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Ageism and aging anxiety among young adults: relationships with contact, knowledge, fear of death, and optimism

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ABSTRACT

Ageism refers to discrimination against individuals based on age, while aging anxiety is defined as fear about getting older. We were interested in whether ageism and aging anxiety had distinct correlates among young adults. The purpose of this study was to explore the effects that knowledge of aging, contact with older adults, fear of death, and optimism have on ageism and aging anxiety in young adults (N = 623). Knowledge of aging and contact with older adults were associated with lower ageism. Aging anxiety was associated with greater fear of death and lower optimism. Results indicate that the positive effects of contact and knowledge on the attitudes of young adults toward the older adult population. Increased education on the aging process and improving quality of contact with older adults could help reduce ageism and ageing anxiety.

Ageism and aging anxiety

Ageism refers to stereotyping and/or discriminating against older people on the basis of their chronological age (Iversen, Larsen, & Solem, 2009). Ageism resembles many other forms of prejudice, such as sexism or racism, in that it is discrimination against a specific group of people (Palmore, 2001) and that victims experience discrimination due to their personal characteristics (Aosved, Long, & Voller, 2009). However, age is not entirely similar to other demographic characteristics. Whereas other demographic and group categorizations remain constant over time, age changes. Ageism is conceptually different in that most individuals will (Troen, 2003) and expect to (Bergman & Bodner, 2015; Bowen & Skirbekk, 2016) become old themselves. In other words, individuals of one racial or ethnic group generally do not expect to eventually become members of another group, but younger individuals will themselves become old (Allan & Johnson, 2008; Bousfield & Hutchinson, 2010). While ageism and classism are more conceptually related in that age and class are mutable (Arum, Beattie, & Ford, 2010; Mehta, 2005), social class can change at any time (Levine, 2006) while aging is a linear process (Mehta, 2005). Thus, for younger individuals, older adults are a social outgroup; however, for most, older adulthood is also a future personal status.

Whereas ageism refers to attitudes toward and discrimination against members of an outgroup on the basis of age, aging anxiety represents individuals' personal fears about the changes associated with aging (Rittenour & Cohen, 2016) – that is, ageism is about "them;" aging anxiety is about "me." Aging anxiety is distinct from ageism; however, they are positively associated (Allan, Johnson, & Emerson, 2014; Bodner, Shira, Bergman, Cohen-Fridel, & Grossman, 2015). Aging anxiety is distinct from ageism in that it has been linked with psychological well-being (Lasher & Faulkender, 1993). Aging anxiety appears to tap into attitudes about individuals' personal future; however, as with ageism, those very attitudes might be informed by knowledge of and contact with older adults.

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Contact with older adults

The contact hypothesis (Allport, 1955) maintains that interpersonal contact is an effective way of reducing prejudice between majority and minority groups. Contact with older adults has been shown to have a positive effect on the level of interest undergraduates have in the aging process (Gorelik, Damron-Rodriguez, Funderburk, & Solomon, 2000). Such contact with older adults does not lead to positive aging attitudes (Angiullo, Whitbourne, & Powers, 1996; Carmel, Cwikel, & Galinsky, 1992); however, a combination of frequency and quality of contact does (Bousfield & Hutchison, 2010). Quality of contact refers to the type of interactions that take place in that the contact between the older and younger adults could be positive or negative in nature. Therefore, the effect of contact on the attitudes young adults have towards the older adult population could be the result of interactions that are only positive in nature. Previous research has found that young adults who have a close relationship with an older adult, or at least experience with them, have more positive attitudes toward older adults (Hawkins, 1996). In this study, we are measuring contact in terms of both quality and frequency of contact.

Knowledge of aging

Knowledge concerning the aging process can serve to work against ageist behaviors (Stahl & Metzger, 2013). A body of research has found that knowledge about aging is associated with more positive aging attitudes (Darling, 2016; Kotter-Grühn, 2015). Conversely, research has indicated that a lack of knowledge correlates with higher levels of ageist behaviors (Cherry et al., 2016; Stahl & Metzger, 2013). Undergraduates who take courses on aging exhibit fewer ageist behaviors and more knowledge concerning the ageing process compared to their peers who have not enrolled in such courses (Dorfman, Murty, Ingram, & Li, 2007; Harris & Dollinger, 2001; O'Hanlon & Brookover, 2002).

Fear of death

According to terror management theory (Becker, 1973), human actions are largely motivated by an unconscious fear of death. Keeping the fear of death unconscious causes death to be personified in the "other" (Chonody, Webb, Ranzijn, & Bryan, 2014). Individuals then project death onto other people, giving anything that represents death outgroup status, and fear them as if they are death itself (Boudjemadi & Gana, 2012; Nelson, 2005). Younger adults may develop ageism and aging anxiety because, to them, older age is symbolically linked with death itself (Martens, Goldenberg, & Greenberg, 2005). Older adults represent their own future death, and, therefore, they buffer against this threat by assigning older adults outgroup status (Bodner, 2009). Therefore, fear of death has been linked with ageism in young adults (Bodner, 2009; Martens, Greenberg, Schimel, & Landau, 2004; O'Connor & Mcfadden, 2012).

Optimism

Dispositional optimism refers to having generally positive expectations toward the future (Carver & Scheier, 2014). Those with dispositional optimism have generally reported higher levels of desirable outcomes most likely due to having a more positive outlook on their lives (Busseri & Choma, 2015). Previous research has evidenced that an individual's expectations regarding the future can have an effect on them in the present, with optimistic people reporting lower levels of distress across a variety of situations (Andersson, 1996). This has been attributed to individuals with dispositional optimism having effective methods of coping, favoring approach coping strategies, although they are able to adjust depending on the situation (Nes & Segerstrom, 2006). Dispositional optimism, ageism, and aging anxiety are related to an individual's attitudes toward the future. Ageism and aging anxiety can

be related to the attitudes the person have toward their own eventual ageing. As dispositional optimism is linked with the ability to more effectively cope, we posit that optimistic individuals will be better equipped to handle the stress of aging (or potentially aging).

The current study

In this study, we explored contact with older adults, knowledge of aging, fear of death, and optimism as correlates of both ageism and aging anxiety. We were interested in the notion that, among younger individuals, ageism and aging anxiety might have distinct correlates, which might inform intervention and education efforts aimed at dispelling ageism and aging anxiety. Ageism among younger adults is a negative attitude toward a social outgroup. As such, consistent with the contact hypothesis, we hypothesized that (H_1) knowledge of aging would be associated with lower ageism and (H_2) contact with older adults. Consistent with the notion that aging anxiety represents personal fears about getting older, terror management theory contends that, to young adults, older adults may symbolize their own mortality. This could lead to young adults assigning older adults outgroup status to manage the threat of death, in which we would expect to see that fear of death is associated with ageism. Therefore, we expected fear of death to have a relationship with aging anxiety in the form of personal fears about the future. Priming young adults with thoughts of death would make them more likely to view older adults as an outgroup and thus activate ageism. However, we conceptualized fear of death as explicit, self-attributed fears of death and dying. In looking at the explicit fear of death, we would expect fear of death to be (H_3) associated with greater aging anxiety. Aging anxiety represents personal fears about getting older – that is, about the future. As such, we hypothesized that aging anxiety would be associated with (H_4) lower optimism.

Methods

Participants

Participants consisted of undergraduate students (N = 623; 73.50% female) aged 18–30 (M = 20.60, SD = 2.19) enrolled in a psychology course at a large public university in the southern USA Participants were recruited through a department research website where students volunteer to participate in studies in exchange for course credit. In this case, students volunteered to take a survey regarding health and perceptions of aging. Regarding ethnicity, 296 (46.50%) of identified as white/Caucasian, 97(15.60%) as black/African American, 141 (22.60 %) as Hispanic/Latinx, 66 (10.60%) as Asian/Pacific Islander, two as Native American (0.30%), and 21 (3.40%) as another ethnicity.

Procedure

This study was approved by the university's committee for the protection of human subjects, and informed consent was obtained from all participants. Participants completed the survey online and earned course credit for their participation.

Measures

Knowledge

The Palmore Facts on Aging Quiz (FAQ; Palmore, 1988) is a measure of misconceptions concerning aging (e.g. "*Physical strength declines in old age*"). The FAQ consists of 25 true–false items. Correct items were summed so that higher scores indicated greater knowledge on the aging process.

Contact

Contact/quality of contact with older adults was measured using four items taken from Drury, Hutchinson, and Abrams (2016). The first item asked, "*How often do you have contact with older adults?*" and participants responded on a Likert-type scale ranging from 1 = *very rarely* to 7 = *very often*. Next, participants were asked to rate the quality of their contact with older adults on three 7-point bipolar items: *unpleasant-pleasant, voluntary-involuntary* (reverse-scored), and *bad quality-good quality*. These four items were averaged, with higher scores indicating greater contact/quality of contact with older adults. In this study, Cronbach's alpha = .67.

Fear of death

The Death Attitude Profile – Revised (DAP-R; Wong, Reker, & Gesser, 1994) is a self-report measure of attitudes toward death and dying. We used the seven items comprising the fear of death subscale (e.g. *"Death is no doubt a grim experience"*). Participants responded on a 7-point Likert scale. Items were averaged so that higher scores represented greater fear of death. In this study, Cronbach's alpha = .90.

Optimism

The Life Orientation Test – Revised (Scheier, Carver, & Bridges, 1994) is a self-report measure of dispositional optimism. The scale consists of 10 questions, four of which are filler questions meant to disguise the meaning of the scale. The rest of the scale consists of three optimistic phrases (e.g. *"In uncertain times, I usually expect the best"*) and three pessimistic phrases (e.g. *"I hardly expect things to go my way"*). Participants rated their level of agreement on 5-point Likert scale. Item scores were summed so that higher scores represented higher levels of optimism. In this study, Cronbach's alpha = .70.

Ageism

The Fraboni Scale of Ageism (FSA; Fraboni et al. 1990) is a self-report measure of ageism. The scale is made up of 29 items that measure both cognitive (e.g. *"There should be special clubs set aside within sports facilities so that old people can compete at their own level")* and affective (e.g. *"The company of most old people is quite enjoyable")* aspects of ageism. Participants rated their level of agreement on a Likert-type scale ranging from 1 = *strongly disagree* to 4 = *strongly agree*. Item scores were summed so that higher scores indicated higher levels of ageism. In this study, Cronbach's alpha = .93.

Aging anxiety

Aging anxiety was measured using four questions concerning the participant's attitudes towards their own aging (Drury et al., 2016). The scale consisted of: "*I am worried that I will lose my independence when I am old*", "*I am relaxed about getting old*", "*I am concerned that my mental abilities will suffer when I am old*", and "*I do not want to get old because it means I am closer to dying.*" Participants were asked to rate their level of agreement on a Likert-scale ranging from 1 = *strongly disagree* to 7 = *strongly agree*. Answers were summed with higher scores indicating higher levels of aging anxiety. In this study, Cronbach's alpha = .61.

Results

Bivariate correlations between and descriptive statistics for all study variables are displayed in Table 1. A multiple regression analysis for ageism and ageing anxiety is detailed in Table 2.

Ageism

Knowledge about aging, quality of contact with older adults, fear of death, and optimism explained 16.0% of the variance in ageism, $F(4,618) = 29.37$, $p < .001$. Knowledge about aging ($\beta = -.22$,

Table 1. Bivariate correlations and descriptive statistics for study variables (N = 623).

	Knowledge	Contact	Fear of Death	Optimism	Ageism	Aging Anxiety
Knowledge	-	.13**	−.06	.12**	−.27***	−.06
Contact		-	.03	.19***	−.31***	−.13**
Fear of Death			-	−.11**	.06	.49***
Optimism				-	−.15***	−.18***
Ageism					-	.06
Aging Anxiety						-
M	14.01	4.67	4.13	3.10	2.42	4.24
SD	2.41	1.05	1.24	.61	.57	1.10
Possible Range	0–25	1–7	1–7	1–5	1–5	1–7
α	N/A	.67	.90	.70	.93	.61

*p < .05. **p < .01. ***p < .001.

Table 2. Summary of multiple regression analyses for ageism and aging anxiety (N = 623).

	B	95% CI	R^2
Ageism			
			.16
Knowledge	−.22***	−.07, −.03	
Contact	−.27***	−.19, −.11	
Fear of Death	.05	−.01, .06	
Optimism	−.07	−.14, .006	
Aging Anxiety			
			.27
Contact	−.12**	−.20, −.06	
Knowledge	.00	−.03, .03	
Fear of Death	.48***	.36, .48	
Optimism	−.10**	−.31, −.06	

*p < .05. **p < .01. ***p < .001.

p < .001) and quality of contact (β = −.27, p = .001) were associated with ageism, while fear of death and optimism were not.

Aging anxiety

Knowledge about aging, quality of contact with older adults, fear of death, and optimism explained 26.6% of the variance in aging anxiety, $F(4,618) = 55.97$, $p < .001$. Fear of death ($\beta = .48$, $p < .001$), quality of contact ($\beta = -.12$, $p = .001$), and optimism ($\beta = -.10$, $p = .004$) were associated with aging anxiety, while knowledge about aging was not.

Discussion

The purpose of this study was to investigate contact with older adults, knowledge of aging, fear of death, and optimism in terms of their relationships with ageism and aging anxiety. We were particularly interested in whether ageism and aging anxiety had distinct correlates among younger adults. Knowledge of aging and contact with older adults were associated with lower ageism, supporting H_1 and H_2. Individuals who have previously invested time with older adults have less negative attitudes about the older adult population. Consistent with previous research (Bousfield & Hutchison, 2010; Darling, 2016; Hawkins, 1996; Kotter-Grühn, 2015; Stahl & Metzger, 2013), a similar relationship exists for individuals who have a greater knowledge about aging and older adults. At a broader level, this provides support for the contact hypothesis regarding interpersonal contact reducing prejudice between majority and minority groups (Allport, 1955) as it suggests that increased contact reduces ageism. However, the knowledge component is also important, and this supports the need for education about aging and issues faced by older adults (Dorfman et al., 2007; Harris & Dollinger, 2001; O'Hanlon & Brookover, 2002).

Aging anxiety was associated with greater fear of death and lower optimism, supporting H_3 and H_4. Aging anxiety was also associated with lower contact with older adults. This means that individuals with a greater fear of death also have greater fears about their own aging. This is consistent with terror management theory (Becker, 1973) and previous research (Bodner, 2009; Martens et al., 2004; O'Connor & Mcfadden, 2012). It is consistent with the notion that individuals may link aging and their fears of death. However, alternative explanations are likely. It is possible, for example, that both fear of death and aging anxiety are attributable to underlying characteristics such as neuroticism (Allan et al., 2014). Aging anxiety was also associated with lower optimism. Optimists may view aging as they do other events in that they have a generally positive outlook on events in their lives (Busseri & Choma, 2015). Interestingly, contact with older adults was also associated with lower aging anxiety. Although fear of death shared the most variance with aging anxiety, it is noteworthy that contact with older adults was associated with both ageism and aging anxiety. This suggests that increased contact with older adults may have benefits for reducing both ageism and aging anxiety. These results indicate potential means of reducing ageism and aging anxiety in the general population. Educational programs focused on aging and the issues that come with it may improve understanding of the process as a whole, and therefore improve individuals' attitudes toward older adults and their potential interactions with them. Arranging points of contact that are quality in nature could increase the positive exposure individuals have to older adults, improving their attitudes on that population as a whole.

This study was limited in several ways. The use of a convenience sample limits the generalizability of the results as participants were all undergraduate students in the southern USA. Further research would benefit from expanding the sample size to include individuals of different educational and geographical backgrounds. The cross-sectional nature of the data limits conclusions which can be drawn about causality and the direction of the results. It is entirely possible – and even likely – that contact with older adults and ageism are reciprocal in nature; that is, contact with older adults may impact ageist attitudes, but also that ageist attitudes may drive contact with older adults. Expanding the study to be more longitudinal in nature could contribute to further understanding this relationship.

Despite these limitations, this study suggests that ageism and aging anxiety may have distinct correlates. Ageism may be more defined by contact with older adults and knowledge about aging as per the contact hypothesis; aging anxiety may be more about fears of death and one's disposition toward the future. However, the results of the study suggest that contact with older adults may have an effect on the attitudes of young adults toward the older adult population. Additionally, the results could point toward the need for increased education on ageism and older adults in general. Education could help increase the knowledge younger adults have on the topic and, therefore, aid in reducing ageist attitudes in that population.

Disclosure statement

The authors declare that they have no conflict of interest.

Funding

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Ethical approval

All procedures performed in studies involving human participants were in accordance with ethical standards of the institutional research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards.

Informed consent

Informed consent was obtained from all participants.

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