

Reframing ageing

Public perceptions of ageing, older age and demographic change

July 2021



About us

Centre for Ageing Better

The UK's population is undergoing a massive age shift. In less than 20 years, one in four people will be over 65. The fact that many of us are living longer is a great achievement. But unless radical action is taken by government, business and others in society, millions of us risk missing out on enjoying those extra years.

At the Centre for Ageing Better we want everyone to enjoy later life. We create change in policy and practice informed by evidence and work with partners across England to improve employment, housing, health and communities.

We are a charitable foundation, funded by The National Lottery Community Fund, and part of the government's What Works Network.

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Our previous research shows that negative and harmful stereotypes about ageing and older age are common across many parts of society including the media, advertising, and central and local government (Centre for Ageing Better 2020a; 2020b).

This report, based on mixed methods research conducted by Savanta ComRes and Equally Ours, builds on our previous research to better understand public attitudes towards older age and ageing. It is part of a wider programme of work at Ageing Better, in collaboration with Age-Friendly Manchester, to examine how ageing and demographic change are talked about in society. With this work we are aiming to shift towards a more positive and realistic narrative of ageing and older age which should, in turn, create more fertile ground for achieving a society where everyone enjoys later life.

Attempting to change narratives is often known as 'reframing': making conscious and intentional choices about what to include – and what not to include – in communications in order to influence how people think, feel, and act on certain issues. The language we use matters because it can influence public opinion, which can in turn influence policy choices and decisions.

The current 'dominant view' of ageing and demographic change is summarised in the table on page 6. This is derived from our <u>literature review</u> and <u>discourse analysis</u>, which explored how ageing was talked about and represented across different parts of society.

The 'alternative view', also summarised below, has been developed over several years of researching ageing and how people experience later life. Many working in ageing already advocate for this view and ascribe to it, however it is clearly at odds with the current dominant view. The gap between these two views represents the reframing challenge. We explore this and how we create that shift from the dominant view to the alternative view in this report.

Table 1

The dominant view: 'Ageing is about old people'	The alternative view: 'Ageing is a life-long process'
Ageing is an inevitable process of physical and cognitive decline, leading to the destination of old age and, ultimately, death	With the right policies, environments and support people can age well, extending healthy life expectancy, leading fulfilling lives and having a purpose
Old people are frail, vulnerable and dependent, which makes them low in competence	Older people can live healthy active lives, participating in and contributing to the workplace, community and society at large
Demographic change is a growing and unsustainable economic and social cost and burden	Our longer lives are an opportunity – for the economy, for society and for us as individuals
There is an unequal distribution of wealth and opportunities across generations, with older people benefiting at the expense of younger people	Inequality exists across the life course, and age is not a proxy for opportunity or wealth
Ageing is something to defy	Ageing is something for individuals to accept and for society to adapt to
How an individual ages is primarily their responsibility and within their control	An individual's experiences of ageing are largely determined by wider society. How an individual ages can be negatively affected by a range of structural issues, including: society's discriminatory attitudes and policies; poorly designed systems and services; national and local level budget decisions; problems in the built environment, etc.

Research methodology

This mixed methods research project comprised focus groups and a nationally representative survey.

Eight focus groups were conducted in two areas (Manchester and Bournemouth), with two focus groups for each of the following age bands: 18-34, 35-49, 50-79 and 70+. In total, 70 participants were engaged in the focus groups. These groups took place before the pandemic and therefore were face to face and did not contain any discussion of COVID-19.

The nationally representative survey was conducted during the pandemic and gathered the views of 2,185 adults across England. Weights were applied to the data in order to ensure representativeness.

Further details of the methodology can be found in the full research report (Centre for Ageing Better, 2021a).



Ageism is important because it can cause a huge range of harms in a wide range of contexts, including employment, health and social care, and media and culture.

Ageism can also be intersectional; for example, a person may experience a 'double jeopardy' on the basis of their age and another personal characteristic such as gender or ethnicity. This report focuses on ageism towards older people, but it is important to note that ageism operates in both directions and can affect younger people too.

Harm from ageism in the labour market

International data suggests that age is the most commonly reported reason for work-related discrimination (OECD, 2020). We know from our <u>Good Recruitment for Older Workers</u> project that many older applicants are frozen out of the job market due to inadequate processes, age-bias and a lack of engagement from employers and recruiters. Over one third of older workers (aged 50-69) feel at a disadvantage in applying to jobs due to their age (Centre for Ageing Better, 2021b). This can lead to people falling out of employment entirely and/or not getting the right work for their needs and aspirations.

Harm from ageism in health and social care

International studies including a <u>systematic review</u> published in 2020 have found widespread evidence of ageism in health care, leading to older people being denied access to care and treatments, being excluded from research studies, and suffering cognitive impairment. Whilst we would need to understand more about whether this is a widespread problem in the UK today, we do know that in mental health services, for example, older people are more likely to be prescribed antidepressants than talking therapies, and the treatment of depression and anxiety in older people is not considered a priority in many areas.

Harm from ageism in media and culture

In some ways ageism in language, photography, the media, social media, advertising and marketing, film and TV and other fields of public life and culture is the most obvious and apparent manifestation of the stereotyping that feeds our prejudices and underpins discrimination (Centre for Ageing Better, 2020b). Whilst many would say that it's harmless, the normalising of worthlessness of old age feeds into our own perception of self and subtly validates discrimination in employment and other areas.

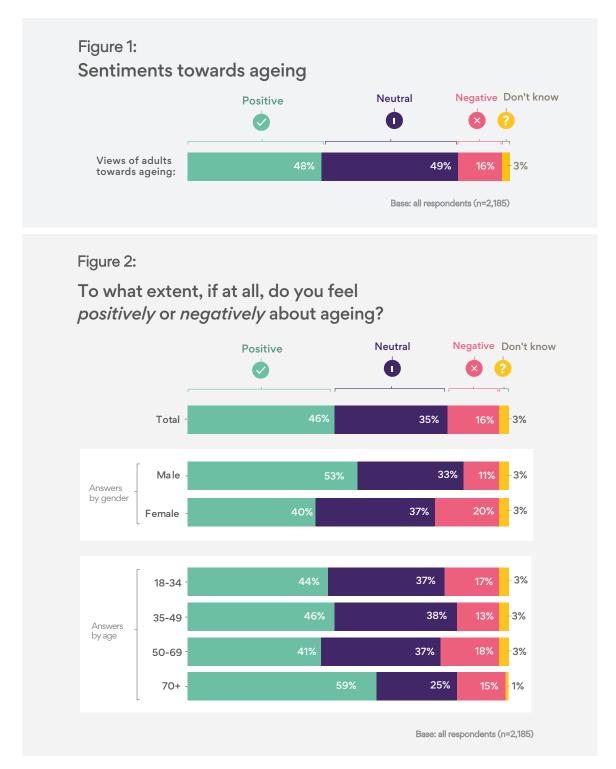


Public attitudes towards ageing and older age are complex and nuanced. In our quantitative research we found that, broadly speaking, older people feel more positive about later life than younger people. However, between a quarter and almost two fifths of all age groups see it as a time of decline and vulnerability.

Some of these people may have internalised negative stereotypes of older age, although for others it may be based on a lived experience of decline and vulnerability. Despite this our qualitative research found that for some participants, older age is seen as a time of freedom. Other recurring themes in the focus groups included older participants feeling younger than their actual age and the pressure of social expectations which dictate how they should look, feel and act as they grow older.

Mixed views towards ageing

Men tend to be more positive about ageing than women (53% versus 40%) and those in the oldest age group (70+) tend to be more positive about ageing (59%) than any other age group. In focus groups the oldest participants often expressed the most positive sentiments towards ageing, focusing far less on the perceived physical impacts of ageing than other age groups.





Those aged 50-69 were the least positive (41%) and the most negative (18%) about ageing amongst all age groups. The focus groups showed that for this age group this negativity may well link to feelings of being overstretched from working and caring responsibilities, despite some expressing that retirement – although seemingly a long way off – was something that they looked forward to.

The youngest age group (18-34) were the second most negative (17%) and second least positive (44%) towards ageing. In the focus groups some 18-34-year-olds were positive and hopeful about the future, but many remained fearful of the unknown and thought older age would inevitably lead to decline and dependency on others or the state.

Ageing and older age as a time of decline and dependency

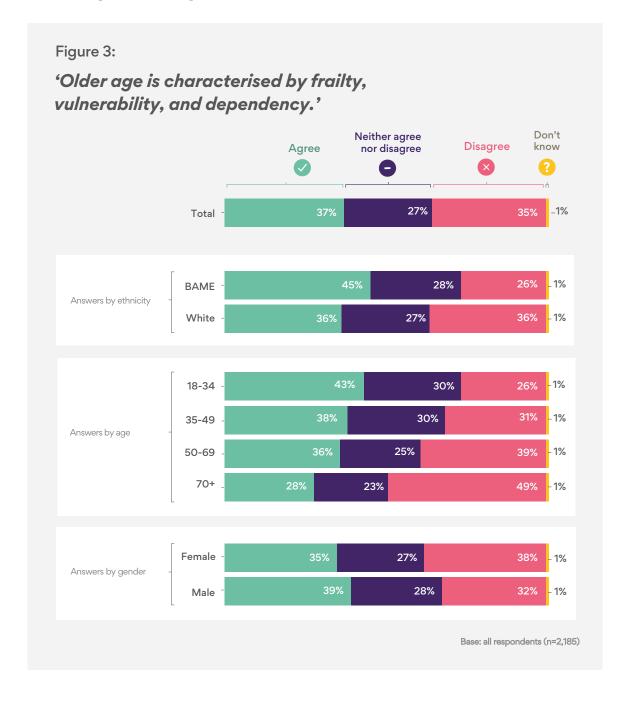


Figure 4: 'All people should expect to deteriorate physically and cognitively (i.e. their mental function) when they get to old age.' Neither agree nor disagree Agree Don't know Disagree 28% Total 29% Male ı 1% Answers by gender 28% ₁1% Female 25% ₁1% 18-34 ₁1% 28% 35-49 Answers by age ı1% 32% 50-69 70+ 27% 30% Base: all respondents (n=2,185)

46% of people agree we should all expect to deteriorate physically and cognitively when we get to old age.



In the focus groups this idea was often reflected upon with regards to people's own experiences of ageing:



"You know when you used to hear people and they'd say, they'd get up and they'd go, oh my back, or my knees. Suddenly I'm saying it and I'm like, flipping heck, what's going on here, you know?"

(Female, 35-49)

A gender split is evident, with larger proportions of men than women agreeing with both statements: 39% of men think that older age is characterised by frailty, vulnerability, and dependency as opposed to 35% of women, and just over half (51%) of men think we should expect to deteriorate physically and cognitively as we get to old age compared to just over two fifths (41%) of women. Adults from Black and minority ethnic groups were also more likely than adults from White groups to agree with the idea that older age is characterised by frailty, vulnerability, and dependency (45% versus 36%).

There is also a clear difference by age, with larger proportions of younger groups tending to agree with both statements. More than half of 18-34-year-olds (53%) expect a physical or cognitive decline, and 43% agree that older age is characterised by frailty, vulnerability, and dependency.

Younger participants in the focus groups often talked about the inevitability of decline as we age: "with age comes health problems... that's certainly... part of ageing" (Female, 18-34) and occasionally mentioned specific conditions "like arthritis" as being "quite a normal thing for older people" (Male, 18-34). This perceived decline was ultimately linked with 'dependency', and for the younger age group often drew on experiences relating to family members:



"My Grandad used to always say, "once a man, twice a child". You start off your life having to be looked after and cared for, and then you end your life the same."

(Male, 18-34)

Almost half (49%) of the oldest survey participants (70+) rejected the idea that older age is characterised by frailty, vulnerability, and dependency, but 28% agreed with the statement. Just under a third (30%) of the oldest participants also rejected the idea that we should expect a physical and cognitive decline in older age, although just over two fifths (43%) agreed with that statement. This nuance was evident in the focus group discussions, where there was a degree of acceptance that things "inevitably happen", but discussions often focused on what people still had rather than what they have lost.

Some focus group participants cited older age as a potential time of freedom:



"You've got more choice about when you go on holiday, you don't have to fit it in with work or school term. So, timewise, as long as your health is reasonable, it opens everything up. I can do it when I want. I can get up when I want. When you're younger, you usually can't."

(Male, 70+)



"I just look forward to being able to spend that time with my wife where we don't have to worry about anyone else. Where it's just me and her and we can spend our time together."

(Male, 18-34)

However, others noted that is only possible for those who can afford it and who do not have other issues to consider such as caring responsibilities which may make them "busier than ever" (Female, 50-69).

Feeling younger than your actual age

A common theme across the older focus groups (50-69 and 70+) was the idea that people did not necessarily feel as old as they were. Many felt that they remained "young inside" (Female, 70+) and that "you are [only] as old as you feel" (Female, 70+). This could be seen as evidence of internalised ageism, through which people see the idea of 'feeling old' as a negative thing and therefore try to associate more with their younger selves.

There was also some talk of acting younger than your age, often in relation to relatives of younger participants doing things that are not seen as being stereotypically old (prescriptive stereotypes). As one younger participant noted about their older relative climbing a ladder:



"There's nothing mentally wrong with her. She just can't believe that she's ageing... Some old people are old in their body but still young in their mind. They just can't do what we can do."

(Male, 18-34)

In this sense, people's understanding of their own ageing process seems relative. Those who have experience of being older see it in a more realistic light, as opposed to those who have not yet experienced it themselves.

Social expectations around age

Another common theme from the focus groups was age-related social expectations. For example, many people noted that there were stereotypical ideas about the stage in life when you should have achieved financial stability or when you should start a family. However, there was broad recognition that these were arbitrary and often based on tradition rather than anything else more concrete:



"You become more aware that there isn't a set rule for: by this age, I should do this, by that age, I should do that. Ten years ago, everyone was like, "By the time I'm 25 I'm going to be married with four kids, and own my house." And that could be realistic for some people, but your priorities change, and the things that you want change, and you realise that it doesn't really have anything to do with age, the way you think it does when you're younger."

(Female, 18-34)

As the survey results showed, women are almost twice as likely to be negative about ageing than men (20% versus 11%). This may well link to the fact that social expectations are often gendered, with women experiencing more pressure with regards to standards of physical beauty and the concept of 'settling down':



"It's the ladies that are written off and thought, okay, once you're past 40 then that's it."

Female, 18-34



"I'm 31, and I was talking to one of the guys at work. He's 27 and he's on his fourth kid and he looked at me and he's like, 'Well, shouldn't you be starting soon? You're getting old."

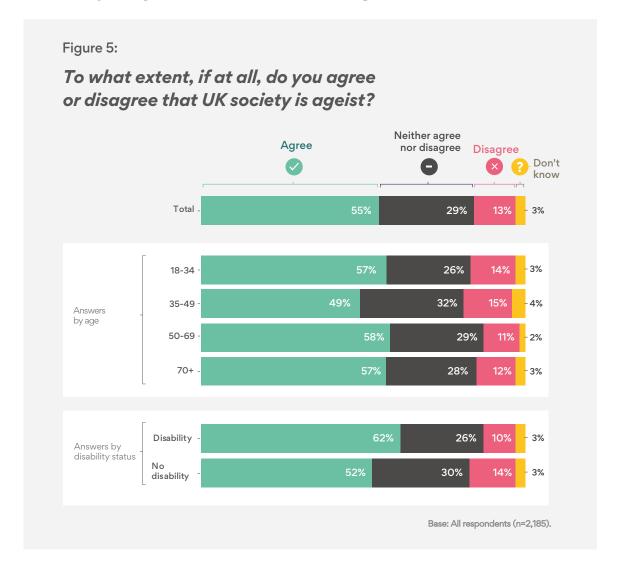
Female, 18-34



Our survey shows that most people believe UK society to be ageist. It also shows that attitudes towards the changing age profile of the UK differ consistently by age.

However, many people reject the common narrative of 'old versus young' that is driven by the media and those in politics (Centre for Ageing Better 2020b). Ultimately, the public see government as having a major role in addressing the issues that we may face due to demographic change.

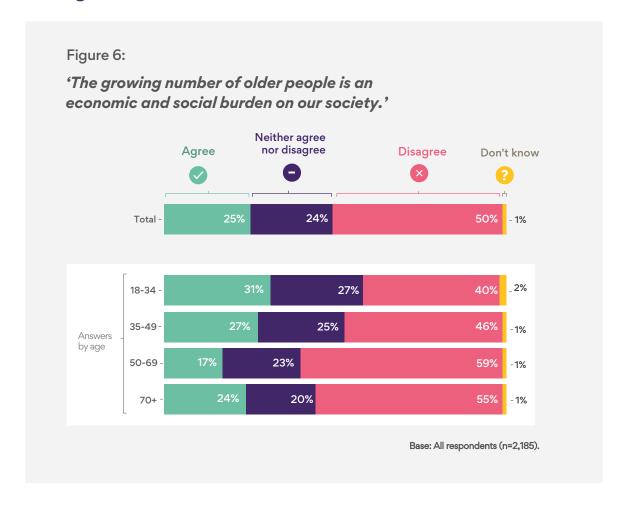
The majority feel that the UK is ageist



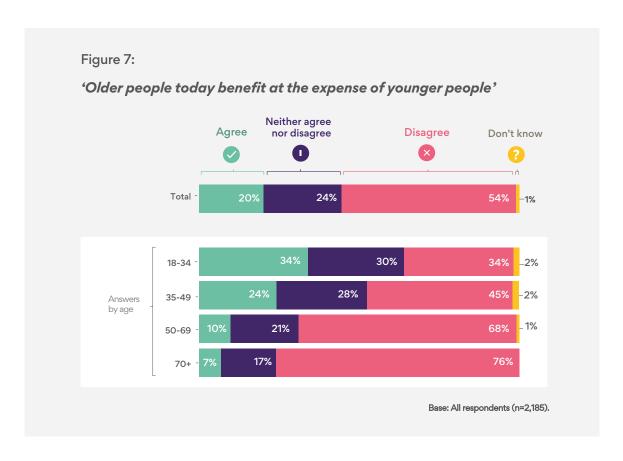
The majority of respondents agreed that UK society is ageist (55%) as opposed to those who do not (13%).

Despite being the least likely group to say that the UK is ageist, 49% of 35-49-year-olds still believe it to be the case. Agreement that the UK is ageist is highest amongst the youngest (57%) and the older age groups (58% and 57%). This may well indicate that these groups have higher levels of lived experience of ageism at both ends of the age spectrum. Agreement that the UK is ageist is also higher amongst those who identify as disabled (62%) versus those who don't (52%).

The public do not support a narrative of intergenerational conflict

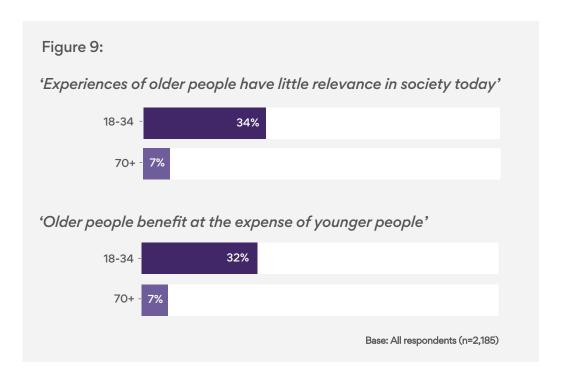


The idea of a conflict between generations is not supported by the majority of the public. Exactly half (50%) of adults reject the idea that older people are an economic and social burden (with only 25% agreeing), just over half (54%) reject the idea that older people benefit at the expense of younger people (with only 20% agreeing), and 80% think that older people have a wealth of experience and perspectives to offer society today as opposed to 17% who believe that older people have little relevance in society today.





However, there is a clear difference across age groups as to agreement with these statements – particularly in the context of the latter two statements. One third (34%) of those aged 18-34 agree with the idea that older people benefit at the expense of younger people and 32% of 18 to 34-year-olds believe that the experiences of older people have little relevance in society today. This compares to relatively low figures (7% for both statements) of those aged 70+.



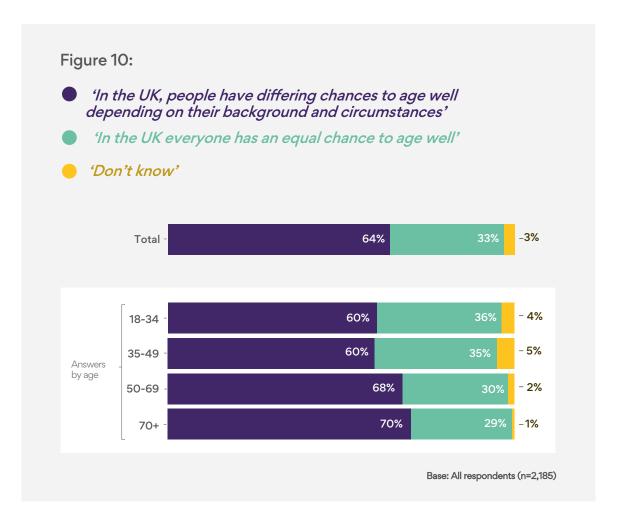
Despite the fact that across the population as a whole many adults disagree with the idea of intergenerational conflict, a minority of younger people do perceive a tension between older people and younger people.

This could potentially be linked to their current experiences of lower incomes, insecure work, and an inability for many to own their own home. In the focus groups, the idea of intergenerational conflict was raised by both younger and older participants, often in terms of media and political narratives. For example, voting behaviours were often brought up with younger people suggesting that older people were to blame for Brexit, although others challenged this and said it was a "cheap stereotype".

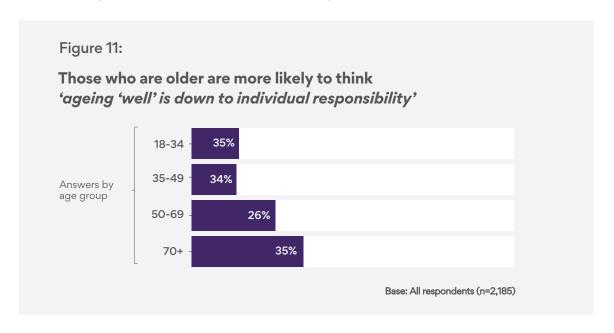


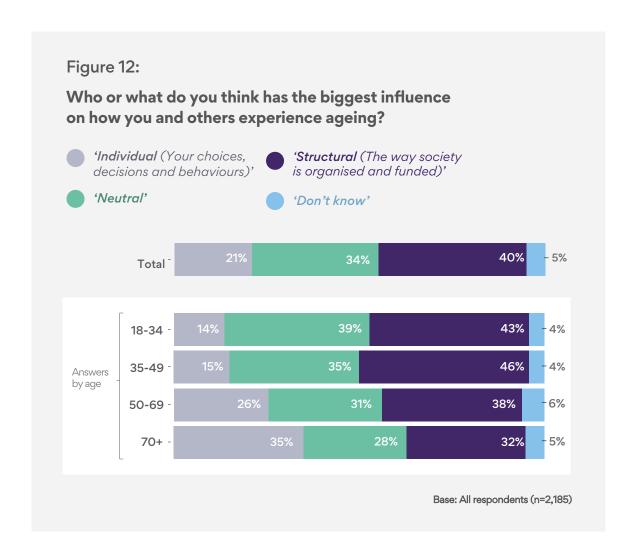
The majority of people subscribe to the idea that a person's socio-economic circumstances affect their experience of ageing (64%) more than individual choices and behaviours. However, around a third of people (33%) believe everyone has an equal chance to age well regardless of circumstances.

Mirroring this pattern, almost twice as many people believe that the way society is organised and funded (40%) is more important to your experience of ageing that your individual choices, decisions, and behaviours (21%). This represents a "structural" understanding of ageing and ties into the idea that government and other institutions are responsible for enabling everyone to enjoy a good later life, rather than it simply being the responsibility of individuals.



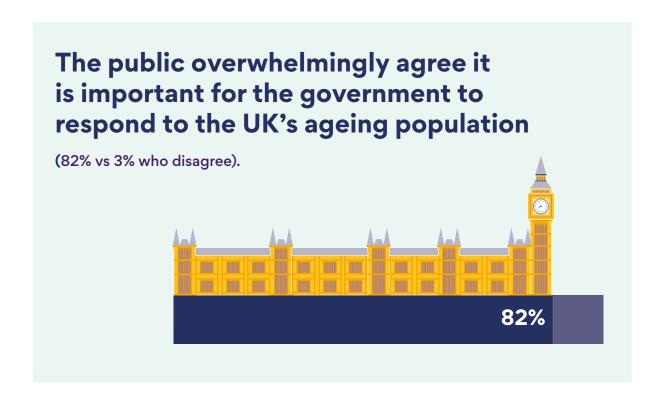
However, as with many other questions in the survey, there was a clear difference of opinion about these concepts by age. Those who are older are more likely to think ageing 'well' is down to individual responsibility (35% for 70+ and 26% for 50-69-year-olds) than younger groups (14% for 18-34-year-olds and 15% for 35-49-year-olds).

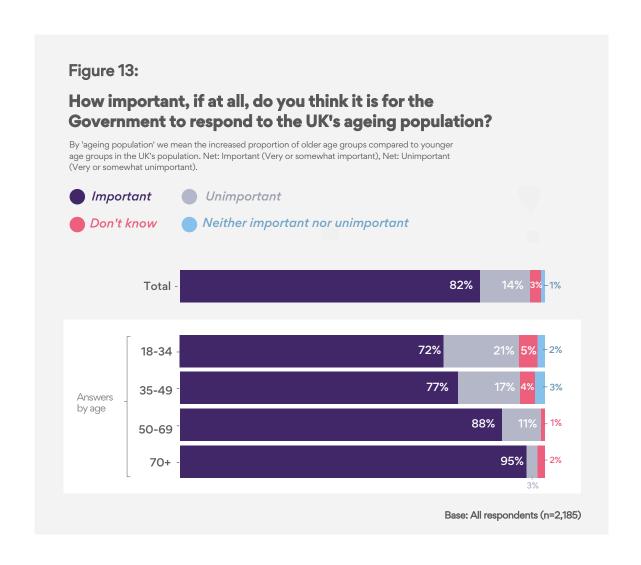


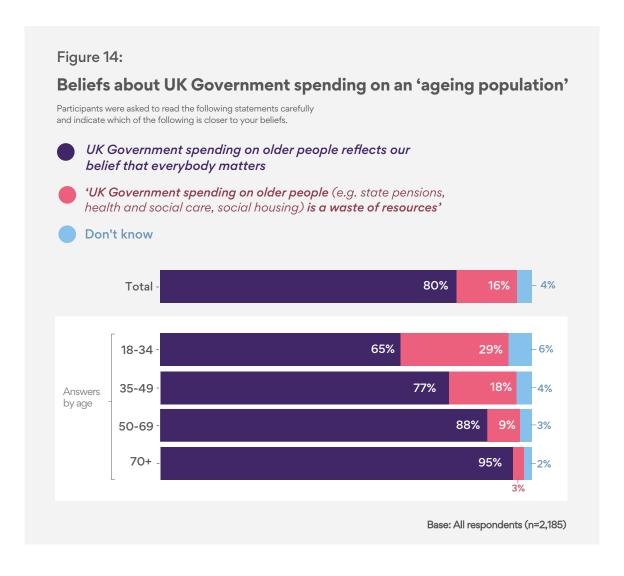


Government is seen as having a key role to play

Linked to the public's general support for the structural view of ageing, the vast majority of people (82%) thought it was important government responded to the challenges and opportunities of the UK's ageing population (with just 3% of people disagreeing), and that UK government spending on older people reflects our belief that everybody matters (80%).







However, the focus groups illustrated that there is a mismatch between public attitudes towards this issue and narratives that are often seen in the media.

This was particularly noted by the middle age and older focus groups where they regularly saw older people being portrayed as a "burden" and "drain" on NHS resources.

This idea of older people as a burden occasionally extended beyond a healthcare context into other issues including the idea that they are a "drain on local resources". Reframing ageing



This report shows that the dominant and often negative narratives of ageing and older age seen across society are reflected in public attitudes, but with some important nuances, including some notable differences by age such as on the topic of a 'generational divide'.

As outlined in the introduction, the over-arching purpose of our work on this topic to date is to explore how we can bridge the gap between the current "dominant" view and the more constructive "alternative" view of ageing and demographic change, using values-based framing practice. This is an evidence-based approach to long-term, large-scale social change, based on what cognitive science tells us about how we think and form opinion.

New ways of talking about ageing

A range of new ways of talking about ageing and demographic change were developed and tested with people of all ages through both the focus groups and survey. The messages were designed to achieve two main goals: make people more positive about the process and experience of ageing; and expand their understanding of the structural nature of this experience – that different people have different experiences due to the way society is organised and funded and that, by changing this, we have the potential to achieve a society where everyone enjoys later life.

The messages invoke a number of shared values to help achieve these attitudinal shifts: freedom and control to give agency, competence and empowerment to us all across the life course; community and interdependence to highlight our interdependence and mutual need to care for one another across our lives; and equality and social justice to highlight the structural factors that shape our experience of ageing and to drive support for policies that allow us *all* to 'age well'.

Three initial reframing routes (through three overarching messages) were explored in the focus groups: the first focused on the process of ageing; the second on the experience of older age; and the third on demographic change. These are given in table 2 on the next page.

Table 2:

Route	What we want to achieve	Overarching message for this route
A - Reframe ageing	Shift understanding of ageing as an inevitable process of decline and loss to a continuous process of change	Ageing is living - a process of continuous change. Throughout our lives, we have different experiences, opportunities and challenges, and contribute and need different things. But [what] we all need is freedom to decide how we live, and recognition and support from one another to thrive. And we all benefit from communities, workplaces and services that give us an equal chance to live the best lives we can.
B - Reframe older age	Shift associations with frailty, vulnerability, dependency and low competence towards living lives of equal value and purpose	As we get older, many of us report a stronger sense of purpose and wellbeing. And our diverse life experience and skills, perspective and resilience mean we have much to contribute. Our communities, workplaces and services can be designed in a way that fully unlocks what we all have to offer in older age. This would give us the freedom to decide how we live, the opportunity to give and receive the recognition and support we all need, and an equal chance to thrive throughout our lives.
C - Reframe longer lives	Shift understanding of longer lives as a societal and economic burden to a mutually beneficial opportunity	Most of us will live longer than the generations before us – an achievement we should all feel proud of as a society. By designing our communities, workplaces and services so that we can all contribute, live well together and thrive, we can fully unlock the benefits and opportunities of our extra time.

Messages

Based on the insights from the qualitative testing, 15 short messages were then developed and tested through the survey. Each has a primary purpose and was designed to work in combination with other messages, based on framing good practice. A regression analysis (also known as a Key Drivers Analysis) was used to assess the potential of each message to achieve the messaging goals above.

Table 3:

Reframing route	Messages we tested
A. Reframe ageing	1. Ageing is living. Across our lives we have different experiences, opportunities and challenges, and we contribute and need different things.
	2. Ageing is living – a lifelong process of growth. Whatever our age, we all want good health, purpose and connection with others.
	3. Because of the way our society currently works, some of us are more likely than others to be able to age well.
	4. Things like poorly designed services, an economy that doesn't work for everyone, and discriminatory attitudes mean that some of us are less likely to be able to age well than others.
	5. Our experience of ageing can be improved if we invest and work together to change the way our society is organised.
	6. If we improve the way we organise and fund things like work, housing, healthcare and our local communities, we can all have the best chance possible to lead healthy, purposeful and fulfilling lives.
	7. When our society enables us all to have freedom and control over our own lives, we have the chance to live the best lives we can, whatever our age.
	8. We all need support at different times across our lives, and we all want to live in communities where we look out for one another.
B. Reframe older age	9. As we age, many of us report a greater sense of purpose and wellbeing. Our diverse life experience and skills, perspective and resilience mean we have much to contribute in later life.
	10. 10. It's possible for us all to live meaningful and purposeful later lives, participating in and contributing to the workplace, community and society at large.
	11. Because of things like discriminatory attitudes, poorly designed services, and an economy that doesn't work for everyone, many of us aren't able to live as healthy and purposeful later lives as we could.
	12. Because of the way our society currently works, some of us aren't given the same opportunities to live as healthy and purposeful later lives as we could.
	13. Our experience of later life can be improved for us all if we change the way we organise and fund things like work, housing, healthcare and our local communities.
C. Reframe longer lives	14. Our longer lives are an opportunity – for the economy, for society and for us all as individuals.
	15. Most of us will live longer than the generations before us. If we organise and fund work, housing, healthcare and our communities better, we can all benefit from our longer lives.

How the messages performed

All of the messages achieved what they were designed to do. Those designed with the primary purpose of driving more positive feeling towards ageing, tapping into values of freedom and control and community and interdependence to do so, achieved this. And those designed with the primary purpose of driving the view that how we age is influenced by the way society is organised or funded, tapping into equality and social justice values to do this, did so. This is encouraging, given that around a third (34%) of respondents in our survey remain to be convinced that society's structures have a greater influence on ageing than our own choices.

Overall, messages designed to reframe older age (route B) performed the best - i.e. people were most positive about them. Out of the 15 messages tested, seven (highlighted above) performed particularly well at driving positivity towards ageing and the view that how we age is influenced by the way society is organised and funded. The top-performing message across all measures was:



"It's possible for us all to live meaningful and purposeful later lives, participating in and contributing to the workplace, community and society at large."

There are variations and some notable exceptions across different age groups. For example, messages designed with the primary purpose of driving positivity towards ageing were also more effective at driving a structural view of ageing among those aged 18-24.

And one message – 'Because of things like discriminatory attitudes, poorly designed services, and an economy that doesn't work for everyone, many of us aren't able to live as healthy and purposeful later lives as we could' – was effective at driving a structural view of ageing among all age groups except the over 70s. As we know from the attitudinal reseach that older groups are more likely than younger groups to think 'ageing well' is down to individual responsibility, this finding is not surprising; attitudinal change can take time, and the new frames that encourage it are strengthened through consistent use and repetition over time.

Messages with the primary purpose of creating a more positive feeling towards ageing appear to drive people towards a more individualistic stance – that how we age is down to our personal choices, decision and behaviours.



"As we age, many of us report a greater sense of purpose and wellbeing. Our diverse life experience and skills, perspective and resilience mean we have much to contribute in later life"

This goes against the evidence on how our experiences of ageing are determined and highlights the importance of using messages in combination to achieve both messaging goals. Ageing Better will be publishing further guidance on ways organisations can pratically apply messages and insights from this project.

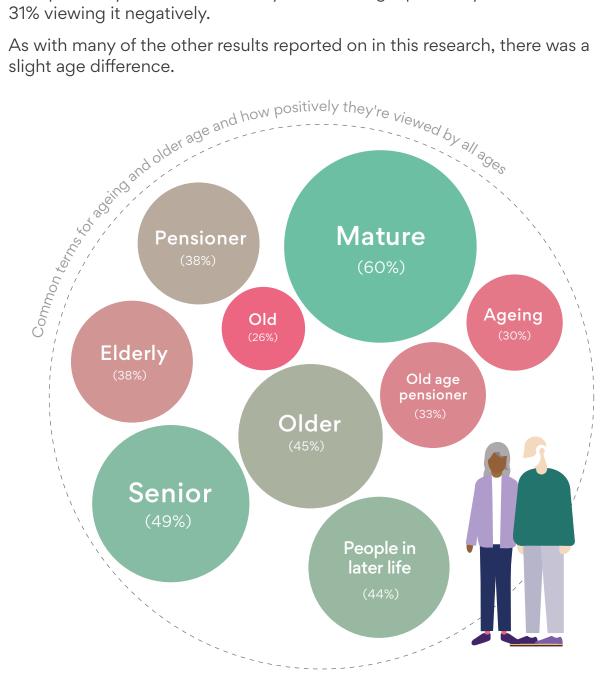


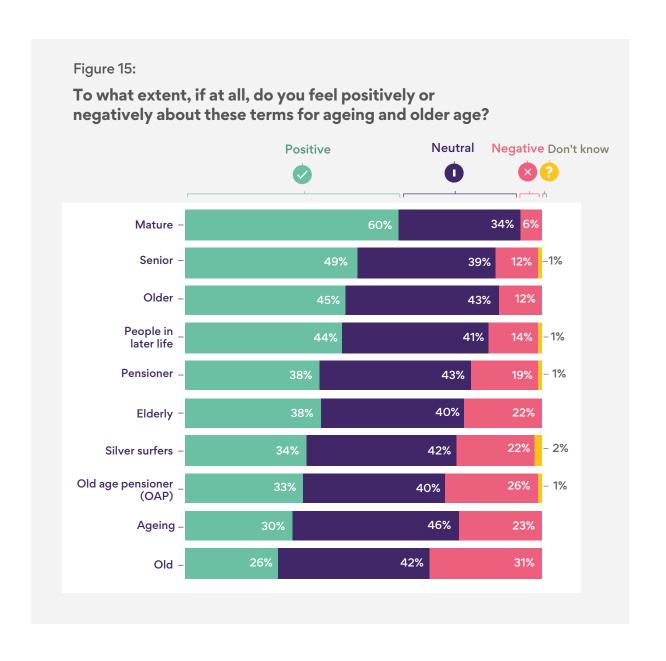
Preferred terminology

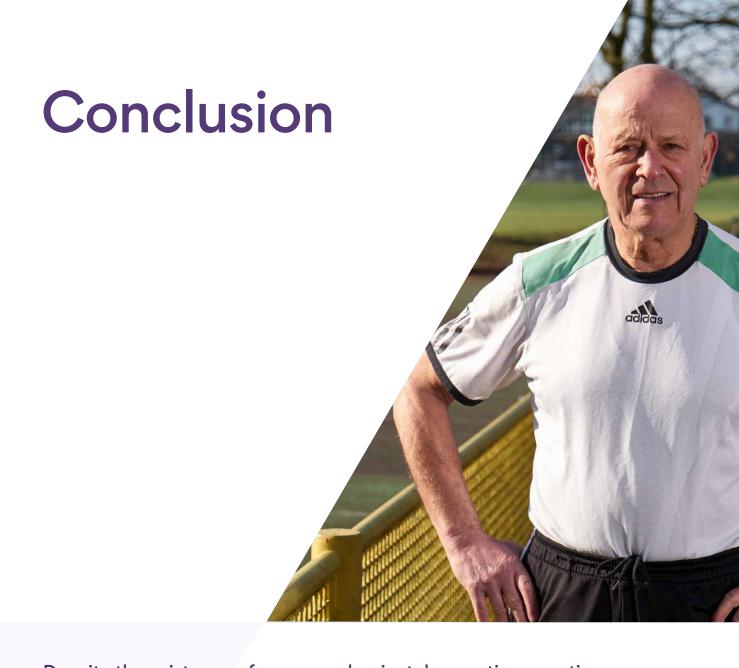
Various terms to describe people aged 65 and over were also tested in the survey. The most preferred term was "mature" with 60% rating it between 7-10 on the scale.

All other terms were seen as positive by fewer than half of respondents (less than 49% in all cases), although, on the whole, rather than feeling negatively towards these terms, larger proportions were neutral about them. The only term that the public saw more negatively than positively was "old", with only 26% viewing it positively and 31% viewing it negatively.

As with many of the other results reported on in this research, there was a







Despite the existence of many predominately negative narratives across society from political actors, the media, and the advertising industry (Centre for Ageing Better, 2020b) public attitudes towards ageing and older age are mixed. This research shows that while some parts of the population hold overwhelmingly negative views about ageing, many see it in a more positive light. Attitudes towards ageing are also complex and nuanced: it is possible for individuals to feel both negative and positive things about ageing and older age.

It is also clear that narratives of intergenerational conflict that are often driven by the media and politicians do not necessarily reflect public opinion overall (although around a third of young people do buy into these narratives). Across all ages, most people agree that your experience of ageing is determined by circumstances and the way that society is structured rather than just your life choices.

This research has generated some important insights that can be applied to the way we communicate about ageing, older age and demographic change, beginning the process of long-term narrative and attitudinal change. This has the potential to influence what policy solutions people will – or will not – support.

More work is needed to refine these messages and to develop and test other message elements to deepen our understanding of what works effectively with different age groups and why.

There is a clear appetite among the public for a new way of talking about ageing – one that conveys that it's a lifelong process of growth and, whatever our age, we all want good health, purpose and connection with others. Ultimately, we need to recognise the opportunities as well as the challenges of ageing and later life.

Recommendations



Those in the media and politics should avoid stoking intergenerational conflict

These narratives perpetuate ageism in society and do not reflect public sentiment. As our survey showed, half (50%) of respondents reject the idea that the growing number of older people is an economic and social burden on our society (with only 25% agreeing).

2 Government must lead society's response to the UK's ageing population

The public are united behind the importance of the need for government to respond to the UK's ageing population (82%), and more people believe that society's structures (e.g. housing market, educational system, labour market, health system etc.) have a bigger impact on how we experience ageing than individual decision-making (40% versus 21%).





3

Those with public platforms have a role in creating more positive narratives around ageing

Through their work, the media, politicians and the creative and cultural industries can shift associations of older age away from ideas of frailty, vulnerability, dependency and low competence towards living lives of equal value and purpose. These individuals, organisations and outlets have a responsibility to represent the diverse experiences of older age and avoid stereotypical portrayals of people in later life.

Anyone communicating with the public should apply the practical insights from this research

This means using the messages in this research that tested positively with the public to counter ageist narratives and foster a structural view of ageing. This will help to shift how people (including policy makers) think, feel and act on ageing. The Centre for Ageing Better will be taking forward this work with different sectors and industries and developing practical tools to help individuals and organisations apply these insights in their day-to-day work.



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Let's take action today for all our tomorrows. Let's make ageing better.



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