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Us, Them, and Me! Intergroup and personal challenges of aging successfully

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Cover Page Footnote

Howard Giles (Ph.D., D.Sc., University of Bristol) is a Distinguished Professor of Communication at the University of California, Santa Barbara, and Honorary Professor in the School of Psychology at The University of Queensland, Brisbane, Australia. His research interests embrace many areas of intergroup communication and he was the architect of communication accommodation theory. He has been the recipient of numerous awards, including the International Communication Association's (ICA) Inaugural Career Productivity Award in 2000, is Past President of ICA and the International Association of Language & Social Psychology, elected Fellow of 7 professional Associations, past Editor of Human Communication Research, and Founding Editor of both the Journal of Language and Social Psychology and the Journal of Asian Pacific Communication.

KEYNOTE: Us, Them, and Me! Intergroup and personal challenges of aging successfully

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> *"Aging seems to be the only available way to live a long time"*
> Daniel-François-Esprit Auber
> *(French composer, 1782-1871)*

> *"To know how to grow old is the master-work of wisdom, and one of the most difficult chapters in the great art of living"*
>
> Henri Frederic Amiel
> *(Swiss philosopher/poet, 1821-1881)*

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This Keynote Address, together with a genuine appreciation expressed for being invited, began with an outline of the journey I would take with the audience who, for various structural reasons, were in great spirits. First, and having outlined *communication accommodation theory* (CAT) which was the basis of much of the work to follow, the communicative ingredients of intergenerational encounters are outlined. Second, after introducing the communication predicament model of aging which was spawned by CAT and highlighting its intergroup and other features, I examine how accommodative and non-accommodative communication practices could be predictors of features of subjective wellbeing. Third, and in search of a healthier model of aging purportedly more traditionally evident in East Asia than in the West, our work is comparatively extended into that former region of the world. Fourth, failing to find such a panacea, various views of successful aging are considered, arguing that *communication* practices should fulfill a pivotal, but hitherto unexplored, role in understanding this process. Finally, the communication ecology model of successful aging is outlined and empirically tested, and its implications (together with the message of this Address) discussed.

Prior Research on Intergenerational Communication: A Backdrop

The substance of the Keynote started with an outline of communication accommodation theory (CAT) which, gratifyingly and after 40-plus years, has stood the test of time with different methods, across many social groups, languages, and cultures, and different applied domains (see, for example, Giles, 2016; Soliz & Giles, 2014). Contextual caveats notwithstanding, and all too briefly, CAT proposes that people:

- accommodate to where they *believe* (or expect) others to be communicatively;

- generally respond positively (e.g., liking, respect) to others who accommodate their communicative stances; and

- respond negatively (e.g., disdain, malign) to others who do not accommodate them, especially those that diverge away from, or over-accommodate (e.g., patronize), or underaccommodate (e.g., talk of their own agendas) them.

With this theoretical backdrop in tow, we moved to findings emerging from the study of communication and aging. Our earlier findings of *younger* adults' (viz., 22-year-olds) views of intergenerational communication *included:* 1) very little reported contact with 65+-year-olds, the quality of which, when it did occur, rated as dissatisfactory; 2) the same "neutral" messages from older folk were interpreted more agistly than from younger adults*;* 3) information sought from elders was also more agistly-framed than when questioning younger counterparts about the same event*;* 4) messages from elders were, likewise, recalled less effectively; 5) elder people were felt as stereotyping and patronizing them; 6) and older people were seen as having their own (underaccommodative) agendas in intergenerational interaction, and injecting "painful self-disclosures" in them which were felt to be very difficult to manage (for the sources of these studies, see Coupland, Coupland, & Giles, 1991; Williams & Giles, 1996). In this latter regard, a British birthday card depicts an older gentleman talking to a small boy – presumably his bemused grandson – smilingly, saying "…and that Jimmy is the tale of my very first colonoscopy…". Such an event would be very difficult to respond to and can be coined an "accommodative dilemma" in that enquiring further about the medical procedure could produce more unwanted information, while changing the topic could be seen as rude and impolite.

In addition, studies were designed where participants were asked to rate their overall impressions of past intergenerational as well as intra-generational exchanges. These studies

found that younger people found older adults—strangers and family—more *non*-accommodating (e.g., give unwanted advice and do not listen) than their younger same-aged peers. Somewhat reciprocally, older adults found young people *less* accommodating (e.g., more supportive and complimentary) than their same-aged peers (e.g., Ota, Giles, & Somera, 2007). Added to this, older people find other older people more *non*-accommodating than younger folk! In tandem, older *and* (especially) younger informants reported avoiding older adults. Having communication problems as an elder in dealing with both younger *and* same-aged peers is obviously not a healthy position in which to be; colloquially-speaking, the elder is "getting it in the neck" from both sides. Nonetheless, improving intergenerational relations is a two-way street and requires judicious communicative adjustments from both age groups.

Intergenerational Communication and Subjective Wellbeing

Arguably, the first attempt at theorizing about the interfaces between language, communication, aging, and health was the so-called, *communication predicament of aging model* (CPAM: Ryan, Giles, Bartolucci, & Henwood, 1986). This framework, like the later stereotype activation model (e.g., Hummert, 2011), was inspired by CAT. The CPAM attends to how younger people's negative stereotypes of certain older people they engage (e.g., as frail, old-fashioned, communicatively incompetent, and despondent) may prompt them to adopt over-accommodative language choices that are manifest in very simple words and grammar, as well as exaggerated intonation. After time, any continuation of these types of language usages, and from a range of different others, can lead some older individuals to question if they are truly as incompetent as messages to them from younger people imply.

As a result, in self-fulfilling prophecy fashion, many older people may be vulnerable to accepting the ageist characteristics implied by younger persons' language choices towards them,

and even behaviorally re-enact them, such as by a slower gait and shaky voice perturbations; and this, despite many of them being otherwise completely competent and autonomous. These negative self-perceptions may cumulatively lead to social withdrawal, a lessened sense of self-worth, and even somatic changes accelerating physical deterioration and demise. For a schematic representation of this model, see Ryan et al. (1986), and for an elaboration of it in terms of those occasions when certain elders assertively question the patronizing talk directed at them, see Harwood, Giles, Fox, Ryan, and Williams, 1993).

In sum, the CPAM includes the following important features:

- It highlights language and communication as *central* to the social construction of aging;

- Intergenerational communication can all too often be very problematic (albeit, of course, not always; see Williams & Coupland, 1998);

- Intergenerational communication can have health consequences for older people; and

- It features intergenerational communication as a *mainly* "intergroup" process (see Giles, 2012; Giles & Maass, 2016); and, hence, the title of this Keynote Address.

Ashleigh Brilliant, in an aphoristic cartoon (Potshots #3501), depicts an older man and boy talking, overlaid with the sentiment: "When you plan a journey from your mind into mine, remember to allow for the time distance." This "time difference" in Western cultures, as the foregoing attests, equates with elder deficits. Given this premise, these questions then arose: Are some cultures *more* "healthy" than, say, mainstream North America, and are there better models of successful aging that can be located elsewhere? East Asia came to the forefront in this regard as the ethic of filial piety has been a cornerstone of intergenerational relations in that region for 2000 years. Indeed, the notion of conferring respect and power on elderly people had been documented across the Pacific Rim (e.g., Ho, 1994; Levy & Langer, 1994; Yum, 1988).

In pursuit of this quest, we devised an array of cross-cultural studies (for review, McCann, Giles, & Ota, in press) investigating age stereotyping and reported communication practices in Western and Eastern nations as well as settings elsewhere (for example, in the Middle East and Africa, see Giles, Khajavy, & Choi, 2012; Giles, Makoni, & Dailey, 2005). The Western cultures sites were USA, Australia, & Canada, and the Asian sites studied were India, Philippines, Thailand, Japan, Taiwan, Hong Kong and the People's Republic of China, South Korea, South and North Vietnam, and Mongolia. In tandem with research described above, we again asked participants to rate their past and intra- and intergenerational conversations from their own perspective, and how they saw different-aged others communicate with them.

Overall, while young Asian raters predictably expressed more of an obligation (termed, "*reluctant* accommodation") to respect their elders, contrary to expectations, Westerners reported a *healthier* intergenerational communicative climate. This was manifest by East Asian young adults viewing their older people as more non-accommodating and negatively age stereotypical than Westerners. In addition, young East Asians wished to avoid older folk more, with East Asians, too, reporting more intergenerational communicative difficulties than Western elderly.

Adopting subjective health indices of life satisfaction and self-esteem, we asked whether communication variables predicted elder's subjective well-being as our CPAM suggested. Given prior work and theory has been western-centric (see Keaton & Giles, in press), it seemed important to examine the CPAM in societies with very different philosophical and religious roots, such as, again, East Asia. In Western contexts, the answer was affirmative to the extent that both outcome measures were predicted by how accommodating elders report younger people have been towards them (e.g., Keaton, McCann, & Giles, in press). However, in Eastern contexts, subjective well-being is *also* predicted by more accommodation and less non-

accommodation from other peer elders. Accordingly, the CPAM was refined to incorporate cultural dimensions and intra-generational communicative experiences (see Barker, Giles, & Harwood, 2004). Furthermore, this program of work suggests that traditional notions (together with the earlier work allied to it) of filial piety in East Asia have eroded, perhaps in part due to the rather sudden economic, social, and technological muscle youth there have acquired over previous generations (see North & Fiske, 2015).

Hence, the quest for a cultural model of more successful aging abiding in East Asia was unexpectedly—*unsuccessful!* Accordingly, we went back to the drawing board to unpack the notion of successful-unsuccessful aging, with an eye to the role of communicative practices being an integral component in the dynamics.

Successful Aging: Its Meanings and Components

The notion of "successful aging" has been given many different labels, such as "productive aging," "effective aging," "robust aging," "aging well," and "positive aging." To date, there are at least 29 different definitions of it (see, for example, Depp & Jeste, 2006)—and these doubtless will have quite different meanings for different people (see Pruchno, Wilson-Genderson, & Cartwright, 2010). "Successful aging" does not necessarily mean longevity—as one could live a very long time, yet age quite *un*successfully! Successful aging, broadly defined, is not to be taken as eliminating traces of old age and trying to maintain one's youthfulness (e.g., through Botox or facelifts). Rather, it should incline people to embrace their age and take advantage of the opportunities that later life can present, while also building healthy relationships with friends and other loved ones. All this should lead to more contentment with each phase of advancing years. In this regard, we favor a definition by Bieman-Copland, Ryan, and Cassano (1998) that considers successful aging more of a personal *process* than a state, namely:

> Successful aging is a highly individualized and subjective concept and is recognized when an older individual is able to achieve desired goals with dignity and as independently as possible. This means that successful aging is possible for a nursing home resident whose goal is to be able to maintain health and complete basic activities as well as for a recent retiree whose goal is to be an active member in the community. (pp. 144-145)

Some important work on successful aging suggests that it may be predicted by *physical* well-being, such as freedom from disability (e.g., Rowe & Kahn, 1987). However, when we look at studies that ask older people to evaluate how successfully they feel they themselves were aging, only 10% of participants fulfilled these criteria (von Faber et al., 2001). In other words, while physical health is incontestably important—in line with the adage, "If you don't have your health, you have nothing"—clearly other factors, including being financially solvent, are operating here, too. Consequently, other scholars have focused more on psychological well-being. Cultural variations relating to this concept aside, research has associated successful aging with "life satisfaction," significant features of which are (see Nussbaum, 1985): zest for life, intellectual curiosity and preparedness for change (resilience), hope, and quality social relationships.

A *Communication*-Centered Approach to Successful Aging

However, it is, arguably, how these cognitions and affect are *expressed or discursively constructed* that is critical to successful aging. Actively living out, on a day-to-day basis, 7 interrelated elements of a communication package introduced below – or at least as many as personally feasible – should increase the likelihood of attaining the status of successful aging, and stymie many of the prevailing negative ideologies associated with aging. The 7 elements, after Giles (2011) and Giles, Davis, Gasiorek, and Giles (2013), and hereby crafted prescriptively, are:

- ***Avoid self-categorizing as old or attributing or excusing behavior to age***.

Relatedly, here are a couple of the many emails I have received from others over the years about their memory and oft-called "senior moments: "Please chalk this up to the feebleness of age…"; "If you'd reply above or beneath each item I'd be much obliged. I'm far too close to developing early-onset Alzheimer's to recall how I posed each issue…". These age self-stereotypical practices should be avoided, or at least resisted, at all costs, and those perpetuating them need to be called to task in an interpersonally-sensitive and non-threatening manner (see Harwood & Giles, 1996).

- ***Personally continually express positive emotions and optimism about the aging process***. In this way, it is best to stay away from expressed regrets, as well as perhaps unannounced painful disclosures (Coupland et al., 1991). Findings from the so-called "Nun Study" are relevant here. Danner, Snowden, and Friesen (2001) found a (homogeneous) sample of nuns in the American Midwest who had been requested to write short autobiographies at the time of their initial vows when they were about 22 years old; the essays were later coded for positive, neutral, and negative words. Even in these very short, rigidly structured statements, the more these women expressed positive emotional words at this stage in their lives, the lower their risk of mortality was 50 or 60 years later. Admittedly, these data are correlative and not necessarily causative (and they related to survivability, admittedly), but the more practiced we become at conveying positive messages about life early on and later, the more we can provide a foundation for favorable health outcomes.

- ***Avoid actively colluding in or teasing others about their age***. There are many ways this can be done, including resisting sending ageist birthday cards – available and directed to even those in their mid-twenties – and not adopting misguided, patronizing, over-

accommodating talk to those older (see Giles & Gasiorek, 2011). Another email, this time sent me and to an entire university unit was an example of this. It was short and blunt, and read, "Just in case you weren't sure, *X* is 50!!! Please join me in *torturing* him!" *X* has a strong personality and does "not take fools lightly" (as the saying goes), but this day he left the office duly "tortured" by all and sundry, and looking visibly older than his years.

- ***Resist mediated images of age and peddlers of anti-aging products.*** A well-known British cosmetics company has a poster that extolls, "Never mind an antidote to ageing – let's find one for ageism." This would not only involve us being aware of the malicious conveyor belt of dubious age-related images and ideas appearing in the media, but move us, almost in activist ways, to overtly (yet appropriately) question their appropriateness in public forums (e.g., in letters to newspaper editors or magazines) and in everyday conversations with other peers and others (see Binstock, 2013; Schoemann & Branscombe, 2011). Only then will we be able to slow down the wheel of problematic depictions and products from incessantly turning.

- ***Communicatively plan with family and others for their likely future care and end-of-life needs.*** Few people do this in Western societies, and it has been argued that this is, in large part, because younger people do not feel competent or confident in raising such matters which they may believe could be a distressing topic for their elders (Pecchioni, 2001). Alternatively, younger people think they already somehow know what older people or their partner would ultimately like or desire; of course they could be grossly inaccurate. In line with much of the above, it has been found that those who *have* discussed this—whether as a young couple (should the untimely demise of a loved one suddenly occur) or with elder family members—good outcomes immediately as well as later become apparent. In this regard, knowing that you have had the chance to express your love, emotions, ideals, and lifespan needs

(including death) with another and they with you, leads to stronger bonds, feelings of control, and healthy relational and family identities (see Giles, Thai, & Prestin, 2014; Nussbaum, Giles, & Worthington, 2015).

- ***Manage successfully being the inevitable recipient of ageism*** when it occurs in interaction and, typically, earlier in life than most expect. Albeit not allied to ageism, the following anecdote was told by Robert Butler about Jeanne Calment, a French woman who lived to be 122 years: At the party celebrating her 120th birthday, a journalist said, hesitantly: "Well, I guess I'll see you….next year?" To which she replied in a flash: "I don't see why not, you look in pretty good health to me!" Although it would be difficult to emulate Ms. Calment's priceless reaction at the spur of the moment, it should inspire us to be prepared to develop a repertoire of partially rehearsed humorous and other responses to deflect ageism when it occurs, rather than (metaphorically) lying down and being rolled over by them. Further, if enacted prudently, such responses could cause the perpetrator to question their assumptions and, if enough of us were able to accomplish this, it might go some modest ways to changing the prevailing negative intergenerational communication climate that so easily becomes re-cycled.

- ***Become an effective user of new communication technologies.*** Using communication technology, and encouraging those in one's network to do likewise, may help people age well by allowing them to stay in touch with others, facilitating societal involvement, and increasing access to support as well as feelings of personal control and self-efficacy of their environments. Cotten, Anderson, and McCullough (2013) found that as seniors spent more time online they felt less lonely and reported that the quantity and quality of their communications with others increased.

Each of our 7 elements of the communicative climate (or ecologies) involves perspectives, skills, and practices that can be taught and learned at any age. However, knowing which elements are most effective (that is, have the strongest effects on successful aging and related feelings of empowerment), and if this effectiveness differs as individuals pass through different stages of their lives, are questions for further research. Understanding this will help us to target and tailor educational efforts, in addition to increasing our theoretical understanding of what contributes to successful aging and, by extension, psychological well-being for people across the lifespan.

The Communication Ecology Model of Successful Aging

The communication ecologies may have a direct impact on determining successful aging as we have suggested above, or it may be more complex in that these communication practices might, instead, be *mediators*. Hence, we constructed a model – called the *communication ecology model of successful aging* (CEMSA: see Fowler, Gasiorek, & Giles, 2015, for the schematic model) to test these dynamics, starting with the notion of age uncertainties. Trotsky allegedly once said that "…old age is the most unexpected of all things that happen to a man" (or woman). As Ashleigh Brilliant aphorized (Potshots #9444) with a view to reflecting a sentiment generally felt by many people: "I never believe I'm as old as I am, and never know what to do about it." Hence, to test these ideas (examining as well the role of emotions attending aging and one's felt efficacy in dealing with it), we conducted an online survey with 450 middle-aged and older New Zealanders in order to better understand how each of the above 7 forms of communication contribute to reported successful aging, analyzing the data with a structural equation model (Fowler et al., 2015).

Consistent with the model, the more uncertain people felt about aging and, likewise, the less positive and more negative their emotional reactions to aging were, they less able they felt in coping with the aging process. However, as people experienced more positive affective reactions to aging, the more they reported being able to handle getting older which, in turn, was strongly related to their reporting that they were aging successfully. In sum, it was found that different communication practices had an *indirect* impact on shaping successful aging by creating the feelings we have about aging as well as in our avowed efficacy in managing the aging process.

We were also interested in whether there are different paths or trajectories to successful and unsuccessful aging. By means of latent class analyses and adding a sample of 234 American middle-aged and older adults to our New Zealand database, we found this to be evident in that three profiles emerged (Gasiorek, Fowler, & Giles, 2015). One profile, called "e*ngaged agers***" was characterized by low levels of teasing and self-categorization (i.e., referring to own age in talk), and higher levels of resistance to media messages and talk about future care wishes. This profile was associated with the most positive levels of successful aging. The second profile, called "*bantering agers*", was characterized by higher levels of teasing, self-categorization and playing along with others' jokes about age, high resistance to anti-aging messages, and moderate to high levels of talk about future care wishes. The third profile, called "*disengaged agers*", was characterized by a relative lack of any talk related to aging, and this was associated with the least desirable levels of successful aging. Interestingly, the same three profiles emerged for young adults in their twenties (Gasiorek & Fowler, 2016). As ever, further research needs to be conducted cross-culturally with refined concepts, measurements, and the inclusion of additional compelling processes (see Gasiorek, Fowler, & Giles, 2016).

Conclusion

In essence, this Address's message is that we need to be constructing, sustaining, and redefining communication climates that foster, collaboratively, the above 7-course menu (which might, of course, contain other delicacies). The latter might include *individualizing and accommodating* someone younger or older than you, rather than talking *at* the observed age category to which you have assigned them; and care for them (if need be) more appropriately in those same terms (see Ryan, Meredith, MacLean, and Orange's [1995] *communication enhancement of aging model*). In this way, each life phase can, and should, become an absorbing and empowering challenge and fascination.

My talk drew to a close with a video portrayal of an American TV vehicle ad. This ad has a car full of young people going through a neighborhood where an abundance of children are playing and having a good time. The car leaves this scene with the occupants waving and being clearly in awe of the childhood era which they are leaving, as a road sign indicated. Further driving into the countryside, the car comes across a large sign in front saying, "Entering old age." The car comes to a sudden halt, and veers quickly away to the right, so as to avoid passing into this phase of life. This is precisely the kind of message about aging, and communicating about aging, we wish *to dispel*. Old age is a phase which should be embraced and enjoyed-in-talk rather than avoided, or merely accepted. Viewing old age as an adventure in communication will contribute to the psychological well-being of those who adopt this mantra.

All that said, and referring back to the quote by Henri Amiel at the outset, we make no pretense that what has been proposed will be some kind of panacea for growing older gracefully, as there are many factors (physical disability, ill-health, and financial constraints) that are responsible for how we age and cope with aging. However, and from pragmatic ideals, I do feel that personally embracing the 7 "ingredients" of the communication recipe that are proposed

here can enhance the lifespan adventure and be an empowering force along that road. I left the audience with the notion that it is not so much that age is biologically-determined, societally-constructed, or even in the mind and how you feel—as much as it is that "you're as old as *you communicate*, and/or are *communicated to*". These issues become all the more potent when projections such as those, for example, on the front cover of *Time Magazine* (February/March, 2015) proclaimed: "This baby [photo] could live to be 142 years old."

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