



RESEARCH BRIEF

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HOW NEGATIVE ATTITUDES TOWARDS AGEING AFFECT HEALTH IN LATER LIFE ¹

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Societal attitudes towards ageing are predominantly negative. Common age-related stereotypes are that older adults are physically weak, forgetful, stubborn and selfish and there is widespread consensus about these attributes across different cultures and generations. These concepts of ageing are commonly understood “truths” about the ageing process but according to the World Health Organisation there is surprisingly little medical or psychological evidence to suggest that they apply to most older adults [4]. The vast majority of older adults are not physically, cognitively or mentally impaired.

Negative attitudes about ageing result in social inequalities. “He told me I was too old for that”, “she assumed I couldn’t understand because of my age” and “I was denied employment because of my age” are just some of the examples of everyday ageism that 77% of older adults surveyed by the Ageism Survey in the UK experienced [5]. In some medical situations older adults are less likely to be given the same treatment as younger adults even when it would likely be effective [6]. Older adults are more likely to be excluded in social situations. They also have poorer employment prospects than their younger counterparts. These examples show how negative attitudes towards ageing can affect societal equality but recent research shows an even more worrying trend, negative attitudes towards ageing affect not only how older adults are perceived but also how well they function.

Studies have shown that confronting an older person with negative stereotypes about ageing can reduce their physical ability, alter heart activity, reduce memory performance and even diminish will to live during the course of an experiment. These effects are only present for a short time during the experiment and then disappear afterwards. With the omnipresence of ageism in society, however, older adults are constantly faced with negative attitudes towards ageing. Frequently even older adults themselves have negative attitudes that are not necessarily founded in experience but are based on attitudes they have held throughout life. Having negative expectations of one’s own ageing can have emotional knock-on effects on mood, life satisfaction and self-rated health. Yet, as experimental studies have shown, short-

¹ This Research Brief draws on a number of recently published papers that look at various aspects of negative attitudes to ageing (Robertson et al 2015 [1-3]).

term exposure to negative stereotypes can also cause real short-term changes to physical health. The next important question is therefore whether long-term exposure to negative attitudes towards ageing affects long-term changes in physical health as well. Data from The Irish Longitudinal Study on Ageing gives us a unique opportunity to study this as we track health changes over time in a nationally representative sample of community dwelling older adults. We asked three main research questions:

- 1) Do negative attitudes towards ageing predict change in older adults' physical abilities?
- 2) Do negative attitudes toward ageing predict change in older adults' cognitive abilities?
- 3) When older adults are already physical frail do negative attitudes towards ageing contribute to further ill health?

HOW WERE ATTITUDES TOWARDS AGEING ASSESSED?

In the first wave of TILDA participants completed a questionnaire in which they were asked to say how much they agreed with 17 statements such as “I have no control over the effects which getting older has on my social life”, “As I get older I can take part in fewer activities”, “As I get older I get wiser” and “As I get older there is much I can do to maintain my independence.” The more older adults agreed with the negative statements like the first two, and the less they agreed with the positive statements like the last two, the worse their attitudes towards ageing.

WHAT TYPE OF COGNITIVE AND PHYSICAL MEASURES WERE TAKEN?

TILDA participants completed tests of cognitive and physical function at wave 1 and again at wave 2, two years later. We assessed their memory using lists of words that they had to remember later, their ability to pay attention during boring tasks, and how quickly they could come up with lists of different words or animals. They also completed a series of physical tasks to assess how frail they were. Participants completed the Timed Up-and-Go, a simple mobility test where they stood up from a chair, walked 3 metres, turned around, walked back to the chair and sat down again. They were asked to squeeze a dynamometer as tightly as possible to measure their strength. They were also asked questions about how physically

active they were, their mood, what medications they were taking, what, if any, health conditions they had and whether they were working or not.

HOW DO ATTITUDES TOWARDS AGEING AFFECT HEALTH?

Older adults with negative attitudes towards ageing at wave 1 showed a decline in walking speed and cognitive abilities in wave 2. This was true even after we accounted for their health, the medications they were on, their mood, their life circumstances and other health changes that had occurred over the same 2 year period [1,2]. Furthermore, negative attitudes towards ageing seemed to affect how different health conditions interacted. Frail older adults are at risk of multiple health problems including worse cognition. In the TILDA sample frail participants with negative attitudes towards ageing had worse cognition compared to participants who were not frail. However frail participants with positive attitudes towards ageing had the same level of cognitive ability as their non-frail peers [3].

WHAT DO THESE FINDINGS MEAN?

These findings have important implications for the media, policymakers, practitioners and society more generally. The way we think about, talk about and write about ageing may have direct effects on health. Everyone will grow older and if negative attitudes towards ageing are carried throughout life they can have a detrimental, measurable effect on mental, physical and cognitive health. All areas of society, including older adults themselves, need to be aware of subscribing to unrealistically negative attitudes about ageing. The media can take steps to avoid biased language when referring to older adults and ageing. Practitioners can check themselves for bias in offering treatments. Finally researchers and policy makers can work together to develop and implement societal-wide interventions to target attitudes and perhaps, ultimately, find novel ways of maintaining health in later life.

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Researchers interested in using TILDA data may access the data for free from the following sites:

- Irish Social Science Data Archive (ISSDA) at University College Dublin
<http://www.ucd.ie/issda/data/tilda/>
- Interuniversity Consortium for Political and Social Research (ICPSR) at the University of Michigan
<http://www.icpsr.umich.edu/icpsrweb/ICPSR/studies/34315>

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