Progress on Understanding Ageism

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Almost 50 years ago, ageism (negative attitudes toward older adults) was introduced as a significant social issue. Since then, the worldwide population of adults ages 60 and over has rapidly become the fastest growing age group, making the study of ageism an even more pressing social issue. This review outlines three broad and intertwined themes as the field continues to develop a fuller understanding of ageism: studying both positive and negative aspects of ageism, taking a lifespan focus, and integrating the study of ageism with the study of aging. The review also focuses on several timely subthemes such as the need and benefits of expanding measures of ageism and intervening variables, expanding the diversity of study samples, expanding the research methodologies, and expanding the contexts under study toward greater cross-cultural and within-culture investigations. This review and the international, interdisciplinary research showcased in this special issue are intended to set the stage for the next wave of international research on ageism across the lifecycle and of effective interventions and public policies supporting older adults and positive intergenerational relations.

Almost 50 years ago, “ageism” was introduced as a “serious national problem” in a landmark article in 1969 by Robert N. Butler, who later became the first Director of the National Institute on Aging in the United States. Butler described ageism as “a form of bigotry we now tend to overlook: age discrimination or ageism, prejudice by one age group toward other age groups” and as “a deep seated uneasiness on the part of the young and the middle-aged – a personal revulsion to and distaste for growing old, disease, disability; and fear of powerlessness, ‘uselessness,’ and death” (p. 243). Since then, more and more scholars around the world have documented forms of ageism in their respective countries. Also, the worldwide population 60 years and older has been growing rapidly, doubling from 1980, and representing the fastest growing age group, which has been projected...
to reach 22% of the worldwide population in 2050 (WHO, 2015). Thus, understanding ageism has become an even more pressing social issue than it was nearly 50 years ago.

In 1980, Butler assembled a special issue of *Journal of Social Issues*, placing a much needed spotlight on ageism and urging the field toward greater study of ageism. Similarly, in 2005, Todd Nelson assembled scholars for an issue of *Journal of Social Issues* and called upon the field to make more progress on understanding ageism. Now, in 2015, we see that the calls are increasingly being answered, and the literature on ageism is continuing to expand. There is not sufficient space in this article to take stock of all the exciting developments and trends in the field of ageism. In this review of the literature on understanding ageism, we outline three broad and intertwined themes that we see as particularly pressing as the field continues to develop a fuller understanding of ageism: studying both positive and negative aspects of ageism, taking a lifespan focus, and integrating the study of ageism with the study of aging. We also focus on several subthemes that grow out of these broad themes such as the need for and benefits of expansions in terms of measures of ageism and intervening variables, of the diversity of study samples, of the research methodologies, and of the contexts toward greater cross-cultural and within-culture investigations. The set of international, interdisciplinary scholars whose work is showcased in this special issue in *Journal of Social Issues* help illustrate these important developments and trends as will be outlined below. This special issue is intended to help set the stage for the next wave of international research on ageism across the lifecycle and for making greater progress on designing and implementing effective interventions and public policies supporting older adults and positive intergenerational relations.

**Broad Themes in the Expansion of Understanding Ageism**

*From a Negative Focus to Integrating a Positive Focus*

The literature on ageism began with a focus on the problem of negative ageism and has slowly integrated a more positive focus, although we suggest more is needed to achieve a more balanced and thus fuller study of ageism. Before Butler (1969) coined the term “ageism” with a focus on negative attitudes toward older adults, the imbalanced focus on negative perceptions of aging had begun in the literature such as with the first measures of attitudes about older adults in the United States (Tuckman & Lorge, 1953). Tuckman and Lorge (1953) described “the problem” as “In our culture with its emphasis on youth and speed, old people are expected to play a decreasingly active role in our social and industrial life. These cultural expectations encourage the formation of misconceptions and stereotypes about old age” (p. 249). Only 11 of the 137 survey items were positive items. Books directed at summarizing the ageism literature also focused on negative
ageism (see Palmore, 1999). As Editor of a special issue of *Journal of Social Issues* in 1980, Butler expanded on a negative ageism definition noting that “there are three distinguishable yet interrelated aspects to the problem of ageism: 1) Prejudicial attitudes toward the aged, toward old age, and toward the aging process, including attitudes held by the elderly themselves; 2) discriminatory practices against the elderly, particularly in employment, but in other social roles as well; and 3) institutional practices and policies which, often without malice, perpetuate stereotypic beliefs about the elderly, reduce their opportunities for a satisfactory life and undermine their personal dignity” (p. 8). Butler (1980), then, distinguished between two negative forms of ageism: benign ageism “as discomfort, anxiety, or fear of aging” and malignant ageism as a “more damaging form of stereotyping in which older people are characterized as being worthless” (p. 9). Perhaps due to some acceptance or validation of the negative basis of physical aging in early writings (e.g., Tuckman & Lorge, 1953) or lack of documentation of positive aspects of aging (e.g., see Palmore, 1979), denouncing negative ageism lags behind other important areas of attitudes toward groups based on race or gender. For example, the American Psychological Association’s (APA) resolution that APA is against ageism in all its forms, did not occur until 2002 (APA, 2002). According to WHO (2015), “ageism may now be more pervasive than sexism or racism.” In 2005, Todd Nelson as Editor of a special issue of *Journal of Social Issues* suggested that the lagging focus on ageism has to do with the institutionalism of ageism such as in the negative portrayal of older adults in the mass media as well as in the general beliefs that aging and getting older are inherently negative.

Scholars have continued to document negative ageism such as characterizing older persons as burdensome, forgetful, ill, incompetent, and unattractive (e.g., Cuddy, Norton, & Fiske, 2005; Kite, Stockdale, Whitley, & Johnson, 2005). Negative behavior toward older persons has also been well-documented, including disrespectful, avoidant, and patronizing behavior as well as unwarranted simplified and slow communication, physical and financial neglect and abuse, and unwanted segregated housing (e.g., Hummert, & Shaner, 1994; Kite et al., 2005; Palmore, 2004). Ageism in the workplace, for example, continues to be a common occurrence including negative treatment in the general work environment, less access to salary increases and promotions, forced early retirement, and discriminatory practices in hiring (e.g., Carrns, 2013; Duncan & Loretto, 2004; Gee, Pavalko, & Long, 2007; North & Fiske, 2012; Rampell, 2010, 2011). Moreover, ageism and age discrimination continue to be documented in health contexts including in terms of the health care of older individuals; problems that could be treated with medication are instead considered a natural part of the aging process or ignored as reflecting the stereotype that older adults complain more as they age; there is also elder abuse by caregivers (e.g., Coudin & Alexopoulos, 2010; Dong, 2014; Nussbaum, Pitts, Huber, Krieger, & Ohs, 2005; Rabin, 2011). Furthermore, researchers have pinpointed the negative effects of ageism across
contexts on people’s cognitive, mental, and physical health (e.g., Abrams, Eller, & Bryant, 2006; Hausdorff, Levy, & Wei, 1999; Hess, Auman, Colcombe, & Rahhal, 2003; Levy, 2009; Levy, Slade, & Gill, 2006; Swift, Abrams, & Marques, 2013). Positive ageism also exists, but positive outlooks of aging and older persons have been studied much less so (e.g., Cuddy et al., 2005; Hummert, Garstka, Shaner, & Strahm, 1994; Kite et al., 2005; Levy, Slade, Kunkel, & Kasl, 2002; Palmore, 1990; Swift et al., 2013). In Tuckman and Lorge’s (1953) measure of attitudes, noted earlier, while only 11 (or 8%) of the 137 survey items were positive, some of the positive items were endorsed by a majority of participants and at a comparable degree to the negative items. As examples, 93% of participants reported that older people were proud of their children; 83% reported that older people are good to children; 64% of participants reported that older people are kind; 81% of participants reported that old people love life. Measurement tools that emphasize negative assessments of old age have persisted in the literature (as elaborated on in the section on Expansion of the Range of Measures of Ageism).

Erdman Palmore (1990, 1999, also see 1979) was one of the early pioneers who wrote about positive ageism and noted positive views. Palmore (1990) in his drive to highlight positive forms defined ageism as “any prejudice or discrimination against or in favor of an age group” (p. 4). Positive views of aging and older adults include characterizations of older adults as calm, cheerful, helpful, intelligent, kindly, neat, and stable as well as more reliable and careful workers, engaging in less criminal activity, participating more in voluntary organizations, and as having higher social status in terms of wealth and holding positions of power in companies and government (e.g., Brewer, Dull, & Lui, 1981; Cuddy et al., 2005; Hummert, 1990; Palmore, 1979; Patterson, Forbes, & Peace, 2009). Additionally, older adults may receive unique positive treatment such as discounts, low-rent housing, pensions, special health care, and tax exemptions (e.g., Palmore, 1979, 1990).

General calls by leaders in the field, such as Erdman Palmore (e.g., 1979, 1990, 1999), to address the positive side of aging and ageism have not gone unheard by the field, but more progress is needed. An emphasis on negative views of aging and older persons may be intentional in the sense of bringing to light that ageism and negative views of aging are nontrivial problems in numerous countries warranting study and action (e.g., Butler, 1969). Nonetheless, an unintentional underemphasis on the study of positive views of aging and older persons is still problematic, resulting in an insufficient understanding of the actual range of views of aging and older persons including the psychological, social, and political consequences of such views as well as an insufficient understanding of how to improve the lives of older persons and improve cross-age relations (see also Palmore, 1990, 1999; Levy, under review). As will be seen in subsequent sections on subthemes related to this broad theme (such as Expansion of the Range of Measures of Ageism and
Expansion of the Cross-Cultural Study of Ageism), there are numerous concrete ways to engender a more balanced study of positive and negative ageism.

**Taking a Lifespan Focus**

Although Butler’s (1969) definition of ageism suggested that middle-age adults in addition to young adults are negative toward older adults, research on ageism has historically been narrow in scope, examining attitudes toward older adults (adults 65 and older) among one age group of participants (e.g., young adults). Scholars have called for the study of ageism to go beyond these traditional assessments by taking a more lifespan approach (e.g., Giles & Reid, 2005). Several articles in this special issue represent this trend toward considering a wider age range of participants. It remains timely to make progress in the study of ageism as a lifespan issue since there is not agreement on what constitutes old age, people are living longer which influences conceptions of old age, and aging is a lifelong issue influencing people along the age continuum (WHO, 2015).

To begin, there is a lack of agreement in what constitutes old age, with old age seemingly representing a potentially wide and ever changing age range. Accordingly, Giles and Reid (2005) emphasize that age is a “social construction.” People have different notions of old age depending on where they are on the age continuum, and as individuals age, their perceptions of what constitutes “old” or even “middle-aged” or “young” changes. For example, in a study by Davidovic, Djordjevic, Erceg, Despotovic, and Milosevic (2007) in response to the question, “how old is an old man?” U.S. children (ages 10 to 16, mean age = 13) reported between the ages of 35 to 80 years (mean 63), nurses (ages 20 to 47, mean age = 34) reported between the ages of 50 to 75 years (mean 60), and older adults (ages 65 to 85, mean age = 75) reported between the ages of 45 to 80 years (mean age = 67). As pointed out by Chrisler, Barney, & Palatino (2016), old age is defined differently as applied to oneself versus others and along gender lines as exemplified by the first author’s 90-year-old mother who “regularly refers to an acquaintance of her same age, as “the old man,” whereas she does not think of herself as an “old woman.” (pp. 84–85).

Even though people have different constructions of age depending on their vantage point, conceptions of age can take on new meanings as people are living longer. In the mass media and on television, there is a shifting of views of old age with popular sayings such as “65 is the new 50” (Rose, 2010). Thus, some of the cut-offs for different age groups may be seen as arbitrary as pointed out by Kooij and Zacher (2016). At the same time, the youth-centered focus of numerous modern societies suggests that a wide age range of adults are considered old and/or approaching old age as antiaging campaigns address increasingly younger age groups as opposed to older age groups (e.g., see popular antiaging skin care
regimen recommendations for women in their 20s and 30s in magazines such as Allure: http://www.allure.com/skin-care/anti-aging-skin/).

Thinking about age as more fluid impacts study designs and analytic strategies in studies of aging and ageism. One way to approach age as a lifespan issue is to investigate age as a continuous variable in study designs, which is the strategy used by Kooij and Zacher (2016), Macdonald and Levy (2016), and Ramírez and Palacios-Espinosa (2016). Kooij and Zacher (2016) suggest using “old” and “young” as descriptive labels and note how using age as a discrete variable “has negative consequences, such as loss of information on individual differences and associated reduction of statistical power” (p. 145). The study of a broad age range is, for instance, increasingly important in studies of age discrimination at work as age discrimination seems to be not a concern just among older adults but also among middle-aged and young adults (e.g., Duncan & Loretto, 2004; Gee et al., 2007).

As we consider age as a more fluid and potentially shifting social construction, it is imperative to consider people’s perceptions of their age and how that influences judgments of aging and behaviors. Consistent with this, Macdonald and Levy (2016) suggest greater focus on identity issues such as the degree to which people identify with their age group across the age continuum (also see Sneed & Whitbourne, 2005). Previous research has focused on people’s identification with old age (specifically as an older worker), with the assumption that identification has negative consequences in the workplace. However, Macdonald and Levy (2016) found that age identity was related to increased job satisfaction, commitment, and engagement. This highlights the potential positive influence of age identity, and the need for further exploration.

Thus, taking a lifespan approach suggests re-evaluating traditional conceptions of age. As elaborated in the sections on the “Expansion of Diverse Study Samples” and the “Expansion of Research Methodologies,” a lifespan approach suggests considering a wider age range of study participants who are evaluating a wide age range of older adults (and are told specifically which age range or age to think of) and if possible, including longitudinal assessments.

Integrating the Study of Ageism with the Study of Aging

As the literature continues to move toward integrating greater study of positive ageism and expanding to take on a lifespan approach, our understanding of ageism would also benefit from greater movement toward embracing relevant literatures. Despite the tremendous strides that have been made in the ageism literature over the past 50 years, it is still somewhat not well integrated with relevant literatures such as the aging literature (and as later discussed, the ageism literature would also benefit from greater links to the literatures on racism and sexism, see section on “Expansion of Diverse Study Samples”). Leading scholars have continued to note
the need for a more complete and integrative approach. Robert Kastenbaum in the Encyclopedia of Ageism (Kastenbaum, 2005) noted that while there is research on aging among individuals and on ageist attitudes and behaviors, “ageism and theories of aging tend to bypass each other. Furthermore, none of the major theories of aging were designed to explain ageism, nor has much effort been made to discover possible links” (pp. 318–319).

The aging and ageism literature have sometimes been on parallel paths, and greater integration would expand the ageism literature in productive and important ways. The literatures on aging and ageism each began with a negative focus; however, the literature on aging has evolved with a more balanced focus. Early research on aging focused on pinpointing and understanding age-related declines relative to declines related to disease. Eventually, the literature on aging turned toward examining “normal” or nondiseased aging in greater detail with a focus on usual development along with “successful” aging resulting in theorizing, research, and interventions focusing on optimal or successful aging, such as being free of diseases and being cognitively and physically engaged and fit throughout the lifespan (e.g., Nesteruk & Price, 2011; Rowe & Kahn, 1987; Schulz & Heckhausen, 1996; Wolff, Warner, Ziegelmann, & Wurm, 2014). The large literature on aging continues to focus on understanding both deficits or diseases with age and high functioning aging, but generally is not well-linked to ageism research (e.g., see Kastenbaum, 2005).

The time seems ripe to move toward greater integration with the aging literature as the literature hopefully continues to move toward a lifespan approach and expands the study of the positive side of ageism. The lifespan approach moves the study of ageism away from a narrow span of old age (however old age is defined) and more along a continuum of aging from birth to death, which places the study of ageism on a complimentary parallel course with the aging literature.

The ageism literature could become more integrated with the aging literature in numerous ways. For one, the ageism literature could incorporate greater study of the positive views of physically and cognitively fit older adults. These additions could be applied to measurement tools as elaborated in a later section on a wider range of ageism measures. The ageism literature could address these positive successful aging characterizations along with the traditional characterizations of older adults as calm, cheerful, helpful, intelligent, kindly, neat, and stable (e.g., Brewer et al., 1981; Cuddy et al., 2005; Hummert, 1990; Palmore, 1999; Patterson et al., 2009).

Expanding measurement tools toward greater positive assessment of aging also promotes an expansion of the study of ageism in particular contexts. For example, most research on workplace contexts focuses on negative views of aging employees, consistent with concerns about age discrimination. With expanded measures, researchers could be better poised to study older workers who defy the negative stereotypes including older employees and older employers who are
well-respected leaders and resources in their companies. Similarly, where much of the focus in health contexts has been on negative views of aging patients due to concerns about neglect and abuse of older adults, there can also be a focus on aging patients who are physically or cognitively fit. This also could include a greater focus on views of older doctors, practitioners, and nurses who challenge the stereotype of older adults as poorly functioning in a domain. Focusing on the study of positive views of successful aging is timely as more adults may stay or need to stay in the workforce longer. Individuals that do not embody successful aging may be evaluated more negatively, which is something to be considered and studied.

Beyond advancing the ageism literature with insights from the aging literature, a greater consideration of the interface between aging and ageism within theorizing, research, and practice would yield fruitful insights. Considering the role of aging would help to expand the study of ageism and move beyond the traditional type of studies which focus on judgments of aging and less so on participants’ perceived and actual aging. Studying both perceptions of aging along with participants’ perceptions of their own physical and mental health with age provides a fuller understanding of the experiences of ageism, the interconnections with health, and can help pinpoint avenues for intervention (e.g., Abrams et al., 2006; Lamont, Swift, & Abrams, 2015; Levy, 2009; Levy et al., 2006; Swift et al., 2013). As an example, Becca Levy’s stereotype embodiment theory (2009) focuses on individuals who may embody the stereotypes of aging in self-fulfilling ways that influence their health. In a 23-year longitudinal study of U.S. adults ages 50 and over, Ng, Monin, Allore, and Levy (2016) found those in agreement with positive stereotypes about physical health during retirement lived 4.5 years longer and those with positive stereotypes about mental health during retirement lived 2.5 years longer. Several other articles in this issue collectively focus on the interface between aging and ageism across several distinct cultures. Bai, Lai, and Guo (2016), in a study of adults 60 years and older in China showed that older adults who see themselves as a burden on their families and society report heightened depression, even when controlling for current physical and functional health and quality of family relations. Similarly, Ramírez and Palacios-Espinosa (2016) in a study of adults ages 44 to 89 in Colombia showed that endorsement of negative stereotypes of older adults is related to negative views of one’s own physical health.

A greater connection between the aging literature and the ageism literature can be an interdisciplinary effort, as illustrated by contributors to this special issue. Ageism and aging are studied and addressed by scholars in numerous fields including communications, gerontology, medicine, psychology, public health, social work, and sociology (e.g., Abrams et al., 2006; Garstka, Hummert, & Branscombe, 2005; Levy, 2009; Nelson, 2009; Palmore, 2004).
Subthemes in the Expansion of the Understanding of Ageism

In the previous sections, we reviewed three broad and intertwined themes in the expansion of the ageism literature toward a fuller understanding of ageism in contemporary times. In the next sections, we consider several themes that grow out of these trends and that can further advance the ageism literature.

Expansion of the Range of Measures of Ageism

One subtheme growing out of the three broad themes is the need to expand measures of ageism including both positive and negative ageism across the life-cycle. This necessitates casting a wider net in assessing ageism. As noted earlier, Butler (1969) originally defined ageism as including prejudice and discrimination and in 1980 he expanded his original definition of ageism to include institutional practices and policies. Nonetheless, measures have been limited in scope, with many focusing on stereotyping and negative stereotyping in particular. To aid in the expansion of research in this area, we suggest studying ageism as a tripartite attitude (e.g., see Kite et al., 2005) including a positive and negative focus, with a stereotyping or cognitive component (e.g., associating positive and negative attributes), a prejudice or affective component (e.g., liking or disliking, valuing or devaluing), and a discrimination or behavioral component (e.g., behaving positively or negatively, approaching or avoiding group members, voting for or against policies or practices that hurt or aid the group).

In terms of stereotyping measures, the image of aging scale (Levy, Kasl, & Gill, 2004) is one of the only evenly balanced measures with one negative item and one positive item in each of nine domains: “activity (walks slowly, active), appearance (wrinkled, well-groomed), cognition (senile, wise), death (dying, full of life), dependence (helpless, capable), personality (grumpy, positive outlook), physical health (sick, healthy), relationships (lonely, family-orientated), and will to live (will to live, given up)” (p. 209). Using this measure allows participants to rate both positive and negative perceptions separately for each domain, which is different from the more commonly used semantic differential where participants are forced to choose a response on a continuum of positive to negative. Allowing participants to rate positive and negative aspects of one particular domain separately is potentially more informative. Indeed, Levy et al. (2004) lamented that “an age-stereotype scale for systemically assessing both the positive and negative perceptions that individuals hold of old people is absent from the literature” (p. 208).

Following on this, Ramírez and Palacios-Espinosa (2016) in creating the first measure of stereotyping to be used in Colombia built upon Levy et al.’s (2004) measure to study the effects of positive and negative stereotyping on aging anxiety and the physical and mental health of a community sample of Colombians. In
addition to general measures of positive and negative stereotyping about aging, scholars have begun to create stereotyping measures that are contextualized, thereby allowing a more fine-grained analysis of the context under study. Ng et al. (2016) examine older adults’ (50 years and older) positive and negative stereotypes of retirement (a transition they are approaching) to help predict longevity.

Similar to research on stereotyping of older adults, research on discrimination tends to focus on negative discrimination such as in the workplace (Bevitt, Horne, & Waldmann, 2006; see also Carrns, 2013). Consistent with integrating a positive focus into the study of ageism, Macdonald and Levy (2016) focus on individuals’ perceptions of negative discrimination as well as social support in the workplace.

Studies that focus on all aspects of positive and negative ageism attitudes (stereotyping, prejudice, and discrimination) can offer a more comprehensive understanding of the nature of ageism. In addition, expanding the study of ageism includes an expansion of related or intervening variables such as aging anxiety. Aging anxiety has not been a central variable in studies of ageism. Most research has focused on what Butler (1980) referred to as “malignant ageism” and relatively less research has focused on what he defined as benign ageism “as discomfort, anxiety, or fear of aging” (p. 9). Applying their Terror Management Theory to ageism, Martens, Goldenberg, and Greenberg (2005) highlighted the potentially central role that aging anxiety might play in negative ageism. Ramírez and Palacios-Espinosa (2016) in a community sample of Colombia adults ages 44 to 89 years old found that less agreement with negative stereotypes about older adults, greater perceptions of social support, positive perceptions of mental and physical health predicted less aging anxiety, and additionally, greater aging anxiety was related to expecting worst physical health in the future. Macdonald and Levy (2016) examined aging anxiety in U.S. adults ages 18 to 80 years old, in relation to workplace outcomes, finding that aging anxiety is negatively related to job satisfaction, commitment, and engagement.

Shifts in the growing aging population along with a youth-centered focus in many cultures point to the need to focus not just on ageist attitudes, but also on intergenerational relations. North and Fiske (2013b, 2016) have developed an individual differences measure, Prescriptive Intergenerational–Tension Ageism Scale, to help disentangle the nature and scope of intergeneration relations, and its three subscales (Succession, Identity, and Consumption) allowing for a fine-grained analysis of such relations. In their study of 18- to 75-year-old participants, North and Fiske (2016), showed that younger participants in their study who agreed more with the succession subscale (that older workers should turn over resources to younger workers) reported wanting to invest less in older worker training.

Abrams, Swift, and Drury (2016) also make a unique contribution to this line of inquiry by examining characteristics that are associated with younger versus older workers. In pilot work, they determined characteristics associated with
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younger workers (e.g., learning new skills, being creative) and older workers (e.g., dealing with people politely, carefulness). Then, across three studies, Abrams et al. (2016) show that profiles of job candidates possessing these traits influenced willingness to hire them. Specifically, they found that job candidates with characteristics of younger workers were more likely to be chosen to be hired than job candidates with characteristics of older workers.

The theme of expanding the study of ageism to encompass a lifespan approach also suggests changes to the instructions or age specificity given in measures. As noted earlier, age has different definitions along the age continuum. Thus, in measures of ageist attitudes, it is important for the instructions to specify what is meant by “older adult” to increase predictive validity. For example, Ramírez and Palacios-Espinosa (2016) specify the age of the target group (65 years old) in the instructions for their new stereotyping measure, which allow for firmer conclusions to be drawn from their study. The gender of older adults that participants have in mind while they evaluate measures of ageist attitudes might also be considered as there are differences in attitudes toward older women and men (see Chrisler et al., 2016, also see Kite et al., 2005).

Expansion of Diverse Study Samples

Related to expanding the measures of ageism and with consideration of participants’ definitions of “older adults,” there is a need to expand the sample of study participants to be more diverse in order to more fully address positive and negative ageism across the lifespan. The history of ageism research includes a limited range of study participants, lacking representative samples of people along the age continuum, and it seems that some of the typical study participants are skewed toward those with a negative outlook of older persons (such as younger adults).

In 1982, Palmore (1982) noted that “Most of the research has been on small groups of college students” (p. 342). Other unrepresentative samples of participants include health care providers such as medical students, nursing students, and social workers who are targeted because of a concern over their potentially negative attitudes and behaviors toward older persons including elder abuse (see Palmore, 1999; Wang & Chonody, 2013). Kite et al.’s (2005) meta-analysis of ageist attitudes highlighted the paucity of research on middle-age adults, while Kwong See and Heller (2005) noted that there is little research with children. Such limited samples constrain the generalizability and conclusions that can be drawn from the findings and is another way that our understanding of ageism is lacking. It is not clear how perceptions of older adults and aging change over time, as individuals and close others age. Using more diverse populations, in terms of age, gender, and race/ethnicity, for example, will allow researchers to gain a greater understanding of ageism (see Chrisler et al., 2016).
Contributors to this special issue are part of the trend toward investigating age-diverse samples of participants. Several contributors recruited community samples across a relatively wide age range such as Bai et al.’s (2016) study of adults ages 60 to over 80 years of age, Kooij and Zacher’s (2016) study of adults ages 18 to 69 years old, Macdonald and Levy’s (2016) study of adults ages 18 to 80 years old, Ng et al. (2016) study of adults ages 50 to 94 years old, North and Fiske’s (2016, Study 2) study of adults ages 18 to 75 years old, and Ramírez and Palacios-Espinosa’s (2016) study of adults ages 44 to 89 years old.

Although age-diverse samples can allow for greater understanding of ageism across the lifespan, it is important that these types of samples are not treated as homogenous, thereby limiting the potential for uncovering differences within age ranges. For example, there is a history of treating a wide age range of older adults as one age category. Neugarten (1974) originally proposed using age distinctions such as “young-old” (55–75) and “old-old” (75+). Defining age groups across a 20-year span limits nuanced understandings of the issues faced by different age groups (e.g., North & Fiske, 2013a). Adults in the young-old category, for instance, may face different kinds of age discrimination compared to adults in the old-old category (North & Fiske, 2013a) and in order to effectively inform efforts to reduce ageism and change policies, it is important to investigate these differences. Sometimes, age categorization is also contextualized (Giles & Reid, 2005) such as in health care contexts where health benefits are realized at certain ages or in the workplace where retirement ages may vary by occupation.

Expansion of Research Methodologies

In moving toward a comprehensive approach to the study of ageism across the lifespan, researchers are moving toward expanded methodologies and study designs. Research on ageism has generally tended toward one-time survey studies using correlational designs. Experimental designs expand our understanding of the causes and consequences of ageism. Abrams et al. (2016) and North and Fiske (2016) offer new insights into the persistent problem of age discrimination in the international workforce. In the Abrams et al. (2016) study, the descriptions of potential employees are manipulated to reflect characteristics thought to differentiate older and younger workers. As such, Abrams et al. (2016) are able to draw causal inferences about the role of age-based profiles on hiring decisions. In the studies by North and Fiske (2016), the age and behavior of presented targets are manipulated to assess how perceptions change as a result of and affect workplace discrimination. The experimental design of their study allows North and Fiske to draw causal inferences about how the age and behaviors of workers can influence perceptions. Together, Abrams et al.’s and North and Fiske’s findings have the potential to inform workplace policies.
Contributors to this special issue also showcase the study of ageism with longitudinal designs across transitional periods, which together highlight a lifespan approach. Both Kooij and Zacher (2016) and Ng et al. (2016) examine age-diverse samples, allowing the authors to cast a wide net for the study of views and the effect of aging over time. Kooij and Zacher (2016) examined learning goal orientation and attitudes toward learning and development among participants ages 18 to 69 years of age at two time points over a 3-month period. The results show that the more individual’s view their time remaining at work as expansive, the more likely they are to be focused on learning and have positive attitudes toward learning and development in the workplace. Ng et al. (2016) utilize a lifespan perspective in their study of participants ages 50 years and over across 23 years to examine the effect of stereotypes of aging on long-term health. Specifically, Ng et al. (2016) explore stereotypes of retirement as a time of lost meaning and devaluation in society and show that those who endorse positive stereotypes about physical health during retirement lived 4.5 years longer and those with positive stereotypes about mental health during retirement lived 2.5 years longer. These data are used as a springboard to speak to public policies and programs for reducing negative stereotypes of retirement.

The transition from work to retirement is a significant one in the ageism literature. It is also one that highlights the need to study ageism along with aging and to examine gender differences. The transition to retirement can trigger depression, and there are nontrivial gender differences such as women’s differing employment patterns, including lower-paid jobs and thus lower benefits (such as social security in the United States; Price, 2000), and sometimes family and caregiver responsibilities can affect these aspects of women’s employment (Duncan & Loretto, 2004). This area of research is growing with more qualitative studies, considering gender, racial/ethnic differences, and considering other transitions that may simultaneously occur such as the transition from work to retirement to volunteering, particularly examining women as there is an expectation in cultures like the United States that retired women volunteer (Nesteruk & Price, 2011). Other intervening transitions include becoming a grandparent and/or moving into a multigenerational family along with retiring and potentially shifting to volunteer work need greater study (e.g., Nesteruk & Price, 2011). With people living longer and thus potentially in longer retirement periods than ever before, there is a need for greater expansion of the study of transitions periods including the retirement period.

Expanding the study of ageism to include more experimental studies, longitudinal studies (including across transitional periods), as well as collecting qualitative and observational data will contribute to a better understanding of the causes and consequences of ageism.
Expansion of the Cross-Cultural Study of Ageism

There has been an expansion of the study of ageism around the world, which is consistent with a growing worldwide aging population (WHO, 2015). At the same time, the expanding international scope corresponds to the pursuit of both positive and negative ageism. Early research on ageism tended to be conducted in Western cultures in Europe and North America where negative ageism was predominately documented. The study of ageism has expanded to include countries such as Brazil (e.g., de Paula Couto & Koller, 2012), China (e.g., Bai et al., 2016), Colombia (e.g., Ramírez & Palacios-Espinosa, 2016), Israel (e.g., Bodner, Bergman, & Cohen-Fridel, 2012), New Zealand (e.g., O’Sullivan & Ashton, 2012), and Taiwan (e.g., Lien, Zhang, & Hummert, 2009). Some of the greatest expansion of research on ageism has been to other cultures where scholars sought to explore positive ageism as well as the coexistence of positive and negative ageism.

Historically, older people were valued and respected members of society across cultures for their vast knowledge of the culture (e.g., Palmore & Maeda, 1985). Scholars have noted a contemporary shift toward a general devaluing of older persons in modern societies especially in Western cultures (e.g., Nelson, 2005; Schoenberg & Lewis, 2005). For example, Butler (1969) in his landmark article introducing the problem of negative ageism, noted—“might it [ageism] not be especially evident in America; a society that has traditionally valued pragmatism, action, power, and the vigor of youth over contemplation, reflection, experience, and the wisdom of age” (p. 243). Moreover, the predicted East-West differences are expected to derive from Chinese traditions placing more respect on aging and obligation to care for older adults, referred to as filial piety (e.g., Schoenberg & Lewis, 2005).

Results have been somewhat mixed on these predicted cross-cultural differences (e.g., Cuddy et al., 2005). Löckenhoff et al.’s (2009) study of 26 cultures in six continents showed small, significant differences supporting prior work that study participants in Eastern cultures report more positive attitudes toward aging than those in Western cultures. But, some suggest that globalization including shifts toward Westernalization and youth culture are challenging filial piety (e.g., Schoenberg & Lewis, 2005) and there is evidence of negative attitudes toward older adults in countries such as Thailand (Sharps, Price-Sharps, & Hanson, 1998) and similar attitudes in comparison studies of countries such as China and the United States (Boduroglu, Yoon, Luo, & Park, 2006; for a review of children’s attitudes, see Montepare & Zebrowitz, 2002). Further suggesting that more research is needed on these complex issues, there is long-standing research showing the coexistence of positive and negative characterizations of aging and older persons in Western cultures (e.g., Cuddy et al., 2005; Hummert et al., 1994; Kite et al., 2005; Levy et al., 2004; Palmore, 1990). More exclusively
positive views of aging and older persons have been identified in societies around the world such as Taiwan (e.g., Lien et al., 2009).

Accordingly, this special issue spotlights insights from scholars in Asia (China, Bai et al., 2016), Europe (England, Abrams et al., 2016; Netherlands, Kooij & Zacher, 2016), South America (Colombia, Ramírez, & Palacios-Espinosa, 2016), and North America (Chrisler et al., 2016; MacDonald & Levy, 2016; Ng et al., 2016; North & Fiske, 2016).

Moving forward, it remains pressing to continue to expand the cross-cultural study of ageism. More research exploring the East-West similarities and differences in attitudes toward aging and ageism is needed. Research on similarities and differences between subcultures, such as those based on religion (Bergman, Bodner, & Cohen-Fridel, 2013), that exist within larger generalized East-West cultural distinctions is also needed, especially with regard to how surrounding dominant culture may or may not influence these subcultures and perceptions of older adults and aging. There are notable gaps in the literature as well. More studies are needed outside of Europe and North America (such as Bai et al., 2016, study in China; Ramírez and Palacios-Espinosa’s, 2016, study in Colombia) and that investigate multiple countries within the same study (such as Kooij & Zacher, 2016, study of the Netherlands and the United States). The world population over 60 years old is expected to double from 12% to 22% between 2015 and 2050, with a large proportion of older people projected to be living in low- and middle-income countries (WHO, 2015). Additionally, in the age of globalization (e.g., Chiu, Gries, Torelli, & Cheng, 2011; Diaz & Zirkel, 2012), it is even more pressing and important to consider culture and cross-culture contact as we seek to understand the wide range of forces influencing people’s beliefs and behaviors relating to age across the lifespan.

**Expansion of the Within-Culture Study of Ageism**

Along with the expansion of the study of ageism cross-culturally, there have been expansions in the study of the ageism within contexts within cultures. Early research on ageism tended to focus on negative stereotyping of older adults in general or in the study of negative stereotyping perpetuated by the mass media in Western cultures (e.g., see Nelson, 2002). The focus of ageism research has become more contextualized, focusing on ageism in particular contexts.

This special issue is organized into two subsections (health contexts and employment contexts) to spotlight two significant and timely contexts under study. Recent economic problems around the world, along with a surge in the aging population worldwide, have resulted in some newer and deeper challenges in terms of hiring and work longevity as well as the health care of and treatment of older adults (e.g., Coudin & Alexopoulos, 2010; Greenhouse, 2014; Rabin, 2011; Rampell, 2010, 2011). As articles in this special issue illustrate, these health and
employment contexts pose substantial and timely public policy implications and the contributors articulate how such challenges translate into public policy needs such as more and better protective laws from the government as well as greater monitoring and intervention strategies. Other environments that are not covered because of space reasons include the home and school environment, which are also significant contexts in the study of ageism.

Four articles in this special issue expand our understanding of pressing issues in the ageism literature concerning the health and well-being of older adults. Good health care and supportive caregivers can help older persons work and live longer making it imperative to better understand the factors that affect the health and well-being of older adults (e.g., Rabin, 2011). As people live longer, an unprecedented majority of middle-age people will have parents who are still alive (WHO, 2015). Understanding the roles of family and community coordination and support, then, is essential (e.g., Abrams et al., 2008; Hummert, 2007). At the same time, research needs to consider the intervening roles that prevalent stereotypes play on care providers as well as directly on older persons as ageism can influence people’s cognitive, mental, and physical health (e.g., Abrams et al., 2006; Hausdorff et al., 1999; Hess et al., 2003; Lamont et al., 2015; Levy, 2000; Levy, 2009; Levy et al., 2006; Swift et al., 2013). Addressing this need, contributors in the health context section of this special issue from Canada, China, Colombia, and the United States discuss empirical data speaking to the health and well-being of older adults through the lens of the effects of general cultural stereotypes as well as specific stereotypes about retirement, of discrimination during medical treatment, and perceived family and community support (Bai et al., 2016, Chrisler et al., 2016; Ng et al., 2016; Ramírez & Palacios-Espinosa, 2016).

The work environment, like the health environment, is an important contemporary and long-lasting context in the study of ageism. Adults spend a significant amount of time throughout their lives working, and the current economic situation around the world has impacted young to older workers (e.g., Gee et al., 2007). For example, there is some evidence that young workers have fared the worst during the poor economy in terms of securing jobs (e.g., Greenhouse, 2009). At the same time, there is evidence that older workers approaching retirement potentially face forced early retirement; older workers further from retirement have also been laid off from work to make room for cheaper, younger labor, presumably with superior skills, and some older workers have seen deep cuts in their pay (e.g., Rampell, 2010). The decline in world economies means that people in general have fewer resources, but older persons are unique in lacking the time to make up losses and staying unemployed longer (e.g., Rampell, 2011). Suggesting potentially worsening conditions, some predict that an increasing aging workforce will translate into a rise in age discrimination in countries such as England and the United States (e.g., Bevitt et al., 2006; see also Carrns, 2013). Some governments around the world have acknowledged this pressing problem with policies aimed at protecting workers of all ages. Moreover, some companies have launched creative solutions
such as allowing older workers unique part-time work including in warmer climates (e.g., Greenhouse, 2014). In an effort to better understand ageism in the workplace and inform policies and intervention efforts, the articles in the workplace section of this special issue advance the field by focusing on factors that help or hinder successful aging in the workforce including stereotypes of younger and older workers, intergenerational tension at work, indirect everyday experiences with age discrimination at work, psychosocial factors such as age identity and work centrality and their relation to job longevity as individuals age (Abrams et al., 2016; Kooij & Zacher, 2016; Macdonald & Levy, 2016; North & Fiske, 2016).

Collectively, the international contributors from this special issue from organizational behavior, medicine, psychology, public health, and social work draw on strong theoretical traditions and sophisticated multimethods (cross-sectional, longitudinal, and experimental) to offer empirical evidence to fill gaps in our understanding, bring together emerging perspectives, and offer insights into these two key domains of health and employment.

Conclusion

People are living longer, and the world is benefitting in numerous ways from being populated by a greater number of older adults who are outstanding leaders and resources of knowledge and expertise and who help raise, mentor, and support younger individuals. This review highlights three broad, intertwined, and timely themes toward making progress on understanding ageism; studying positive and negative ageism, studying ageism as a lifespan process, and studying ageism along with aging. Several key subthemes emerge from this review as well such as the need and benefits of cross-cultural analyses and more in depth within culture analyses of contexts as well as the expansion of study designs, of study samples, and of measures of ageism. We look forward to the next wave of basic, applied, interdisciplinary, and international research on positive and negative ageism across the lifecycle that moves us closer to a fuller understanding of ageism and promoting positive aging and intergenerational relations.

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