Ageism involves stereotyping and discrimination against people because of old age (Butler, 1995).

Some stereotypes about older people are positive (e.g., the idea that older people have acquired wisdom), but old age is associated with the perception of more losses than gains (Cuddy, Norton, & Fiske, 2005).

Palmore (2004) describes ageism as the third most important ”ism” after racism and sexism. Ageism differs in that everyone will become a target of it if they live long enough, and there is less societal awareness of its existence.

Age prejudice is socially condoned and institutionalized (Palmore, 2004). At an institutional level ageism can involve discrimination in employment and housing, and sub-optimal care of older people in nursing homes (International Longevity Center, 2006). Societal examples of ageism include younger people using patronizing language when talking with older people (e.g., shorter words and sentences) (Levy and Banaji, 2002).

Several different theories explain the existence of ageism:

Terror Management Theory suggests that ageism represents a way to keep older people at a distance to try to deny the reality of death (Martens, Goldenberg, and Greenberg, 2005).

Social Identity Theory (reviewed in Bodner, 2009) argues that people form ingroups on the basis of shared characteristics, and then show biases that favor their ingroup compared to the outgroup. Ageism is unusual given that everyone eventually becomes a member of the outgroup, but before they do, they are exposed to many negative stereotypes about this group they might internalize.

Social Role Theory (reviewed by Kite, Stockdale, Whitley, & Johnson, 2005) suggests that because older people are less likely to be seen in the role of employed adult, they are not seen as very competent. It was noted by Nelson (2005) that American society became more ageist after the industrial revolution when work shifted away from the home and was given to those perceived as the most physically able; i.e., those who are younger.

Statistics from the United Nations predict that by 2050 the population of older people will represent a quarter of the general population.

Ageism has been found to have important effects on older individuals.

Ageist stereotypes become internalized by some people when they are younger because they are accepted in society almost without question (Levy, Slade, Kunkel, & Kasl, 2002).

Self-fulfilling prophecies can operate to translate ageist stereotypes into actual behavior (Nelson, 2005). For example, if an older person is talked to in a patronizing way (e.g., using “baby talk”) they might start to see themselves as less competent and behave accordingly.

The internalization of ageist stereotypes has been correlated with memory failures, physical frailty, and risk of cardiovascular events (Levy, & Leifheit-Limson, 2009; Levy, Zdonman, Slade, & Ferrucci, 2009).

A cognitive outcome was measured in some individuals (memory failures, physical frailty, and risk of cardiovascular events (congestive heart failure, stroke), controlling for variables known to predict risk (Levy, Zdonman, Slade, & Ferrucci, 2009).

Longitudinal research has led to important findings, but it is difficult to conduct given the time frame required. Also, there is much variability in the scales that are used to measure ageism.

Most of the early scales to measure ageism are unidimensional measures of opinions about older people, and there is not one measure that has been determined to be the most valid and reliable. A more recent measure, the Fabroni Scale of Ageism (FSA) (Fabroni, Salstone, & Hughes, 1990) is a more comprehensive measure (Rupp, Vodanovich, & Crede, 2012) encompassing both cognitive and affective components of stereotyping. Fabroni and colleagues reported good internal consistency for the FSA, and evidence of construct validity in that scores on the measure related to scores on other measures of ageism.

Another type of research strategy is to prime age stereotypes through experimental manipulation to measure effects on behavior (Levy, 1996). This allows for a quicker examination of the potential impact of internalized stereotypes brought to awareness through the priming process. Priming research can be done with younger people and older people.

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