This instructional module on stereotypes of aging is one in a block of 10 modules designed to provide the human services worker who works with older adults with basic information regarding the aging process. An introduction provides an overview of the module content. A listing of general objectives follows. Three sections present informative material on each of the three objectives. Topics are mental pictures, relationship of mental pictures to stereotypes, and stereotypes of aging (aging, nonproductivity, disengagement, inflexibility, senility, serenity, and sexuality). Other contents include a summary and listings of selected readings and additional resources. (YLB)
MODULE
A-2

Stereotypes of Aging
Elderly Service Workers' Training Project

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STEREOTYPES OF AGING
MODULE A.2

The Elderly Service Workers' Training Project
wishes to express appreciation of the following
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INTRODUCTION

Blondes have more fun!
Redheads are hot tempered!
Fat people are jolly!

These statements are generalizations; they may or may not be true. They exist because people make assumptions about things that may seem to be connected. They see an individual event - a blonde having a good time - a redhead having a temper tantrum - and they take for granted that these events cover all blondes, all redheads. In fact, the redhead herself may feel obliged to live up to society's expectations. Henceforth, any redhead conjures up a mental picture of a firebrand.

This module will present several commonly held stereotypes of aging and arguments to prove them invalid. It will also discuss how stereotypes develop, especially in relation to the mental pictures that people assume and their effect on one's responses to situations.
GENERAL OBJECTIVES

Upon completion of this module, you will be able to:

(1) Describe the meaning of mental pictures.
(2) Describe how mental pictures relate to stereotypes.
(3) Describe commonly held stereotypes of aging.
The following section will present the meaning of mental pictures.

Mental pictures are personal viewpoints that colour one's thinking. They are the product of a lifetime of exposure to others and how one "sees" things to be. If one's mental picture of a fat person is that of a carefree jolly soul, it will be difficult to accept the overweight person who is lonely and depressed.
Mental pictures tend to influence one's first responses to situations. In fact, the mental pictures may be so strong as to prevent one from taking a second look, to understand what is really happening.

"My mind is made up! Don't confuse me with the facts!" Sadly, a mental picture is sometimes less than accurate. Nevertheless, mental pictures influence one's response to others, and this can be destructive.
THE FOLLOWING SECTION WILL PRESENT THE MEANING OF
MENTAL PICTURES AND HOW THEY RELATE TO STEREOTYPES.

STEREOTYPES

UPON COMPLETION OF THIS SECTION, YOU WILL BE ABLE TO
DESCRIBE HOW MENTAL PICTURES RELATE TO STEREOTYPES.

STICKING NARROWLY TO A PREDECIDED JUDGEMENT
(ASSUMPTION) OF SOMETHING WITHOUT TAKING A SECOND LOOK
CAN LEAD TO STEREOTYPES. STEREOTYPES ARE FIXED AND
OVERSIMPLIFIED NOTIONS ABOUT SOMETHING; THEY HAVE NO
ROOM FOR FLEXIBILITY OR INDIVIDUALITY.

NOT ALL STEREOTYPES ARE WRONG, BUT THEIR UNCHANGING
RIGID NATURE MAKES THEM INACCURATE FOR MANY SITUATIONS.
IF ALL SITUATIONS ARE JUDGED BY THE STEREOTYPE, ONE
BECOMES TRAPPED IN A VICIOUS CIRCLE OF ERROR. THE
VICTIM OF THE STEREOTYPE IS NOT SEEN AS AN INDIVIDUAL.
SUCH A PERSON IS NEVER GIVEN A CHANCE TO PROVE THEMSELVES
UNIQUE.

STEREOTYPES FREQUENTLY INTERFERE WITH CONSIDERATION
OF THE OLDER ADULT. OLD AGE IS PROBABLY UNIQUE BECAUSE
IT IS SURROUNDED BY MORE MISCONCEPTIONS THAN ANY OTHER
PERIOD IN A PERSON’S LIFETIME. STEREOTYPES OF AGING ARE
ALSO UNIQUE IN THAT WE ARE ALL LIABLE TO BECOME THE
OBJECT OF THIS PARTICULAR STEREOTYPE. THIS IS NOT
USUALLY THE CASE FOR OTHER KINDS OF STEREOTYPING, SUCH
AS SEXISM OR RACISM.
THE REMAINDER OF THIS MODULE LOOKS AT SEVERAL COMMONLY HELD STEREOTYPES OF AGING. IT ATTEMPTS TO DESCRIBE AND DISPUTE THEM BY PRESENTING FACTS THAT PROVE THE STEREOTYPES BOTH WRONG, AND DESTRUCTIVE.
THE FOLLOWING SECTION WILL PRESENT COMMONLY HELD
STEREOTYPES OF AGING.

STEREOTYPES OF AGING

UPON COMPLETION OF THIS SECTION, YOU WILL BE ABLE TO
DESCRIBE COMMONLY HELD STEREOTYPES OF AGING.

MANY PEOPLE VIEW THE AGING PROCESS AS ONE OF MANY
NEGATIVE CHANGES. ONE SUCH VIEW IS 'DOWNHILL ALL THE
WAY'!
The general assumption of old age as a time of deterioration, disease, and feebleness is one held by young and old alike. It is a stereotype based on inaccurate assumptions. It ignores the fact that older adults are no more alike as a group than are young adults or children.

**Stereotype #1**

_A person is "old" because of their age._

While a person's calendar years do give one an age category, they tell little of how one has aged.

Growing old is a dynamic (ever changing) process of complex body changes and social adjustments. Saying a person is 80 years old tells the listener one thing only - that one has lived for 80 years. It tells nothing of their physical or mental state; it says nothing about whether one is employed or in good health.

All too often the calendar puts a seal on the expectations of a person. No one claims there is the typical 25 year old. Why then is there the 'typical' 80 year old?

There is a never-ending degree of aging changes - physical, emotional, and mental. Each person ages at their own rate, and it may bear little relationship to their years on this planet.
The Physiological Aspects of Aging Module describes in detail many aging changes. These changes begin at various periods in life.

People become more dissimilar as they grow older. There are greater differences in personality traits, abilities, disabilities, interests and circumstances among older adults than within any other social
category. Older adults are unfairly clumped together as a homogeneous (alike) group in the eyes of society.

Aging is NOT a disease and disease is NOT the inevitable companion of older adults. It is important to separate the consequences of aging from occasions of illness. The only true universals of aging seem to be slightly diminished height; thinner grayer hair; and some decline in the functioning of the senses of taste, touch, smell, sight, and hearing.

Other deteriorations and changes are more likely the sad result of disease, loneliness, social isolation, and misunderstanding from others.

**Stereotype #2**

As a person ages, they become less useful, productive, or creative.

There exists a false prevalent notion, that older adults should be, or worse, want to be dependent. In other words, they want to be supported by the working labor force (generally 18 to 64 years of age).

McPherson (1983) points out that, each person over 65 in Canada is supported by approximately eight people in the working labor force. The figure is higher in other countries, but would be much less if mandatory retirement was abolished. Thus, mandatory retirement, appears to perpetuate the dependency stereotype of the
OLDER ADULT. HOWEVER, NO ONE PERSON WISHES TO BE DEPENDENT, LET ALONE OLDER ADULTS, AND THE MANDATORY RETIREMENT AGE OF 65 HAS LITTLE TO DO WITH PEOPLES' CAPABILITIES.

Indeed, retirement is often merely a switch from one type of activity to another - it is not the end of activity. The individual's ability to change and adapt to new situations is important, whatever their age. In fact, the ability to work, largely depends on one's state of health, need, interest, motivations and not their age.

While changes in specific work performance do occur over time, general performance does not decline with increasing years. What may be lost in speed of reaction time is compensated for in experience, dependability, and loyalty.

There is no specific age at which a person loses productivity or creativity. Indeed some folk never even manage to achieve productivity or creativity, much less lose it!

Many people develop new interests in their older years. Literature abounds with stories of famous folk who are in their eighties and creating new things. Toscanini, Rubinstein, and Horowitz are three such timeless people. They gave the world a heritage of musical brilliance that anyone will be hard pressed to equal.
To call older adults unproductive because of their age is unfair and untrue, and to force them to retire at the age of 65 robs society of the much needed richness of experience. Why does 'seniority' mean so much in the work world, but only up to a point?

Responses to work and retirement depends on one's personality; it depends on the person's own concept of aging and what it holds for them. Regular employment
controls the person's time. Retirement can give one the opportunity to govern their own time. How a person spends their own time depends on many aspects of their personality, life circumstances and personal desires.

Stereotype #3

Old people prefer to withdraw into themselves, and to live apart from the mainstream of life.

Separation of older adults from society can be the fault of the young, not the old. Older adults maintain their interest in and participation with the world around them, given good health and opportunity.

Most older adults prefer to remain in their old communities, surrounded by familiar people and things. Most keep in touch with their families, and are interested in the affairs of the world. They wish to remain self-sufficient and involved.

Social networks based on the workplace often dissolve upon retirement. They are replaced by new friendships made through voluntary groups, and with neighbours living in similar circumstances. 'Family' is important, but many older adults also enjoy close friendships with others of the same generation as themselves. Caring human contact is the key to human happiness, whatever the age.
Stereotype #4

The older a person becomes, the more one is set in their ways, and resistant to change.

Age has little to do with one's inclination to change a viewpoint, or try something new.

Although studies show that personality traits are stable over time, people can and do change as a result of life's experiences. In fact, some researchers suggest that older adults are more adaptive to change than younger adults. Most certainly, aging calls for adaptive behavior probably more frequently than when one is young.

An older adult has many adjustments to make as life proceeds - children leave home; work patterns change or stop; income level deteriorates; friends and loved ones leave or die. Life is a continuous cycle of changes.

It is important to remember that most people remain open to change throughout their lives, contrary to the popular beliefs about their resistance toward it. Some researchers suggest older adults are indeed more adaptable than younger. Certainly, aging calls on adaptive behavior more frequently than when one is young.
Stereotype #5

The older adult inevitably suffers from mental decline and senility.

Senility is one of the most misused words in the description of older adults. Even the dictionary refers to it as "showing signs of old age, weakness and infirmity of mind and body" (Webster's Dictionary, 1960).

The fault lies in the fact that people see such deterioration as the inevitable companion of old age.

It ignores the fact that senility is related to disease; in the absence of disease there is absence of senility. Arteriosclerosis, Alzheimer's and other diseases do produce a deterioration of brain function. The Physiological Aspects of Aging Module describes these events in more detail. They are sadly irreversible.

Other events can also mimic the symptoms of senility. Loneliness, isolation, grief, malnutrition, and drug interactions are all culprits in causing what may appear to be confusion and decreased brain functioning. These are reversible situations. Helping older adults deal with their loneliness, and improving their diet and activity will do wonders in lessening the apparent mental decline.
Forgetfulness, confusion, and inattention are signs of senility. They are also signs of neglect and lack of human caring contact. Ensuring that the older adult is well fed, stimulated, challenged, and cared about will bring remarkable improvements in mental functioning. It is indeed erroneous to limit this fact to the older adult. Healthy infants will not survive if they are deprived of the same qualities. Why is it right and proper for the young to receive such treatment, but nonessential for the old?

Learning performance remains stable over time; only its speed is reduced with age. Decision making and problem solving abilities remain. Forgetfulness, an event that plagues most people throughout life, may well be a function of disinterest or boredom. A brain that is kept active usually remains active.
"USE IT, OR LOSE IT!"

STEREOTYPE # 6

Old people are serene and content in their last years, content to reap the rewards of life's labours.

Assuming older adults are in a state of tranquility, blinds the observer to the very real stresses and strains of later life. In fact, older adults probably have to cope with more stresses than any other age group. Enjoying the fruits of life's labours can be short-lived as one sees savings wither away due to inflation or costly housing. Without a loved one to share it with or close friends passing away can also hinder the enjoyment. All the changes are inherently stressful and require adjustments that may be painful, sad, and humiliating.

Many of the changes faced can produce depression, anxiety, and even feelings of illness. The depression that is so frequent a companion of these changes contributes to the high suicide rate amongst those over 65 years of age.
**Stereotype #7**

Age brings a decrease in the need for sexual gratification as well as with a decrease in the ability to perform.

The mental picture of the amorous old couple brings a smirk to the lips of the young.

This foolish and erroneous viewpoint is fortunately being changed, thanks to many recent studies which prove that sexual needs and abilities continue throughout life.

The Physiological Aspects of Aging Module describes normal sexual changes that occur in both men and women in later years. They are relatively minor and in no way indicate a cessation of sexual activity. Indeed, once freed of the burden of childrearing and employment demands, the older couple may enjoy a new and closer relationship.

Frequency of sexual contact for the older adult is dependent on several important factors. Past practice and degree of activity is probably a key indicator of present and future actions. A couple who enjoyed regular and satisfying sexual relations in younger years are apt to continue similar practices into their 70s, 80s and beyond, good health permitting.
Another important factor is available and willing partners. Widowers tend to remarry following the death of a spouse; widows, who outnumber widowers, are not so successful in finding companions.

The assumption of decreased or non-existent intimacies in older years does a disservice to all. Physical changes do slightly alter some activities, however the emotional attitude of the individual is even more important.
It is important to remember also, that intercourse is but one expression of sexuality. Disability or ill health may interfere with the sex act, but it need not prevent mutual expression of love and caring.

Recognition of ongoing sexuality needs in later years is essential for maintaining individual respect and dignity. It is as much a part of life as any other activity that brings two people together in a sharing caring way.

Living in an institution and living without one's spouse does not eliminate the need to love and be loved. Society is only beginning to come to grips with this fact.
SUMMARY

Age associated changes are not necessarily age dependent. Older adults do not comprise a homogeneous group of faceless, identical people. It is unacceptable to generalize, to make sweeping assumptions, to stereotype.

One must separate the universal consequences of aging from the effects of lifestyle and environment.

Loneliness and isolation may be the result of the physical changes in sight and hearing. They may also be the effect of loss of loved ones and a lack of people who care.

No period of life is free from illness and disability. Only the type of disease encountered changes with the life period. Any chronic disease serves to block social interaction and alienate those afflicted, be they five or eighty.

The stereotypes that lead one to think of older adults as idle, aloof, rigid, serenely senile, and sexless are unfair and untrue. They blind the observer to the many active, virile and enthusiastic older adults with which society is blessed.

Now that the stereotypes have been proven wrong, it is up to the individual to tap the resources held by older adults. Everyone will benefit.
APPENDIX
SELECTED READINGS


ADDITIONAL RESOURCES

THE LAST OF LIFE

With the number of people aged 75 and over steadily increasing in our society, this thoughtful film is a timely attempt to dispel some of the myths surrounding old age and senility. Looking at geriatric aging, it reminds us of some often forgotten truths: that growing old is a natural process, not a disease, and that old age can still be a creative time. From The Nature of Things series.

27 MINUTES: 50 SECONDS COLOR 106C 0177 110 CBC

SOMETHING TO CELEBRATE

This extraordinary and critically acclaimed look at life after 70 focuses on fourteen Canadians between the ages of 71 and 92, who share an unfettered curiosity and passion for life. They are women and men - intellectuals, eccentrics, artists, farmers, entrepreneurs, horse trainers and ordinary folk - most with some physical difficulties, many who have lost partners, and all who confront death openly; there is nothing maudlin here. The film is a celebration of life at its wisest and fullest; an inspiration to old and young alike.

56 MINUTES: 43 SECONDS COLOR 106C 0183 023

JACK RABBIT

"Jack Rabbit" Johannsen, the man who introduced cross-country skiing to North America, is filmed during his hundredth year. A model of old age, his story reveals a love of life and of nature, and continuing active participation in the world around him.

28 MINUTES: 40 SECONDS 106C 0175 042
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Manitoba Department of Health, Home Economics
Manitoba Heart Foundation
TITLES OF THE TRAINING PROJECT'S MODULES

BLOCK A: BASIC KNOWLEDGE OF AGING PROCESS
A.1 PROGRAM PLANNING FOR OLDER ADULTS
A.2 STEREOTYPES OF AGING
A.3 HUMAN DEVELOPMENT ASPECTS OF AGING
A.4 SOCIAL ASPECTS OF AGING
A.5 PHYSIOLOGICAL ASPECTS OF AGING
A.6 DEATH AND BEREAVEMENT
A.7 PSYCHOLOGICAL ASPECTS OF AGING
A.8 CONFUSION AND THE OLDER ADULT
A.9 NUTRITION AND THE OLDER ADULT
A.10 LISTENING AND THE OLDER ADULT

BLOCK B: CULTURAL GERONTOLOGY
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   B.1.1 COMMUNICATION AND ADJUSTMENT
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B.2 GERMAN CULTURE
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B.3 FRENCH CULTURE
   B.3.1 COMMUNICATION AND ADJUSTMENT
B.4 NATIVE CULTURE
   B.4.1 COMMUNICATION AND ADJUSTMENT
   B.4.2 COMMUNICATION AND ADJUSTMENT

BLOCK C: WORK ENVIRONMENT
C.1 WORK ENVIRONMENT

NOTE: MOST MODULE'S ARE AVAILABLE IN TWO FORMATS:
A) PRINT FORMAT
   OR
B) INTERACTIVE VIDEO (COMPUTER ASSISTED TELEVISION) FORMAT

RESOURCE MATERIALS:
HANDBOOK OF SELECTED CASE STUDIES
USER’S GUIDE