This resource was retrieved from the ProQuest database in the CEC Library on March 17, 2017.


This resource was retrieved from the CINAHL Plus with Full Text database in the CEC Library on March 13, 2017.


This resource was retrieved from the CINAHL Plus with Full Text database in the CEC Library on March 13, 2017.

During the 1984 presidential debates, 73-year-old President Ronald Reagan was asked whether he was too old to serve—to which he famously replied, “I will not make age an issue of this campaign. I am not going to exploit, for political purposes, my opponent’s youth and inexperience.” Though his response elicited a laugh from his opponent, both the question and the answer were examples of ageism in action.

Sadly, not much has changed over the past thirty-one years, as Hillary Clinton (who will be 69 on Election Day 2016), has already been challenged with the same question—numerous times. Google “Is Hillary Clinton too old to be president?” and you’ll find 110 billion references—and the election is still more than a year away.

The Broad Impacts of Ageism

In 1968, Dr. Robert Butler, founding director of the National Institute on Aging, coined the term “ageism,” four years after free speech activist Jack Weinberg first uttered the phrase, “Never trust anyone over 30.” Yet, forty-seven years later, the FrameWorks Institute’s report, Gauging Aging: Mapping the Gaps Between Expert and Public Understandings of Aging in America (Lindland et al., 2015), reveals that the notion of ageism doesn’t even register on the public’s radar—and this at a time when the subject of aging so dominates our public discourse.

While researching the topic of ageism, I found countless articles on the impact it has on various aspects of society: the workplace, healthcare, the media, politics, and civic engagement. Not surprisingly, that impact has been generally negative, as follows:

• Older adults have a more difficult time finding gainful employment. They are seen as technology-averse, unwilling to learn new skills, difficult to manage (particularly by younger supervisors), too expensive, and not productive enough to justify the perceived increased expense (The New York Times, 2009).

• Older adults more frequently have their health concerns dismissed by healthcare professionals. In addition, they are less likely to receive routine screenings or preventive care, more likely to be treated less aggressively than younger patients with the same diagnoses, are generally excluded from clinical trials, and are typically treated by physicians who have little to no training treating older patients (Currey, 2008).

• Older adults, when not entirely disregarded by the media, are typically portrayed with negative stereotypes; and, when and if aging is depicted from a positive point of view, the depiction is typically unrealistic and unattainable (World Economic Forum, Global Agenda Council on Ageing Society, 2012).

By Barbara Raynor

Ageism In Action? Ageism Inaction!

Fighting ageism through civic engagement could be the baby boomers’ next big human rights battle.
• Older adults running for public office are routinely questioned about whether they have “what it takes” (ostensibly, good health, physical stamina, mental acuity, sufficient projected longevity, or all of the above) to serve in demanding leadership roles (York, 2014).
• Older adults have historically made a meaningful difference in their communities through civic engagement activities (White House Conference on Aging, 2015); however, institutions that could benefit from the knowledge, wisdom, and skills older adults offer are not making an effort to harness those skills in ways that could help local communities build their capacity to better serve those in need. Even national entities like the Corporation for National and Community Service (CNCS), which operates AmeriCorps VISTA and Teach for America, two programs that actively target younger adults, has not waged an effective campaign to similarly recruit older adults.

That said, after reviewing the copious volume of information available on the impact of ageism throughout society, perhaps the most striking story I found relates to the dramatic toll ageism takes on the daily lives of older adults—and on their perceptions of aging. Studies by Dr. Becca Levy, director of the Social and Behavioral Sciences Division at the Yale School of Public Health, revealed that negative self-perceptions of aging result in poor health outcomes, hearing decline, poor memory performance, and shorter life spans. Conversely, Levy’s studies demonstrated that positive self-perceptions of aging can improve memory, thinking, and cognition, mood, self-confidence, overall functionality, and longevity (adding seven-and-a-half years to a person’s life span) (Currey, 2008).

The Baby Boomer Effect
While ageism also affects age groups other than baby boomers, it is this generation and other older adults who are likely feeling its effects most acutely right now. In fact, baby boomers are at the nexus of this insidious form of discrimination, not only because they are aging, but also because many of them have aging parents (and, in some cases, aging grandparents) as well.

Baby boomers, virtually all of whom are now older than 50 (the leading edge of this generation will begin turning 70 next year), are truly struggling with the idea that they are aging. Growing older, maybe—but not aging. Perhaps this is because their perceptions of aging have been influenced by the negative ageist stereotypes outlined above. Sixty percent of baby boomers believe that America is a youth-driven society (Bradbury, 2015), a belief supported by the fact that, according to London-based marketing and advertising magazine AdMap, 90 percent of marketing dollars today target the under-50 population. Consequently, adults 50 and older not only feel invisible to and disregarded by society, but, from a marketing standpoint, they actually are (World Economic Forum, 2012).

What makes this situation all the more confounding is that half of every dollar spent in the United States is spent by someone over the age of 50. Moreover, by 2017, 50 percent of the nation’s population will be composed of baby boomers, and baby boomers will control 70 percent of its wealth (Pauley, 2013). And, while the public typically views older adulthood as a time of loss, physical and cognitive decline, and diminished relevance—something to be “overcome” or “defied”—experts on aging see it as a time of new opportunities and capacities for growth, contribution, and self-expression (Lindland et al., 2015).

During the American Society on Aging’s 2012 Aging in America Conference, I served as a pan-

Even national entities like the Corporation for National & Community Service have not waged an effective campaign to recruit older adults.
elist at a session on civic engagement. During the question-and-answer period, a participant raised her hand and said, “I’m a baby boomer, but I think boomers are a bunch of narcissists who only care about dyeing their hair and getting cosmetic surgery so they can look younger.” After considering this comment while one of my fellow panelists tried to respond, I asserted the following observation: “Perhaps baby boomers seem to be overly concerned with preserving their youth because they don’t like the way old people are treated, and they don’t want to be treated that way.”

“How?” the audience member replied. “Maybe you’re right. I hadn’t thought about it that way.”

For more than fifty years, baby boomers have been the driving force behind some of the most transformative battles against injustice our country has ever experienced: civil rights, women’s rights, reproductive rights, LGBT rights—the list goes on and on. While admittedly most of these battles are still being fought today, it is clear the early and continued intervention of baby boomers has had a meaningful and lasting effect on the way much of society thinks about human rights, particularly among marginalized populations.

**Sixty percent of baby boomers believe that America is a youth-driven society.**

With that in mind, I would submit that baby boomers have one remaining battle to fight—the battle against ageism. Fifty-six-year-old global pop star Madonna (who has been a target of ageist comments) recently said, “[Ageism is] a form of discrimination that still has not been dealt with and it should be. I think it should be as verboten as making racist remarks or making homophobic remarks, judging somebody by their age” (Bradbury, 2015).

Thanks in part to their numbers (78 million at last count), not to mention their track record and penchant for affecting transformational societal and cultural change, baby boomers now have an opportunity to change the way society looks at aging—and how it treats older adults. And, once again, one of the ways they can advance this important agenda is through civic engagement activities—if they are given the chance.

**Baby Boomers: An Underused Civic Engagement Asset**

One would think that, given the enormous disparity between community needs and community resources across our nation, local communities would welcome the involvement of anyone willing to give their time, talents, and expertise for the greater good, regardless of how old they might be. Sadly, too many community-based organizations, nonprofits, and public institutions not only fail to see the value that older adults have to offer, they often reject offers of help from older adults.

In its report, *There’s No Substitute for Experience*, the Community Experience Partnership (CEP) (2014) states, “By 2030, there will be 72 million Americans at least 65 years old, more than twice as many as 2000. Virtually every community in the [United States] is seeing rapid growth in its older population. Yet few communities have the systems or structures needed to effectively leverage experienced adults. Studies repeatedly show that older people either don’t know where they can put their talents to good use, or they are viewed as liabilities with out-of-date skill sets and a fear of change.”

Over the past five years, we at Boomers Leading Change in Health (BLCiH, a CEP participant) have had a unique opportunity to see both sides of this coin: organizations that have benefitted greatly from the engagement of adults 50 and older, and organizations that have failed to tap into what we at BLCiH believe is our community’s greatest natural resource. Since July 2010, we have recruited, trained, and placed more than 350 adults 50 and older as patient navigators, community health workers, health-
The Mobilization Effect: Older Adults Work for the Greater Good

BLCiH volunteers and AmeriCorps Encore Members are not the only adults 50 and older making an impact addressing pressing social issues. Through CEP, thousands of older adults from Portland, Maine, to Portland, Oregon, have been mobilized in a variety of ways for the greater good:

- In New York City, older adults have improved access to affordable fresh food in low-income communities;
- Throughout the State of Maine, they’ve come together to promote healthy communities, people, and the environment through smart growth;
- In Baltimore, they’ve helped improve the quality-of-life in low-income neighborhoods;
- In Rochester, New York, older adults have mobilized to increase high school graduation rates through mentoring programs;
- In Grand Rapids, Michigan, they have worked to end homelessness;
- In Northeastern Minnesota, intergenerational programs have promoted youth achievement and community connection;
- Throughout the State of Oregon, older adults have worked to improve early childhood development outcomes; and,
- In Los Angeles County, California, older adults have addressed the diverse needs of immigrant communities.

This is an impressive list; however, it does not include the thousands of other older adult volunteers who help children learn to read at grade level through AARP’s Experience Corps, serve as Foster Grandparents, teach in under-performing schools through Teach for America, or build the capacity of nonprofits across the United States by serving with Senior Corps, RSVP, and VISTA. Nor does it include the tens of thousands of adults 50 and older in communities who are serving others in their houses of worship, taking care of homebound and infirm loved ones and neighbors, or volunteering in myriad other ways.

care policy advocates, and AmeriCorps Encore Members (did you know there is no upper age limit to serve with AmeriCorps—and that Encore Members receive special benefits for serving?).

Together, these older adults have provided vital assistance to more than 50,000 medically underserved individuals and families, served by more than two dozen host sites across the seven-county Metro Denver area. They have helped people enroll in health coverage; connected them to healthcare; taught people diagnosed with chronic conditions how to take better care of themselves and their families; helped immigrants and refugees from all corners of the world navigate our nation’s complex health system; provided follow-up and support to patients transitioning from hospital to home; connected struggling families to social safety net resources like Temporary Assistance for Needy Families, the Supplemental Nutrition Assistance Program (SNAP, formerly known as food stamps), affordable public transportation services, and other emergency assistance programs; and, advocated (formally and informally) on issues related to healthcare policy, health equity, and aging.

Continuing Barriers to Civic Engagement

So, if adults 50 and older are making such a meaningful impact in their local communities, why are there still barriers to civic engagement—and what are they?

Truth be told, ageism isn’t entirely to blame. Most adults 50 and older lead busy lives and have significant caregiving responsibilities—either for their parents or grandparents, their children or grandchildren—or both. Also, many older adults still work full or part time, while others are taking time to travel, attending classes, or dealing with their own health challenges. Plus, some older adults are admittedly technology-averse, which can get in the way of some civic engagement activities (for example, to apply and serve with AmeriCorps, members must be computer literate, as virtually all of
their “paperwork” is administered online). Finally, because they take their volunteer commitments seriously, these potential volunteers generally don’t commit until and unless the time is really right.

On the other hand, ageism can be a factor. Many nonprofits either aren’t prepared for or don’t understand how to take advantage of the knowledge, skills, and experience older adults have to offer. Adults 50 and older are serious about wanting to make a difference—a difference that is meaningful to them, as well as to those they serve. Gone are the days when volunteers are satisfied merely to stuff envelopes or distribute magazines. Yet many organizations fail to recognize that—and those that do have no idea how to modify their volunteer opportunities accordingly.

Moreover, as previously indicated, many younger volunteer supervisors are simply uncomfortable supervising older volunteers. In our experience at BLCiH, adults 50 and older are do-ers, not “wait-and-see-ers.” They are creative problem-solvers who bring creativity, tenacity, patience, and perseverance to the task at hand. As such, they require a certain amount of freedom, flexibility, and trust that nonprofits must be willing to give to maximize these volunteers’ impact in the community, which can be a scary prospect to a volunteer coordinator who believes older adults are slow-moving, forgetful, and stuck in their ways.

A couple of years ago, one of BLCiH’s AmeriCorps Encore Members was serving as a community health worker at a host site that addresses the needs of East African and Indonesian immigrants and refugees. The manager of the government-subsidized apartment complex that housed these families happened to mention offhandedly that she was concerned she might have to evict some of them because they weren’t keeping their apartments clean enough. The residents were all recipients of SNAP (food stamps), and SNAP does not provide for cleaning supplies. Upon hearing this, the BLCiH Member asked for a list of items that could be purchased with SNAP—and then created recipes the residents could use to make cleaning supplies (with lemons, vinegar, baking soda, etc.). She then taught the residents—none of whom spoke the same language as each other, much less English—how to make and use the recipes to keep their homes clean. Problem solved.

**Older adults require a certain amount of autonomy that nonprofits must be willing to give to maximize these volunteers’ impact in the community.**

Luckily, this host site recognized the value their AmeriCorps Encore Member brought to the immigrants and refugees—and embraced the Member’s ability to identify a challenging situation, think of a creative solution without being asked or told, and make a real difference that was likely beyond the Member’s original scope of responsibilities. As a result of this host site’s willingness to be flexible and empower its trained volunteers and AmeriCorps Encore Members to intervene in innovative ways, the impact they have had over the past five years has been life-changing (and, at times, life-saving).

**Civic Engagement Fights Ageism**

Finally, civic engagement activities provide an effective means to address ageism in two very important ways: First, they give older adults the opportunity to exercise their desire, willingness, and ability to make meaningful contributions to society in so many ways. Second, and perhaps most importantly, they provide a forum through which older adults can engage with other generations—on both the giving and the receiving end of the equation. If you look at the CEP projects listed in the sidebar on page 61, not one of them involves older adults helping only older adults. On the contrary, all of them involve adults 50 and older interacting with people of all ages, which
may be the real key to breaking down the negative stereotypes associated with every age group.

Frank Lloyd Wright (who lived to age 91) once said, “The longer I live, the more beautiful life becomes.” Those of us who work in the field of aging understand both the challenges—and the opportunities—associated with aging. We recognize that as we age we may not see as well, hear as well, move as well, or remember as well as we did when we were younger; on the other hand, we realize that with increased age comes increased knowledge, wisdom, experience, and perspective. When we were kids, we aspired to have seniority in our schools, because with seniority came important privileges, responsibilities, and POWER. Being seniors in high school and college meant not only that we were older, but that we knew more and could do more. Similarly, having seniority in the workplace meant that we not only earned more, we offered more. So why should we think differently about seniority now that we’re older adults?

By failing to embrace terms like “aging” and “senior” due to their perceived negative connotations, we further perpetuate ageism and ageist stereotypes, even among older adults. That is what makes ageism so hard to fight—it has become so insidious and ubiquitous over time that not only has it become acceptable by default, it has become virtually imperceptible to the public’s eye (Lindland et al., 2015). That is why, just as they have done throughout their lives, baby boomers must use their collective clout—especially at this crucial moment in time—to bring attention to this injustice. They must begin to see that they are not only the targets, but often the perpetrators of ageism, and demand that society view aging—and the aged—as forces that add value to our world, rather than detract from it.

Barbara Raynor is the executive director of Boomers Leading Change in Health in Denver, Colorado. She can be contacted at braynor@blcih.org.

References


