

## Book Review

# The Campaign Against Ageism

Karen L. Fingerman, PhD,<sup>1,\*</sup> and Joan K. Monin, PhD<sup>2</sup>.

<sup>1</sup>Department of Human Development & Family Sciences and Texas Aging and Longevity Center, University of Texas at Austin, Austin, Texas, USA. <sup>2</sup>Social and Behavioral Sciences Department, Yale School of Public Health, New Haven, Connecticut, USA.

\*Address correspondence to: Karen L. Fingerman, PhD, 108 East Dean Keeton Street, Austin, TX 78712, USA. E-mail: [kfingerman@austin.utexas.edu](mailto:kfingerman@austin.utexas.edu)

Becca Levy. *Breaking the Age Code: How Your Beliefs About Aging Determine How Long & Well You Live*. Harper Collins, New York, NY, 294 pp., \$23.18 (hardback).

Gerontologists face public health challenges when communicating the distinction between growing older versus experiencing physical and cognitive declines. According to the [Administration on Aging \(2021\) 2020 Profile of Older Americans](#), approximately one-fifth of adults over the age of 65 are experiencing a physical or cognitive disability impacting their ability to function (e.g., hearing impairment even with a hearing aid, memory loss) and up to 40% experience a lot of difficulty with mobility (e.g., climbing stairs; [Administration on Aging, 2021](#)). The flip side of that means that 80% of older adults do *not* experience disability and 60% have only moderate or small mobility impairments. The conflagration of decline and aging is insidious and obscures the heterogeneity of late life. Undoubtedly, some older adults require assistance, but other older adults are *providing* that assistance. During the coronavirus disease 2019 pandemic, the media justifiably focused on the disproportionate number of frail older adults who passed away, but the involvement of adults over aged 50 on the frontline did not receive attention. Approximately 37% of essential workers during the pandemic (e.g., in health care, transportation, critical retail, and postal delivery) were over age 50 ([Schramm & Figueiredo, 2020](#)). Yet, when ventilators and intensive care unit beds were in short supply, bioethicists discussed age (as young as 70) as a criterion to determine who would receive medical care, as though age were synonymous with medical risks and responses to treatment.

*Breaking the Age Code: How Your Beliefs About Aging Determine How Long & Well You Live* is the much-needed remedy for understanding and counteracting prejudices against aging. The book addresses the ways in which we

as a society internalize negative views of aging and the long-lasting ramifications for our health and well-being. It does so by presenting a program of research that has identified how our views of aging help determine how we actually age. Through a systematic exploration of this phenomenon over the past two decades, Levy has shown that holding negative stereotypes of aging predicts poorer psychological, physical, and cognitive well-being. Her research shows negative aging stereotypes even lead to earlier death. Indeed, she has a sign in her office referring to 7.5 years, the difference in longevity between people who hold positive views of aging and those who hold negative views. If there were a pill that gave people 7 extra years of life in relatively good health, we would encounter very long lines at the pharmacy. Levy's book is the facsimile for that pill.

This book describes “stereotype embodiment” and what can happen to a person's body when they embrace negative beliefs about aging. Ageism is the one type of discrimination we all encounter if we live long enough. Levy explains how people internalize ideas about aging early in life, before they identify themselves as older adults, and how they may retain negative views as they age.

Importantly, Levy looks at positive beliefs about aging as well. In one study, she primed older adults with positive statements about aging and found improvements in their memory, gait speed, and balance that were measurable months later. The positive primes generated a feedback cycle that facilitated older adults' increasing confidence in their abilities, and this phenomenon endured over the course of years. Dr. Levy describes several of her other studies that show similar findings, too. The implications of this research are groundbreaking: beliefs about aging, rather than aging

per se, help explain why some older adults thrive while others do not. Levy further pinpoints mechanisms underlying these associations. She presents studies showing that negative age stereotypes can increase biological markers of stress, including cortisol and C-reactive protein. Over time, greater fluctuations in these biomarkers can lead to an earlier death.

The book is replete with compelling stories describing exceptional older adults, starting with Levy's own grandmother, who was vibrant into very old age (though not always treated that way). Sister Madonna Buder completed a triathlon at the age of 91: her 350th triathlon since she turned 50. Likewise, 99-year-old Maurine Kornfeld started swim practice with a Master's team because they dominated the pool on Saturday morning. She now holds 27 world records for swimming. The book is peppered with case examples illustrating the potential for physical and psychological growth into very late life.

It is important to extend beyond celebrated individuals, however, to examine older adults more broadly. Levy does so by identifying cultures that defy negative views of aging. Her interest in beliefs about aging was sparked by a foray into Japan. She noticed that Japanese older adults were fit, involved with others, and thriving. Deaf culture is equally sensitive to the strengths and experiences that accumulate over time, with considerable respect for older adults.

The wrap-up to the book includes productive steps individuals can take to change their own views of aging. Levy presents to the reader the ABC Method of individual age liberation. The method consists of three stages: (a) increasing awareness (i.e., noticing age stereotypes when they occur); (b) placing blame where blame is due (i.e., reminding oneself that apparent declines in memory or physical ability may actually reflect societal beliefs); and (c) challenging negative age beliefs (taking actions to combat ageism). In the Appendix, Levy provides some useful and straightforward exercises to practice this method, with the goal of making our age beliefs more positive.

The good news is that Levy is not alone in her fight against ageism. The [American Psychological Association \(2020\)](#) issued a resolution in 2020 combating ageism, drawing on a psychological understanding of how negative beliefs about aging affect individual well-being. The Gerontological Society of America is engaged in a Reframing Aging initiative. And this interest and attention extends beyond

scholarly societies: the World Health Organization has launched a global campaign to combat ageism.

In sum, *Breaking the Age Code* provides the raw material for efforts to combat ageism and solutions that individuals can use to reframe their own aging. The book sets groundwork and dovetails with emerging societal efforts to address ageism on a broader societal level. The book will be of interest to scholars who study adult development, practitioners who work with older populations, and individuals who look ahead to become their best aging self.

<https://doi.org/10.1093/geront/gnac116>

*Karen Fingerman is the Wilson Regents Professor of Human Ecology at the University of Texas at Austin and is the founding director of the Texas Aging & Longevity Center and the Director of Research for the National Institutes of Aging-funded University of Texas Center on Aging and Population Sciences. She has authored over 180 articles and papers addressing social relationships across adulthood. She directs the National Institutes of Health-funded Family Exchanges Study and the Daily Experiences and Well-Being Study.*

*Joan Monin is Associate Professor in the Social and Behavioral Sciences Department and the Director of the Social Gerontology and Health Lab at the Yale School of Public Health. Her research examines how emotional processes affect health in older-adult relationships. She combines survey methods and laboratory experiments to understand the mechanisms (e.g., emotional contagion, cardiovascular reactivity) and moderators (gender, individual differences in attachment) involved in these processes. Currently, her research focuses on understanding how caregivers and care recipients support one another in the context of early stage dementia.*

## References

- Administration on Aging. (2021, May). *2020 profile of older Americans*. Administration for Community Living, US Department of Health and Human Services. [https://acl.gov/sites/default/files/Profile%20of%20OA/2020ProfileOlderAmericans\\_RevisedFinal.pdf](https://acl.gov/sites/default/files/Profile%20of%20OA/2020ProfileOlderAmericans_RevisedFinal.pdf)
- American Psychological Association. (2020). *APA resolution on ageism*. Washington, DC: American Psychological Association. <https://www.apa.org/about/policy/resolution-ageism.pdf>
- Schramm, J., & Figueiredo, C. (2020, October). *The US essential workforce ages 50 and older*. AARP Public Policy Institute. <https://www.aarp.org/ppi/info-2020/the-u-s-essential-workforce-ages-fifty-and-older.html>