Black/White Comparisons in Negative Stereotypes toward Older People

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BLACK/WHITE COMPARISONS IN NEGATIVE STEREOTYPES TOWARD OLDER PEOPLE

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ABSTRACT

The present study compares Blacks' and Whites' stereotypes of older people. The respondents are college students of a state university in the Southeast (N = 492). The study uses a recently developed Stereotypes Toward Older People Scale, consisting of intolerance, health behavior, negative personality characteristics, and inactivity dimensions and has demonstrated reliability and validity. Few studies have specifically compared Black and White differences in negative stereotypes toward older individuals, but instead have used race as a control variable. Results of this study show that without employing control variables, Blacks as compared to Whites believe that older people have more intolerance, have negative personality characteristics, and are inactive. However, when respondents' gender, age, family income and academic major were controlled, the study found that respondents' age accounted for the racial differences in negative personality characteristics, and family income accounted for the racial differences in the intolerance toward older individuals. The implications of these findings are discussed and their potential effects on the informal and formal support sectors.

INTRODUCTION

Most all societies classify their members based on demographic characteristics and these classifications have implications for both society as a whole and the members of a particular category. For example, North Americans have developed negative stereotypes toward older individuals that may be unequalled by any other society (Palmore 1990 3-5). Stereotypes, which can have both positive and negative components, are mistaken or exaggerated beliefs about a group (Hooyman, Kiyak 1998 525; Palmore 1990 18; Stephan et al 1993). In other words, stereotypes can be right or wrong to differing degrees, but tend to be over-generalizations. Negative stereotypes toward older people are held by people of all races, ages, educational levels, social classes and occupations in the U.S. (Levin, Levin 1980; Palmore 1990). Some examples of negative stereotypes are that "all old people are senile" and "all old people are grouchy" (Hooyman, Kiyak 1988 526).

Negative stereotypes toward older individuals affect social policies and service provision (Palmore 1990; Schaie 1988), impede medical and mental health treatment of older persons (Butler 1975; Levin, Levin 1980), and likely diminish the self-esteem and feelings of adequacy, usefulness and security of older persons (Hooyman, Kiyak 1988 524; Kogan 1979). Additionally, research shows that most health professionals have negative stereotypes toward older adults and prefer to treat children or young adults (Palmore 1990). Palmore (1990 11-17) claims that older individuals are similar to minority groups in that they have a sense of group identity with accompanying status-role expectations.

Even with the prevalence of negative stereotypes toward older people in American society and the deleterious effects these stereotypes have on the elderly, few studies have specifically addressed Black/White differences in negative stereotypes toward older people. However, Lucas and Roy (1992) did explore only black female attitude toward older people. At any rate, most of the past studies on negative stereotypes toward older people use social background variables, such as race, as a control variable, rather than as a primary independent variable. Authors have noted that variability across race is an important source of information that should be attained when exploring potential differences in attitudes and stereotypes toward older people (Kraus 1980; Levine 1982).

In previous research on Black/White differences in intergenerational relations (Mindel et al 1986; Mitchell, Register 1984; Mutran 1985; Smergila et al 1988), gender, socioeconomic status and geographical residence have not been controlled. Thus, from a sample of college students, the central concern of the present study is whether racial differences in negative stereotypes toward older individuals exist with social background variables (i.e., gender, family income, and students' academic major) controlled. These control variables should provide more detailed information about the potential racial differences, which past research has neglected.

CONCEPTUALIZATION OF STEREOTYPES

Palmore (1990 15) defined ageism as a "prejudice or discrimination against or in favor of an age group." "Prejudice against an age group" is a negative stereotype about that
group (e.g., all old people are grouchy”). Negative stereotypes are derogatory beliefs about a group that is based upon mistaken or exaggerated perceptions (Palmore 1990 18).

Stereotypes are a form of attitudes (Hooyman, Kiyak 1988 525; Palmore 1990 18-19). More specifically, negative stereotypes can lead to negative attitudes (Palmore 1990 18). Moreover, stereotypes can affect intergroup relations. At the individual level, they bias information processing regarding in-group and out-group members, which in turn facilitate self-fulfilling prophecies (Stephan 1985, 1989; Stephan, Stephan 1989). At the group level, stereotypes often serve to differentiate the in-group from the out-group. Moreover, stereotypes may be incorporated into the in-group’s ideology and used to justify and explain behavior toward the out-group (Stephan et al 1993; Stroebe, Insko 1989).

RACIAL DIFFERENCES IN STEREOTYPES TOWARD THE ELDERLY

Research suggested that the behavior of Blacks toward the elderly is different from that of Whites (Baressi, Mennon 1990; Lucas, Roy 1993; Wylie 1971). For instance, Blacks generally hold elders in higher regard and respect than Whites (Lucas, Roy 1992). This higher admiration of older individuals among Blacks has resulted in intergenerational continuity (Willie 1988 275). Mutran (1985) found that Black families experience a greater degree of reciprocal assistance across generations than do White families. In addition, Blacks as compared to Whites were more likely to include the elderly in familial activities and to regard the elderly with respect, if not veneration (Lucas, Roy 1992; Wylie 1971). Wylie (1971) found that Blacks see old age as a sign of dignity—with older people having important input regarding the affairs of the community.

Extended families and intergenerational relations are more prevalent among Blacks (Hill, Shackelford 1986; Hofferth 1984; Tienda, Angel 1982). Recent surveys of elderly Blacks indicated that they had extensive contact with their children and grandchildren and also take proactive roles in their socialization and development (Brown et al 1992; Burton 1992; Burton, Bengston 1985; Cantor 1979; Kiecolt, Acocoon 1990; Minkler et al 1992). Likewise, younger Blacks typically spend more time with their grandparents during their youthful life (Burton 1992; Minkler et al 1992; Peacock, Talley 1984). Furthermore, Black youngsters develop affectional ties with their grandparents, which in turn can lead to favorable impressions toward older individuals (Nobles 1981). In other words, research suggested that Blacks were more socially integrated with older adults.

In addition, research indicated that Blacks provided more informal social support, instrumental support (i.e., food, money, and running errands) and cognitive aid (visiting and companionship) to their older family members (Cantor 1979; Lucas, Roy 1992; Smerglia et al 1988; Tate 1983; Taylor, Chatters 1986). Moreover, Cantor (1979) found in her examination of Black and White families that a larger percentage of Black children, compared to Whites, assisted their elders in the chores of daily living and shopping. It is not clear, however, whether greater young-old contact in the Black community is by choice, circumstances, or both.

Taylor and Chatters (1986) found that Black as compared to White adult children are much more likely to provide instrumental or material aid (food, money, transportation, running errands) and cognitive aid (visiting, companionship) to their older relatives. Similarly, Lawton et al (1992) founded that Black caregivers express a greater sense of caregiving mastery and more strongly espouse traditional caregiving ideology. In terms of caregiving appraisal, Black caregivers express less subjective burden, greater caregiving satisfaction, and less perceived intrusion on their lives because of caregiving (Hinrichsen, Ramirez 1992; Lawton et al 1992). Thus, these studies suggested that Whites and Blacks view and treat older individuals differently, which could be related to differences in negative stereotypes toward older individuals.

There are several factors—gender, age, socioeconomic background, academic major—that may be important to attempt to understand Black/White differences in stereotypes. Regardless of race, females are more likely than males to assume the role of informal caregiver for family members who are older (Lucas, Roy 1992; Taylor, Chatters 1986). Older Blacks tended to prefer and to rely on assistance from a daughter before turning to other offspring or relatives (Baressi, Mennon 1990; Lucas, Roy 1992). In fact, a recent study of college students (Lucas, Roy 1992) found that women as compared to men hold more positive attitudes toward the elderly. In particular, Lucas and Roy (1992 80) claimed that
"younger women tend to uphold the traditional value of family responsibility for the old."

The age of the respondents is examined because some research (for example, Brody et al 1984; Lucas, Roy 1992) found that younger individuals as compared to middle-aged individuals are unable to foresee themselves as providing care to the elderly and do not understand the role strain that may be incurred. Brody et al (1984) further pointed out that middle-aged women, who are often both mothers and daughters, understand the physical and psychological demands of caregiving for their elderly parents.

Some relatively recent studies (Mindel et al 1986; Mitchell, Register 1984; Mutran 1985; Smergla et al 1988) pointed out the need to control for socioeconomic background in studies of racial differences in intergenerational relations (i.e., relationships between older and younger individuals). More specifically, once socioeconomic background was controlled, Mindel et al (1986) found little racial difference regarding age in informal assistance.

The analyses take into consideration academic major because of the selection of students into majors based on personality and career goals is an important factor in a college aged sample. As Ben-Shem and Avi-Itzhak (1991) claimed, students majoring in the humanities and/or social sciences as compared to physical or biological sciences were more likely to have attitudes and values which are more humanitarian. Thus, it is anticipated that academic major will have some association with stereotypes.

Based upon the literature discussed above, I investigate the following questions (Q):

Q 1) Are there racial differences regarding negative stereotypes toward older people, without employing control variables?

Q 2) Are there racial differences regarding negative stereotypes toward older people, controlling for age, gender, family income, and academic major?

METHODS
Sample
The participants in the study are introductory sociology students drawn from a regional university in the Southeast (N = 492). Students were surveyed outside their regular class meeting time. Respondents were assured that their participation was voluntary and that their responses were anonymous. It is important to note that the data are not a representative sample of university students, but are valuable in exploring Black/White differences regarding the elderly.

For both race and gender, the sample consists of the following: 346 Whites (70%) and 146 Blacks (30%); 320 women (65%) and 161 men (35%). In addition, the age ranges from 17 to 60 years, M = 24.1, SD = 8.4. The mean family income is $25,328, while the median is $15,000. Two-thirds of the respondents are classified as either freshman or sophomores. Academic major distributions consist of 57 percent who study in one of the human service fields (i.e., social sciences, humanities and fine arts, nursing and education); the remaining 43 percent major in either the physical or biological sciences.

Measures
Stereotypes Toward Older People. I use Chumbler's (1994) Stereotypes Toward Older People Scale (STOPS) to assess the students' stereotypes toward older people. Chumbler's (1994) STOPS contains 14 items, measured by a Likert-type seven-point scale (where 1 = never; 7 = always). STOPS is a multidimensional scale. Based upon both exploratory and confirmatory factor analyses, Chumbler (1994) identified four factors that are labeled: 1) Intolerance; 2) Health Behavior; 3) Negative Personality Characteristics; and 4) Inactivity. After employing both exploratory factor analysis (EFA) and confirmatory factor analysis (CFA), the present study found the same factor structure as that of Chumbler (1994). For all four sub-scales (described below), a higher score indicates a negative stereotype of older people.

The first sub-scale, Intolerance, contains four-items (minimum factor loading = .48), reflecting perceptions of elders' likelihood of "getting upset", "being grouchy"; "talking to themselves" and "being impatient". This sub-scale has a mean of 14.0 (SD = 3.6) and a Cronbach's alpha = .77.

The second factor, Health Behavior, contains three-items (minimum factor loading = .60), reflecting perceptions of older individuals' likelihood of "having health problems", "recovering from illness", and "having poor walking ability". This sub-scale has a mean of 12.4 (SD = 2.7) and a Cronbach's alpha = .70.

The third factor, Negative Personality Characteristics, contains four-items (minimum
Variables  | Blacks  | Whites  
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>146</td>
<td>346</td>
</tr>
<tr>
<td>Age</td>
<td>26.31</td>
<td>23.81**</td>
</tr>
<tr>
<td>Male</td>
<td>27.30</td>
<td>65.10***</td>
</tr>
<tr>
<td>Income</td>
<td>18,411</td>
<td>29,214**</td>
</tr>
<tr>
<td>Major - Hum/Soc Sci****</td>
<td>24.90</td>
<td>73.30*</td>
</tr>
</tbody>
</table>

* p < .05; ** p < .01; *** p < .001

Note: "Means" of dichotomous variables represent the percentage of subjects with that characteristic. Differences in nominal variables tested by chi-square; other differences examined by t-test.

**** 2% (or 5) of the respondents left this item unanswered.

Table 1 presents the social background characteristics for the Blacks and Whites. Table 1 shows that the mean age for Blacks is much higher than that of Whites (26.31 versus 23.81, p < .01). Moreover, Table 1 indicates that Whites rather than Blacks are more likely to be male, and to major in either the Humanities or Social Sciences. In addition, Table 1 shows that Whites as compared to Blacks are much more likely to have a higher average family income ($29,214 versus to $18,411, p < .01).

Q 1: Are there racial differences in negative stereotypes toward older people, without employing control variables? Table 2 indicates that there are statistically significant mean differences by race for three of the four sub-scales—intolerance, negative personality characteristics, and inactivity—used to measure negative stereotypes toward older people. More specifically, Blacks as compared to Whites have stronger negative stereotypes regarding intolerance of older people (M = 15.00 versus M = 13.55; t = 3.33, p < .001). Similarly, Blacks instead of Whites have stronger negative stereotypes regarding negative personality characteristics (M = 20.76 versus M = 18.68), t = 6.4, p < .001. Moreover, Blacks as compared to Whites have stronger negative stereotypes toward older peoples' levels of activity (M = 12.31 versus 11.63; t = 2.8, p < .01). There are no differences between Blacks and Whites regarding their stereotypes toward older individuals' health behavior.

Q 2: Are there racial differences in negative stereotypes toward older people, controlling for age, gender, family income, and academic major? Table 3 presents the multiple regression analyses for the entire sample, as well as for the sample of Whites and Blacks. In particular, Table 3 shows that when respondents' age, gender, family income, and academic major are controlled, there are no statistically significant racial differences in negative stereotypes toward older people for both the inactivity and health behavior dimensions. Table 3 indicates that the racial differences in the negative personality characteristics dimension can be accounted for by the respondents' age. That is, age has a statistically
Table 2: Mean Scores of Racial Differences in Negative Stereotypes Toward Older People

<table>
<thead>
<tr>
<th>Negative Stereotypes Toward Elders</th>
<th>Whites N=346</th>
<th>Blacks N=146</th>
<th>T-test Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intolerance</td>
<td>13.55 3.10</td>
<td>14.96 4.35</td>
<td>3.33***</td>
</tr>
<tr>
<td>Health Behavior</td>
<td>12.33 2.52</td>
<td>12.73 3.14</td>
<td>.57</td>
</tr>
<tr>
<td>Negative Personality Characteristics</td>
<td>18.68 2.90</td>
<td>20.76 3.66</td>
<td>6.40***</td>
</tr>
<tr>
<td>Inactivity</td>
<td>11.63 2.14</td>
<td>12.31 2.89</td>
<td>2.80**</td>
</tr>
</tbody>
</table>

** p < .01; *** p < .001

Note: The scales are coded so that higher numbers indicate stronger negative stereotypes.

Table 3: Standardized Regression Coefficients for Blacks (N=146) and Whites (N=346) For The Four STOPS Sub-scales On Age, Gender, Family Income, and Academic Major

<table>
<thead>
<tr>
<th>Variables</th>
<th>Intolerance</th>
<th>Health Behavior</th>
<th>Negative Personality Characteristics</th>
<th>Inactivity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>E  W  B</td>
<td>E  W  B</td>
<td>E  W  B</td>
<td>E  W  B</td>
</tr>
<tr>
<td>Blacks</td>
<td>.10 -.02 -.12</td>
<td>-.09 -.09 -.11</td>
<td>-.03 -.04 -.20</td>
<td>-.06 -.06 -.03</td>
</tr>
<tr>
<td>Age</td>
<td>-.02 .05 -.06</td>
<td>.00 .06 -.13</td>
<td>.00 -.03 .03</td>
<td>.00 .00 .01</td>
</tr>
<tr>
<td>Male</td>
<td>.01 .05 -.05</td>
<td>.00 .06 -.13</td>
<td>.00 .06 -.16</td>
<td>-.09 -.07 -.16</td>
</tr>
<tr>
<td>Income</td>
<td>-.03 .04 -.20</td>
<td>-.04 -.02 -.06</td>
<td>-.03 -.03 .03</td>
<td>.00 .00 .01</td>
</tr>
<tr>
<td>Major-Hum/Soc Sci</td>
<td>.06 .05 .06</td>
<td>.06 .05 .05</td>
<td>.04 .05 .04</td>
<td>.05 .04 .02</td>
</tr>
<tr>
<td>Adj R squared</td>
<td>.01 .00 .03</td>
<td>.00 .01 .00</td>
<td>.03 .04 .04</td>
<td>.00 .00 .00</td>
</tr>
</tbody>
</table>

* p < .05; ** p < .01; *** p < .001

Note: E = The entire sample of respondents (N=492); W = The sub-sample of White respondents (N=346); B = The sub-sample of Black respondents (N=146).

significant Beta for both the Blacks and Whites, which in turn, accounts for most of the four percent of the variance explained. Thus, Table 3 suggests that both the Black and White respondents who are younger are much more likely to perceive older individuals with negative personality characteristics. Additionally, Table 3 shows that the racial differences in the intolerance dimension could be accounted for by the income level of the Black respondents. For instance, for Blacks, income level has a Beta = -.20, p < .05, whereas for Whites, it has a Beta = -.04, p > .05. Note that the remaining Beta's are not significant and the r-squares are virtually zero.

Finally, Table 3 indicates that when Blacks and Whites are combined into a single model (N = 492), the race effect does not remain statistically significant for inactivity, health behavior, and negative personality characteristics dimensions. Similar to the Black and White sub-samples, age has a statistically significant negative direct effect on negative personality characteristics and accounts for most of the three percent of the variance explained.

CONCLUSION AND DISCUSSION

The present study examined whether racial differences in negative stereotypes toward older individuals are present among a sample of university students. The study found that without employing control variables, Blacks as compared to Whites were more likely to believe that older individuals were intolerant, possess negative personality characteristics and are inactive. However, when the respondents' age, gender, family income and academic major were controlled, two of the four dimensions of Chumbler's STOPS (1994)—health behavior and inactivity—had no statistically significant differences by race. On the other hand, after these control variables were employed, the other two dimensions, intolerance and negative personality characteristics, still had statistically significant differences. For the intolerance dimension, the results suggest that the statistical difference can be explained, in part, by the Black respondents' family income. That is, those Blacks who have lower incomes are more likely than Whites to believe that older adults are intolerant. Regarding the negative personality characteristics dimension, the respondents' age appeared to explain the racial differences. More specifically, for both Blacks and Whites, the younger respondents are more likely to believe that older individuals have negative personality characteristics.
characteristics.

The present study followed suggestions from previous research (Lucas, Roy 1992; Mutran 1985; Schwalb, Sedlacek 1990; Smerglia et al 1988) which suggested that potential racial differences in negative stereotypes toward older individuals should explore the potential effects of gender, socioeconomic background and academic major. These data reported here suggest that income levels and age of the individuals are more important than gender and academic major in determining Black and White differences in negative stereotypes toward older people. The statistical differences between Whites and Blacks in the intolerance and personality scales could have implications for the assistance received by older individuals. Blacks typically provide more informal assistance for their elderly family members, while Whites tend to utilize more formal assistance, which requires substantial finances (Smerglia et al 1988).

The present study found that Whites have higher family incomes. However, family income was not associated by racial differences in negative stereotypes toward older individuals. Future research could explore whether family incomes are influential for Blacks in their caregiving responsibilities. Moreover, research could explore if individuals who have higher incomes feel they are relieved of caregiving responsibilities because they provide financial assistance or whether they are preoccupied and unavailable to offer direct caregiving assistance.

Future research should also explore why Blacks and Whites display negative personality characteristics toward older people. Moreover, recall that age had a statistically significant direct on negative personality characteristics for the entire sample as well as for the Black and White sub-samples. Research, hereafter, should explore the association between age and views of elder’s negative personality characteristics.

In addition, further research might explore questions about specific likes and dislikes about older people. This would provide an understanding of how stereotypes develop. I should also note that the students were not asked to respond to any questions concerning the caregiving situation; therefore, there is insufficient evidence to conclude whether they would accept or reject such a situation if faced with the necessity to do so. Moreover, the amount of contact the students maintain with older adults was not addressed in this study. This is a shortcoming to the study since (Townsend 1971) has shown that individuals who have more personal contact with older individuals do not possess as many myths and stereotypes. I decided not to include “amount of contact” because some scholars (Burton, Bengston 1995; Kiecolt, Acock 1990) claimed that this is an ambiguous construct that needs further measurement work. For instance, “amount of contact” could be measured in “days per week” or “hours per week,” both of which could lead to different results.

I should also note that there may be perceptual differences between colleges students and non-college students. Focusing on only college students, such as the present study, reduces the Black/White variation on a number of factors. Even though the study’s findings can not be generalizable to the entire United States, the sample has a respectable percentage of Black respondents (i.e., approximately 70% of the sample are White as compared to 30% who are Black). Research studies typically must rely on samples that include respondents of one race or are disproportionate. Future research should relate stereotypes and experiences of the respondents to the stereotypes of students in other geographical regions and to young adults who do not attend college.

A second limitation of this study is that we conceptualized “the elderly” as all individuals 65 years of age and older. The reality is that “the elderly” may be too diverse to measure as a homogeneous group (Cook 1992). Utilizing the STOPs (1994) scale to measure stereotypes between different age categories of the elderly (e.g., age 65 to 74, 75 to 84 and 85 to 99) might be informative. In addition to addressing the limitations of the present study, future research should investigate the etiology of racial differences in ageist stereotypes. In this regard, longitudinal studies would be valuable in addressing the process leading to negative stereotypes toward older people.

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