

# Self-perceptions of aging

July 19 2017, by Morgan Sherburne

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Credit: University of Michigan

In the 1960s, the Beatles sang about wondering whether their true love would still love them as they grew older—after they've lost their hair and are no more adventurous than wanting to knit a sweater.

A group of four studies led by University of Michigan researchers has found that however the hero of the Beatles song turns out, his [health](#)—and his wife's health—may be dictated by their perceptions of their own aging.

"Beliefs about one's own aging are shared within couples, and these beliefs are predictive of [future health](#) above and beyond individual beliefs," said Shannon Mejia, a postdoctoral fellow at U-M's Institute for Social Research. "Husbands' and wives' individual experiences of physical activity and disease burden are important for their current shared beliefs and future functional health."

That is, couples who tend to view their aging negatively tend to become less healthy and less mobile than couples who view their aging positively. In addition, husbands' disease burden shape their attitudes toward both their own aging and their wives' aging. Mejia and colleagues surmise that the husbands' limitations stemming from disease negatively affect the wives' health because of the increased burden of caregiving.

Jennifer Sun, an M.D./Ph.D. candidate at the U-M Medical School who conducted the research as a psychology doctoral candidate, found that a person's self-perception of aging affects whether he or she accesses health care in a timely fashion. She found that the more negatively a person viewed his or her aging, the more likely he or she was to delay seeking health care and the more barriers he or she saw for seeking care.

This association between negative self-perceptions of aging and health care delay persisted even after Sun controlled for problems that can delay [health care](#), such as [low socioeconomic status](#), lack of health

insurance and multiple chronic health conditions.

"While many studies have focused on financial and structural barriers to care, it is also important to consider how psychosocial, emotional and cognitive factors are affecting the decisions of older adults to delay medical care," Sun said.

A third study authored by U-M doctoral candidate Hannah Giasson found that [people](#) who experience age discrimination feel less positive about their own aging.

A fourth study found that as people aged, their explicit bias toward older people—or how they would talk out loud about how they felt toward fellow older adults—improved as they aged. But their implicit bias—how they felt internally about fellow older adults—became more negative as they aged. Giasson and William Chopik, a Michigan State University researcher, led this study.

The papers are published today in a special supplement to the August issue of *The Gerontologist*.

"We're interested in the way people interpret their own lives," said Jacqui Smith, the principal investigator of a project on well-being in midlife and old age and second author on some of the published papers.

"We know that the images in the world and age stereotypes play a role in how people perceive their own aging. But subtle experiences of discrimination in interactions with strangers and sometimes with your own kids or partner—that is feedback that people take to heart and either rebel against it or begin to believe it."

The AARP supported the publishing of the supplement ahead of the annual meeting of the International Association of Gerontology and

Geriatrics.

"Wherever these negative perceptions come from, the damage can be profound—for individuals, communities and larger populations," said AARP CEO Jo Ann Jenkins. "We need to change the conversation about age and aging in this country. It's not about being 'polite.' It's a necessity."

Provided by University of Michigan

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