When COVID-19 first emerged and began to spread, there was a rush to identify common characteristics shared by those infected. Geographic location, lifestyle and pre-existing health conditions were all early candidates for a distinguishing factor that would help predict who would be most susceptible.

It soon emerged that advanced age was likely a contributing factor in being vulnerable to the virus. Measures such as restricting the movement of anyone over the age of 70 came into effect in order to protect seniors from either contracting the virus or passing it on to others. And with that, some noticed a parallel outbreak of ageism and a rise in instances of prejudice or discrimination on the grounds of a person's age.

Professor Alison Chasteen in the department of psychology in the Faculty of Arts & Science, a behavioral scientist who specializes in stereotyping, prejudice and stigma across the lifespan, recently co-authored an editorial in the Journal of Gerontology: Psychological Sciences on avoiding ageism and fostering solidarity between generations.

Chasteen spoke with Arts & Science's Sean Bettam about what she and her colleagues have seen and their recommendations for how to ensure that seniors are supported during such uncertain times.

You've observed that, in the course of the COVID-19 pandemic, there has been a parallel outbreak of ageism. Has the pandemic fueled the perpetuation of stereotypes of older people?

Ageism was already present in most countries. However, the COVID-19 pandemic exacerbated the tendency to portray older adults in stereotypical ways. What we have been seeing from different sources, such as social media, the media and government officials around the world, is a portrayal of people aged 70 and over as unable to contribute to society, frail and helpless.

Public health officials and the media once suggested that older adults were most likely to be infected by COVID-19. Some jurisdictions even imposed restrictions on the movements of anyone over a certain age. How might such declarations impact the mental health of those in that demographic?

Segregation based on age reinforces the message that all older people are vulnerable and should be protected. These declarations can undermine older adults' independence and feelings of competence.

Such policies ignore the fact that older adults are a heterogeneous group who vary greatly in terms of health status. As the pandemic has gone on, we now know that physical distancing measures are needed to protect people of all ages.

Are older adults the only ones being viewed as a homogeneous group when it comes to managing the pandemic? If so, why do you suppose that is?
It is certainly the case that in the early stages of the pandemic, the focus was on older adults and viewing them solely through the lens of their age. This was likely the case because of early data from other countries suggesting higher infection and mortality rates among older people. Yet, what we have seen in Canada is that almost half of the cases have occurred in people aged 30 to 59.

Have older people always been viewed with such generalizations and stereotypes or is it a relatively recent phenomenon?

Age stereotypes have long been applied to older adults. The term "ageism" was first coined in 1969, when it was recognized that prejudice based on age was a common occurrence.

What are the dangers in viewing older adults in such a uniform manner?

When we view members of a group as all the same, we are more likely to apply stereotypes to them. In the case of older adults, we are more likely to patronize them and treat them in a condescending manner. Our research has shown that older people report negative emotional effects from being disrespected and discounted.

At the same time, there are also dangers for younger age groups. We are all exposed to negative age stereotypes from childhood on and we may be more likely to apply those negative age stereotypes to ourselves when we grow older.

Thinking about aging and older people in stereotypical ways can lead us to form negative expectations about our own aging experiences. This results in a sort of self-fulfilling prophecy where we think age-related declines are inevitable and we do not attempt to alter the course of our own aging experiences.

In what ways are older people uniquely affected by the COVID-19 pandemic? What do you think is the most challenging aspect for them to manage?

A major concern for older people is that social distancing, rather than just physical distancing, is happening. We know that loneliness and social isolation can have negative health consequences for people of any age. The fact that a focus has been placed on social isolating older adults means they might be at even greater risk of the negative effects of loneliness.

What can people of other generations do to better support seniors during this time?

We need to engage in physical distancing but not social distancing from our older family members, friends and neighbors. We can do this by finding ways to stay in touch—whether through chatting from people's porches or across backyard fences, calling, teleconferencing or texting older people or even writing them a letter if they are not online.

Engaging in such intergenerational contact will not only reduce all of our feelings of loneliness but will help to counter age stereotypes and bring a sense of solidarity across age groups. Recognizing that we're all in this together, no matter our age, is key.


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