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Children's views of older people

Abstract

Worldwide demographic change means that the responsibility for a growing older population will fall to younger generations. This narrative literature review comprises an international examination of what has been published about children's views of older people between 1980 and 2011. Sixty nine academic papers were inductively analysed, and the emerging themes were: ageism; contact with older people; children's media; children's perceptions of older people; intergenerational studies; children's perceptions of older people's health conditions; and culture, ethnicity and worldwide studies. Reports about children's views were influenced by research methods, the children's familiarity with whom they were being asked to describe, their prior relationships with grandparents and other significant older people, and their stage of development. 80% of the papers were based on American research, and were often guided by a concern about ageism. While children adopt stereotypes, they do not appear to be ageist. Research needs to include a wider geographical and cultural spread of children; children's understandings of the lived experiences of older people; and an exploration of the effects of culture, faith and socio-economic status on children's views if it is to underpin effective education to equip the next generation to humanely support the older populations of the future.

Introduction

Traditionally older people were venerated for their experience and wisdom, but in western societies attitudes began to change from positive to negative after the 1930s. The diminution in the social status of older people paralleled an increased focus on youth, and was underpinned by economic, social and political changes (Johnson, 1995). Phillipson (1991) explains how during the 1970s, the rise in oil prices, economic decline, raised unemployment and high inflation led to older people being characterised as a burden on public finances. The study of older people emerged during the late 1970s and focused on the older person's deficits as measured against a biological or social 'norm'. Geriatrics identified the medical problems, such as dementia, and gerontology identified the social problems such as loss, institutionalisation or loneliness. Defining any population in terms of deficits alone makes that population vulnerable to being blamed, as scape goats, for wider social, political or economic difficulties, thus fuelling negative discrimination such as ageism. It wasn't until the 1980s that the social model developed into one that focused on the structures of society, and recognised that older people's experiences were often shaped by the wider physical and social environment over which, as individuals, they had little control (Townsend et al, 1988; Phillipson, 1991).

Today, as the world tentatively emerges from economic recession, there are concerns about the rising older population. The United Nations (2002) reports that, across the more developed regions of the world, there are likely to be double the number of older people compared to children by 2050 (UN, 2002). According to the World Health Organization (2011), the rising number of people over 65 years across the world is associated with an increased prevalence of major health issues such as dementia, cardiovascular disease and cancer. Consequently health and social care costs could outstrip national infrastructures. By 2035 there will be 2.6 million more older people in the UK than younger (ONS, 2012). Currently, Age UK describe the care of older people as having reached 'financial breaking point', with 34% aged 65 to 74 years and 48% aged 75 and over having a limiting long standing illness (Age UK, 2011; 2012). The social and economic responsibility will fall to the younger generations, making intergenerational understanding and support an urgent issue. It is into this context that this paper examines children's views of older people which, in turn, can help to inform children's education about older people and their needs.

Age Concern UK commissioned a recent European Social Survey with 55,000 people, 15 years of age and over, across 28 European countries found that 44% thought that age discrimination, of young and old, is a serious problem (Abrams, Russel, Vauclair & Swift 2011). People over 70 years are

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attributed the lowest social status, as contributing little economically (57%) and being a burden on the health care services (49%). Compared to other age groups, older people are more likely to be described as friendly and having high moral standards, but also as being incompetent. People's views of an age group are more positive the closer they are themselves to that age group. The Survey suggested that the UK population is particularly concerned about not being prejudiced towards other age groups. Perhaps this can be partly explained by the findings from an earlier UK study where 1843 people aged 16 and over were interviewed (Ray & Sharp, 2006). One in three replied that the over 70's were viewed as incompetent and incapable and that prejudice was higher than five years previously. Thirty three per cent felt that the demographic shift towards an older society would 'make life worse'. Neither the European nor UK surveys examined the views of children.

In England, teachers are being asked to create learning experiences that will enable children and young people to positively adapt to population changes due to factors such as immigration and the ageing population. The English Framework for School Inspection (Ofsted, 2012a) states that inspectors of mainstream schools and academies will consider the spiritual, moral, social and cultural development of pupils at school. In response to concerns about bullying and prejudice-based language in schools (Ofsted, 2012b), teachers are expected to provide a wide range of opportunities to develop pupils' knowledge and understanding of diversity so that they can be helped to develop sufficient empathy for others. Lessons in Personal, Social and Health Education (PSHE) and Citizenship need to include learning about individual differences and diversity, and schools need to provide evidence that they support pupils with developing and maintaining healthy relationships within a range of social and cultural contexts, that they encourage pupils to respect equality within a diverse community and that they tackle prejudice with vigour (Ofsted, 2012c). The Citizenship curriculum (DfE, 2011a) includes enabling pupils to engage in discussions about rights, responsibilities and democracy. Children and young people are encouraged to challenge injustice, inequalities and discrimination and become active citizens who contribute to community cohesion and social justice. In order to be judged as outstanding, schools need to provide evidence that pupils are able to work constructively with others in exploring citizenship issues and that pupils participate in active citizenship (Ofsted, 2012d). This learning includes exploring relationships between younger and older generations.

The International Baccalaureate encourages, "Students across the world to become active, compassionate and lifelong learners who understand that other people, with their differences, can

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also be right" (International Baccalaureate, 2011, p.2). Cambridge & Simandiraki (2005) propose an interactive intergenerational learning framework for students studying the International Baccalaureate Diploma. It comprises experiential learning with older people and fits the Creativity, Action, Service (CAS) component of the Diploma. As the European Year for Active Ageing and Solidarity between Generations (Europa, 2012) drew to a close, it was timely to carry out an international literature based study which aimed to examine what is known about children's views of older people.

Method

A search was carried out between May 2011 and August 2011 for academic journal articles across 21 electronic data bases: ASSIA, BioMed Central, British Education Index, British Humanities Index (BHI), British Nursing Index, CINAHL with Full Text (EBSCO), EBSCO host Electronic Journals Service, ERIC Educational Resources Information Center, Informaworld journals, Ingenta Connect, Medline, Oxford Journals, PsychINFO, PubMed Central, SAGE Journals Online, ScienceDirect, Web of Knowledge, Wiley Online Library, Zetoc, Google, Google Scholar. The inclusion criteria comprised combining three search terms: children AND views/perceptions/attitudes/prejudice/ AND 'elderly people' OR 'older people' OR 'intergenerational'. Papers were excluded if they were published before 1980 because the researchers noted that there were relatively fewer studies undertaken before 1980, the findings from these concerned children from more distant generations living in a different era, and 31 years was considered to be a reasonable time frame in which to identify changes in children's views which may have relevance to today.

Table 1

Sixty nine papers were found of which 55 emanated from American studies, eight from the UK and one from the Netherlands, Serbia, Australia, Israel, Taiwan and Scandinavia respectively. 86% of the papers reported empirical studies, 7% were narrative literature reviews, one paper reported a systematic literature review and another was an editorial piece. The papers are listed in Table 1. The data was manually, that is without the use of computer software, and inductively analysed because it was guided by a hermeneutic/interpretivist philosophy. This means that the research aimed to understand the meaning of social behaviour and experience on all levels from personal, to social and cultural. The researchers were interested in what the papers could reveal about children's

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experiences and thoughts, and gain insights (Hayes, 1994; Johnson, 1984; Buchanan, 1992). So as not to limit the range of perspectives which may arise from an investigation hermeneutic/interpretive approaches, in contrast to positivist/empiricist ones, do not have pre-conceived ideas of what they are looking for (Scott, 1996). The process was one of interpreting and drawing conclusions (Moule and Goodman, 2009).

Table 2

After both researchers had undertaken the literature search, each read half of the papers in full, to gain an overview of the subject area. After sharing reflections, the first researcher read and annotated all the papers, and made brief handwritten notes on each. The notes included type of study, age and gender of sample, aims, methods, key findings and individual words or phrases or references to a page number. From this, she identified the initial thirteen emerging themes. These themes were agreed by the second researcher as being credible, meaning that she believed the themes to be a true representation of the literature (Moule and Goodman, 2009). Together, using the notes and discussion, and through the process of creating a coherent and credible narrative, the thirteen themes were merged into seven themes. This grouping is shown in Table 2. The seven themes were: Ageism, Contact with older people, Children's media, Children's descriptions of older people, Intergenerational studies, Children's perceptions of older people's health conditions, Culture, ethnicity and world-wide studies.

Findings

Ageism and the evidence

Thirty two papers were relevant to the theme of Ageism and the evidence. Stereotypes are fixed, simplified characterizations of people which provide a quick coherent impression about the features, traits, attitudes, behaviours, orientations or myths of another (Lichtenstein, Pruski, Marshall, Blalock, Liu & Plaetke, 2005). Ageism concerns age-based discrimination (Abrams et al, 2011). In the context of older people, it implies stigma, negative attitudes and prejudice towards older people (Blunk & Williams, 1997). Many papers were written because of a concern that stereotypes about older people tend to be ageist, at a time when older people are rapidly increasing in number and will need more care from the young than ever before (e.g. Kamenir, 1983; Rich, Myrick & Campbell, 1983; Aday, Rice Sims, McDuffie & Evans 1996a; Blunk & Williams, 1997; Kupetz, 1994; Nishi-Strattner & Myers, 1993) and, more rarely, because people need to prepare themselves for older

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age (McGuire, 1993). Children begin to be able to accurately discriminate age from about six or seven years old (Burke, 1982; Goldman & Goldman, 1981). The majority of children define 'old' as over 60 years (Aday et al, 1996a; Armstrong & McKechnie, 2003; Lichtenstein Pruski, Marshall, Blalock, Lee & Plaetke, 2003; Lichtenstein et al, 2005; Davidovic, Djordjevic, Erceg, Despotovic & Milosevic, 2007).

Page, Olivas, Driver & Driver (1981), Gilbert & Ricketts (2008) and Dunne, Macdonald & Kilpatrick (2008) are among many authors who cite a range of American studies from the 1970's to the 1990's (e.g. Chitwood & Bigner, 1980; Page & Driver, 1981) which suggested that children had developed well defined negative attitudes towards older adults by the age of eight. Frequently cited are Isaacs & Bearson (1986) who used a questionnaire with 144 children and concluded that the four year olds were not ageist, but the six year olds were. The eight year old children had significantly higher levels of prejudice compared to six year olds. The finding that children become more ageist with age was confirmed by a study that compared four and five year olds in 1997 (Blunk & Williams, 1997). During these decades, older people anticipated that children would have negative attitudes towards them, and when studies found that children had positive attitudes towards older people, the authors appear to search for reasons that could have influenced the findings, as if disbelieving the data at face value (e.g. Nishi-Strattner & Myers, 1983).

In 2003 Armstrong & McKechnie reported that all but one of the ten year olds in their study liked talking to older people and demonstrated sensitivity towards their life experiences. While there was evidence of stereotyping, there was no evidence of ageism. In 2005 Lichtenstein et al used a research method based on children's drawings, and concluded that middle school children did not demonstrate stereotypical or ageist views about older people. The drawings were diverse and multidimensional. A study in Serbia showed that more children, with a mean age of 13, refuted the idea that old age is unattractive, than agreed that it was (Davidovic et al, 2007). Dunne et al (2008) identified 12 research instruments used to identify children's attitudes towards ageing in their systematic review spanning 1995 to 1997. Burke (1982) noted that using a questionnaire and photoboard, a very common research method in the 1970's and 1980's, elicited more passive and negative descriptions compared to when the same young children were interviewed. Fillmer (1984) found that children described older people more favourably when attributing adjectives, but more negatively when asked to respond to questions. In 1986 Dobrosky & Bishop called for research methods to be broadened arguing that, "Too often ... research results are, in part, simply reflections of the thought patterns of the researchers, patterns are 'built into' the research techniques

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themselves" (p. 438). It seems that contemporary studies are countering the findings of the older studies, and suggesting that children are not as ageist as they were, or as previously thought.

Alternatively children's apparent decline in ageism could be related to the evolution of different and more diverse research methods as well as changing social values.

Contact with older people

Twenty nine papers discussed children's contact with older people. Children from across four countries identified older people as being most often family, neighbours and friends (Ivey, 2001; Bergman & Cybulski, 1980; Burke, 1982; Armstrong & McKechnie, 2008; Seefeldt & Keawkungwal, 1985). The most familiar older people in children's lives are their grandparents (Burke, 1982; Aldous, 1995; Newman, Faux & Larimer, 1997). Newman et al (1997) found that grandparents are special to nine and ten year olds. They are the people from whom children learn the most about being old. Attar-Schartz (2009) explain that because parents often act as gatekeepers within these intergenerational exchanges, they can also shape children's attitudes. Grandparents can provide family connections for children living in families where other family ties have been severed (Chom, 2009). Pitcher (2009) examined the views of three generations in British families with adopted children. The grandparents were described in terms of giving practical support and as 'approving witnesses' to the new family unit. Burke (1982) found that among five and six year olds, over half visited grandparents weekly to bimonthly and 60% lived within 80 miles, but contact with other older adults was quite rare. Aldous (1995) concluded, from a literature review of many studies, that younger grandparents had more contact with children than older ones, and that there was greatest contact with their mothers' parents and with the maternal grandmother. A close relationship with grandparents seems to be associated with having a more positive attitude towards their own ageing among pre-teenagers (McGuinne & Mosher-Ashley, 2002). Children's relationships with their grandparents, or with another older adult, seems to be generalised to their views of 'all old people' (Newman et al, 1997; McGuinne & Mosher-Ashley, 2002; Burke, 1972). For example Bales's (2002) study of relationships focussing on the quality and opportunity of interactions, shared activities, support and emotional closeness, identified that the quality of the grandchildren's relationship with the older person was predictive of how positive their views were towards older people in general. It is noteworthy that it is not uncommon for researchers to introduce the idea of grandparents as a 'way in' to asking children about their attitudes towards older people, and Hoe and Davidson (2002) found that if children were primed with grandparent related thoughts prior to an investigation, their views of older people were found to be more positive, compared to being primed with negative words.

Researchers noted how much societal structures can diminish contact between children and older people (Hagestad & Uhlenberg, 2005), and asked whether children have more positive attitudes towards older people if they have greater contact with them. Among studies investigating pre-school and primary school aged children, some have found that having more contact with older people, including non-relatives, is associated with more positive attitudes (Chitwood & Bigner, 1980; Cartensen, Mason & Caldwell, 1982; Caspi, 1984), while others have found that the frequency of contact has no effect on children's attitudes (Nishi-Strattner & Myers, 1983; Miller & Blacock, 1984; Kokarnik & Ponzetti, 1986). It appears that the key factor is familiarity. Children are more positive when asked about people they know rather than strangers (Burke, 1982; Kokarnick & Ponzetti, 1986; Lichtenstein et al, 2005), and they prefer to interact with family members more than with outsiders (Zandi, Mirle & Jarvis, 1990). In 1982 a group of older people, with a mean age of 72 years, acted as tutors to school-aged children (Aday, Aday, Arnold & Bendix, 1996b) and a quarter of the children described their tutors as being 'not old', despite, as we have seen 'old' is usually perceived as over 60, indicating that familiarity challenges prior concepts of 'an older person'. Blunk & Williams (1997) researched four and five year olds and found that the *frequency* of visits to their grandparents was not associated with their attitudes towards older people. McGuinne & Mosher-Ashley (2002) found that the closer the relationship children, with an average age of 12, had with their grandparents, the higher was their fear of other older adults. These studies agree with another carried out with 16 to 25 years olds (Bousfield & Hutchison, 2010), in concluding that familiarity, and the quality of relationship, is a greater influence on children's attitudes than contact.

Children's media

Twelve papers related to the theme of children's media. In addition to the family, the media is recognised as a powerful force for learning about older people (Newman et al, 1997). There have been a number of examinations of child-oriented electronic and print-based media representations of older people in America. Over the last 30 years, the frequency of older people represented across the media has been consistently much lower than their relative size in the population (Bishop & Krause, 1984; Vasil & Wass, 1993; Swan, 1995). The exceptions are within family-orientated television where they appear with greater frequency (Dail, 1988) and Disney animated films where older characters have steadily risen to about 3.8 per film (Robinson, Callister, Magoffin & Moore, 2007). Qualitative analysis shows that older characters tend to be peripheral rather than characters that are central to the plot (Bishop & Krause, 1984; Vasil & Wass, 1993; Robinson & Anderson, 2006). During the 1970's and early 1980's their portrayal was mainly negative (Bishop & Krause,

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1984; Vasil & Wass, 1993; Dellman-Jenkins & Yang, 1997), but has become much more positive since (Dail, 1988; Dellman-Jenkins & Yang, 1997; Beland & Mills, 2001; Robinson & Anderson, 2006) with the exception of Saturday morning television cartoons which were still overwhelmingly negative during the 1990's (Swan, 1995). Negative depictions of older people include: loss of capacity, losing power; unattractive; needing help, foolish eccentric, unsuccessful, lacking common sense, helpless, an object of ridicule, sexually neutral, evil, sinister, incompetent, grumpy, passive, angry, senile, crazy, villainous and not respected; positive depictions include: healthy, clean, friendly, happy, good, caring, not lonely, independent, happy, wise and understanding (Bishop & Krause, 1984; Vasil & Wass, 1993; Swan, 1995; Dellman-Jenkins & Yang, 1997; Robinson & Anderson, 2006; Robinson & Anderson, 2006; Robinson et al, 2007). Having a disability does not detract from these otherwise positive portrayals (Beland & Mills, 2001), and there is evidence that negative stereotypes of older people in advertising are becoming culturally unacceptable in America (Robinson, Gustafson & Popovich, 2008).

Children's descriptions of older people

Twenty six papers provided information relevant to understanding children's descriptions of older people. Children's reported descriptions of older people are influenced by the research methods, research context, the children's familiarity with who they are being asked to describe, prior relationships with grandparents or other significant older people, the media and their stage of development. Given an open ended question, most young children focus on describing an older person's physical appearance and older ones, from about ten, will consider more psychological and behavioural attributes (Dobrosky & Bishop, 1986). This is what one would expect in line with their cognitive development (Hoe & Davidson, 2002). Many of children's physical descriptions have remained stable over time: wrinkles, grey hair, false teeth (Page et al, 1981); deterioration of skin, bones, posture, hearing, sight, smell, eating and mobility (Goldman & Goldman, 1981); grey hair, no hair, wrinkles, quavering voices, funny nails (Ivey, 2001); bald/less hair, short hair or buns, wearing a hat, wrinkles, glasses, walking aid, male facial hair, hearing aids, sensible flat shoes/slippers (Falchikov, 1990); wrinkles, grey hair, bald (Lichtenstein et al, 2003). Dobrosky & Bishop (1986) suggest that children have stereotypes about older people based on primarily physical characteristics. If they do, then it is proposed that they are coming from adults. Bishop & Krause (1984) chose to use the following criteria for identifying the old people represented in the cartoons that they analysed: wrinkled skin, white hair, cracking voice and stooped posture. These descriptions also have a biological reality. Today children's descriptions are generally positive, but reflect reality when describing older people as less active, weak and slow (Lynott & Merola, 2007).

Older studies of younger children being asked to describe the behavioural/psychosocial aspects of older people through a heavily structured research method produced negative findings: not friendly (Chitwood & Bigner, 1980); senility and forgetfulness, poor concentration, reduced powers of thinking, moodiness, bad temper, impatience, inability to cope with stress and 'keep up with the times', slower to understand (Goldman & Goldman, 1981); lonely, not busy (Burke, 1982); helpless, unwanted, weird, scary, lonely, sad and no one cares about you (Marks, Newman & Onawola, 1985). More recent studies and/or those with open or diverse research methods tend to produce more positive findings: wisdom, confidence, patience, friendliness, helpful, kind (Goldman and Goldman, 1981); behavioural descriptions more positive than negative (Dobrosky & Bishop, 1986); take time to teach children, cuddle, read stories, happy times, like to be with (Ivey, 2001); sensitive to older people's life experiences and fairly positive overall (Armstrong & McKechnie, 2003). Studies which ask about older people that are known to the children also produce more positive findings: grandparents are nice, they talk to and play games with children, they laugh together (Burke, 1982); trusted friend, funny, wise, kind, intelligent (Ellis & Granville, 1999).

Intergenerational studies

Five papers discussed intergenerational studies. Intergenerational studies consider how the behaviours of one generation can impact on the development and self-esteem of another (Schindlmayr, 2006). Alcock, Camic, Berker, Haridi & Raven (2011) suggest that the development of healthy attitudes between young and old is dependent upon the opportunity for intergenerational interactions and the quality of these interactions. Both are decreased in societies which are becoming increasingly age-segregated. Studies which investigate intergenerational views can, themselves, bring people together (Chom, 2009).

Studies have examined what happens when older people are brought into school settings. Ellis and Granville (1999) found this experience to be perceived as enjoyable, mutually beneficial and as adding value to the children's learning. Hall & Batey (2008) found that children's ideas about ageing were also influenced by such interactions. Children's attitudes to older people might improve when they are involved in the classroom, but Chom (2009) cautions that this might be because they expect the older adults to help them.

Children's perceptions of older people's health conditions

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Seven papers discussed children's perceptions of older people's health conditions. Goldman & Goldman (1981) asked American, English and Australian children about the causes of ageing and their answers revealed the dominance of a biological decline model characterised by loss. For example the children spoke of the body being worn out and worn down, perhaps through the loss of friends, too much alcohol and smoking, being tired and needing new parts, getting disease of the heart or lungs, or strokes. Middle school American children rarely associated old age with health conditions (Lichtenstein et al, 2003). Out of 2,476 children, only 4.6% mentioned diseases, and these included arthritis, osteoporosis, diabetes, cancer, heart problems, blood pressure problems and back pain. 6% mentioned being ill or taking medications and 5.7% mentioned sensory problems, usually related to hearing or vision. In another study middle school children were asked to draw a picture of a typically older person and to write written responses to a series of questions about the person's age, activities, feelings, thoughts and so forth. The 1,944 drawings accompanied by words note the following, diseases or medication (6.4%), arthritis or back problems (5%), osteoporosis (7.8%), weakness (21.7%), trouble with walking (9.9%), a wheelchair (6.4%), a cane or crutch (33.5%), glasses (28%). When describing older people, apart from 'weakness', the health conditions of older people are not prominent in children's thinking.

For the older generation, who face the risks of illness and hardship, relationships with younger generations can be instrumental in maintaining their health, for example through the younger generations' access to technological advancement and knowledge (Contanzo & Hoy, 2007).

Children's reactions to older people are more likely to be more negative when faced with someone who has a health condition which includes personality changes (Newman et al, 1997). Myers, Epperson & Taylor (1989) found that children with grandparents who had Alzheimers disease had less positive perceptions of grandparents in general, although they held positive views of the elderly in general. McGregor, Copestake & Wood (2000) discuss the concept of the 'intergenerational bargain' which concerns the transfer of family resources through the generations. When a grandparent has a long term health condition both parents and grandparents are preoccupied with the health issue. In the context of limited health or social care provided by the state, the result is often a significant drain on the family resources, which reduces the resources available for the next generation. In turn, this 'family debt' influences children's perceptions of older people, and the perceptions of each successive generation.

Culture, ethnicity and world-wide studies

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Twenty two papers discussed the influence of culture, ethnicity or international studies. Out of these, four studies discussed ethnicity. Mitchell, Wilson, Revicki & Parker (1985) found no differences between American black and white children in their perceptions of older people. Zandi et al (1990) compared Indians born and raised in America with other Americans and found that both rated older people quite positively. The Indian children cited more behavioural/lifestyle answers, such as walking more slowly, whereas the American children provided more affective/feelings based answers such as older people being nice. Slaughter-Defoe, Kuehne & Straker (1992) found similarities between Anglo-American and Anglo-Canadian children's attitudes towards older people, and noted that African-American children had more positive attitudes than Anglo-American children. Studies comparing nationalities include Seefeldt (1984) who found that Alaskan children's attitudes towards older people were more negative compared to children based on mainland USA, Paraguay or Australia, but that their overall concepts of older people and many of their specific attitudes were similar. Another study found similarities between Thai and American children, except more Thai children described older people as 'older' and 'healthier' and more American children cited 'more wonderful' and 'more friendly' (Seefeldt & Keawkungwal, 1985). Davidson, Luo & Fulton (2008) found that younger children, of six and seven, were more likely to use stereotypes when describing older people compared to slightly older ones, of nine to eleven, in both China and America. In 1981 Goldman and Goldman noted that English children were more negative overall and less likely to mention psychological descriptions of older people compared to Australian, American and Swedish children.

Bergman & Cybulski (1980) compared children of European origin, Yeminite/Tunisian and Christian-Arabs who all lived in the same geographical area. The children viewed older people not so much as formal transmitters of skills, but rather the agencies of socialization through relationships that are instrumental (practical help), affectational (sources of love, affection and strength) and transmitters of cultural values and models of personal behaviour. The European children saw older people as 'bearers of national values' which included a love for Israel; The Yeminite/Tunisians emphasised that older people were about 'sharing subsistence and keeping the family alive'; the Christian-Arab children focused on older people being 'role models and active participants in their lives'. In Taiwan Huang (2011) studied text books used in local elementary schools and found very few older people, all in roles such as fishing, walking, gardening, described by the author as being 'unproductive'. Okoye & Obikeze (2005) reported that Nigerian youth perceived older people as being sickly, behaving like children and not being open in their communication. They noted that the greater stereotyping was more prevalent among the less educated young people. Across the studies that

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examine ethnicity, nationality and culture there are more similarities than differences, but the relative importance of the differences are hard to judge with so few papers, and would benefit from wider study.

Eighty per cent of the papers reviewed for this review were based entirely on studies carried out on Americans living within American culture. This is explained by the rise of 'Gray Power' in America and Canada during the 1970s, which led to the predominance of academic papers and journals specialising in old age in America (Goldman & Goldman, 1981). Children's perceptions of older people may differ across the world and across ethnic groups, cultures and across time, and there is evidence that children's perceptions might also vary across socio-economic status (Dobrosky & Bishop, 1986; Gilbert & Ricketts, 2008), gender according to the child (Goldman & Goldman, 1981; Burke, 1982; Filmer, 1984; Mitchell et al, 1985; Falchikov, 1990; McGuinn & Mosher-Ashley, 2002; Armstrong & McKechnie, 2003), and the gender of the older person (Chitwood & Bigner, 1980; Dail, 1988; Falchikov, 1990; Middlecamp & Gross, 1993; Aldous, 1995; Mitchell et al, 1985; Dellman-Jenkins & Yang, 1997). Much more research, and more outside of America, is needed.

Discussion

The review concurs that, like young and older adults (Abrams, Russel, Vauclair & Swift 2011), children's own age influences their perceptions of what is old age. It concludes that research methods used to explore children's views should avoid being too structured by the researcher, so that the children's responses can be more valid. Both the methods and the analysis of the results need to take into account the children's cognitive stage of development.

Stereotypes are categorizations, they are neither positive nor negative in themselves. Their strength is that they help people to navigate the social world, but their weakness is that they do not reveal the whole truth and that, once embraced, they are difficult to dislodge (Bishop & Krause, 1984). So if a child comes to think of an older person as inactive, they will tend to perceive them that way, regardless of reality (Swan, 1995). This review suggests that children's views of older people are stereotyped, but not ageist. Their stereotypes of the wrinkled, grey haired person are rooted in biological reality and in adults' stereotypes. It could be argued that adults might have stereotypes about what they think are children's attitudes towards older people based on a narrative that was concerned about ageism in America 40 years ago. Since, there have been positive changes in child-orientated media and research methods, and out of this has come a more positive picture as well as a greater understanding of the factors that influence children's attitudes towards older people. The

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evidence from this review suggests that many children have not yet formed the age-based discrimination which is recorded among young and older adults (Abrams et al, 2011). The review also found that familiarity is a stronger determining influence on children's attitudes towards older people than just contact. The more familiar they are, generally, the more positive is their attitude. Baumeister and Bushman (2011) explain that repeat exposure to a person tends to promote familiarity and a more positive attitude, but the addition of positive feelings emerging from shared experiences will promote a liking of another. This endorses the use of intergenerational face to face activities between children and older people such as cooking, crafts, oral history, music making and gardening, whereby children can see older people as empathic, knowledgeable and skilled.

The finding from this review that children do not appear to be ageist is reassuring as children will increasingly find themselves contributing, as part of a family or part of a local community, to the health and wellbeing of older people, many of whom will not be in full health (WHO, 2011; DfE, 2011b). In this context it is noteworthy that only seven studies emerged in this review which reported on children's perceptions of older people's health conditions. Mental disorders including depression and dementia are most prevalent among older people (Mental Health Foundation, 2007), and the number of people living with dementia in the UK is likely to double over the next three decades (Department of Health, 2009). Newman et al's (1997) paper suggests that children may feel more negative towards someone whose health condition has led to a personality change. Education may have a role in developing children's understanding of common health conditions among older people and helping children to develop the skills required to enable them to cope with the special communication challenges that this can present. This review did not uncover any publications discussing the introduction of this topic into children's education which might reflect international drivers for schools to move away from adopting medical, deficit, models, which historically excluded pupils with health or learning needs from mainstream education, to social models of inclusion for all children (DfE, 2002; UNESCO, 2009). Robinson and Summers (2012) have demonstrated that a total rejection of the medical model can have negative consequences for children with serious illness in schools whose needs are not being adequately met, and similarly it might have negative consequences in terms of equipping children to deal with older people who have challenging health or communication issues. Both models have a place. Within England, for example, an introduction to some common health problems, such as arthritis or dementia, could contribute to school inspection criteria for Personal, Social and Health Education (PSHE) and Citizenship lessons (Ofsted, 2012c; DfE, 2011).

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The review also highlighted the need for more research outside of America, as only 20% of the papers were non-American. The European Social Survey (Abrams, Russel, Vauclair & Swift, 2011) shows that among young and older adults there are differing attitudes towards older people in different countries. Romanians were the least likely, and the Norwegians the most likely, to view the over seventies friendly; while the Hungarians were the most likely to view this population as the most competent and the Polish the least. Migration, including a border-free single market within the European Union, has led to a diverse child population within many schools (Council of Europe, 2001), and it is likely that these children bring with them differing attitudes towards older people. Approaches to health, health care (Campbell-Hall, Petersen, Bhana, Mjadu, Hosegood, Flisher, 2010; Seale, 2001) and elder abuse (WHO, 2002) are culturally and socio-economically determined. Children's education has a role to play in fostering learning about differences between individuals, challenging assumptions, respecting different views and promoting healthy relationships across communities (Ofsted, 2012c; DfE, 2011). Such education needs to be informed by research into children's views about older people within a wide variety of countries and settings comprising multi-cultural populations of children.

Limitations

This literature review was limited by the number and types of data bases used, which may not have captured the whole picture. In particular, the authors are aware that there are many papers published on intergenerational studies which may include useful information, but the search terms, focusing on children's views, only found five papers. The review's findings were based on those emanating from papers published in academic journals, and exclude findings from wider sources such as reports produced by organisations, websites, media and unpublished papers. The findings are also based on secondary, rather than primary data, which makes this paper an interpretation of other interpretations based on a diverse range of methods and child populations. The rigour of the research would have been improved if both researchers had read, annotated and made notes on all the papers independently, and then checked to see if they agreed on the emergent initial themes. Equally, using a coding system is recognised as a way to increase rigour and reduced bias. This was not used by the researchers because it can also leave out subtle nuances in what people say, and these can be very relevant. Together these factors compromise validity. In order to try to address this, the researchers took note of the methods and samples, and avoided simply taking the authors' conclusions at face value. In the light of these limitations, it is recognised that these findings represent an incomplete picture, but one to which further research could add through a wider systematic review.

Conclusions

During the 1970s the difficult social and economic climate helped to fuel negative views of older people in terms of deficits and being a burden to society. These views were reflected in the media at the time. Many studies, published from the 1970s to the 1990s, demonstrate the adult authors' concerns about ageism by referring to it within the contextualisation of their papers, and the review's finding that the design and analysis of some studies also seemed to be influenced by a presumption of ageism by the authors. The papers of the 1970s and early 1980s tend to present the children's views of older age in terms of deficits such as loss and decline compared to more recent papers. In 2010, in the midst of a world recession, social epidemiologists defined the older population's health as being both biologically and psychologically shaped by the accumulation of their life experiences which are, in turn, strongly influenced by unequal wider social influences over which they have no control (Marmot, 2010). It is a model that is attracting world-wide interest not only because it seeks to improve quality of life for the individual, but because it promotes equity and through that a way of controlling spiralling health and social care costs. The children of the twenty first century, perhaps influenced by strong social inclusion and equity agendas that focus on 'the structural' rather than 'the individual', rarely view older people in terms of health deficits, preferring more holistic and generally more positive characteristics compared to the past. These findings support the idea that wider societal influences can influence social constructs of older people and in, various ways, these can influence children's views.

Research needs to extend beyond assessing the thoughts and attitudes of children in relation to older people. If the younger generation are going to adequately support the expanding older generation, they will need an empathic understanding of older people's needs and experiences. Research needs to turn to studies which examine children's understandings of the lived experience of being an older person, which includes children's perceptions of older people's quality of life, their health and wellbeing, and their histories, culture and personhood. The research needs to be based on a far wider geographical and cultural spread of children, and in addition to examining intergenerational relationships, it needs to examine children's views of older people where there are differences of culture, faith and socio-economic status. This broader research base is needed to guide the development of effective education to meet goals such as challenging injustice and discrimination, respecting individual differences and supporting social inclusion. Such education needs to be evaluated and reported upon. In this way we can learn and support children towards

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the complex and highly challenging task of participating constructively in a society which adequately cares for its older generations in ways that are ethical and humane.

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Table 2 Grouping initial themes into seven themes (n= number of papers)

Initial themes	Seven themes
How old is old, who are older people? (n=9)	Ageism (n=32)
When does ageism occur? (n=13)	
Qualities of older people (stereotypes, simple negative/positive attitudes (n=10)	
Contact (relationship between contact and attitudes towards older people) (n=13)	Contact with older people (n=29)
Grandparents (n=12)	
Types of relationships with older people (n=4)	
Portrayal of older people in media, books, TV (n=12)	Children's media (n=12)
Qualities of older people (what they are like) (n=26)	Children's descriptions of older people (n=26)
Intergenerational studies (n=5)	Intergenerational studies (n=5)
Perceptions of older people's illness/health (n=7)	Children's perceptions of older people's health conditions (n=7)
Gender differences (boys and girls) (n=7)	Culture, ethnicity and world-wide studies (n=22)
Gender of older people (n=8)	
Cultural differences (n=12)	