Who is the ageist of us all? As most readers of The Gerontologist know, ageism is a form of bigotry akin to racism and sexism. Ageism is different from the other two “isms” in two ways: we are universally at risk, and most people remain ignorant of its impact. Yet these distinctions enhance the compelling nature of the topic. On the one hand, everyone has a personal stake in understanding and overcoming ageism, but on the other hand, the pervasive nature of the injustice should, upon personal reflection, make us a bit uncomfortable. Although it may be politically incorrect and potentially inaccurate to suggest that readers of this essay carry ageist assumptions beneath their skin,
our collective world reflects the actions of individuals within it.

Before each of us searches for that piece of glass to raise or throw, our fuller understanding of ageism is best guided through more finely-honed methods. Thankfully, we can turn to Erdman B. Palmore, a leading researcher and writer on ageism over several decades. Palmore, along with coeditors Laurence G. Branch and Diana K. Harris, has assembled a compendium of essays focusing on available knowledge. The *Encyclopedia of Ageism* suggests that ageism is both pervasive, and has grown in relevancy since the word was first introduced to the lexicon 35 years ago, when Robert Butler (1969) coined the term.

While changes in societal and individual attitudes are slow in coming, our knowledge base is growing quickly. In a testament to the interdisciplinary appeal of the topic, 63 experts wrote 125 scholarly essays informed by hundreds of references. Though this not the first book on ageism (e.g., Bythway, 1995; Levin & Levin, 1980; Palmore, 1990; 1999; and most recently Nelson 2002), it is the first volume to present a comprehensive assessment. Topics include definitions, measurements, sources, consequences, different environments and institutions that foster ageism, and ways to reduce ageism and change societal attitudes. As noted by Butler, who wrote the Foreword, it is important to name this prejudice and expose it as a form of conscious or unconscious discrimination. The *Encyclopedia* will do this by serving as a thoughtful resource to inform discussion and debate for educators, policymakers and practitioners alike.

**Changing Lenses**

If ageism continues to be deeply embedded within our culture, then what must change in the new millennium? In the entry titled, “Future of Ageism,” Palmore identifies six trends that may deflect the effects of ageism: increasing knowledge, increasing research, improving health, increasing education, increasing affluence, and reductions in other forms of prejudice. Evidence of these developments demonstrates the possibility of decreasing the impact of ageism. Palmore (1998) has suggested that when it becomes widely known that younger cohorts are moving into old age better off than previous cohorts, negative stereotypes will be dispelled. We find ourselves caught between the realities of the present and possibilities of the future. Looming on the horizon is the yet undetermined impact of the aging of the baby boomers. Potential challenges related to work and health in old age will influence how we frame our responses in ways that are difficult to predict. Though there is a growing body of scientific work to inform debate, how we respond both individually and collectively will test our resolve to diminish ageism.

**Scuffy Floors**

The concept of “aging well” refers to a movement to alter the long-standing myths and negative stereotypes previously used to characterize growing old. The idea of “aging well” conveys positive images of and approaches to aging. It is a portrait that emphasizes the idea that people can adapt and maintain satisfying lives as they age, even when circumstances are less than optimal. It supports the continued involvement of older adults in positive, productive and healthy living. With regard to health care, is “aging well” truly refinishing old floors or only putting a thin veneer of wax over a scuffy idea?

Health care remains ageist because we attribute many age-related conditions to aging, when they actually reflect disease. The pervasiveness of these beliefs causes individuals, families, and health care providers to attribute problems to aging rather than considering the full range of causes and diagnoses that they would with a younger person. Healthy aging initiatives can be ageist if they promote the concept of “successful aging”—that you are not “successful” if you have chronic conditions. Healthy aging initiatives that are comprehensive in scope focus on disease management (e.g., diabetes, heart disease) as well as health promotion activities (e.g., flu shots and exercise) to be effective in
maintaining health and maximizing function. Exemplifying this view, is the Healthy Aging Program of the Centers for Disease Control and Prevention (2006).

Non-ageist healthy aging strategies recognize that health is dynamic. It is not about keeping people at the same level, but rather about accommodating changes as they occur, so that health and function are maximized. In order to facilitate and promote the concept, health care policies need to be committed to enhancing lifestyle choices and recognizing the importance of the environment (e.g., home modifications, transportation, etc) in promoting well-being and community participation.

Clearer Images

Advancements in 20th century science and health care have altered the definition of longevity for many, however, gerontologists are keenly aware that society does not yet reflect the possibilities that come with those extra years, thereby dooming many elders to continued marginalization. Communities lose the experience, judgment, and wisdom that the burgeoning numbers of elders can contribute. As we search for better and more accurate reflections of aging, we must be mindful that the coming tide of baby boomers will likely change the face of an aging population (Longino, 2005). Because of the baby boomer generation’s size, their higher levels of education, wealth, and general level of health, we will likely see more boomers engaged in the wider community.

Popular culture that often holds up as exemplary examples baby boomers who exhibit extraordinary (usually physical) accomplishments, and concentrates attention only on those, reflects ageism by forcing the continued marginalization of elders who don’t meet those criteria. Furthermore, this narrow interpretation of age—imitation of youth—discourages public discussion of the real changes and limitations that accompany aging, and dismisses the extraordinary personal growth that can be bestowed in old age.

The entries in this Encyclopedia are both diverse and well balanced. I would hope that future editions include works that discuss new findings that address the implications of the following topics for ageism.

• Demographic changes: the increasing diversity of the older population, including the changing ethnic and cultural mix, diversity of life courses, and changing definitions of what is an “older person.”
• Healthy aging and role of place: regional and neighborhood infrastructure and design issues, access and mobility issues, the interrelation of health, housing and transport services.
• Health: The impact of new technologies, prevention of injury and chronic conditions and quality of life post-injury/condition, and workforce training and education to provide for the care service needs of aging individuals.
• Work and transitions: how people make decisions about moving from paid to unpaid work and to retirement, how businesses are organizing around transition issues, managing a mixed-age workforce, savings, intergenerational transfers of wealth, the complexity and fluidity of family care networks.
• Creativity: role of expression, linkages between creativity and health, and changes in these phenomena through the life course.
• Attitudes to and experiences of aging: better understanding of how older people contribute to society.
• Social connectedness: changes in family structures, national and internationally dispersed families, voluntary work, the role of grandparents.

Ageism encompasses attitudes toward the aging process in general, and our own aging in particular. Because our personal reflections are intertwined with how we seek to understand programs or policy, studying and understanding ageism is especially complex and challenging. Ageism is so deeply rooted in our culture and our unconscious because it is inextricably intertwined with our cultural and societal fears of illness, decline, and death.

Important lessons may be gleaned from the connections between aging and disability. Prejudice toward disability may also be covert and difficult to discern. Many elders associate disability with vulnerability, dependency, and a loss of control. Looking for commonalities that strengthen quality of life for all, Sheets (2005) notes that both aging and disability systems must adopt a shared focus on consumer choice in making decisions. This approach neither changes nor occludes individual identities, but rather seeks to empower individuals to reach their potential.

Perhaps the best hope is to offer society an appreciation of aging and a new consciousness about what aging means, and can mean. Cruishank (2002) asks what will happen if we fail to “grow old gracefully”? Whose responsibility is it? Because aging is still seen through physically constructed lenses, our ability to address ageism lags behind our abilities to address gender, race, and sexual orientation.

Creating a non-ageist society requires work. Freeing individuals to find an older identity that suits them comfortably, and empowering elders to select the perception of aging that fits them best is really the only way to unravel the forces of ageism.

A careful reading of this Encyclopedia points to many ways that ageism creeps into our personal lives. Perhaps a gentle cleaning of our own reflective skill sets will help develop more mindful approaches toward the world. This has implications for how we educate and prepare ourselves to be more conscious of how our own ageism is embedded in our cultures, interactions and worldviews. In turn, we will be prepared. This volume provides a collective resource for all seeking to personally or communally engage in a richer discussion and investigation of ageism.

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