

Social representations of ageing shared by different age groups

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Abstract

The present study is focused on the social representations of ageing and positive ageing. 171 subjects composed 4 age groups cohorts (G1 18-25; G2 26-40; G3 41-55; G4 55+). A group of 69 elderly clients of a daily care institutional setting also responded to the stimulus material. All subjects were submitted to a free evocation task concerned with ageing and positive ageing. Data were analyzed by software EVOC and SPAD. Results of the structural analyses show a negative representation of ageing given by the 171 subjects. Terms such as: wisdom, body, death, tiredness, loneliness among other categories composed the hypothetical central core of the representation of ageing. Data on positive ageing suggests a markedly positive view characterized by items such as wisdom, experience, health and also autonomy and maturity among others. Factorial analysis show a more positive tone of representations produced mainly by youngsters and senior groups. Results were analyzed taking into account intergroup implicit processes and stereotypic answers were identified in the overall representation of ageing and in the responses of the younger group.

Keywords: Social representation, Ageing, Positive ageing, Social stereotypes, Intergroup relations.

Nowadays there is a concern with the topic of ageing of populations especially by members of the governments and health professionals from most western countries. This concern is due to the fact that an accentuated demographic transition has been occurring whereas an increase in the number of the elderly population takes place. Reports of the WHO (2002) recognize that in the first half of the XXI century there will be a significant increase of elder citizens' life expectation as much as of their life quality.

Research on social representations in the area of studies concerned with the phenomenon of ageing can contribute to unveil the shared knowledge of social groups.

Studying the phenomenon of ageing as perceived by different age groups allow us to see the elderly as members of a particular group but also as a social category which is implicit in the classification and judgment of social events. Such judgments have been studied as an important issue within the social psychology of prejudice and social stereotype.

The intergroup approach is necessary to discover the implicit discriminations and the social psychological dimension allows to detect empirical data on social representations, social stereotypes about the elderly and concomitant

prejudices. Furthermore, the intergroup approach in the study of ageing brings forth data which refer to the distinct social positions occupied in society by citizens belonging to different age groups which reflect important aspects of power relations, economical issues and social organization as related to real life groups.

A review of studies related to ageing realized previously or concomitantly to the release of the global public policies at the beginning of the first decade of this century was made with the aim of finding out shared social representations but also information about possible stereotypes and prejudices. As far as the studies on social representations are concerned we found similarities in the local studies, in the south of Brazil as much as in the international findings. Such review was made aiming mainly at the positive or negative tone assumed by each representational system given that the cultural and local specificities add a unique meaning to such representations. It also aims at making explicit the importance of the intergroup choices made at the methodological level as a determinant factor of such representations.

Studies made in the city of Mexico (Ampudia, 2000; Mendoza, 1999), with elderly

samples, showed that ageing was associated to “loss of activity” in the physical dimension and feelings of “loneliness”.

Gastaldi and Contarello (2006), in data obtained in the beginning of the decade, demonstrated in their results that ageing was associated to an effect of group filiation (young x elderly) which influenced their social representations of ageing. The youngsters associated age with illness while the elderly did not make such explicit association. Furthermore, the gender of the respondents was related to the attribution of potentialities and weaknesses associated to the stage of ageing. Italian male respondents concentrated their answers on “psychological and physical decay” while female respondents associated it to a “serene and tranquil life”.

In a study of representation of ageing made in Germany with health professionals, Flick, Fischer, Neuber, Schwartz and Walter (2003) concluded that the representations of such professionals turned out to be more complex than the ones observed in previous decades. In this study the representations obtained were concerned with the elderly’s abilities in adjusting their limits; with their level of activity and with their capacity to maintain autonomy and determination. Those results obtained in a German context anticipate the changes which have been happening since the introduction of the global public policies respective to the elderly and their inclusion in democratic societies in the beginning of this decade. It shows that the German professionals were going through a process of changing of attitudes or representations whereas the topic of ageing included positive tones and stressed the importance of the dimension of activity and autonomy of the elderly.

Some studies run during the end of last century and beginning of this decade, in the south of Brazil, arrived to results compatible to the ones described above. In a first study done and published at the end of the 90’s (Guimarães, 1997; Veloz, Nascimento-Schulze, & Camargo, 1999), concerned with the representations of ageing as a process, of the elderly and of *old age*, interviews were made with retired university lecturers, with participants active in elderly groups and with residents of an old people’s home considered a model in the city. Those three groups were chosen because they represented different insertion in the social scenery with respective

associated social practices. In fact, 3 distinct social representations were found whereas women in particular referred to the “loss of family bonds” and “loss of bodily beauty”. A second representation emerged from responses given particularly by the male subjects, related mainly to questions respective to the “elderly” and “old age”. This representation referred to “loss in work capacity”. A third representation emerged from the contribution of both men and women and was concerned with a “natural decay” result from the ageing process.

In a study, also done in Florianopolis, with women aged sixty or more, interviews were run about their early and actual sexuality. Data was obtained in the beginning of this decade, (Flor & Nascimento-Schulze, 2002; Lemos, 2001). Results are like an echo of the ones previously found, so far as women reported loss of physical beauty and further they revealed their ignorance towards sexuality at their youth. They also reported on their lack of sexual pleasure and the repression of desire which followed them in their mature life.

Another research, realized at the beginning of this decade and run in the same context, was devoted to the social representations of a healthy elder (Teixeira, 1999; Teixeira, Nascimento-Schulze, & Camargo, 2002). The groups of subjects elected were: healthy elders; elders with health problems; caretakers and health workers. The group of subjects which had some sort of illness used an internal causal attribution strategy to define the healthy elder. They represented the healthy elderly as a person with a “good head” and a capacity of ageing in a positive way. Great emphasis was given, by members of all groups, to the autonomy of the elderly as a sign of health. The group of caretakers mentioned a healthy life style as the major issue in the maintenance of old people’s health. Thus, this study shows very clearly how different groups contribute with distinct aspects of a representation, and how prototypical examples can be observed through the technique of words evocation, which covers two important aspects in the detection of social stereotypes, namely, categorization and classification of items. Furthermore, it is interesting to notice that the results obtained in this research at the end of the 90’s of last century, pointed to some ideas which are now adopted by the global policies of the WHO for the XXI century, respective to the insertion of the elderly in present societies and

defending the policy of a positive and active ageing.

Finally, a pertinent set of data has to be mentioned here resulted from a study also run in the southern part of Brazil (Martins, 2002), which is concerned with the social representations of ageing by different age groups within an institutional context of leisure, culture and entertainment. Results obtained in the interviews with youngsters and adults with ages below 55; show a picture of the elder as someone who needs more attention especially so far as health is concerned. Those two age groups also represented two types of elder person: the ones who feel old and the ones who do not feel old. On the other hand, the group of senior subjects gives evidence to the "support of religion" and "faith" as important to cope with the challenges of ageing. Also, similarly to previous results, senior subjects attribute internal responsibility from the elder as a central factor for them to be able to reach a successful life in the old age.

The different pieces of research that we considered here, respecting a chronological dimension, seem to be referring to a representation of ageing which is very much associated to negative elements and it is only when subjects take in consideration an ideal situation (for example: how would be a healthy elder?) that results give a more positive view, as it is the case of the German study and the study about the elder's health where the interviewed subjects argue in favor of a different representation. Thus, at this time in which the above studies were realized, a prevalent negative view of the process of ageing, the elderly, or of old age was pictured through the results. This is an important issue to the studies of social representations in the area for two reasons: (1) researchers have to be aware of the negative associations recurrent with the word "old age" and "ageing"; (2) because concomitant to those negative representations, senior citizens were and probably still are facing problems of discrimination, prejudice and stereotypes.

Stereotypes and stereotype threat

The outstanding contribution of Levy, Slade, Kunkel and Kasl (2002) refers exactly to the same period of time in which the Brazilian studies were being produced, and it can bring some light to the issue of stereotype and social

identity. In a review of studies related to the effects of negative stereotypes upon the self perception and performance of senior subjects with North American citizens, Levy et al. (2002) demonstrated experimentally that social stereotypes are internalized and can operate without the awareness of the elder subjects. They flashed age stereotypes on a screen at a speed that was below subjects threshold of awareness and had the behaviour of the primed subjects judged by a panel of judges. Judges, who didn't know about the procedure and didn't identified the subjects who were primed, judged their behaviour in several tasks as more deteriorated than the behaviour of others who were in the baseline condition.

Nosek, Banaji and Greenwald (2002), also found indications that stereotypes related to age are internalized. In this study, elderly subjects displayed feelings towards the ingroup as negative as the feeling maintained by the outgroup, i.e., the younger subjects.

Levy et al. (2002) argued that unlike gender and race stereotypes which individuals encounter while developing group self-identities, individuals acquire age stereotypes several decades before becoming old. In their study, they observed whether positive self perceptions about one's ageing influenced survival, controlling for functional health and other relevant factors. They obtained from the measure of self-perceptions of ageing a partial inventory of the participants' definition of their old age. The authors assumed that these definitions tend to evolve, partially from the age stereotypes internalized in childhood and beyond and that they are unlikely to be consciously evaluated. It was found that the more positive the self-perceptions of ageing were, the greater was the will to live, and this partially mediated the relationship between self-perceptions of ageing and survival.

Thus, there seems to be evidences to suggest that the detrimental effect of stereotypes in old adults' lives can affect elders' cognitive performance because of the debilitating context that stereotypes can create.

The great contribution of Henri Tajfel to the study of social stereotypes has to be mentioned here. Tajfel (1981) accepts a definition of social stereotypes as a mental image simplified of a category, individual, institution or event which is shared, in essential aspects, by a large number of people. He contributes in particular to the discussion of the

individual and social functions attributed to social stereotypes. The individual functions being mainly related to cognitive purposes and the social ones particularly linked with group processes. The individual functions are discussed together with the process of categorization and bring evidence to the close relationship between stereotypes and prejudiced attitudes as much as on the need to maintain values. The social functions of stereotypes bring evidence to the need to preserve ideologies or to explain and justify a variety of social actions which bring advantage to the groups involved in the task of stereotyping.

The studies above mentioned assign to a period in which there were negative representations and stereotypes towards the elderly. After 2002 the WHO and Unesco launched a series of publications with the intention to change the attitudes of citizens and in specific of the young ones, by introducing a positive view of ageing. Activities which enhance positive intergenerational relationships were promoted and public policies were designed to influence citizens globally and locally.

Intergenerational studies concerned with the phenomenon of ageing assume an important role since they can reflect the real world and real intergroup age situations. The design of intergenerational studies has a dimension of intergroup relations so far as the groups created by the researcher can reveal to the subjects an ingroup versus outgroup dimension that is implicit in the real world and becomes explicit in the research setting. Such designs implicitly assume an intergroup paradigm in which perceptual discrimination, favoritism, maximization of differences and similarities are all perceptual and cognitive consequences of the phenomenology of being in a group.

A study run by Liu, Ng, Loong, Gee and Weatherall (2003) in New Zealand on cultural stereotypes and social representations of elders from Chinese and European origin, involved intergenerational groups approached from the *tajfelian* perspective of intergroup relations. Cultural stereotypes were confirmed but also universal representations such as the nurturant elder or the curmudgeon were found.

Another example of studies using the intergenerational model was done by Contarello, Romaioli and Bonetto (2009). Representations of the elderly were obtained from young and older respondents and results

showed that youngsters presented a more negative view of the out group than the elderly did of their in-group

After considering briefly the intergroup consequences of an intergenerational study, a review on the topic of positive ageing will set the basis for the proposed study. The idea of a more positive look to the phenomenon of age but also to the studies on health have been recently introduced by many authors and in fact this new look is happening at the same time as the propagation of the concepts of positive and active health.

Positive ageing

The concept of positive ageing is adopted in this study in contraposition to the negative representations of ageing found in the research examples above mentioned. Such concept offers an alternative to the omnipresent idea of ageing seeing as deficit or decline found in the medical literature and which frequently focuses in the ideas of loss, and of cognitive, biologic and social deficits.

Gergen and Gergen (2002), conceive different ways of ageing and admit that although the longevity of citizens is increasing in most countries, even so, the literature on ageing, up to 2003, was still concerned with the different losses that this process involves and not with the strategies that those citizens could adopt in order to have a positive view of the life they still had ahead of them. They conceived the mature life as a period of growth without parallel as much as of personal enrichment. They use the concept of positive ageing as an alternative to the negative connotation attributed to this stage of life. After the pioneering contribution offered by Gergen and Gergen, many contributions to the study of the elders in the area of social psychology or cognitive social psychology adopted research questions and orientations which are closer to a new paradigm of ageing focused in the potential of the senior citizens and not only in the loss which necessarily occurs during life course. Among the several authors who could be identified as adepts of a new paradigm of ageing could be mentioned Seligman (2008), Hertzog, Kramer, Wilson, and Lindenberger (2009) and Ryff (2010).

Seligman (2008), after contributing for the understanding of learned helplessness and stress, launches the rationale for the positive

health approach. The rationale for such theory is very much consistent with the ideas above described. He states that psychology and psychiatry have done reasonably well with mental illness but very poorly with mental health. A substantial body of research now suggests that intervention that builds the positive states alleviate depression. Further, the implementation of programs on positive health can operate on the economic scale since health costs will drop for the individual and the State. The notion of positive health is relevant to studies related to the old age since Seligman assumes that positive health is a predictor for longevity.

Other authors who contribute to a new look to the studies of ageing are Hertzog et al. (2009) who try to answer to the question whether the functional capacity of old adults can be preserved and enhanced and under which circumstances. Hertzog et al. bring scientific evidence to the argument that individuals' behaviors and environmental contexts can enhance their cognitive functioning and development in adulthood and old age. They work with the hypothesis of cognitive enrichment which states that the behaviors of an individual (including cognitive activity, social engagement, exercise, and other behaviors) have a meaningful positive impact on the level of effective cognitive functioning in old age. Among several topics he focuses on the question of whether behavior and lifestyle can move an individual's cognitive performance vertically upward.

Another example of research concerned with the positive aspects of health and ageing is the large national study of health and Well-Being supervised by Carol D. Ryff who is a Professor of Psychology at Wisconsin University and director of the Institute on Aging of Wisconsin University (Love, Seeman, Weinstein, & Ryff, 2010). The broad research line is contained in a national project on aging called MIDUS directed by Ryff, which is a forum for investigation, whereas health is taken as an integrative process and delineates the biopsychosocial pathway through which converging processes contribute to diverse health outcomes (Love et al., 2010). The project Midlife in United States basis its research line on the concept of positive ageing considered as a complex and integrated biopsychosocial process which demands several levels of analyses including

sociodemographic characteristics, psychosocial resources, life stress, health behavior and practices and neurobiological risks. In their research projects positive ageing is associated to well – being which can be related to six dimensions: autonomy, environmental mastering, personal growth, positive relationships, purpose attainment and self-acceptance.

The reviewed literature transmits the idea that changes in terms of attitudes and representations are occurring in the western societies respective to the set of cognitive and evaluative elements associated to concepts related to ageing and the elderly and that this change is occurring inside the research lines and laboratories of research where researchers choose to concentrate on relationships among variables which verify reasons and associate variables to the possibilities of a positive ageing to elderly citizens. Thus, we can speculate whether there are changes of attitudes and representations within the academic circle itself which often inspire new ways of looking and perceiving hidden variables or even help in the genesis of new paradigms and social representations.

Moscovici (1976) argues that representations constitute universes of opinions which have three dimensions: the information, the attitude and the field or image of the representation.

This research is focused on the structural approach of the representations since it allows a comparative study in which the different groups' contributions can be considered in relation to each other.

Abric (1998) considers that the elements of a representation (opinions, beliefs, information and attitudes) are hierarchically organized around a central nucleus. Such nucleus gives meaning to the representation and around it are organized the peripheral elements.

Social categorization

Before describing the actual study it is necessary to make explicit the overwhelming role of the social categorization process which, we claim, is always implicit in studies of social representations involving groups.

The process of categorization can be considered as the basis of cognitive processes closely associated to intergroup strategies and intergroup behavior.

Tajfel (1981), Turner and Giles (1981) see the categorization process as a systematic superimposition of a classification upon a stimulus dimension which leads to the perceptual accentuation of intra-class similarities and interclass differences. Such process operates in social perception producing prejudice and stereotyping.

Doise (1978) considers the categorization process as causing intergroup discrimination so that categorization *per se* induces individuals to perceive themselves and others in terms of their group memberships. Thus, they perceive themselves as similar to ingroup members and different from outgroup members. This cognitive distinction produces differential intergroup behaviours and attitudes.

Moscovici (1981), when discussing the processes of anchoring and objectification, also stresses the importance of the categorization process for the classification and naming procedures activated in the structuring of a social representation.

Those theoretical remarks highlight the permanent presence of social categorizations in real social interactions when group identifications are triggered off by verbal interactions or even by non verbal signs, as in the case of age clues recognition.

Furthermore, the cognitive process of categorization is the basis of the free evocation task normally used as the technique to detect the structure of social representations.

Based on the contributions above reviewed a study was elaborated with the aim of verifying the impact of a positive communication about ageing upon the structural representation already existent. Thus, it is to be observed a possible change in direction, structure and content of elements present in the representations of positive ageing when compared with elements previously obtained in the representations of ageing.

The following research questions are put forward: Which is the representational structure of ageing shared by different groups' cohorts? The presentation of a positive concept about ageing can modify the previous representational structure? Is there a difference in the shared representational structures of ageing and positive ageing of different group cohorts? The presuppositions were that the original representation of ageing would be close to the results obtained previously in other studies in the south of Brazil in which ageing is

categorized in a more negative way. Furthermore, it was expected that the introduction of the concept of positive ageing would bring a change in the structure previously shown. There was an expectation that age groups would contribute differently to such representations in terms of their structure, attitude direction and content.

Methodology

Subjects

171 volunteers' male and female subjects participated in the study. They were divided in 4 cohorts or groups with ages varying from: 18-25 (Group 1), 26-40 (Group 2), 41-55 (Group 3) and Group 4 with individuals older than 55 years. Another sample of (number) elderly subjects enrolled in a daily care system institution was also considered.

Questionnaire

The data collection involved a questionnaire with two basic questions. After reading the instructions and identifying themselves in terms of sex and age subjects were asked to produce and classify by order of importance 5 words associated to the stimulus words "Ageing" and "Positive Ageing". A specific definition of positive ageing was written on the questionnaire stressing the potential and real importance of the elderly for societies. All participants responded first to the task respective to ageing and second to the task concerned with positive ageing.

The following text was given to subjects concerned with the concept of positive ageing:

"This idea takes into account the fact that not enough importance has been given to the development and the potential of people who are older than 65 years. Medical doctors specialized in gerontology, focus their attention mainly in illnesses and little is said about the positive possibilities of ageing. Such as the fact that those people are wiser, that they have much to teach to the following generations, that they are the live memory of the present societies, that they know more about life because they lived more and furthermore, that they are often the support element of their families when both parents work outside their home. In sum, it is not considered that in this stage of life, when the process of ageing becomes more evident, that people can also live their lives with satisfaction and happiness".

Participants were invited to produce 5 words (categories) which they perceived as being associated with each of the concepts of ageing above described. The terms were then classified by each of them in terms of importance.

Procedure

Participants were individually contacted considering mainly the criteria of age cohort and educational level. All 171 participants had a completed secondary education course and most of them were in the university or already obtained their degrees. However, the educational criterion was not observed with the 'daily care' group of elderly. Instructions were read in loud voice with each respondent and the answers and classifications were written by the respondent unless this for some reason was not possible for him (her).

Data analyses

In a first instance data were analysed with the help of programme EVOC (Ensemble de Programmes Permettant l'Analyse des Evocations), by Vergès (1999). Such programme performs a lexicographic analysis which allows the researcher to reach the structure of the considered social representations as much as its central and

peripheral elements which are grouped and displayed in four cells. Such structure is obtained by a hierarchyzation of both: the frequency and order of the evoked items (Nascimento- Schulze & Camargo, 2000).

The programme EVOC was used with the aim of describing the structure and hypothetical centrality of the representational elements.

In order to find the different contributions given by each of the four age groups a factor analysis of multiple correspondences was done with the help of the software SPAD (Lebart & Salem, 1988; SPAD, 2008).

Results description

Representations of ageing

The total number of evocations produced by the 171 respondents respective to ageing was considered in the EVOC analyses and two criteria were used to constitute the diagram with 4 quadrants, namely, frequency of the evoked item and the mean of the order of evocation (MOE). As it is displayed in figure 1, in the top left quadrant the words experience, body and death in particular but also the words need and wisdom, are the elements which probably constitute the central core of the representation of ageing.

MOE < 2,9				MOE > 2,9		
	Element	f	MOE	Element	f	MOE
1 >= 8	Experience	34	2,74	Illness	48	2,98
	Body	26	2,50	Family	25	4,08
	Death	22	2,59	Loss	22	3,23
	Need	19	2,84	Health	12	2,92
	Elderly	17	1,77	Knowledge	11	3,36
	Wisdom	16	2,31	Time	10	4,20
	Skin	14	1,86			
	Fear	12	2,75			
	Pension	9	2,89			
	Maturity	8	2,75			
		Maturation	7	2,43	Abandonment	6
1 < 8	Life	7	2,86	Entertainment	6	3,33
	Tiredness	6	1,83	Respect	6	3,00
	Sadness	6	1,83	Difficulties	5	3,20
				Sufferance	5	3,40

Intermediary frequency:8
Medium rank evocation: 2,9

Figure 1 - EVOC results on social representation of Ageing for all subjects.

In the first quadrant it becomes evident the double bind associations towards the process of ageing since together with positive elements such as experience, wisdom and maturity, appear negative ones. It is also mentioned the word retirement, which could be associated to negative feelings and interpretations. In the second and third quadrants, peripheral answers suggest the same division manifested in the central cluster, whereas *maturity* and *life* are followed by *tiredness* and *sadness*. Illness appears in the periphery with a high frequency followed by health with a lower frequency. The emergence of family as a frequent category could be interpreted as a recognition of its importance during the old age. It is worth to mention the appearance of knowledge as reinforcing the more central category of wisdom.

The same data was used in a correspondence analyses where the age cohorts were considered searching for the groups' contributions to the representations above described.

The factorial analyses done with SPAD software obtained a Phi index of 0.4159.

Textual variables were analyzed together with the four cohorts and allowed to identify the contribution of each group to the extracted factors. Three factors were produced by the correspondence analyses and the first two factors explain 81.30% of the total variance

(Factor 1= 54.70 %, factor 2= 26.62%).

The significant words and groups which contributed most to factors 1 and 2 are graphically represented bellow.

Factor 1 shows an opposition between the group of younger subjects (18 to 25 years) and the group of seniors (55 years +). But, the group of senior subjects contributed more to factor 1 (70.4%) than the group of younger subjects (29.5%). Results show a predominance of positive categories in the representation of ageing in the responses of the elder subjects. They mentioned happiness, joy, health and love followed by sadness and lack. The group of older subjects contributed with a dimension where the positive side of their life stage predominates over the negative. In this dimension, the youngsters do not seem to share a representation of ageing.

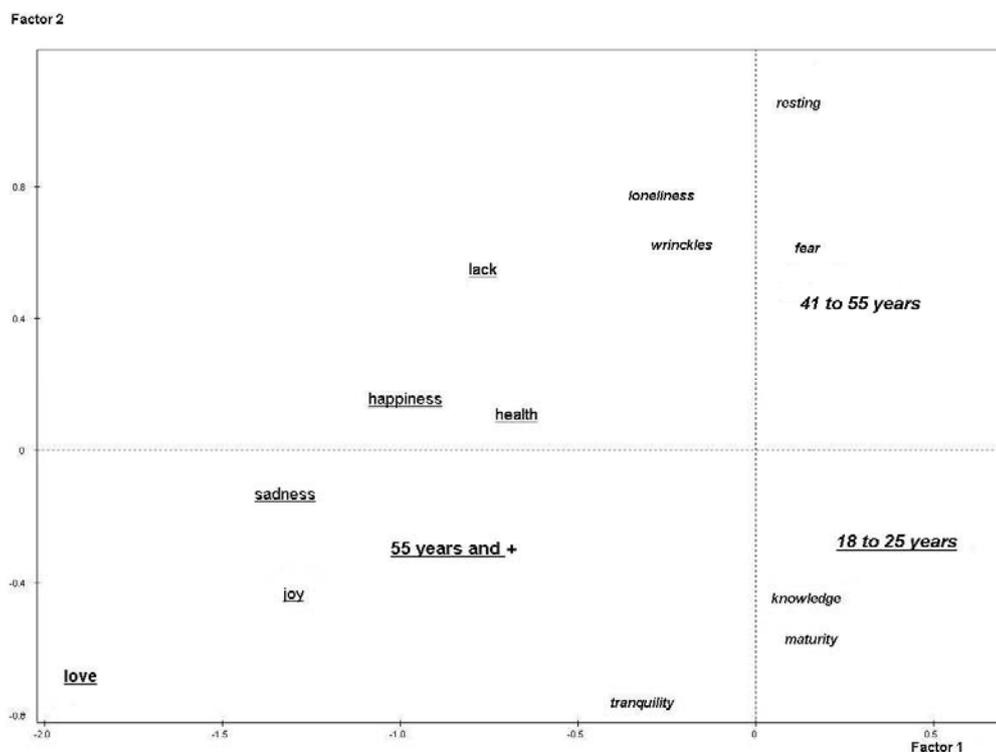


Figure 2 - Graphic representation of SPAD factorial analysis for AGEING (factors 1 and 2).

Factor 2 shows group 1 (18 to 25 years) in contraposition to group 3 (41 to 55 years). Results here suggest that the younger subjects described ageing as related to knowledge, maturity and tranquility while the cohort of Ss with ages between 41 and 55 associated ageing with fear, loneliness, wrinkles and resting. Younger subjects present a consistently positive view of the old age while the mature subjects seem to be somehow worried or concerned with this life stage, possibly because their generation group is nearer to the experience of being considered as a member of the elderly.

Results also suggest a different group positioning towards the issue, since youngsters are very positive, the group of elders give a divided view to ageing and the intermediary groups are more negative, proposing a blink

view of their future, when they are stimulated by the concept of ageing alone.

Representations of positive ageing

Results on social representations of positive ageing obtained through the EVOC analyses with the same 171 Ss show a completely different set of data as compared to the one obtained from the association with the term Ageing.

In the first quadrant, top left, related to the hypothetical central nucleus of the representation, the three first words: wisdom, experience and health present higher frequencies than the following ones: knowledge, work and stories. Differently from the previous structural results on ageing, wisdom emerges as the most frequent element in the central cell and knowledge migrates from the periphery to a more central position.

MOE < 2,9				MOE > 2,9		
	Element	f	MOE	Element	f	MOE
1 >= 6	Wisdom	32	2,31	Life	16	3,06
	Experience	28	1,75	Activity	15	3,07
	Health	23	2,83	Respect	11	3,36
	Knowledge	14	2,84	Maturity	11	3,91
	Work	10	2,80	Stability	8	3,00
	Stories	6	1,60	Happiness	7	3,43
1 < 6				Security	7	3,86
				Time	6	3,50
				Help	6	3,00
				Joy	5	3,40
				Conviviality	5	3,40
				Patience	5	3,40
				Relationships	5	3,40
				Trips	5	3,40
				Friendship	5	4,25
			Love	5	3,50	
	Food	5	2,50			
	Autonomy	5	2,75			

Intermediary frequency: 6
 Medium rank evocation: 2,9

Figure 3 - EVOC results on social representation of Positive for all subjects.

As it happened in the results related to Ageing, wisdom and maturity are present but this time inserted in a different position. Furthermore, the concept of health is included in the new structure and family is not mentioned as relevant and is somehow substituted by activity. Thus, the concept of positive ageing brings a different constellation of concepts whereas the older person is seen as more autonomous and dynamic. Thus reading a positive conception of ageing promoted a

change in the representational structure, including of the peripheral elements, which is more positive and opened to new possibilities to individuals in the late stage of life. In the second and third quadrants, food and autonomy emerged as relevant associations to positive health and a set of 9 concepts ranging from life, activity, respect and maturity to felicity, security, time and help, complete the set of related associations to the new representation of positive ageing. The last quadrant, mainly

associated to social practices, includes the items particularly related to social interactional issues such as: conviviality, relationships, trips, patience, happiness, love and friendship. Further analyses allowed us to see the contribution of each of the age groups to the above results.

The correspondence analyses results run with the positive ageing data discovered a Phi indexed 0.2781.

Three main factors were found in such analyses and the two first factors together contributed to 75.78 % of the variance (factor 1= 43.58% and factor 2= 32.20%). A third factor by itself accounted for 24.22% of the variance.

The contributions of frequencies in each of the axes show for factor 1 an opposition between group 1 and group 4 while for factor 3 there is an opposition between group 1 and group 3.

The identified significant words which most contributed to factors 1 and 3 associated to the significant groups are graphically arranged and displayed in Figure 4.

Factor 1 shows a contraposition between group 1 (18 to 25 years) and group 4 (55 years

and +) so that younger subjects attribute to positive ageing the words happiness and experience while the older subjects attribute to positive ageing the words friendship, work and learning. This dimension seems to be emphasizing the positive aspects of interpersonal relationships where work and learning are part of it. Factor 3 shows a contraposition between group 1 and group 3 (41 to 55 years). In this dimension, the younger Ss associate positive ageing to pleasure and social interaction while Ss with ages varying between 41 and 55 contributed with the terms love, independent and participation. Overall, the words that present the higher frequency involve terms which show a very subjective contribution. So, in the two complementary analyses, positive ageing is seen as centrally involving knowledge, wisdom as the main core elements, followed by the happy conviviality. Maybe an important result here is the emphasis given to good health as a key element for positive ageing. This result comes in agreement with the research line developed by the Wisconsin group. Ryff (2010) associates positive ageing to positive health.

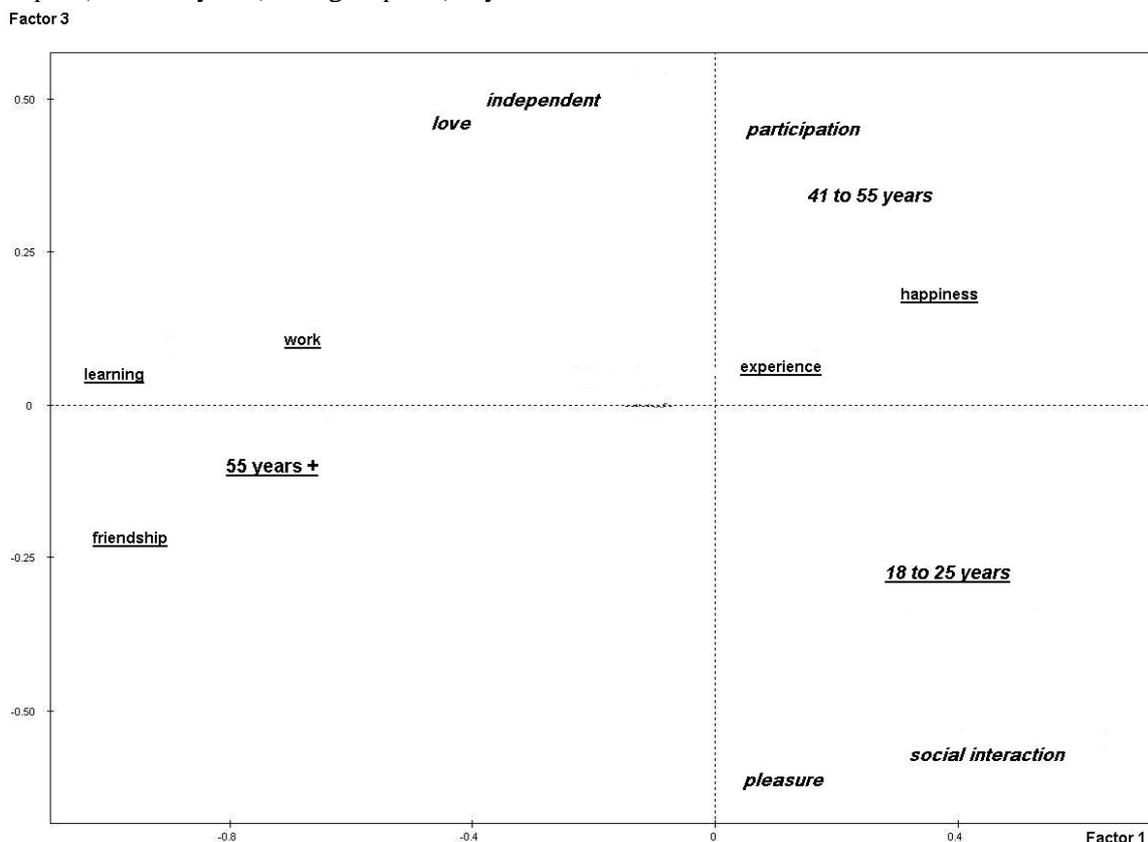


Figure 4 - Graphic representation of SPAD factorial analysis results for POSITIVE AGEING (factors 1 and 3).

Daily care subjects' results

The same set of questions was presented to a group of 69 elderly who frequented an institution which offered daily care. Responses were submitted only to EVOC analyses since subjects constituted a single homogeneous group in terms of age. Results for the representations of ageing are displayed in Figure 5.

The results of the daily care group suggest the same 'double bind' pattern found in the results of the larger group previously analysed. This group of subjects which is somehow secluded from the conviviality of others, frequenting the institution in a daily basis, conveys a set of responses which on the whole constitutes a representational structure characterized by both positive and negative concepts.

So, those subjects associated ageing primarily with illness and health as much as with happiness, loneliness and sadness.

Peripheral elements of the representation show the typical association of ageing with God, family and friends but also with death and fear. Longing, wisdom and fun were the outstanding answers present in the fourth quadrant which usually reflects the new concepts to be probably included in the core representation in a future instance.

The same subjects, when required to produce words associated to the concept of positive ageing, and after reading the definition given to the term, produced the following structure for the representation of ageing which can be seen in Figure 6.

The representational structure observed above in the four quadrants, displays a positive view of ageing. The first cell left and above, includes elements that were classified as first in a list and were mentioned with a higher frequency. It is to be remarked that the same elements which have, in the previous set of data, occupied a secondary place are now central in this representation.

MOE < 3				MOE > 3		
	Element	f	MOE	Element	f	MOE
1 >= 6	Illness	17	2,7	Family	24	3,9
	Health	13	2,7	Death	11	3,3
	Joy	9	2,3	God	7	4,4
	Loneliness	7	2,3	Love	6	4,1
	Sadness	6	2,6	Friends	6	3,8
1 < 6	Happiness	5	1,5	Enjoyment	5	3,4
	Experience	5	1,8	Wisdom	5	3,0
	Fear	5	2,3	Longing	5	3,2

Intermediary frequency: 6
Medium rank evocation: 3

Figure 5 - EVOC results on social representation of Ageing for all subjects.

MOE < 3				MOE > 3		
	Element	f	MOE	Element	f	MOE
1 >= 12	Family	28	2,6	Enjoyment	20	3,4
	Health	36	1,5	Friends	20	4,2
	God	12	2,0	Love	17	4,0
				Joy	14	3,2
1 < 12	Knowledge	5	2,0	Trips	6	3,1
	Good Food	5	2,6	Money	5	4,2
			Acceptance	5	3,7	

Intermediary frequency: 12
Medium rank evocation: 3

Figure 6 – EVOC results on social representation of positive ageing daily care subjects.

Thus, family, health and God could be considered as the hypothetical central nucleus of positive ageing for this group of elderly.

The results here depicted show the magnitude of the change occurred in the structure of social representations after the introduction of the concept of positive health. When foreseeing a more positive development of life in their old age, subjects not only gave central importance to family and God in the first quadrant but also introduced the concept of health, showing their awareness of a healthy life as an intrinsic component of well being which accompanies a positive ageing process.

Discussion

Overall, results on ageing embrace a larger number of negative categories followed by elements with a more positive tone. Ageing was represented as a stage of life whereas individuals acquire some experience and wisdom which are followed by needs, body decay and death. The peripheral items which necessarily report to the central ones emphasize a life with tiredness and sadness where illnesses and eventual losses are present. The family occupies an important role in this representational structure. This representation of ageing is somehow compatible with the findings of different research initiatives done in the south of Brazil previously and illustrates the internalized negative attitude towards this stage of life.

However, factor analysis results revealed a dimension with the predominant contribution of the group of elderly subjects composed by responses which denote internal positive emotional states and perceptions such as happiness, health, joy and love, balanced by sadness and lack. Further, in factor 2 youngsters contributed with words which denote a somehow stereotyped view of the process of ageing such as maturity, knowledge and tranquility but also, surprisingly the tone of the contribution is again positive. This positive representation could be interpreted as an attempt to give a socially desirable answer and maybe does not correspond to the youngsters real experience. Still considering this dimension the group of older adults (46 to 55 years) contributed with a more negative tone bringing words such as loneliness, wrinkles and resting. Such results invite further research with the groups of younger (26 to 45 years) and

older adults which most probably had a greater contribution to the negative attributions towards ageing in the structural analyses. Important to notice that group 2 and group 3 include adults who are inserted in the work market and make attributions to the process of ageing taking into account the demands of their work activity and their projections to the future.

Results on representations of positive ageing obtained through structural analysis show a change in terms of content and attitudes direction when compared with the ones obtained for ageing alone. The new representational structure centered on the core elements wisdom, experience and health, together with the peripheral elements, show an emphasis on health, activity and food intake which can be interpreted as health care. The structural representation of positive ageing is also centered on conviviality, promotion of social life and relationships. Finally, it also considers internal stability of the elder person, contentment, security and autonomy.

It cannot be argued here that there was a change in social representations of ageing since the participants have been minimally exposed to the new concept of positive ageing. However, results can be considered as encouraging for any future state programme aiming at introducing the new concept.

Complementing this data, the factorial analysis on positive ageing contributions show a somehow positive but stereotyped set of answers from the younger subjects. This may be due to the fact that the large distance or gap in terms of age and the fact that there are few opportunities in real life for significant interpersonal relationships between those two age groups led the young subjects to produce socially desirable answers which maybe do not always correspond to their real experiences.

The older group of subjects is explicitly responsible for the inclusion of the categories work and learning as associated to the first factor. While the older adults give stress to love and participation to be interpreted as social inclusion as much as to independence, or autonomy.

This data on positive ageing can be considered as the beginning of a representational process, since subjects were not previously exposed to the conceptual information and were for the first time, invited to evoke associations respective to a new way of conceiving the process of ageing. However,

the category “learning”, mentioned by elder respondents could be interpreted as considering positive ageing as an opportunity for growth and personal enrichment and self actualization. Such internal dispositions are similarly described by Gergen and Gergen (2002) in their discussion of positive ageing and on Ryffs conception of positive ageing. In a document dedicated to understanding positive ageing, Ryff mentions six dimensions of well-being which are very much in tune with the results found in this study, they are: autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance.

Results obtained with the elderly who visit a daily care institution on a permanent basis allow us to see the changes occurred in the structure of representations. Although it would be necessary to have more information about the conditions of life inside the institution to interpret such changes, the impact of the new concept on subjects responses was very clear. Results suggest in the first set of representations a concern with health and possibilities of illnesses as a central element of the representation of ageing. This picture changes to what seems to be recognition of the importance of good health. Further, family and God became part of the central core of positive ageing representation followed by entertainment, happiness and leisure.

Important to mention that the recognition of health as a central element for the possibility of ageing well and in a positive way, is in compass with the conception of positive ageing espoused by Ryff’s research program seen as a consequence of biological, physiological and neurological substrates as much as of psychosocial processes.

The results obtained on social representations of positive ageing also involved elements such as happiness, joy, relationships and friendships, all considered as hedonic formulations of well being, that is a concept associated to positive ageing by Ryff’s group which consider religion and spirituality as relevant issues concerned with well-being. In fact, elderly subjects from the daily care institution in the present research, associated God as a central element to positive ageing, probably referring to their spiritual believes or religious practices.

Finally, results showed some differentiated effects for the age groups variables. The

methodology and setting of the present study allows observing implicit intergroup sub processes such as in-group and out-group differentiations and stereotypic answers. The very nature of the association task elicits either self versus others or in-group versus out-group comparisons. It could be argued that cognitive social comparison possibly occurred when subjects were asked to categorize and classify their answers towards a stage of life that necessarily is the condition of the elderly. That is, the subjects were making a comparison between themselves as a member of a particular age group (in-group) with all others, members of the category of elders or the out-group.

Such hypothetical interpretation could be further checked in a future study which comprises in the instructions explicit assignments to either self or group categorizations.

Furthermore, typical studies on social stereotypes use techniques which have common aspects with the free evocation task used in this study. The common aspect refers to the cognitive activities of categorization and classification of items. Also, the centralities of the elements are arranged in function of the frequency and ranking order. In other words, studies focused on social stereotypes and on the structural approach of representations are based on the same cognitive processes.

Stereotypic signs appeared in two instances of the results. Firstly, on the strong negative tone attributed to ‘ageing’. Considering that there are many ways of aging, dependant on variables such as: social class, income, education, health state, social insertion etc., the strong and frequent associations with experience, body and death, illnesses and loss, show a tendency to perceive ageing in a more typified way. Second, the young respondents answered in a positive typified manner which suggests a lack of contact with ageing people or a lack of knowledge about the issue. Important to stress here that in intergroup contexts where there is a marked categorization between “them” and “us”, the out-group is generally perceived as having less favorable attributes compared to the in-group ones (Liu et al., 2003).

Group 3, characterized by subjects which are closer to the group of elderly in terms of their ages, had some contribution to the representations of ageing, which is mostly marked by a fearful tone followed by a

change to a more assertive contribution when making associations related to positive ageing. Subjects of their age cohort are contemplating issues such as retirement and changes in life style which are followed by such an event.

Finally, it is worth considering the social status and possible social power which in real social groups is attributed to individuals who are in their mid twenties to mid thirties (early adults), and individuals who are in their late thirties and mid forties. This status and power, when compared to the adolescents and senior citizens may be attributed in function of their insertion in the work world. Young and older adults are respectively starting a professional carrier or establishing one.

The present study cannot be characterized as a classical intergroup study so far as there were no clear manipulations of variables making the intergroup setting more salient. Nevertheless, it benefited from the intergroup approach by going beyond the mere description of social representations as produced by different groups bringing evidence to the strong influence of social categorization process and approximating the concepts of social representations to the intergroup processes. It also invites further initiatives to explicitly consider in their design variables such as: social comparison, social implication, discrimination, group distinction, stereotyping and prejudice. Those could contribute to unveil the real content of intergroup relations among intergenerational groups in the studies on ageing.

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