

Clothing, Embodied Identity, and Dementia: Maintaining the Self through Dress¹

Christina Buse and Julia Twigg

INTRODUCTION

Older people have been largely absent from fashion studies which, reflecting the values of the fashionable world, has focused its gaze on the youthful, subversive and transgressive (Hurd Clarke, Griffin, and Maliha 710; Twigg, *Fashion* 2). Though dress is widely theorized in terms of identity—its performance, expression and attribution—the identities explored in this literature have been limited. It is often assumed that clothes cease to matter as people grow old. For people living with dementia, this is all the more the case—a loss of interest in appearance is often regarded as symptomatic of the condition (Jenkins and Price 86; Twigg, “Clothing” 223), and is a visible signifier of dementia in medical advertisements (Downs, “Embodiment” 369). Dress is associated with expressivity, agency, and choice—qualities that are presumed to erode with the progress of the condition. In this article, by contrast, we argue that dress continues to be significant in the everyday experiences of people living with dementia. This understanding helps support the wider movement towards a greater recognition of personhood and the role of embodiment in the lives and identities of people with the condition.

This article explores questions of clothing and identity, drawing on the findings of the “Dementia and Dress” study. Our analysis builds on conceptual themes set out by Twigg and Buse in “Dress, Dementia and the Embodiment of Identity,” developing these themes through exploration of empirical findings. We begin with a brief overview of research on clothing, identity, and age, before addressing its significance to literatures on personhood, embodiment, and dementia. Our analysis is then organized into four key themes: Firstly, Clothing, Dementia, and

Embodied Identity examines the ongoing significance of dress as part of personal and social identities and considers tensions between narrative and embodied enactments of self. We then explore the significance of clothing for Negotiating Frailty and Dementia, with potential to ascribe, as well as resist, “the classic look of the dementia patient” (Twigg, “Clothing” 228). The section that follows explores how Clothes as Biographical Objects can challenge the reduction of the person with dementia to their condition, evoking past identities. The final theme looks at the ways identity is intercorporeal, with family carers and care workers drawn into Curating Identity through Dress. The concluding discussion considers implications for understandings of dementia as well as for broader theories of aging, suggesting that the experiences of frail older people should not be positioned outside cultural and material analyses.

CLOTHING, AGE, AND IDENTITY

There is a long history of work exploring the relation of clothing to identity and the role of dress in the constitution of social difference and social order (Entwistle 112-39). The focus has largely been on the master identities of gender, class, sexuality, and ethnicity.² Age has been comparatively neglected, reflecting its wider treatment in sociology and cultural studies (Laws 12-18). A small but growing body of work, however, is exploring the clothing experiences of older women (e.g., Church Gibson 322-37; Fairhurst 258-75; Hurd Clarke, Griffin, and Maliha 709-26). In *Fashion and Age*, Twigg describes dress as “age ordered,” with the choices of older women constrained by cultural norms of age-appropriate dress (25). At the same time, this literature suggests that norms of being older are changing and that this is reflected in dress practice.

Dress has thus become implicated in current debates around the changing cultural constitution of age and the role of consumption in this, located within the wider “cultural turn” in gerontology (Gilleard and Higgs, *Cultures* 22). This involves a shift from a focus on conceptualizing age identities as defined within social structure towards a more fluid conceptualization shaped by consumer culture and a more fragmented experience of the life course. Identities—including age identities—are

seen as increasingly diverse, marked by agency and choice, reflexively constituted through consumption practices (Gilleard and Higgs, *Cultures* 24-25). Images of “positive aging” are emerging, associated with maintaining a youthful lifestyle and appearance (Featherstone and Hepworth 30), in which clothing plays a part (Twigg and Majima 23). However, as Katz and Laliberte-Rudman argue, contemporary aging is also characterized by a “unique contradiction between experiences of personal freedom and structural constraint” (48). They describe how ideals of “positive” and “successful” aging can be oppressive, part of neo-liberal discourses of self-responsibility that marginalize those experiencing bodily decline or impairment (49).

These tensions between structure and agency, “fixity and flux” (Biggs 47) are explored in theories of age identities as performative. Laz (86) argues that age is something we “do,” constituted through social interactions, and stabilized through repeated performances. However, as Swinnen and Port comment, “since a repetition can never be identical to its original script, there is always the possibility of subversion and change” (12). Biggs develops these ideas through the concept of masquerade, describing the performance of age as a “tactical manoeuvre”—a strategy for concealing “socially unacceptable aspects of ageing,” in order to protect a coherent sense of self (53). Dress can be conceptualized as part of how age identities are performed—a strategy for managing the complex interplay of age identities and bodily aging (Twigg, *Fashion* 46). This may adhere to normative aging or allow for transgressive performances, either in the form of vivid, outlandish outfits that challenge invisibility (Yarnal, Son, and Liechty 57), or in an unadorned appearance that refuses to disguise the aging process (Church Gibson 326).

These accounts of identity link well with the growing body of work exploring everyday experiences of dress as a “situated bodily practice” (Entwistle 11). This literature emphasizes the materiality of dress, which acts back on the self at a direct bodily level, shaping possibilities for identity construction. The relationship of identity to dress is not regarded as pre-given, but rather as something that emerges through everyday

practices of selecting, trying on, and wearing clothing (Woodward 14). Daily clothing decisions like these are shaped by interplay between structure and agency, between broader social norms and the intimate relationship of clothing to the wearer (Banim, Green, and Guy 1-8).

Discussions of dress, performativity, and age have generally focused on the “young old,” who are physically and socially active (e.g. Yarnal, Son, and Liechty 54; Fairhurst 258-75). Those experiencing frailty or bodily decline by and large remain marginalized from these new possibilities for aging. As argued by Gilleard and Higgs, images of positive aging are rooted in bodily control, agency, and self-care, capacities that are diminished with the progression of dementia (“Ageing, Abjection” 168). Indeed, a loss of interest in appearance is often interpreted as an early sign of the condition (Jenkins and Price 86). Dementia can disrupt the ability to recognize one’s image in the mirror (Twigg, “Clothing” 226) and to dress the body independently and expressively (Feyereisen, Gendron, and Seron 169-88), reflecting the “disruption of the skilled, habitual body” (Phinney and Chesla 288). Yet recent work on dementia, personhood, and embodiment has challenged these assumptions, reinstating the selfhood of people with dementia, suggesting the potential of embodiment and appearance in the expression of personhood (Kontos and Martin 290-91).

EMBODIMENT, PERSONHOOD, AND DEMENTIA

Dementia has traditionally been conceptualized as the “erosion of selfhood,” a consequence of progressive cognitive impairment (Kontos, “Redefining Agency” 105). This notion of the loss of the person is central to the fear and stigma associated with the condition. Increasingly, however, this perspective is being challenged through the personhood approach, which emphasizes the relational aspects of the self that remain intact despite cognitive impairment (Sabat 295). Kitwood defines personhood as: “a standing or status that is bestowed upon one human being by others, in the context of relationship and social being. It implies recognition, respect and trust” (8). The personhood approach challenges the marginalization of the experiences of people with dementia

and brings their voices to the center of research and practice (Downs, “Emergence” 601-04).

Kontos has taken this research forward, highlighting the embodied dimensions of selfhood. Drawing on Bourdieu and Merleau-Ponty, she challenges the Cartesian dualist notion of the self as underpinned by a division between mind and body, arguing instead that selfhood continues to be enacted through habitual, embodied practices and gestures (“Ethnographic Reflections” 837). Agency and intentionality are reconceptualized as things that can be enacted at a pre-reflective, bodily level (“Redefining Agency” 119). In her work she cites various examples, including some relating to clothing and appearance. For instance, she describes Molly, a woman with advanced dementia and physical frailty, painstakingly reaching under her bib to draw out her string of pearls and placing them delicately on top: “With this simple gesture, Molly emerged from her world of decrepitude, incontinence, dementia, and helplessness” (“Ethnographic Exploration” 198).

Kontos’s work thereby opens up a space for thinking about the significance of clothing, appearance, and embodiment within the lives of older people with dementia. While the appearance and dress of people with dementia has been presented as part of the labor of care staff, a form of bodywork (Chatterji 227; Reed-Danahey 53; Twigg et al. 1-18), the subjective experiences of appearance have been relatively neglected. However, recent work is beginning to address this, for instance, Ward and Campbell’s research on hairdressing as an embodied and sensory experience (341) situated within “appearance biographies” (Ward, Campbell, and Keady 66). There is also growing recognition of the body as a site for more positive care interactions, which facilitate communication, engagement, and recognition through bodily practice (Downs, “Embodiment” 370). While dress has not been the focus of previous research, reminiscence theatre work has utilized clothing in the enactment of memories (Schweitzer 251-53), and illustrates how clothes can trigger memories for people with dementia as they are touched, held and worn (Schweitzer, Bruce, and Gibson 61-62). The significance of having

one's own clothing is also recognized as part of person-centered care (Brooker 55).

At the same time, research has begun to develop a more nuanced understanding of the social identities of people with dementia. Hulko critiques unitary conceptualizations of personhood, arguing for a focus on social identity as fluid, contingent, and intersectional ("Social Science" 238). She explores how intersections of class, ethnicity, and gender create different experiences and interpretations of living with dementia ("From 'Not'" 131-44). There is also a growing body of work exploring the narrative identities of people with dementia and their construction through embodied performance and gestures (Hyden and Orulv 211). Building on this research and dress studies literatures, the Dementia and Dress study sought to further explore the implications of dress for embodied identity, using creative visual and sensory methods such as "wardrobe interviews" (Banim and Guy 218) to understand the experiences of people with dementia.

THE DEMENTIA AND DRESS STUDY

Dementia and Dress was a two-year, ESRC-funded study that explored the significance of clothing in the daily lives of people with dementia, their carers, and care workers, using ethnographic and qualitative methods. It was conducted across three Kent care homes and fifteen domestic households. Thirty-two people with dementia took part in the study: fifteen in domestic settings and seventeen in the care home sample. Participants were selected purposively to reflect different stages of dementia (from mild to severe), to draw from different socioeconomic backgrounds (see Table 1), and to include both men and women (nine men and twenty-three women). They were recruited with support from local voluntary sector organizations and care home managers. In addition, qualitative interviews were conducted with twenty-nine family carers and relatives, twenty-eight members of care home staff (care workers, managers, and laundry staff), and two clothing company representatives.

Methods of data gathering included "wardrobe interviews" (Banim and Guy 218) with people with dementia and family carers, who were

TABLE 1. PARTICIPANTS WITH DEMENTIA-BACKGROUND INFORMATION

Name ^a	Age	Former occupation(s)	Living situation	
			At home	Care home
Alice	81	Clerical worker, housewife	✓	
Andrew	95	Ballroom dance instructor, council worker		✓
Betty	87	Lab assistant, housewife, dressmaker, librarian	✓	
Bobby	95	Tool maker		✓
Colin	80	Building site labourer		✓
Diane	68	Computer programmer	✓	
Douglas	89	Postmaster	✓	
Dot	87	Clerical worker		✓
Edith	84	Clerical worker, housewife	✓	
Ethel	66	School teacher		✓
Eva	81	Dinner lady, factory worker	✓	
Florence	90	Seamstress		✓
Harry	86	Bacon curer, factory worker		✓
Hazel	85	Museum curator, clerical worker, civil servant		✓
Henriette	72	School teacher, pub landlady		✓
Joe	77	Sales representative, coach driver	✓	
Kathy	72	Dinner lady	✓	
Ken	91	Plumber, environmental health officer	✓	
Lillian	86	Unknown		✓
Mable	97	Laundry worker, housekeeper, nanny		✓
Maggie	87	Nurse, care home matron	✓ ^b	
Marie	75	Hairdresser		✓
Norma	88	Cleaner, factory worker	✓	
Pearl	87	Administrator (local council)	✓	
Peggy	86	Clerical worker		✓
Rita	86	Factory worker (textile industry), dinner lady		✓
Rose	75	Dress maker, housewife, clerical worker	✓	
Rosemary	82	Clerical worker, housing officer		✓
Tom	72	Self-employed builder	✓	
Sadie	87	Clerical worker		✓
Valerie	74	Shop worker, housewife		✓

^aNames are pseudonyms.

^bMaggie was part of the domestic sample, but moved into a care home during the study.

interviewed alongside their wardrobes, using the materiality of dress to prompt discussion. Interviews addressed the theme of identity by asking people with dementia what is important about their clothes; their likes, dislikes, and favorite clothes; and how their style had changed over time. A range of visual and sensory prompts were used in one-to-one discussions and reminiscence groups, including photographs, images, vintage garments, and fabric samples. The concreteness of these props helped to elicit responses from people who struggled to participate in more abstract verbal discussions. Twenty-three participants took part in the wardrobe interviews; nine were unable to participate in these because of their more advanced levels of dementia.

The experiences of participants with more advanced dementia were included in the study through the use of observations and informal discussions (Hubbard, Downs, and Tester 352). Observations were qualitative and unstructured, taking place in the public areas of the care homes, as well as incidentally during visits to domestic households. Activities that were observed included assistance with dress in public spaces, the location of dress within care routines, informal discussions of dress between care workers and residents, and non-verbal responses to clothing and interactions with dress. Observation sessions lasted, on average, five hours, taking place one or two days per week in each care home over a three month period, on different days of the week and times of day.

Detailed field notes were recorded after each session, and formal interviews were transcribed. Data were analyzed using thematic analysis. Initial analysis took place after each research visit, as part of the writing up of field notes, identifying emerging themes and “puzzles.” Formal analysis began with a careful reading and rereading of transcripts and field-notes, noting down emerging themes and concepts. A list of themes was then developed collaboratively by the research team and used to code transcripts and field-notes with the assistance of NVIVO qualitative software. As the study included people without capacity, ethical approval was obtained from the Social Care Research Ethics Committee (SCREC). Where the person did not have capacity to give informed consent, family

carers acted as personal consultees. Every effort was made to involve the person with dementia in the decision process, including explaining the study verbally and using simplified information sheets with visual aids (Bartlett and O'Connor 108). Consent was treated as an ongoing process, and the researcher continuously assessed the willingness of the person to be involved (Hubbard, Downs, and Tester 353), monitoring verbal and non-verbal signs of assent or dissent (Black 4-5). The researcher also carefully monitored signs of distress or tiredness and adjusted the length of fieldwork sessions according to the person's needs.

CLOTHING, DEMENTIA, AND EMBODIED IDENTITY

It was clear from the study that dress continued to be significant for many people with dementia, remaining part of their embodied identity. Respondents often retained a sense of the clothes which were or were not "them": "I don't like big patterns . . . no, it's not me" or "I'm more of a trouser person." Many retained a personal "set of rules" regarding dress—a sense of the colors, styles, and textures that constituted their "personal aesthetic" (Woodward 67) or "appearance signature" (Ward, Campbell, and Keady 67). Color was important, and some participants had a particular color which they felt defined them: for Ken, it was an earthy palette of plaids, blues, and soft browns, while Peggy described herself as a "pink person." While people with advanced dementia often lost interest in their dress and appearance, family carers and care workers described how they would still recognize or respond to color. Personal aesthetic related not just to the look of clothes, but also to their fit. For instance, some participants had "never liked short sleeves"; others disliked clothes which were "tight against the body" or having their blouse "tucked in" at the waist. Some preferences reflected responses to the aging of the body, but others were carried forward from earlier life.

Participants often described favorite garments that were constantly worn and reworn, becoming part of them, molded by their body and embodied practices (Lupton 144). Betty had a favorite cardigan, a chunky, hand-knitted, "jewel colored" garment, which she always wore,

and her neighbors and friends had come to identify her by it. Norma had been wearing the same sets of clothes for many years, and her daughter remarked, “Mum don’t believe in parting with clothes.” Norma replied: “I think it’s what you get used to and what you like, sort of thing . . . what you feel comfortable in.” Feeling comfortable is not merely about “the physical sensation of comfort” but also “the notion of aesthetic fit: the wearing of clothes which are ‘you’” (Woodward 73). For most men, fashion lies outside the dominant discourses of hegemonic masculinity (Kaiser 126). In the study they were often quick to distance themselves, saying: “I’m not a lot for fashion really,” or “I’m not really bothered with clothes.” However, this did not mean that clothes were unimportant to them. For many men, clothes were significant in terms of maintaining an aesthetic of smartness. Suits, in particular, embody masculinity and authority (Berger 31-40), broadening the shoulders and chest, and were often part of work biographies, particularly for middle-class men. The appeal of suits derived not only from the image they created, but also from how they felt against the body; as one participant said, he had “just felt right” wearing a tie and suit jacket. For working-class men of this generation, the ethic of smartness was more about neatness and respectability—polished shoes and a smart shirt and tie.

Clothing was also part of enacting femininities. Whether women defined themselves as a “skirt person” or a “trouser person” was significant, and going against this was perceived as a disruption to their sense of comfort and being in the world. One woman said, “I never wore trousers” and “I could never feel comfortable going out in trousers,” adding jokingly, “I’m a lady.” Skirts signify femininity at a symbolic and visual level, and also shape how gender is enacted at the level of the body, affecting the way the wearer moves and sits. In contrast, some women described themselves as feeling more “comfortable” in trousers. This reflects intersections of gender, generation, aging, and class. Some women had “got used to wearing trousers” or “slacks” during the war, or had embraced their wider popularization from the 1970s onwards. Others had switched from skirts to trousers in later life because their

legs were “not as nice” as when they were younger. Women in the sample who had embraced trousers were often middle-class, younger, and more career orientated, having had more opportunities for challenging conventional femininity (Skeggs 116).

The different femininities enacted through dress also reflected tensions in Simmel’s classic terms between “individualization and the desire to be merged in the group” (309), between an emphasis on glamour and a more conventional self-effacing aesthetic. Some women described themselves as a “plain Jane,” saying “I don’t like fussy, that’s not me.” There was often an emphasis on being “neat, clean and tidy,” which was particularly prevalent among working-class women, embodying a desire for respectability (Skeggs 87), and an ideal of femininity “associated with modesty, neatness, and domestic responsibility” (Dyhouse 3). This class-based pattern was also found in Twigg’s study of older women (*Fashion* 65). For other women, however, clothes were about glamor and standing out, the act of dressing up, and “the sensuousness of fur, silk and rich fabrics” (Dyhouse 4). Rita’s favorite clothes had been her beaver lamb fur coats, cocktail dresses, stilettos, and gold lame jacket, and she remained drawn to anything that “sparkled” or “stood out.”

Working-class participants—both men and women—often located their clothing practices within a history of “making do,” and were reluctant to spend money on new clothes or to throw out old ones. Norma’s preference for keeping old clothes reflected not only the comfort and familiarity embodied by these garments, but also her experience of being “very poor” growing up, and making do with “a lot of sort hand me downs.” Her daughter said: “I think that mentality still stayed with mum, because everything apart from us buying her new jumpers at Christmas, everything virtually has been handed down.” For working-class women, clothes were often literally part of the “fabric of their lives” (Goett), embedded in working histories as laundry workers, factory machinists, or dressmakers. Eva would only wear the clothes she had made herself, as her son Grant explained: “that’s what she is. That’s what she did. She was the best dressmaker . . . that’s what was important to her.”

Despite the importance of clothing in the narrative accounts of participants, as dementia progressed this was often increasingly in conflict with their ability to maintain dress and appearance at an embodied level. Though Norma emphasized the importance of being “clean, neat and tidy,” her daughter said that she often forgot or refused to change her clothing, wearing the same dirty clothes day after day. Maggie talked about how she enjoyed dressing up for family occasions, but her grand-daughter Ellie suggested that while she used to “dress up smartly for such occasions . . . now I don’t think so much . . . she’s in the habit of just putting the same clothes on every day.” Embodied competence could also be disturbed by the “disruption of the skilled, habitual body” (Phinney and Chesla 288). Douglas still “likes to be smart,” however his wife described how the practical, tacit knowledge involved in dressing was lost:

I don’t think he could do the . . . the bow [on shoe laces] now because he has a job with his dressing gown tie. . . . Some things I think would come automatic, like playing the organ but no, it’s completely gone and yet he’s played it for what? Thirty-five years and all the chords he knew off by heart, they’ve gone. You know, because it’s immediate memory (Cora, family carer, age 80).

The loss of these competencies could threaten continuity of self, disrupting the ability to perform embodied identity independently. Ellie described how her Nan—a fiercely independent woman—disliked accepting help with dressing and washing: “I’m not daft. I don’t need all this help. I can do it for myself so leave me be.” However, these experiences were often “re-edited” to minimize disruption (Golander and Raz 279). During the interview, Maggie quickly explained away difficulties with dress as “just part of life,” locating them within life-long experiences of coping with illness and war. Other women would downplay any difficulties, leaving them undiscussed, or resituating them in terms of “just getting on with things.” Men more readily accepted and openly discussed their need for assistance with dress, perhaps reflecting continuity with earlier domestic roles and gendered assumptions about being assisted. For instance, Douglas described his wife as being

“very good” and “looking after me”—she had always bought and maintained his clothing. Therefore difficulties with dress were differentially interpreted and constructed, reflecting gendered social location (Hulko, “From ‘Not’” 131).

NEGOTIATING FRAILTY AND DEMENTIA THROUGH DRESS

For people with dementia—and even more so for their relatives—dress can take on additional significance in terms of negotiating images of frail old age, avoiding, in particular, the “classic look of the dementia patient” (Twigg, “Clothing” 228). This can become an important part of maintaining social standing in everyday interactions. Particular styles of clothing embody the look of dementia or frailty, and were carefully avoided by some participants. Joe refused to wear the Velcro shoes a friend had passed on to him, telling his wife “they look like old people’s shoes.” As he explained: “I don’t want people to think ‘oh there’s the old boy’” (miming frail bodily movements). Rosemary, an eighty-two-year-old care home resident with mild dementia, still liked to wear her jeans, saying “nobody’s ever said that I’m too old for them,” and “I’m quite comfortable in them.” She described an aversion to Crimplene and “old fashioned” clothing, and still had her hair styled by her own hairdresser, avoiding the “old lady perm.”

Avoiding the look of dementia also involved fighting off signs of dereliction (Twigg, *Fashion* 64-65), epitomized in shabby, down-at-heel, neglectful dress that conveys negative meanings, eroding the moral standing of the individual and undermining their status as a “normal” person. This, however, becomes increasingly difficult with the progression of dementia. Families became vigilant in monitoring and concealing “little slips” of dress—visible food marks, gaping buttons, rips and tears—which could be interpreted as “signs” of decline. These efforts often focused on cleanliness and managing dirt: “I can’t bear an old man to smell an old man smell so I never ever let him get to that stage.” This is part of “curating identity” on the person’s behalf (Crichton and Koch 365), which we go on to discuss below. Maintaining social identity and standing therefore becomes not only about what is made visible, but also

about what is *concealed*, hiding “unacceptable signs of ageing” (Biggs 53).

While certain dress styles carry negative images of frailty and dementia, dress may also be used to challenge these associations, subverting expectations of what a frail older person would look like. Mark described how maintaining his Mum’s elegant appearance of “stylish ageing” (Church Gibson 323) challenged perceptions of her as a woman with dementia:

I could see my mum and there’s this white haired lady . . . in a very nice suit and looking very elegant and I thought *she’s in there with hundreds and hundreds of people there and nobody knows that if you were to go up to her and ask her what her name was and where she lives she couldn’t tell you.* (Mark, family carer, age 55)

These practices could continue within the context of care. Douglas described how he likes to “surprise” people at the day center by dressing in clothes which are “too smart,” and not expected in this context, while Rita still liked to “stand out” in the care home in bright colors and sparkles. Her vivid outfits resist invisibility and the dull colors associated with old age (Twigg, *Fashion* 63), reasserting images of glamour and vibrancy. Her son reflected that: “I think she sort of likes . . . her own individualness in the sort of the conformity that you have in a care home, so she likes to be a little bit different.”

Dressing well could still elicit positive reactions within the context of care, and we observed residents with dementia—and care workers—complimenting one another’s clothing, remarking “I like your dress” or “that’s a nice color,” issuing affirmations that could act back on the self in a positive way. This demonstrates how clothes have potential for challenging the stigma associated with dementia, enabling more positive images. As Mark explained: “I think it normalizes it in a strange way, and makes dementia more acceptable.”

However, the use of clothing to resist images of frailty remains bounded within age ordered norms of dress (Twigg, *Fashion* 25), often taking place through reasserting dichotomies of normal/abnormal aging and “othering” residents with more advanced dementia. Rosemary was keen to emphasize that she was “not like the others” in the care home,

and read the disorderly appearance and dress of other residents as a sign that they had “really gone downhill.” Similarly, while Rita’s and Douglas’s dress expresses continuity of self, it also establishes their *difference* from other residents in care settings. As one care worker described, residents would still comment on appearance and use it as basis for making social judgments: “I’m all right but she’s really peculiar.” Dress, therefore, becomes part of the interactional order within care homes, a means by which categories of “normal” and “demented” were attributed (Golander and Raz 274) as well as holding potential for resisting these categories.

CLOTHES AS BIOGRAPHICAL OBJECTS

Clothes, through their status as “biographical objects,” can also challenge the reduction of people with dementia to the condition. Entangled in the events of a person’s life, they are vehicles for selfhood (Hoskins 2). As material objects, they can be powerful triggers for memories (Ash 20), making visible the owner’s personal history and past identities. Participants often had “kept clothes” in their wardrobes—garments that were rarely worn, but were retained because of their significance as a source of memories and identity (Banim and Guy 204). These included outfits bought for special occasions—weddings and anniversaries—or that embodied their “working self” (Woodward 54). For middle-class men these were generally suits, but for retired builder Tom, work clothes consisted of jeans, old shirts, jumpers, and boots, marked with plaster and holes. His wife said that he liked to wear them “pottering about in the garage and things . . . he just likes to feel he’s at work I think.” Tom struggled to express his connection to these clothes verbally, but through wearing them, he was able to reenact this aspect of his identity and remind himself and others about who he was.

For people living in care settings, small aspects of dress could similarly act as “transitional objects,” carrying with them connections to personal histories and memories (Parkin 303-20). Items of dress such as rings, necklaces, or cufflinks could embody memories of people or significant transitions, evoked through touching or holding. In this context, handbags could act as “identity kits” (Nippert-Eng 57), containing items

relating to the owner's identity and personal history (Buse and Twigg 18). For instance, Marie's handbag contained a pair of ballet slippers, a gold locket holding pictures of her parents, an army cap badge belonging to her Uncle, and her "hairdressing kit," all reflecting various facets of her occupational history, interests and family relationships. Hazel's daughter had deliberately put together a range of objects in one of her old handbags, including one of her drawings, a photograph album, knitting needles and wool, which provided a resource throughout the day, but also carried forward her identity. For Marie and Hazel, handbags acted as a "talking point" with staff, residents and visitors—a prop in telling their stories.

Clothes could therefore act as a springboard for telling broader life narratives in care settings, evoking memories of relationships, past identities, and life events (Weber and Mitchell 4). This could provide a basis for more positive care interactions. During interview discussions and reminiscence groups, clothes triggered memories through their tactile and sensory properties (Woodward 5). For instance, when participants held a pair of vintage silk stockings, they remarked on their "silky feel" and "fineness," conjuring up memories of getting ready and making up for a night out. The sensory properties of dress provided a way to interact even with people who had advanced dementia—particularly women—who would still respond to the tactility of fabrics like velvet and silk, smiling or exclaiming "ooh" as they touched them. As one care worker said: "They might not know what color it is . . . but it's the *feel* of it." During one reminiscence group, a woman who had worked as a dressmaker grasped one of the garments and held on to the fabric tightly, smiling. One of the care workers remarked: "No she can't say. But you remember, don't you?" Staff sometimes reported that using clothes in reminiscence sessions helped them to see the person differently. They learned things that they "didn't know before."

Nonetheless, despite their significance in triggering memories, clothes could also constitute a site of forgetting. Recently acquired clothes were most likely to be forgotten, reflecting the increased impairment of

short-term memory, but also the fact that these clothes were not entangled with histories and memories in the same way (Banim and Guy 206). For example, while Alice kept asking to see her wedding dress, her husband said, “if you bought her something new this week she wouldn’t ask for it” and would not remember it. The remembering and forgetting of clothes is suggestive of their varying affective significance; emotionally powerful memories remain more resilient as dementia progresses (Westius, Andersson, and Kallenberg 489). Diane could recollect the histories of her favorite garments, but had amassed a large pile of jeans in her room which she could not remember or recognize as her own. This suggests the significance of supporting people to maintain clothes that look and *feel* familiar. Clothes that have no functional use can still represent an “extension of the self” (Belk 140-42) as identity and memories in material form.

“CURATING” IDENTITY THROUGH DRESS

When people with dementia are no longer able to maintain their identity through dress, family carers—and sometimes care workers—become engaged in the process of “curating” identity on their behalf (Crichton and Koch 365). Identity becomes “intercorporeal” and “intertwined” (Weiss 22), involving practices of “working together” to maintain continuity of self (Ward, Campbell, and Keady 71). Family carers drew on biographical, tacit knowledge of the daily routines and nuances that formed part of the person’s embodied identity, as Ellie said with regard to her Nan: “I’ve grown up with her always having certain routines . . . she always had her lipstick on and the way she did her hair and the way she dressed.” As her Nan’s dementia had progressed, Ellie had taken these practices “on board,” carrying them out “instinctively.” She said: “I think it’s important to me because I know, I understand, it’s important to her.”

Curating identity is embedded in intimate family relationships and the “depth of connection” to the person. It therefore becomes more challenging in care settings, where workers lack this depth of biographical knowledge. Family carers often sought to pass knowledge on through

verbal and written accounts, pictures, and the materiality of clothes, hoping to “carry forward identity” into the context of care (Crichton and Koch 372). However, formally documented biographical information was in general scant, and detailed knowledge could only be acquired by talking to the families: “Well mum always has tights. She never wears high heel shoes . . . she’ll always have a scarf . . . she never wears her jewelry except for Sunday.” Where the person did not have any relatives and was unable to convey this information themselves, workers found it extremely difficult: they felt they were “leading it blind” or “starting with a blank piece of paper.”

By piecing together information from the person with dementia with their relatives, and looking for clues in photographs and care plans, some care workers became drawn into the process of curating identity. Working with residents over a long period could, in those with sensitivity, facilitate a nuanced understanding of different personal styles. Darren, who had worked in one of the homes for ten years, described his clients: “Rita’s a bit more likes sparkly . . . Hetty’s just sort of always been quite smart, you know.” Rather than imposing a normative idea of older femininity, such as that associated with the “lounge standard resident” (Lee-Treweek 53), he recognized their different femininities and dress styles. When one woman reached the advanced stages of dementia, he tried to help her maintain the person she was: “she was like a real sort of lady . . . so I sort of keep that in mind,” dressing her in the smart clothes and pearls that “if she was . . . as she was back then would like to be in.”

However, the curation of identity through dress raises complex questions about agency and identity. Feminist and disability studies perspectives challenge the idea that identity is rooted in the autonomous, bounded body (Weiss 32-33), instead emphasizing the relationality of our “becoming in the world with others” (Hughes et al. 269). Family carers sought to maintain “seamless” continuity with earlier dress choices, and some participants agreed that their relatives “did very well.” However, in the advanced stages of dementia, the expressed wishes of the person become difficult to interpret, so that relying on a judgment of “what

they would choose” had potential for mistakes. The identities, intentions, and aesthetic preferences of the various actors could become confused. Mark admitted that, though he sought to “carry on” his Dad’s individual style, this merged with his own preferences: “There’s always an element of what I would like as well—there’s always going to be like that . . . but I wouldn’t put [him in] anything that’s just not him.” In the advanced stages of dementia, maintaining visible continuity became perhaps more important to family carers than the person themselves, as Mark said: “If you change the way they look . . . I think you’d be coping with losing another part of them.”

There is a tension here between maintaining continuity and recognizing how clothing preferences and identities change (Twigg, “Clothing” 228). Clothing choices alter throughout the life course, and family carers also described specific changes in dress style following the onset of dementia. Unless these changes in dress were seen as embarrassing or inappropriate, families generally supported the person to maintain their “their own volition” even “if they’re doing something that’s slightly random.” However, sometimes new clothing choices were described as inappropriate, clashing, or disheveled, and family carers and care workers were torn between respecting the person’s wishes and avoiding the images of dementia and dereliction described above.

Changing bodies and care needs could also disrupt continuity, particularly in care settings, as routines of care and institutional laundry regimes meant that vulnerable fabrics like silk and wool were discouraged in favor of stretchy, easy-care garments. Smart trousers were sometimes replaced with jogging bottoms to increase ease of dressing. Jane agreed that her husband Tom “wouldn’t have been seen dead” in jogging bottoms when he was younger, but now with incontinence, and struggling with zips and buttons, these were easier for him to manage. Women were sometimes encouraged to wear trousers rather than skirts, which were easier than “dealing with tights,” and prevented them from rolling up their skirt in public, revealing the body inappropriately. These adaptations of dress therefore involved balancing continuity in embodied

identity with maintaining “dignity.” They were often described as more “comfortable,” however, as noted above, comfort lies not only in the physical feel of clothes, but also in the sense of social ease that comes from habitual comportment (Woodward 73; Twigg, *Fashion* 22)—something such modifications of dress can undermine.

Sometimes people with dementia resisted changes to their dress. For instance, Donald protested about the jogging trousers the care home had bought him, so they were resigned to dressing him in smart trousers again. Resistance was sometimes enacted at a bodily level (Kontos, “Redefining Agency” 105-21): Tom would often get changed out of his joggers into his scruffy work jeans, while Mabel, a care home resident with advanced dementia, would sometimes tear off her plastic bib at mealtimes, exclaiming “this is terrible.” However, the possibilities for agency diminished with progression of dementia. Norma initially had a “big argument” about switching to flat shoes, but her daughter had since replaced her heels with flats, reflecting, “I took all the others away so she’s not missed them really . . . if you remove them they don’t always remember.” Similarly, Mabel’s daughter described how she would have “kicked up merry hell” if given trousers to wear in the past, but as her dementia has advanced, she “just accepts” them. The close involvement of relatives and care workers in curating identity could thus support continuity of identity and agency, but it could also undermine this, prioritizing “dignity” and ease of care.

CONCLUSION

This article highlights the ongoing significance of dress in the lives of people with dementia, showing how clothes, which embody diverse life histories and memories, continued to be part of how older people with dementia expressed their identity. The study therefore contributes to a growing recognition of the body and embodiment as significant to understandings of dementia (Downs, “Embodiment” 368) by highlighting the role of dress in this context. In doing so, it also contributes to new ways of thinking about dementia and sheds new light on the everyday lives and experiences of people living with the condition. However,

the article also highlights tensions and difficulties relating to dress in the context of dementia. The involvement of others in “curating” identity helped to maintain the self at a direct bodily level, but at times raised questions about whose wishes and intentions were being inscribed on the body.

Within dress studies, the aging body has traditionally been neglected, reflecting a bias toward the youthful, expressive, and subversive. Nonetheless, research on the experiences of older women is growing, illustrating the significance of dress as part of performing identity and negotiating bodily aging, as highlighted by the recent academic conferences “Mirror Mirror,” and “(a)Dressing the Ageing Demographic.”³ Our research extends these arguments into the context of dementia and frailty, shedding light on experiences of frail older bodies and on tensions between continuity and change, using dress as a “method of inquiry” (Weber and Mitchell 4). In doing so, the article takes dress studies into new ground, highlighting everyday, mainstream practices and experiences of dress, showing how dress is a site of struggle as well as of agency and subversion.

The findings of our research also hold significance for age studies more generally. Although research on older bodies is growing, it often focuses on age resistance and on younger bodies that encapsulate the new representations and possibilities for growing older. This leaves “deep old age” increasingly marginalized, surrounded by a “failure of meaning” (Cole qtd. in Featherstone and Hepworth 44). Here, by contrast, we show that material and cultural analyses can also shed light on the condition of frail old people. Their experiences do not lie beyond such approaches. Using dress as a lens, our research illustrates how cultural meanings of dementia and deep old age, tensions between structure and agency, and “self, identity and the body” (Katz and Laliberte-Rudman 49) are negotiated in everyday life. It adds to a rethinking of identity, embodiment, and agency in the fourth age, and their location in interrelationships with other bodies and “things” (Hepworth 125-35; Gilleard and Higgs, “Ageing, Abjection” 139-40). The article thus contributes to

the wider cultural turn in aging studies and its extension to all categories of the aged.

NOTES

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²See, for example, Crane, *Fashion and its Social Agendas*; Breward, “Cultures, Identities, Histories”; and Davis, *Fashion, Culture and Identity*.

³“Mirror Mirror” and “(a)Dressing the Aging Demographic” were conferences held in London, United Kingdom, in autumn 2013, focused on aging, clothes, and appearance.

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Christina Buse is a Research Fellow in the Department of Sociology, University of York, UK, working on the ESRC funded “Buildings in the Making” project with Sarah Nettleton and colleagues. She completed her Ph.D. in Sociology at the University of York, examining older people’s usage of new information and communication technologies (ICTs). She has since worked as a researcher at the Universities of Leeds and Kent, working on the embodied health and social care needs of older people and family carers. Her recent research includes a study of dementia and dress with Julia Twigg. Readers may write to Cristina Buse at C.Buse@leeds.ac.uk.

Julia Twigg is Professor of Social Policy and Sociology at the University of Kent, UK. She has written widely on age and embodiment, recently focusing on the role of the dress in the cultural constitution of age. She published *Fashion and Age: Dress, the Body and Later Life* and *The Body in Health and Social Care*. With Christina Buse she has written on dementia and dress. She is coeditor with Wendy Martin of the *Routledge Handbook of Cultural Gerontology*. Her website related to dress and age is clothingandage.org. Readers may write to Julia Twigg at J.M.Twigg@kent.ac.uk.

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