



# Internal experience of an aging self: A grounded theory study on women's aging awareness beyond midlife

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## ARTICLE INFO

### Article history:

Received 10 August 2025

Received in revised form 21 December 2025

Accepted 12 February 2026

Available online xxx

### Keywords:

Aging awareness

Constructivist grounded theory

Women

Geriatric nursing

## ABSTRACT

**Purpose:** Awareness of one's own aging is a critical psychological process that shapes adaptation and well-being in later life. For women, age awareness is influenced by gendered experiences such as bodily changes, menopause, and shifting social roles. This study aimed to develop a grounded theory explaining how women aged 50–75 construct and adapt their awareness of aging through everyday life contexts.

**Methods:** This study was guided by constructivist grounded theory, informed by symbolic interactionism and social constructionism. Nineteen in-depth interviews were conducted between 2021 and 2023. Data were analyzed using constant comparative methods, including initial and focused coding, memo writing, and theoretical integration.

**Results:** The core category, internal experience of an aging self, emerged as the central adaptive process. Initially not aware of one's own aging, participants gradually developed an emerging awareness, often followed by confusion as they struggled to interpret the changes. Internalization involved mirroring aging through self and close others, reflecting on the normal life cycle, and managing oneself in accordance with age-related changes, ultimately leading to embracing aging with psychological balance. Some faced emotional turmoil—triggered by chronic conditions, negative body image, and financial or role insecurity—and developed a negative outlook on one's future self, reflecting disruption in the internalization process.

**Conclusion:** These findings suggest the importance of gerontological nursing interventions that support emotional resilience, reflective adaptation, and self-directed aging. Tailored strategies that facilitate women's internalization of aging may promote psychological well-being and agency in later life.

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## Introduction

As societies rapidly transition into super-aged populations, understanding the aging process becomes increasingly critical. According to the World Health Organization (2022),<sup>1</sup> the global population aged 60 years and older is expected to double by 2050, reaching 2.1 billion. In countries such as South Korea, where over 20% of the population is already aged 65 or older,<sup>2</sup> aging is no longer a marginal phenomenon but a defining societal characteristic.<sup>3</sup> Therefore, helping older adults maintain a positive perception of their aging process is essential for achieving healthy and successful aging.<sup>4,5</sup>

Aging is not merely a biological phenomenon but a subjective, self-referential process involving individuals forming cognitive and emotional representations of what it means to grow older.<sup>6</sup> Such representations shape personal identity, attitudes toward aging, ultimately affecting outcomes such as life satisfaction,<sup>7</sup> quality of life,<sup>8</sup> and even mortality.<sup>9</sup> These subjective interpretations are influenced by various sociocultural and gender-specific experiences.<sup>10,11</sup> For women, particularly, bodily changes, menopause, and social expectations regarding appearance and care roles can shape how aging is experienced.<sup>12,13</sup> These experiences are further influenced by cultural context. In South Korea, where this study was conducted, Confucian values emphasizing multi-generational caregiving,<sup>14,15</sup> and societal emphasis on youthful appearance<sup>16</sup> may shape how women perceive and adapt to aging.

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Despite the growing recognition of these issues, prior studies on aging awareness have largely remained descriptive, lacking in-depth exploration of how individuals construct and negotiate their understanding of aging in real-time. Existing phenomenological and thematic studies<sup>17–20</sup> offer rich narratives but treat aging as a static condition rather than a dynamic and evolving process. Few have examined the contextual, emotional, and interactive dimensions through which awareness of aging is formed, transformed, and occasionally resisted.

To address this gap, the present study adopts a constructivist grounded theory approach, rooted in symbolic interactionism,<sup>21,22</sup> allowing for the exploration of aging not as a static state but as a dynamic, negotiated process shaped by changing roles, relationships, and sociocultural expectations.<sup>23</sup> This dynamic process unfolds along a continuum,<sup>24</sup> where individuals may experience varied and shifting trajectories in their aging awareness.

Through this lens, aging is viewed as a relational, self-reflective experience that involves questioning, adaptation, and redefinition. This study contributes to gerontological nursing by uncovering the stages, emotions, and contextual factors that shape this reflective journey, providing a grounded framework that can inform timely and person-centered interventions. Nurses who understand the nuanced ways in which aging awareness unfolds can better support women during key transition points—bodily changes, retirement, or loss—thus fostering psychological well-being and adaptive functioning in later life.

The purpose of this study is to develop a grounded theory, employing a constructivist approach, to explain how women beyond middle age construct and adapt their awareness of aging through everyday experiences and social contexts.

## Methods

### Design

This qualitative study applies grounded theory to analyze and describe the process of aging awareness among middle-aged and older women. Taking a constructivist stance, the process is understood as contextual, temporal, and subjective, reflecting individuals' perceptions and experiences.<sup>25</sup> The grounded theory development encompasses: (1) theorizing as an ongoing activity, (2) engaging with grounded theory strategies, (3) utilizing induction and abduction, (4) acknowledging the researcher in the theorizing process, and (5) developing the theory.<sup>26</sup>

### Participants

Nineteen middle-aged and older women aged 50–75 were recruited in Seoul, Korea. Following grounded theory methodology, sampling began with purposive selection and evolved into theoretical sampling until theoretical was reached.<sup>26</sup>

We included women who had experienced menopause, actively participated in community activities, had no communication barriers, and voluntarily consented to participate in the study. They were recruited through online communities for middle-aged women, city council bulletin boards, and senior citizen center communities using convenience sampling. The initial data collection, conducted using purposive sampling, took place from October 2021 to April 2022. The second stage of data collection, employing comparative methods, was conducted from August 2022 to April 2023. Participants were community-dwelling women with diverse health statuses, which allowed exploration of how health conditions influence aging awareness.

**Table 1**

Example probing questions.

Questions
(1) Can you share more about your thoughts and emotions when you first realized you were aging?
(2) What positive or negative changes occurred after you became aware of aging?
(3) What challenges have you encountered while aging?
(4) How have you coped with these challenges?
(5) In what ways has your perception of your own body evolved with the aging process?

### Data collection

Individual in-depth interviews were conducted via telephone. After collecting sociodemographic information and disease-related participant data, the main interview question “How have you experienced aging so far in terms of when and how you have felt it?” was posed. To facilitate open dialogue, interviews were scheduled at participants' convenience, and a conversational approach was used to encourage candid sharing (Table 1). Both an open-ended and semi-structured question format was used to allow participants to freely share their thoughts, feelings, and stories.

Data collection continued until theoretical saturation was reached. Field notes were taken during the interviews to record individual contexts, which were utilized in the a incremental analysis. A research assistant transcribed the interview content, which was then reviewed and compared by the researcher against the recorded content to ensure accuracy and prevent any omissions or errors in the original data.

### Data analysis

Data collection and analysis were conducted concurrently, following the procedure outlined by Charmaz(2014).<sup>26</sup> Initial and focused coding techniques were used to determine data categories. During the early stages of coding, the key features of the interview data were identified and organized into a taxonomy. Subsequently, central categories were established through a focused coding process. In the final step of the analysis, theoretical coding was employed to uncover the connections between the core categories and develop a theoretical framework.<sup>26</sup>

Reviewing the literature before embarking on a constructivist grounded theory study is crucial as it enables researchers to grasp the current state of knowledge and properly position their specific research question within the existing research landscape.<sup>27</sup> Therefore, we reviewed key theoretical frameworks relevant to aging awareness, including the multidimensional model of awareness of aging,<sup>24</sup> life course perspectives on subjective aging,<sup>10</sup> socioemotional selectivity theory,<sup>28</sup> and the theory of gerotranscendence.<sup>29</sup> This preliminary engagement with existing literature enhanced theoretical sensitivity while preserving the inductive, data-driven nature of grounded theory analysis.

We utilized the constant comparative analysis method, which involves closely comparing the similarities and differences between the initial data collection and subsequent data analysis to discover and confirm relationships between major categories.<sup>30</sup> Additionally, memo writing was employed throughout the process to facilitate this endeavor, focusing on coding changes or modifications, explanations, reflections, and ideas. This method facilitated the research from its inception to the final phase of grounded theory, where categories are integrated into the theory formation.<sup>27</sup> The content of Box 1 represents an example of memo writing.

**Box 1**

Example of memo writing on aging awareness.

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The body holds considerable significance for individuals. Typically, we do not ponder over it unless it hinders our daily activities. The body sends signals even at rest. When one is in good health, the thought of being sick does not usually cross one's mind, much like how, in youth, thoughts of growing old may not occur. However, being unwell is distinct from aging. Unlike the sudden impact of illness, aging is a gradual process of change that may unfold quietly until an individual becomes aware of it. People and moments recognize, interpret, and prompt changes in behavior. That moment comes to everyone, but not for the same reasons or at the same time. Therefore, can we say that reflections on aging only differ in depth but will be experienced by everyone at some point? It comes as a shocking—even a crisis—when one is not aware of one's body and suddenly notices symptoms.

The principal investigator conducted the primary data analysis, and the co-investigators reviewed a subset of transcripts to validate the emerging findings. The investigator who led the interviews and analysis applied a grounded theory approach in writing the doctoral dissertation. The first author, who reviewed the analysis and interpretation, has extensive experience in qualitative research. The second author contributed to the recruitment of participants for the study. MAXQDA 2022 was used for data management during the analysis.

**Rigor**

The rigor of the study was demonstrated by adhering to the criteria of constructivist grounded theory methodology: credibility, originality, resonance, and usefulness (Charmaz, 2014).<sup>26</sup> Credibility was ensured by transparently describing the research methods; resonance was reflected in the research findings and discussions, elucidating the complexity of participant perceptions of aging and offering generalizability to similar individuals and contexts. Additionally, the initial analysis included the use of gerunds and vivo codes, focusing on processes and expressing explicit and implicit meanings, along with member checking. The usefulness of the developed theoretical model is demonstrated by its contribution to interventions that support women experiencing aging.

**Ethical considerations**

The data collection for this study commenced after obtaining approval from the Institutional Review Board (IRB 4-2021-0187) of Hospital A and continued until data saturation was reached. At the outset, participants were given a thorough explanation of the study's purpose, methods, the recording of interview content, and aspects concerning the protection of personal information. After obtaining participants' consent, the interview content was recorded.

**Results**

The mean age of the participants was 66.1 years. Most were married (84.2%), not currently employed (68.4%), had at least 12 years of education (77.8%), lived in the capital area (68.4%), had chronic diseases (84.2%), and lived with an average of 2.1 family members (Table 2).

A total of 921 initial codes were obtained, yielding 102 focused codes after comparing similarities and differences in the analysis stage. After continuous and theoretical comparisons of the focused codes, 26 subcategories were derived. Through the process of theorization, seven main categories were derived (Table 3). Finally, the core category derived from the analysis was "internal experience of an aging self" (Fig. 1). Fig. 1 illustrates the conceptual trajectory of aging awareness among women beyond midlife, grounded in the core

**Table 2**

General characteristics of the participants (N = 19).

Characteristics	M (SD)	N (%)
Age	66.1 (5.6)	
Married		
Yes		16 (84.2)
No		3 (15.8)
Number of family members living together	2.1 (1.1)	
Employed		
Yes		6 (31.6)
No		13 (68.4)
Education (n = 18)		
< 12 years		4 (22.2)
≥ 12 years		14 (77.8)
Economic status		
High		2 (10.5)
Middle		9 (47.4)
Low		8 (42.1)
Place of residence		
Capital area		13 (68.4)
Non-capital area		6 (31.6)
Medical history including chronic disease		
Yes		16 (84.2)
No		3 (15.8)

category of "internal experience of an aging self." The core category of this study captures how women cognitively and emotionally process their aging. Rather than progressing in fixed stages, this experience unfolds along a dynamic continuum shaped by individual awareness and emotional orientation.

The initial phase is characterized by a lack of conscious recognition of aging—bodily changes are not typically associated with age, and thoughts related to aging are often avoided or remain unacknowledged. As physical and contextual changes accumulate, participants begin to experience confusion arising from aging, which prompts a shift toward reflective aging.

During this reflective phase, participants internalize aging through three interrelated mechanisms: mirroring aging through self and close others, reflecting on the normal life cycle and one's own aging, and managing oneself in accordance with age-related changes.

This internalization leads to divergent outcomes. Some participants achieve psychological balance by integrating aging into their self-concept, while others, unable to resolve physical, emotional, or social vulnerabilities, develop a negative outlook on their future self—marked by self-withdrawal, diminished self-worth, and pessimism. The model demonstrates that aging is not merely a biological transition but a subjective and interpretive process shaped by individual adaptation and meaning-making.

**Core category: internal experience of an aging self**

The core category identified in this study is "Internal Experience of an Aging Self," which represents the central process through which participants recognized, internalized, and constructed meaning around their own aging. Rather than following a fixed or linear trajectory, this experience emerged as a fluid and multifaceted process shaped by individual contexts.

Some participants remained in a state of not being aware of their own aging, either consciously avoiding thoughts about it or remaining absorbed in daily routines without recognizing that aging was occurring. By contrast, most participants experienced confusion arising from aging over time, prompted by the awareness of physical changes or shifting social expectations. These realizations initiated a process of internalization of an aging self.

This process involved multiple dimensions of engagement with aging. Participants reflected on the normal life cycle and their own

**Table 3**  
Main categories, subcategories, and representative quotations illustrating women's aging awareness.

Main categories	Subcategories	Example quotes
Not aware of one's own aging	Not connecting bodily changes with the aging process	You don't think of it (incontinence) as something you have to go to the doctor to fix; it's just something that comes with aging. I don't think, "Oh, I'm getting older"; I just think, "Okay, my body is changing." (P7)
	Not dwelling on one's own aging	I try not to dwell on the fact that I'm getting older and, in some ways, it could be viewed as turning a blind eye to it. I try to keep myself busy, and, in some ways, it's like brainwashing, if you will. (P2)
Emerging awareness of one's aging self	Not being mindful of one's own aging	I don't have time to think about it (aging) because I'm out and about doing volunteer work. When I'm stuck at home, it creeps in. But I moved here when I was in menopause, got a new place, and now I'm involved in social activities. I'm out and about all the time, and thoughts about my aging have just gone (P5)
	Noticing the difference between one's younger and current body	There are moments when you suddenly notice yourself up close. Like, sometimes when I put on makeup while watching TV at home, if the mirror is far away, I'll bring all my makeup and lay it out on the table, so I can see my face up close. It's in these moments that I realize I've aged quite a bit. (P5)
	Realizing one's own age prompted by environmental triggers	So, the other day, I was waiting to get my vaccine, and I glanced at the sign that said they were vaccinating people by age. It said, "60 to 75 years old." Then it dawned on me, "Wait a minute, I'm actually getting close to that age." And that's when it hit me, that I'm getting old. (P2)
Confusion arising from aging	Becoming aware of aging due through changing roles	I really loved my grandma. You know, growing up, she was always seen as the oldest adult in the house, like the wisest one. But when I became a grandmother myself, I felt like I was the adult now, but also, like, the oldest person in the room. (P9)
	Interpreting one's own aging in comparison to others	When a reporter is on TV, you can guess their age. So, you're looking at them and thinking, "He's 64? That's older than I thought." And then it hits you, like, wait a minute, that's me. (P6)
	Experiencing a sinking feeling when noticing changes in appearance	I've lost all my muscles, and my body's got this weird shape going on. Especially when I check myself out in the mirror, my face just looks odd, and my belly's sticking out weirdly. My thighs and legs are getting all flabby, too, and I just don't dig how I'm looking these days. (P4)
	Feeling disappointed over one's own aging	I keep telling myself that age doesn't matter. But, even as those words leave my mouth, I'm still taken aback. The shock hits me, and it's like I'm the only one feeling it, you know? It hits me hard. Ah...this place, the one I've always known, suddenly feels so strange.... I feel this weakness creeping in, and it's just so discouraging. (P11)
Internalization of one's own aging	Experiencing heartache caused by changing roles	I felt down because, wherever I went, I couldn't do what I used to do, couldn't keep up with anything. My whole life, people relied on me because they saw me as this capable, good-hearted person who could handle anything. So when I was suddenly told to step back because of my age, it hit me hard, in so many ways. (P8)
	Mirroring aging through self and close others	It's just a part of aging, not just me. I've got friends going through the same stuff. It's all part of the deal. I don't know anyone who doesn't go through this. So I'm like, "It's just part of getting older," and then it blows over. (P14)
	Reflecting on the normal life cycle and one's own aging	No matter how much I try to stop it, it's going to happen when it's time. No one can really stop the natural order of things, no matter how hard they try. You can't force it. Everyone's just going to roll with it; there's no other choice. (P10)
Embracing aging with psychological balance	Managing oneself in accordance with age-related changes	When menopause hits, there's really nothing to protect you. You're just prone to getting sick as your hormones drop. So, as I've aged, I've come to understand the importance of looking after myself better. I noticed I had to go to the gym because my stamina was hitting rock bottom. So, I started working out, and now I feel a lot better, and I've definitely seen some changes in myself. (P8)
	Living in the moment and accepting change	As you get older, you change, and you don't hate it; you appreciate it for what it is. I accept it and live with it. (P4)
	Maintaining individuality and building inner strength	Now, I prioritize myself. It used to prioritize my husband, children, and grandchildren. One day, I cooked some food, and my husband said, "I don't want to eat." The moment I heard that, in my mind, I was like, "I'm not doing it for you; I'm doing it because I want to eat." Now, I take care of myself a little bit. (P9)
	Seeking meaning and novelty in later life	I'm thinking, "I'm going to travel when I don't look like a grandmother. I'll do things I've never done before, and I'll learn one more thing." (P6)
Emotional turmoil in confronting age-related vulnerabilities	Preparing for the end of life through acceptance	When I turned 70, I thought, "I've only got about 10 years left to walk around on my feet and do what I want to do." I was like, "I've got to start preparing for my death, praying, and making sure that I'm not a burden to my kids. I've got to get myself ready." (P14)
	Relating to others through shared aging experiences	When I was younger and saw adults forgetting things, I used to think, "What's wrong with them? I took pity and thought they were in a hurry." But now I think, "Yeah, this is how adults live when they're in their 60s and 70s. This is how my mother-in-law was once." I have a greater sense of understanding—a sense of understanding others. (P6)
	Triggered by chronic physical conditions	I've always been such an active person, so when my body ended up like this, I just felt miserable, frustrated. . . every emotion you can think of, all crashing in at once. I couldn't move the way I wanted anymore. My world just got smaller. The pain was one thing, but what really got me was how hard it hit me emotionally. (P10)
Emotional turmoil in confronting age-related vulnerabilities	Arising from age-related milestones and negative body image	Turning 60 and beyond—it hit me really hard back then. I don't know if others felt the same, but for me, it was a huge shock. I couldn't really talk about it. I was afraid people would think I was being overly dramatic or making a fuss. (P11)
	Linked to financial strain and role insecurity	One day, my legs just started aching—like the muscles were hurting—and then they began to twist, you know? They started to bow out, like how women's legs sometimes spread apart like that. It really shocked me. I hated how they looked so much. (P11)
		I take care of kids, you know. And I started hearing things like 65 or 70 being the retirement age. I mean, I can still work until 70. So, when I hear that, I just feel disappointed. It makes me sad—like, I can still work, I can still earn money, I still want to. But hearing that... it's like, oh, so I'm being pushed out. (P4)
	I shouldn't be a burden to my family—I should live for myself, enjoy life, and love. But as I go through life, it just doesn't work out that way. Things like financial circumstances get in the way. (P4)	

(continued)

Table 3 (Continued)

Main categories	Subcategories	Example quotes
Negative outlook on one's future self	Withdrawing from the world	When I consider joining a volunteer group, I hesitate because I don't believe I can be of much help. They might think, "Hey, that old lady comes in every day." But then I think about it from the other perspective, and I'm like, "I wouldn't want a 70-year-old lady to come in." There are many volunteer groups in the church like that, so I'm kind of closed off. (P6)
	Worrying about one's older self	I don't like seeing older people's bodies. It makes me think I should exercise more while I'm younger so I don't end up looking like that. It just seems so sad and even miserable to be really old. (P12)
	Losing agency in one's future life	It would be nice to live comfortably and effortlessly during old age, but we can't afford it, so we just live life as it comes. What can we do? Nobody's going to give you a penny. Everyone wants to live comfortably, but it's not really up to you. (P17)
	Being unable to let go of one's past self	I don't think I'm really embracing it. I'm supposed to just accept that it's natural to be like this as I get older, but I'm not. I keep telling myself, "I'll be good again, I'll be the same person I used to be." I'm not thinking, "Of course, I'm getting older, I'm supposed to be this way." (P12)
	Experiencing a diminished sense of self-worth	It kind of hits me that I'm old now, like I can't do much. (...) It's a bit wild to think I'm over 60. I'm like, "What have I been up to all these years?" Feels like I haven't really lived a life. (p.4)

aging, situated their experience within a broader understanding of human development. They described adjusting lifestyle, expectations, and emotional responses to manage age-related changes. Many deepened their reflections by observing the aging of parents, spouses, or peers. These insights gradually reshaped their concept of aging and fostered psychological balance.

Some, however, faced emotional turmoil when confronting age-related vulnerabilities such as chronic illness, negative body image, or financial insecurity. A few expressed fear, uncertainty, and a sense of loss about their future selves, which hindered their acceptance.

Ultimately, the internal experience of an aging self served as a central organizing construct in participants' interpretations of later life. This process encompassed both emotional disruption and psychological adaptation, illuminating the complex, fluid, and meaning-making nature of aging as it is subjectively lived and understood.

Not aware of one's own aging

As part of the broader process of internalizing aging, some participants exhibited limited or no awareness of their aging, and an early stage preceding conscious reflection. This unawareness was not denial, but a passive or unconscious experience, where aging had not yet become an active personal concern. This state of unawareness manifested in several ways: some individuals did not associate physical changes with aging, and others chose to avoid thinking about it

altogether. Many were preoccupied with daily life or future goals, which delayed their engagement with their aging identity. This unawareness functioned as a temporary psychological buffer or a pause before deeper self-reflection and identity work. As one participant described: "I try not to dwell on the fact that I'm getting older... I try to keep myself busy, and, in some ways, it's like brain-washing" (P2).

Emerging awareness of one's aging self

Participants' awareness of their own aging appeared in diverse ways. As aging is not a sudden event but a gradual process, the moment of becoming aware of one's own aging varies depending on each individual's aging characteristics and perception of aging. Participants recognized signs of aging by noticing changes in their bodies compared to their younger selves, experiencing age-related transitions in their environment, or perceiving shifts in their social roles. For example, one participant recalled: "It said, '60 to 75 years old.' Then it dawned on me, 'Wait a minute, I'm actually getting close to that age.' And that's when it hit me, that I'm getting old" (P2). This initial recognition marks the beginning of reflective aging, in which individuals consciously acknowledge and give meaning to their own aging. Examples of when participants became aware of their aging are presented in Supplementary Table 1, in the order they were discussed.

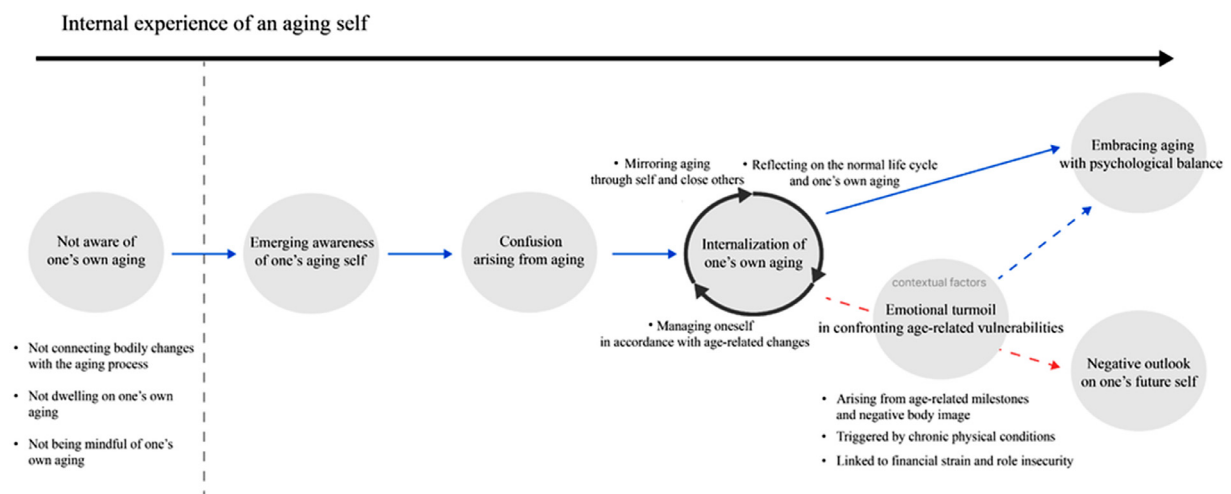


Fig. 1. Grounded theory of the internal experience of an aging self. Figure legend. Grounded theory model depicting the internal experience of an aging self. The process moves from unawareness to emerging self-awareness and confusion, with central internalization processes of mirroring, managing, and reflecting. Outcomes include embracing aging with psychological balance or developing a negative outlook, shaped by contextual factors.

### *Confusion arising from aging*

Participants often experience a sense of disconnection from their bodies as they age. They may feel that the once vibrant and healthy bodies of their youth have changed, making them uncomfortable or even unwell. This shift can lead to feelings of lost femininity and a perception of their bodies as unfamiliar, unattractive, or no longer truly belonging to them. One participant captured this emotional ambivalence: "I keep telling myself that age doesn't matter. But, even as those words leave my mouth, I'm still taken aback... I feel this weakness creeping in, and it's just so discouraging" (P11). When they suddenly realize they have changed, they feel lost, disappointed, and saddened by the diminished social roles they now occupy. Whenever they contemplate their own aging, their minds race. Rather than presenting as a chronic emotional state like anxiety or depression, it appears as a transient emotional disruption occurring at specific moments of aging awareness, conceptualized as confusion arising from aging.

### *Internalization of one's own aging*

Participants gradually experienced a process of internalizing their own aging as they recognized various changes associated with growing older. This process was not simply about accepting the passage of time but involved a reflective reorganization of identity and meaning in life.

First, participants became aware of their aging by mirroring aging through self and close others. Observing the aging of peers, spouses, or parents served as a reflective surface, through which they acknowledged that they too were aging, prompting them to confront their own aging more consciously. As one participant explained: "It's just a part of aging, not just me. I've got friends going through the same stuff. It's all part of the deal... So I'm like, 'It's just part of getting older,' and then it blows over" (P14). This awareness led to a stage of reflecting on the normal life cycle and one's own aging, in which women compared their past and present selves and considered their aging within the broader context of the human life course. Rather than perceiving aging as a disruption, they tried to understand it as a natural and expected part of life. Additionally, many participants managed themselves in accordance with age-related changes. They adjusted the intensity of their daily activities, re-evaluated priorities, and adopted new routines that accommodated physical and emotional changes. Through these actions, they demonstrated an active effort to adapt to their aging process.

### *Embracing aging with psychological balance*

This final phase reflects how participants gradually come to terms with aging by integrating it into their sense of self and everyday life. Rather than resisting change, participants described a growing ability to live in the present, appreciate small moments, and accept physical and emotional transformations as a natural part of life. They redefined their identities by shifting from roles centered on family to a focus on personal needs, values, and growth, thereby fostering a stronger sense of individuality and internal resilience. One participant exemplified this shift: "Now, I prioritize myself. It used to prioritize my husband, children, and grandchildren... I'm not doing it for you; I'm doing it because I want to eat. Now, I take care of myself a little bit" (P9).

Participants also reported actively pursuing meaning and novelty in later life through travel, continued learning, volunteering, or deepening spiritual engagement. Aging was not viewed as a period of decline but as a time for renewed purpose and contribution. Many expressed a calm, proactive approach to end-of-life considerations,

including the desire to prepare both emotionally and practically for death without becoming a burden to others.

Moreover, aging was understood as a shared, relational experience, and participants described a growing empathy toward others—particularly older adults—by recognizing similar patterns within their own experiences. Overall, this stage illustrates a dynamic and evolving adaptation to aging, marked by acceptance, intentionality, and the embracing of new possibilities that later life brings.

### *Emotional turmoil in confronting age-related vulnerabilities*

Some participants experienced emotional turmoil as they confronted age-related vulnerabilities, which stemmed from a complex interplay of physical, psychological, and social stressors. Reaching certain age milestones, such as turning 60 or 70, was accompanied by a sense of shock, often evoking feelings of sadness or frustration. One participant described the intensity of this experience: "I've always been such an active person, so when my body ended up like this, I just felt miserable, frustrated... every emotion you can think of, all crashing in at once" (P10). These emotions were further amplified by dissatisfaction with their appearance and physical function; reduced stamina, wrinkled skin, and changes in body shape undermined their sense of femininity and self-worth.

Additionally, chronic physical conditions such as persistent pain and fatigue disrupted daily routines and limited physical activity, leading to feelings of isolation and emotional exhaustion. These health issues functioned as physical burdens and as constant reminders of aging, making it difficult to maintain psychological balance.

Furthermore, financial strain and role insecurity compounded these challenges. Some participants expressed anxiety about becoming dependent on others or managing unexpected expenses, while others reported a loss of purpose after retiring or stepping away from caregiving roles.

Altogether, these intersecting difficulties deepened participants' internal distress and reinforced negative perceptions of aging. Physical decline, financial instability, and shifting social roles emerged as substantial vulnerabilities contributing to emotional instability in later life.

### *Negative outlook on one's future self*

Some participants developed a negative outlook on their future self during the aging process, revealing a pattern of growing psychological withdrawal. Faced with age-related vulnerabilities such as chronic illness, physical decline, and financial insecurity, they experienced emotional turmoil, which, when left unresolved, led to increasingly negative self-perceptions about aging. One participant's words reflected this resistance: "I don't think I'm really embracing it... I keep telling myself, 'I'll be good again, I'll be the same person I used to be'" (P12). Rather than viewing aging as a natural and inevitable process, these individuals perceived themselves as becoming socially marginalized and losing their sense of personal value.

## **Discussion**

This study provides a nuanced understanding of how women beyond midlife develop awareness of their aging process. The core category—internal experience of an aging self—captures a dynamic process in which women gradually recognize, interpret, and integrate the physical, emotional, social, and existential changes associated with the aging process. Rather than passively enduring aging, participants actively engaged with it, constructing meaning through

reflection and adaptation, consistent with findings that link self-awareness to psychological resilience and well-being in later life.<sup>10,24,31</sup>

Women's awareness of aging emerged incrementally, often prompted by bodily sensations, changing roles, or interpersonal comparisons. These moments of realization often involved emotional ambivalence and cognitive dissonance, revealing that both confrontation and avoidance shape awareness of aging. This aligns with socioemotional selectivity theory, which posits that the perception of limited time leads older adults to focus on emotionally meaningful goals and relationships.<sup>28</sup>

The internalization of aging constituted a complex identity negotiation process. Rather than simply accepting aging, women actively reflected on its meaning by observing changes in themselves and those close to them, situating these changes within the context of the normal life cycle, and adjusting their behavior accordingly. These findings are supported by prior research suggesting that subjective aging is shaped by internal factors and through social mirroring and self-regulation.<sup>6,24,32</sup> By engaging in this process, women demonstrated an ability to reframe aging from a state of decline to one of psychological growth and self-directed adaptation.

For some participants, this internalization led to a phase of embracing aging with psychological balance, marked by a shift in priorities from externally imposed roles to personal values and meaning-seeking. This transition resonates with the theory of gerotranscendence,<sup>29</sup> which posits that aging facilitates movement toward greater introspection, spiritual growth, and emotional maturity. The ability to prepare for the end of life calmly and proactively further reflects the internal resilience and capacity for existential reflection of women.<sup>33,34</sup>

However, some participants remained unaware of their own aging. While this state occasionally functioned as a psychological defense mechanism, alleviating emotional distress, it also led to delayed adaptation and limited opportunities for proactive coping. This corresponds with the subjective aging awareness continuum proposed by Diehl et al. (2014),<sup>24</sup> which spans from preconscious denial to conscious reflection, suggesting that individuals need to progress toward the reflective stage of aging. Therefore, health professionals should assess where individuals are situated along this continuum and develop tailored intervention strategies appropriate to their level of awareness about aging.

Importantly, this study identified emotional turmoil in confronting age-related vulnerabilities as a key contextual factor that intensified negative aging awareness. Vulnerabilities such as reduced mobility, milestone-related emotional shocks, chronic illness, involuntary retirement, and environmental disruptions undermined participants' physical functioning, emotional stability, and self-identity. Health status emerged as an influential factor, with functional limitations rather than the mere presence of chronic conditions determining adaptation outcomes. These conditions often marked turning points, reinforcing a sense of loss and diminished agency. Consistent with prior research,<sup>35,36</sup> these challenges compromised autonomy and psychological resilience. When amplified by ageist societal norms, they contributed to internalized ageism and negative self-perceptions.<sup>37,38</sup> These findings underscore the importance of geriatric nursing interventions that enhance perceived control, support emotional validation, and facilitate meaning-making in the aging process.

A negative outlook on one's future self often emerged as a result of emotional turmoil in confronting age-related vulnerabilities, reinforcing fears of further decline and loss of control. This internalized negativity sometimes resulted in social withdrawal, pessimism, and diminished self-worth, underscoring the need to challenge ageist narratives and promote more diverse and empowering perspectives on aging.<sup>17,39</sup> Therefore, identifying individuals experiencing

emotional turmoil early in the aging process and implementing preventive strategies is essential to support emotional regulation and reduce the risk of developing a negative outlook on one's future self.

These findings underscore the significance of geriatric nursing, which encompasses physical care and addresses the psychological and existential aspects of aging. Nurses are in a unique position to support older women in navigating their reflective journeys by validating their experiences, encouraging adaptive self-perceptions, and helping them find meaning even in the face of loss. Attentive and individualized care can empower older women to face aging not as a passive decline but as a meaningful stage of life shaped by agency, reflection, and transformation.

Despite its contributions, this study has several limitations. First, the sample consisted of 19 women residing in a specific urban area in South Korea, which may limit the generalizability of the findings to other cultural or geographical contexts. Additionally, the use of telephone interviews may have limited the depth of nonverbal cues, potentially influencing the interpretation of emotional nuance. Moreover, recruitment through community activities may have introduced selection bias toward socially engaged participants, potentially underrepresenting individuals who are homebound or socially isolated and may experience aging awareness differently.

Future studies could expand the sample to include more diverse socio-demographic groups, including rural populations or individuals with different health or economic backgrounds. Employing mixed methods or longitudinal designs may also help capture changes in aging awareness over time and provide richer, multi-dimensional insights. Further research may also explore how awareness of aging unfolds among men or across different cultural contexts to broaden understanding and applicability in geriatric nursing.

## Conclusions

This study elucidates the internalized and reflective processes through which women beyond midlife construct their awareness of aging. The core category, internal experience of an aging self, represents a dynamic and multidirectional process shaped by individual cognition, emotion, and social context, wherein women may advance, pause, or retreat in their aging awareness depending on life circumstances. Women's awareness of aging was informed by interpersonal comparisons, contextualization within the life course, and behavioral adaptation to age-related changes.

Importantly, emotional turmoil associated with age-related vulnerabilities—physical decline, role loss, and chronic conditions—was linked to negative projections of one's future self. These findings underscore the significance of addressing the psychological dimensions of aging as key targets for geriatric nursing. Proactive identification of individuals at risk for maladaptive perceptions, along with tailored support, is essential. Interventions should promote reflective processing, strengthen adaptive self-concepts, and foster a sense of agency in later life, ultimately enhancing emotional well-being and enabling person-centered aging care.

## Funding statement

This work was supported by the Yonsei University College of Nursing.

Sunyoung Oh received a scholarship from Brain Korea 21 FOUR Project funded by the National Research Foundation (NRF) of Korea, Yonsei University College of Nursing.

This work received English language editing support from Chung-Ang University

## Ethical approval

The study protocols received ethical approval from Severance Hospital, Korea (IRB 4-2021-0187).

## Data availability statement

The data that support the findings of this study are available from the corresponding author upon reasonable request.

## Declaration of competing interest

The authors have no conflicts of interest to declare.

## CRediT authorship contribution statement

**Eui Geum Oh:** Writing – review & editing, Writing – original draft, Supervision, Formal analysis, Data curation, Conceptualization. **Sunyoung Oh MSN, RN:** Project administration, Investigation, Data curation. **JeeHee Han:** Writing – original draft, Visualization, Project administration, Formal analysis, Data curation, Conceptualization.

## Acknowledgments

None.

## Supplementary materials

Supplementary material associated with this article can be found, in the online version, at [doi:10.1016/j.gerinurse.2026.103967](https://doi.org/10.1016/j.gerinurse.2026.103967).

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