Eradication of Ageism Requires Addressing the Enemy Within

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Dr. Palmore’s (2001) Ageism Survey is a much-needed contribution toward creating awareness about a form of prejudice and discrimination that has been largely ignored by our society. However, the survey omits measuring two components of ageism that have emerged from a series of recent findings. These studies have found that ageism can operate (a) implicitly, or without awareness, and (b) in the form of aging self-stereotypes, or older individuals’ beliefs about the elderly population. To achieve Dr. Palmore’s goal of establishing an “epidemiology of ageism” as a first step toward its eradication,” it seems that these two components might warrant consideration.

Implicit Ageism

The groundwork for current studies of implicit ageism was laid more than one hundred years ago by William James’s studies of automatic processes and Sigmund Freud’s exploration of the unconscious. Recent social psychological research has employed new techniques for studying these phenomena. Although the studies on implicit prejudice have focused on racism and sexism, a growing number examine the operation of implicit ageism.

Several aspects of implicit ageism deserve mention. First, “implicit ageism” is defined as the thoughts, feelings, and behaviors toward elderly people that exist and operate without conscious awareness or control, with the assumption that it forms the basis of most interactions with older individuals (Levy & Banaji, in press). Second, every socialized individual who has internalized the age stereotypes of their culture is likely to engage in implicit ageism. Third, like explicit ageism, implicit ageism can be positive or negative; however, because most age stereotypes in the United States tend to be negative (Kite & Johnson, 1988), implicit ageism also tends to be mostly negative (Perdue & Gurtman, 1990). A survey of implicit ageism found that 95% of the participants had negative views of old people; this is a higher proportion than for implicit racism or sexism (Banaji, 1999).

A number of studies have found that a disassociation exists between implicit and explicit measures of prejudice. That is, individuals who are opposed to racism or sexism on explicit surveys often demonstrate prejudice toward African Americans or women on implicit measures (Blair & Banaji, 1996; Dasgupta, McGhee, Greenwald, & Banaji, 2000; Devine, 1989). My colleagues and I have found that regardless of individuals’ explicit views of aging, they can be influenced by negative implicit age stereotypes (Levy, 1996; Levy, Hausdorff, Hencke, & Wei, 2000; for a review of the primary forms of implicit measures used to measure age stereotypes, see Levy & Banaji, in press).

If individuals are not aware that a negative stereotype of age has been automatically triggered by a person’s older age, they are likely to attribute their behaviors (e.g., refusal to hire or to rent an apartment) to another factor that better fits their preferred self-images as reasonably fair individuals. Thus, rather than acknowledge that “I hired a younger person in preference to an older person,” a rationalization, such as the older applicant’s personality or training, might be evoked.

Further, if such explanations for ageist behavior are given to older people, they may accept these attributions, especially if the relative youth of the other candidate is not known. Even if older persons suspect a behavior was influenced by age, they may not want to admit to themselves that they have encountered ageism. The reason for this is that the aging process has been societally defined in negative terms (Butler, 1980; Zebrowitz & Montepare, 2000). It may, therefore, be easier for individuals to not acknowledge that they have been designated, through ageist acts, as members of a stigmatized group: the old.

Given the multitude of choices most people have for their free time, the behavior that may be especially vulnerable to implicit ageism is the failure to visit an older person. Unlike hiring, for instance, this type of behavior allows for benign neglect. Research has found that implicit evaluations influence whether an individual approaches or avoids another person (Chen & Bargh, 1999). Further, if the avoidance is due to implicit ageism, the individual avoiding the
older person may attribute this distancing to other factors, and the older person who is not visited may blame the lack of contact on the busy life of the younger person. There could be a broader impact of this avoidance insofar as meaningful intergenerational contact may be one of the most effective ways to reduce ageism, or at least prevent its growth (Hewstone, 1996).

**Aging Self-Stereotypes**

Traditionally, “ageism” has been defined in terms of attitudes and actions directed toward older individuals by younger individuals who hold stereotypes about aging. However, research suggests that after a lifetime of exposure to a culture’s age stereotypes, older individuals direct these age stereotypes inward.

A series of studies has examined how aging self-stereotypes affect older individuals’ thinking, behavior, and functioning. In the first study, we found that older Chinese individuals reported more positive stereotypes of aging and performed better on memory tasks than their same-age peers in the United States (Levy & Langer, 1994). A subliminal age-stereotype priming method was developed for follow-up studies in order to randomly assign participants to either a positive or negative age-stereotype condition while keeping the participants blind to the intervention (Levy, 1996). Using this method, we have found that older individuals who are exposed to negative age stereotypes tend to demonstrate worse memory performance, self-efficacy, handwriting, and will-to-live (Levy, 1996; Levy, 2000; Levy, Ashman, & Dror, 1999). In contrast, older individuals exposed to positive age stereotypes tend to show positive changes in these same areas.

As a consequence of their ability to operate on an implicit level, aging self-stereotypes are not likely to be perceived as a cause of cognitive, behavioral, or health-related outcomes. A health problem, for instance, might be attributed to an inevitable decline associated with old age, rather than to a response triggered by an age stereotype. One area in which this process may occur is how older individuals experience cardiovascular stress. We found that aging self-stereotypes can influence older individuals’ cardiovascular function without their awareness. Participants who were subliminally exposed to negative-age stereotypes demonstrated a heightened cardiovascular response to stress, measured by blood pressure and heart rate, as compared with those exposed to positive age stereotypes (Levy et al., 2000). The negative age stereotypes acted as direct stressors, whereas the positive age stereotypes helped protect participants from experiencing cardiovascular stress.

In these studies, my colleagues and I have tended to explore only one dependent variable at a time. In the real world, it seems likely that implicit self-stereotyping occurs in several spheres at once, and that these effects are mutually reinforcing. For example, if an old person is exposed to a negative age stereotype, this may both impede memory and elevate an individual’s stress level. The impaired recall may exacerbate stress, and the elevated stress may further impede memory performance.

**Conclusion**

It is important to record acts of ageism that are perpetrated against elderly people, the aim of Dr. Palmore’s (2001) Ageism Survey, both because these events are injurious in themselves and because they may trigger responses in older individuals without their awareness. When these responses are observed by younger individuals, there is a risk that the observations will confirm negative age stereotypes and, thus, increase the likelihood that ageist acts will be perpetuated.

The research on implicit ageism and aging self-stereotypes suggests a need to be concerned about the multiple ways in which negative ageism infiltrates into our own thinking and behaviors. To eradicate ageism we need to become aware of not only the blatant forms of ageism, but also its more subtle forms that operate within us all, regardless of age or explicit views about equality.

**References**


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