semi-structured interviews provided different accounts of the everyday lives of the interviewees and insights about the different relations and networks that formed their practice. The different fieldwork settings contributed to the production of diverse fieldwork materials (notes, photos, recordings and collection of objects from the field) and allowed me to include second opinions about the interviewees’ practices from their wives, children, grandchildren and friends from outside the activity centre, as well as from the various situations and accounts that the change of setting created. The details of billiards and active ageing were accentuated in different ways and gained ethnographic richness thanks to the diversity of sites and material produced.

I consider active ageing to be a policy concept and a discourse, and I follow it through its multi-sited configurations and enactments in everyday practices. This also means that I am an integral part of performing the field through my understanding of active ageing, which I have achieved by reading literature and documents, via participant observations, and through my analysis that relates active ageing and billiards. The field is performed through the collective practices, my reading of them, and the interplay between these phenomena (Coleman & Collins 2006; cf. Jespersen 2007).

Using Ehn and Löfgren’s (2006) line of thinking, billiards may be understood as the “kitchen entrance” of active ageing, as it shows how active ageing can unfold in practice, and how it is negotiated in this practice. However, as I entered through the kitchen door of active ageing, the structure and decoration of this kitchen were changed. The game of billiards was disturbed by my presence. My age and background differed from the old working-class men at the activity centre and my skills as a billiards player differed from the Cordial Club’s billiards players. The rhythm, order and smoothness of the game were thus severely compromised by my lack of skills, as well as my lack of understanding of the small gestures and things that make up the game. I thus realised how “out of sync” I was with the game. While this positioned me as an outsider, it also allowed me to consider what it was that I disturbed – and it inspired me to see the routines in their absence, and the rhythm through its disruption. In this way, my out-of-sync-ness became a methodological and analytical strategy, and a condition for what I was able to observe. My presence interrupted the game and revealed how its cultural specificity makes it fragile for intruders, but simultaneously makes it durable through its many practices, actants and intertwinements with the participants’ life histories.
In the following empirical sections, I examine billiards as a socio-material practice that is embedded in a specific type of “good late life”, which nuances the “good late life” currently promoted in EU and WHO active ageing policies. By showing the cultural significance of billiards, I demonstrate how active ageing risks producing specific and confined configurations of individuals and collectives that are ignorant to cultural practices, and that exclude alternative functioning collectives. As described by Jespersen and colleagues, one of the ambitions of cultural analysis should be to engage in the composition of “common worlds” (2012). Perhaps playing billiards could be re-composed – not as a common activity for all older persons – but as a specific form of active ageing activity that promotes social participation and engagement in life, with physical activity as an added benefit.

The Cordial Club – an Active Ageing Collective

Wagner leans over to shoot the ball. From the way he slowly and stiffly leans over, it is obvious that he has spent a long life carrying around sacks of potatoes as a greengrocer. At 91 years of age, he is one of the oldest players at the club. Wagner shoots the ball slowly and with control – with precision and the right pace. He has had his cue stick for many years, and began playing as a kid in the 1930s. He and his fellow players often play billiards from 10.00 to 16.00, three to four times a week.

As Wagner maintains his bent-over position, his eyes follow his slow and controlled shot. His back is stiff, but he is still able to control his shots – most of the time, at least. He complains that he is beginning to lose more games, and he is disappointed in many of his shots. What looks like a masterful shot – the perfect alignment between Wagner, cue stick, ball and table – turns out to be misleading. One does not have to see the balls roll to know that the shot is bad; it is visible in Wagner’s eyes. He stands up straight, steps back into a passive state and waits for his next turn. Sometimes, he talks a bit with his fellow players, but mostly he waits and helps replace the pins after the ball has hit them. He is primarily passive between turns. He focuses on the game, looks at the details, and watches how the balls roll on the green table. And just when I think he has lost focus, it is his turn again, and he immediately walks around the table. With a lifetime of experience, he has the ability to know exactly the right place from which to make his shot. He leans over...

The member-driven Cordial Club is located in an activity centre for the elderly in a suburban municipality on the outskirts of Copenhagen. Founded in the 1950s as “Billardklubben” (The Billiards Club), it was originally a self-organised billiards club for a group of blue-collar, male workers at an electronics factory, which had billiards facilities. In the 1980s, when the members were reaching retirement age, they wanted to continue their billiards club and had no place to go. They discovered that if they became an official association, they could use the public facilities at the newly opened municipal activity centre next to the factory. Many of the members’ wives were also retiring and needed a place to meet and socialise, sew or play cards and dice. Thus, because a “billiards club was no place for a lady” (as a female member, Tove, said during my participant observations), Billardklubben changed its name to The Cordial Club and became an open association for all retirees in the municipality.

The Cordial Club is located in the bar and café areas of an activity centre. All members are retirees and the majority of members are older than 70 years of age. Most members are in their 70s and 80s and a few are in their 90s. The Cordial Club is member-driven and has its own board with a chairman, treasurer and several committees for parties, excursions, etc. There are 30 to 40 core members who run the club and attend three to four times a week. The rest of the members only occasionally come by for the bi-weekly bingo games or to attend parties and excursions. The most frequent users are the men who play billiards, but there are also 10 to 15 women who come three to four times a week to play dice, cards, darts, and to make lunch.

Ironically, the activity centre is now located in the former buildings of the now-defunct electronics factory. Although most of the club’s current members did not work at the factory, many of them share a
working-class background, and they often say that this is one of the things that make them feel at home at the club. Their shared background distinguishes The Cordial Club from other types of activity centres. The members used to work on the same factory floors, and many of their routines, jargon and the way they see themselves – in opposition to policy, municipality, health and physical activity – creates a kind of alignment among the members.

There is no doubt that other forms of activity for the elderly, with a more specific focus on physical activity, would suit the active ageing discourse better. However, billiards is a popular activity in which many older persons participate, and, when entered from the “kitchen door”, it can be seen as a form of active ageing since it activates the elderly, allows them to take part, engage socially, and form their own type of collective. In many respects, it fits well with the overall guidelines of active ageing policy. However, the aspects of the game that do not fit in are the ones that stand out: the working-class jargon, alcohol consumption and indifference towards health guidelines and physical activity.

Although The Cordial Club and the billiards game have an anachronistic feeling of “out-of-sync-ness” attached to them, they are at the centre of active ageing policy. Municipalities and the EU support activity centres. Activity centres configure activities as the structuring principle of post-retirement everyday life, and create the framework within which older persons can organise themselves around activities. In this way, activity centres are policy tools that produce certain types of active late lives. While the older men in The Cordial Club might differ from the ideal active ageing subject, there are many of their kind in Denmark; collectives of older men who do not engage in activities because they are supposed to be healthy, but because they ascribe certain values and histories to the type of activities they engage in, and because they enjoy the social togetherness and friendship surrounding the activity.

The activities at “The Cordial Club” are not specifically physical activities. However, playing billiards five to six hours a day is a physical achievement for many of the members. In this way, billiards is a physical activity, but it is not articulated as such by the members. There is not much talk about health at the club, and the members often consider leaving the house to be an achievement in and of itself, at their age. When they do talk about health, they often ironically talk about “the health regime”, and how their doctors worry more about their health than they do. Many members talk about physical ailments as an intrinsic part of reaching their age, and they think the doctors should just let them enjoy themselves instead of making them feel guilty about their “unhealthy” lifestyles. Alcohol consumption is an integrated part of the collective, and it is considered to be something their doctors should not interfere with. Hence, the members do not openly adhere to the active ageing discourse, although the ideals of activity and health are often used as implicit standards when they talk about their diets, gardening work, winter-bathing or gymnastics (for an elaboration of this point see Lassen 2014). In this way, the members ambiguously inscribe many of their activities into a health-oriented active ageing discourse.

**Billiards as Affiliation, Tradition and Escape**

My dad used to take me to the pub and teach me how to play. (…) When there were birthdays, all of the men would go out to play as soon as dinner was over. I remember the first time I was old enough to go, 10 or 11 years old, a big day. (Kaare)4

For Kaare, 80 years of age, billiards is not just amusement – it is part of his family history; billiards has been passed down from generation to generation, and entering the male collective of billiards players was part of becoming a man. When Kaare was young in the 1940s and 1950s, playing billiards was a way to socialise, but also a place for education and passing on traditions. The younger generations were taken to the pub when they were old enough to learn how to play, and to learn how to be part of a working-class collective. The adults taught the adolescents how to socialise and work; playing billiards was a way to prepare them for the jargon at the factory floor. Kaare remembers the first time his father took him to the pub to play:
I remember the smell of beer and tobacco, the low lights inside the pub – everything as you’d expect it to be, probably. My father’s brothers and friends all showed me what to do and were very welcoming. I felt like a man sometimes, but at the next moment, they would tease me about a bad shot or some kind of awkwardness, and I would become very little again. (...) This was a new world opening up to me – some skill that I had to acquire, and I wanted to – needed to, really. When my father gave me my first cue stick, I knew that I was part of it. They had taught me how to play and how to behave like a man. (Kaare)

In Kaare’s family, there was a transfer of skills and knowledge from generation to generation. But now, the younger generations in Kaare’s family resist receiving the skills and knowledge to play billiards. At family birthday parties, the men still go out to play after dinner, but the younger generation appears disinterested when they are at the pub. Kaare sees this as a loss of tradition.

Karl, 79 years of age, also considers billiards to be a part of his family history. He comes from a family of billiards-table carpenters. One of his uncles worked for a famous billiards-table manufacturer and, as a teenager, Karl worked as an assistant, along with his friend and future brother-in-law. The brother-in-law continued to work as a billiards-table carpenter – a fact in which Karl takes great pride. More than half a century ago, Karl himself assembled one of the still-standing billiards tables at The Cordial Club, and he constantly judges the (lack of) skills and effort put into the maintenance of the tables by the service personnel of the billiards-table company:

It’s a craftsmanship that has disappeared. When I was young, we took pride in our skills with the tables. It was a matter of accuracy and detail and skill. And we played ourselves, you see, everyone in my family. Now, they don’t know what they’re doing. You can sense it when you’re playing on the table. I always have to fix it after [they’ve fixed it], but [I have] no tools anymore, so sometimes we call them again. I wish my brother-in-law hadn’t retired. It’s a craftsmanship that has disappeared, really. (Karl)

At The Cordial Club, nostalgia is part of the billiards game. There is a lot of talk about the good old days on the factory floors and “friendly bullying”, as they call it, when they make fun of each other using their working-class jargon, as well as sentimental accounts of the time when one was allowed to smoke and drink without being frowned upon. They have a special way of saying cheers without noisily clinking their bottles together. This small gesture is a way to show class affiliation, as they said cheers in this way at the different factories where they worked, so that the factory manager would not hear them drinking alcohol before lunch.

For most of the players at The Cordial Club, billiards has been a leisure activity throughout their lives. However, it has changed over time: many of the players describe how billiards has become a strenuous activity. Previously, it was just a social activity, but when one is 80 or 90 years of age and plays billiards five to six hours a day, it is a physically demanding activity, and one’s body aches afterwards. Wagner, 91 years of age, describes it as such:

I didn’t understand it at first when I started coming here. I was sore in the mornings and felt like I did when I was an apprentice bricklayer back in the day. Then it hit me. I wasn’t used to playing billiards for so many hours anymore. You know you’re an old geezer when your body hurts after playing billiards. (Wagner)

For Wagner the continuity and duration of the billiards game and the rhythm of playing for so many hours is an achievement. While active ageing’s emphasis on physical activity and health has turned billiards into a sedentary type of activity, it has simultaneously become a tougher physical activity for these elderly people as they get older and still play for hours on end. In this way, the players inscribe billiards into an activity ideal:
It might not be marathon running, but at my age and with my health, this is an achievement. I don’t sit at home on the couch. So what if I have a couple of beers? I’m here, out the house, talking to the guys, walking around, playing. That’s what counts, isn’t it? To do something, to enjoy life. (Bent, during a game of billiards)

In this quote Bent, 78 years of age, relates the state of doing “something” to enjoying life. For him, an important aspect of billiards is that it is comprised of both social and physical activity. In the terminology of social gerontology from the 1940s, billiards is a form of adjustment (Cavan 1949; Pollak 1948). However, what one must adjust to has changed. Bent emphasises not just the social aspect but also the physical, although he is not generally concerned with his health. He and his fellow players inscribe billiards into the “busy ethic” (Ekerdt 1986); they need to be active and busy in order to enjoy life.

Billiards can bring together the collective through the emotions it awakens in the players, and via its intertwining with their life histories. Several of the players told me an almost identical story about how they searched for something meaningful to do and a suitable place to go after they retired. Through different channels, they heard about the billiards tables at The Cordial Club, visited the place and immediately felt at home. Billiards is an important aspect of this feeling-at-home; it carries the history of the players’ lives. The feeling of belonging is not just produced by the game or the tables but rather by the entire collective and the history of which it is a part:

The social workers told me about the place. They saw that I was exhausted from taking care of my wife [who was suffering from dementia] and arranged for her to go to a day-care centre twice a week so I could go to the club. When I walked in, I recognised a lot of the members. Some had been customers at my shop, some were from my neighbourhood, others I had played with at the local pubs. This is a nice place, you know. We look out for each other, tease each other, help each other, and cheat each other, but always with a gleam in our eyes. This place, the beers, the beautiful tables, the guys, the lunches, the games and the atmosphere – it instantly made my shoulders drop a couple of centimetres. I was stressed out, but this place changed that. I asked [when entering the first time] what it would take for me to play with them. The bastards told me to buy a round of beers, and I did. When I found out afterwards from Kirstine [the chairman at the time] that I just had to become a member to play, and the round of beers was something they made up, my shoulders dropped a couple of centimetres more. (Wagner)

Wagner immediately felt at home at The Cordial Club. His shared history of drinking and playing billiards at the local pubs with several of the other players confirmed that this was the type of collective in which he would like to engage during his retirement. At The Cordial Club, he could continue to show off and develop the billiards skills he had honed and performed his entire life. Many of the players at The Cordial Club have severe problems with their health and struggle with loneliness, but billiards creates a refuge where these issues are forgotten. The interviewees Stig and Valter consider billiards and The Cordial Club to be a temporary escape from the loneliness they feel at home, and Karl frequents the billiards tables more often now that his wife suffers from depression, as he needs a break from the atmosphere at home.

When the players talk about physical activity, it is usually with reference to the “health regime”. In this collective, diseases and decline are intrinsic parts of growing older. Some say that their doctors worry more than they do about their risk of developing high blood pressure, high cholesterol, type 2 diabetes and arthritis. Some of the members even articulate that cardiovascular diseases and heart surgery are just a part of getting old and not something that should get in the way of a good game of billiards for very long, nor make one worry excessively. When I asked Bent, who was sitting in a chair watching the others play if he was playing that day, he responded:
No. They’ve just given me a new “thingamajig”, you see. The heart didn’t work anymore so they had to fix the apparatus and change the “thingamajig” there [pointing to his chest]. So they said I had to relax a bit, and it hurts when I move my left arm, so I can’t play billiards. But luckily, there’s nothing wrong with my right arm [he laughs as he uses his right hand to take a sip of beer] (Bent, while watching a game of billiards)

Billiards is a huge part of Bent’s life. He comes to The Cordial Club to watch the games and be part of the collective, even though he cannot play. But he is still able to participate in the conversations, drink beer and immerse himself in the other players’ games. He has recently undergone a serious surgery, but he seems more concerned about his current inability to play billiards than his health. In his case, health is directly related to his ability to play billiards: “I’m ill if I can no longer play billiards” (Bent, while watching a game of billiards). Thus, Bent links his health to his capacity to play billiards, and it is one of the central activities of daily living that he wants to regain the ability to perform.

The specific configuration of the collective at The Cordial Club produces the “good late life” as one in which togetherness, class affiliation, billiards, beer, mild physical activity, leaving the house, a cosy atmosphere and participation are all part of the composition. In this way, it is not an outright rejection of active ageing; rather, it transforms active ageing and inserts it into a culturally specific practice.

A Game Composed of Activity and Passivity
When Wagner plays billiards he is in a state that is neither passive nor active. While he is active for many hours – he walks around, stands up, replaces the pins, leans over, shoots, etc. – he also spends a lot of his time at the activity centre passively immersed in the game; he gets into its rhythm. This rhythm sometimes entails longer periods of passivity, as there are usually too many players for the centre’s three tables. While an excess of players could pose a problem, it allows them to play for a longer period of time as it forces one or two players to take breaks while the others play. During these breaks, the players waiting often have a conversation or comment on the shots being made. But usually, the players use their breaks to drink a beer and stare at the game; to get immersed in it. The states of passivity and activity are entangled and part of the same practice. There is continuity between them: activity is not just activity, and passivity is not just passivity. They are entangled.

The dance between activity and passivity is meticulously composed and refined over many years of playing. I constantly place myself in the wrong position and do little things too fast or at the wrong moment. The older players play calmly. They know where to position themselves so they are not in the way of the player shooting or the one keeping score. They tacitly perform the various tasks between them. They know when to place the pins, when to take a sip of beer, when and where to be passive, who is buying the next round of beers and when to converse. Although they are very welcoming to outsiders, it is hard not to feel out of place. They do not seem to acknowledge that I am out of sync; instead, they smile and explain the rules of the game when I ask. But I am out of place, and when I occasionally lead the scoreboard in the beginning of a game, they notice and comment on the humorous aspect of it. Then it becomes clear that I am not really in sync, not part of their collective. When my participation is not interfering in their game, they appear to dance without thinking about it. My presence disturbs the collective.

Despite their advanced age, the players appear to effortlessly enter the rhythm of the game. They weave around each other and gracefully hit the balls with just the right force. My approach to billiards is more arbitrary, and I ruin some of the grace of their game. Sometimes, I shoot too hard. At other times, I estimate that my best chance for success is a hard shot that will make the white balls bounce back and forth and eventually hit the pins. But this assessment is usually wrong, and my wild shots end up giving the other players points that are decisive for many of the games I participate in.

My participation adds an element of chaos to an
otherwise smooth composition. However, the older players do not seem to be frustrated by this – over a lifetime of playing billiards, they have played with chaotic players many times and know how to slowly teach new players to adapt to the rhythm – but they do notice the chaos. Karl previously told me that playing with the women, and some of the guys, was not fun. I soon learned what he was talking about, and that he was also talking about me. It is not these players’ lack of competitiveness or their inability to correctly keep score; rather, it is the fact that the game becomes more arbitrary and less rhythmic. Chaotic players often create advantageous positions for the following players and their wild shots may be decisive for a game. Furthermore, doubts about who is going to do what arise. The rhythm is disrupted, and the players cannot show the same level of attentiveness towards the game. Here, billiards is not about winning but about playing the game, becoming immersed in the game, continuing the game and honouring the game by making the right shot and devoting one’s full attention to the game.

“You almost did a Bent”, teases Kaare, after Johnny shoots with such force that the balls randomly bounce back and forth across the table. Johnny does not score, but he does come close. Bent is “one of the guys” and highly respected by the others, but he is also infamous for his chaotic style of play that involves many coincidences. He shoots with great force and racks up a lot of points that way, but the other players also earn many points from his chaotic shots. “You almost did a Bent” is a reference to Bent’s chaotic and typically lucky shots. But Johnny does not take the teasing to heart, as he knows that the others recognise his usually controlled way of playing and know that his chaotic shot was a mistake.

The entire composition of the game is characterised by control and respect for the game. The players, beers, cue sticks, balls, pins, the table’s green cloth and the scoreboard are all in perfect balance. They have played here together for many years and have composed a specific rhythm of play in which chaos and chance are disregarded. However, a player may be forced to shoot forcefully if there are no other alternatives. This is considered risky, but is also widely acclaimed when it scores points. The players notice when a shot is too hard, and most of the shots are slow and fully in control. A shot that is less forceful is more appreciated, as a soft tap honours the gracefulness of the game. A soft shot shows the others that the shooting player has understood the logic and complexity of the game, even if the shot is unsuccessful.

However, this controlled and meticulously composed dance also involves different rhythms – some of which upset the delicate balance between activity and passivity. As I describe in the next section, the different rhythms emphasise how billiards produces a specific type of “good late life” that balances activity and passivity. Some of the players trick each other and go to great lengths to maintain this equilibrium, avoiding rhythms of the game that provide less opportunity for passivity.

**Rhythms, Tricks and Collectives**

Prior to the first game of the day, the players usually take a shot to decide who will keep score; the player with the worst shot must keep score. After the first game, this task then meanders among the players, who take turns keeping score with the exception of the most disabled players. However, the designated scorekeeper often tries to fool the others into thinking it is someone else’s turn. Attempting to avoid keeping score is part of the dance. If the player is not prepared for this, the others will make him believe it is his turn to keep score. And once the player has started to keep score, he is stuck doing it for the rest of that game.

The task of keeping score is disliked because it requires a different, constantly active, rhythm for the game. The scorekeeper cannot be passive between turns, but must constantly go back and forth between the table and the scoreboard. The other players will often try to trick him with the scores – for example, when he does not see a shot because he is busy tallying the score after the previous shot. Keeping score demands constant activity, constant calculations, constant movement of the markers on the scoreboard and a constant awareness of the shots. And then it is the scorekeeper’s turn to play. Thus, the same game has several rhythms.
The delegation of tasks seems automatic most of the time – that is, until somebody tries to trick one of the other players. Then the game’s rhythms become negotiable. Becoming immersed in the game without the hassle of keeping score is the ideal, as it allows for the movement between passivity and activity. Some players make up stories and use different tricks to avoid keeping score. However, they jokingly and smilingly accept their turn at keeping score if the others see through their tricks. The players accept the tricks as part of their collective game, and as part of their way of playing billiards. The collective forms itself as a group that has its own set of rules, and does not confine itself to what might be considered correct. To take turns, to be healthy and to be physically active are qualities in contrast to how the collective forms itself as an inclusive and alternative ageing collective. The tricks and cheating are part of the collective.

The collective has its own jargon. Some of the tricks used to avoid keeping score are so cleverly or remarkably designed and performed that they are named after the person who invented them. As already mentioned in relation to Bent, this is also the case with certain special shots that some of the players make, either due to a particular playing style or because a physical disability forces a player to shoot in a certain way when the ball is in a difficult position. Naming the shots and tricks is a procedure that forms The Cordial Club as a collective with its own terminology and jargon, which are occasionally incomprehensible to an outsider.

Just as the games have many rhythms, many tricks, and many shifting players, there are also many entities that compose the game. In addition to the human entities – such as the players and their (dis)abilities, the craftsmen who made the billiards table, the board members of The Cordial Club, the municipal officials, etc. – non-human entities also compose the collective: the green table, the cue sticks, the balls, the pins, the chairs, the beers, the scoreboard, etc. These artefacts are part of the collective and part of the production of procedures, such as the rhythm of the game, the ways of drinking, the entanglement between activity and passivity, etc. These artefacts produce billiards as a socio-material practice.

In the collective, the social and the material are indistinguishable and entangled. Billiards is composed not only by the player keeping score, but also by how the scoreboard allows this player to keep score with a pin going from 0 to 100, as well as by how these numbers determine the shooting player’s strategy. Billiards is composed not only by the way the players say cheers without clinking their beer bottles, but also by the sound the bottles would make if they did touch, and by the shared history of factory floors and the working-class background that this suggests. Billiards is composed not only by the way the players sit in their chairs between games, but also by the softness of the chairs and their placement, which allows for both conversation and silent immersion in the game.

Billiards produces a specific type of good late life and a certain way of ageing. The game’s procedures, the conversations, the artefacts and the players produce a rhythm in the life of the players. They attend The Cordial Club, play billiards, eat lunch, talk with the other players, go home and repeat this rhythm the next day. It is not a type of active ageing that focuses on physical activity, health or productivity, but rather one that focuses on the collective, social activity and enjoying life in this specific manner. For the collective to work, the players have to look out for each other and require each other’s attendance. Billiards composes the good late life as a life that is focused on togetherness and mutual care. This type of activity is a way to keep going rather than to exercise. But billiards does involve physical activity, due to the many hours of play each day. Thus, billiards could be inscribed into a different active ageing discourse that reorders the hierarchy of activities and focuses on the significance of the activity rather than on the outcomes of the activity – such as health or longevity.

Active ageing in The Cordial Club is not primarily about physical activity or health, nor is it an instrumental activity for the sake of activity itself. In this collective, billiards is not a random activity or a way to pass time that can be replaced by some other
activity; instead, it is a culturally significant socio-material practice that links the players to their shared histories on the factory floors, and allows them to create their own procedures and rhythms. The socio-material practice creates room for an alternative form of active ageing that considers culturally significant everyday practices to be examples of what active ageing could become. This type of active ageing does not focus on physical activity, good health or productivity, nor does it discount the decline that often comes with late life. Rather, it embraces a form of late life that allows for limited physical abilities, different rhythms, different states of activity and passivity and culturally specific forms of practice. But it is not just billiards as it was 50 years ago. Billiards today is an active ageing activity because it produces subjects who are socially, physically and mentally active, and who are aware of – and emphasise the importance of – the activating aspects of playing billiards.

The case of billiards contains some insights that are transferable to other kinds of activities. Indeed, billiards is not the only type of activity at the activity centres that does not have physical activity and health as its primary outcome. Petanque, smithy workshops, knitting, darts, sewing, stone polishing, skittles, etc. all entail physical activity to some degree, but focus on other aspects of the activity; physical activity is an added benefit. In the same way, the rhythmic movement between activity and passivity can be seen in other activities. This is important not only for the participants’ ability to engage in the activity for many hours, but also includes older people with various degrees of (dis)ability, composes a rhythm with space and time for breaks, beers and other endeavours, and thus knits the collective together. The type of collective described in this article shows how active ageing initiatives are situated in culturally specific localities. This collective calls for an ethnological approach that can scrutinise how everyday life unfolds and is entangled with larger cultural and political processes. Indeed, if the EU and WHO active ageing policies are to add life to years, and not just years to life, this approach is required in order to create active ageing policies that recognise activities as cultural significant forms of practice. In this way I have attempted to re-compose active ageing and create a “common world” through cultural analysis.

Conclusion

Many current active ageing initiatives have a biomedical focus on physical activity and healthy lifestyle at their core. These types of initiatives aim to add more disease-free years to life, and this is seen as a pre-condition for a good old age. While the formulations of active ageing in the policy documents are very comprehensive and emphasise participation and engagement in life, these ambitions often disappear in the local active ageing initiatives. In its focus on physical activity and lifestyle, the biomedical approach produces a hierarchy amongst activities, wherein activities that have physical fitness as their outcome are more highly valued than activities that simply “keep you going”. This creates blindness towards the cultural significance of the activities that unfold in the everyday practices at the activity centres.

Through an ethnological study of billiards at The Cordial Club, I have studied how the active ageing discourse is situated in a group of older men’s collective socio-material practice. The older people I studied are very active, but in a different manner to that which is proposed by the EU and the WHO. The older people in this study do not particularly care about physical activity, nor are they concerned about health or want to work into very old age. The collective forms and negotiates what active ageing means via its practice. Active ageing in The Cordial Club is collective and composed of many bodies, artefacts, competences and procedures. Furthermore, it has cultural significance for the players due to their shared life histories – it is amalgamated into their lives. In this way it is a socio-material and cultural form of active ageing.

Although billiards is a specific form of practice rooted in a male, working-class, suburban collective, it includes some patterns that are transferable to other forms of activities and could become a guideline for how to translate active ageing policy into lo-
cal initiatives. Through a coordinated distribution of tasks and gestures, the billiards collective forms a meticulously composed rhythm of activity and passivity. Activity and passivity are not opposites; they should be seen as states that are entangled and condition each other. This entanglement forms a durable collective that allows for players to play for many hours daily and includes frail people in very old ages. This is the local realisation of the active ageing ideal of independence and participation in old age. Nevertheless, this type of collective and activity seems out of sync with active ageing policies. Through its negotiation and transformation of active ageing, the billiards collective points to how active ageing can be anchored in the everyday life of the elderly.

If the EU and the WHO aspire to develop durable active ageing collectives, the type of collective at The Cordial Club should be taken into account. For a large group of older people, it is not physical activity, health or longevity that drives their everyday activities, but the cultural significance of the activity and the collective wherein it is embedded. In this regard, physical activity is merely an added benefit, although this benefit can prove to be highly important for the quality of life of these older people in the long run. The types of activities that have these qualities, of which billiards is merely one out of many, tend to be absent from active ageing initiatives. While this relates to the aforementioned hierarchy amongst activities, this hierarchy is dismissed at The Cordial Club. It requires a cultural analytical gaze on seemingly insignificant practices to see billiards as an active ageing activity. I have used the “kitchen entrance” approach in order to rearticulate what active ageing does to culturally specific forms of practice, and in order to compose a different type of active ageing and a different type of good old age.

The out-of-sync-ness proposed in this article does not just relate to the object of the study, in this case billiards, but also to the researcher’s presence in the field. My disruption of the rhythm in the game made this rhythm visible to me. My disruption made the invisible visible and revealed that, without my presence, billiards is a meticulously composed rhythm comprised of activity and passivity. Thus, the out-of-sync-ness is a way to make the seemingly insignificant visible, and I used my own out-of-sync-ness as an analytical tool to study the kitchen entrance. This analytical and methodological strategy could be transferred to other ethnological studies where the researcher is loudly and inescapably different from the collective that is being studied.

Notes
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2 Paradoxically Alan Walker, one of the intellectual craftsmen behind active ageing in the EU, is a former student of Peter Townsend, and was a key figure in the articulation of the theory of structured dependency in the late 1970s (e.g. Walker 1980). Together with Tiago Moreira, I analyse this productive relation between critical gerontology and active ageing policy as a circular process of negative feedback (Lassen & Moreira 2014).
3 The type of billiards played at The Cordial Club is a Danish version called “skomager” (cobbler). In this game, a player can score “skæve” (askew) points, when the red ball (used for shooting to the white balls) hits the pins or when other mistakes are made. The “skæve” points are then given to each of the other players.
4 All the names of the interviewees were changed to ensure confidentiality. Unless otherwise stated, all quotes are from interviews and translated from Danish by the author.
5 “Thingamajig” is the closest translation I could find of “plingeling”, which is an expression often used to replace a word in a humorous manner. Here, “thingamajig” refers to Bent’s pacemaker.

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Aske Juul Lassen is a Ph.D. student at the Centre for Healthy Ageing, Department of Ethnology, SAXO-Institute, University of Copenhagen. He specialises in cultural analysis, ethnography, humanistic health research, biopolitics, science and technology studies and user-driven innovation. Together with Julie Bonnelycke and Lene Otto he recently published “Innovating for ‘Active Ageing’ in a Public-Private Innovation Partnership: Creating Doable Problems and Alignment” (Technological Forecasting and Social Change, 2014: http://dx.doi.org/10.1016/j.techfore.2014.01.006). (ajlas@hum.ku.dk)