Exploring Ageism Intergenerationally with the Expressive Arts

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Exploring Ageism Intergenerationally with the Expressive Arts

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Abstract

Ageism is not always explicit. Like racism, sexism, or any other form of prejudice and discrimination, ageism can also take on a subtle, quiet tone that results in making a human being feel inferior. This paper discusses ageism as directed toward the older population and offers expressive arts therapies solutions that bring social awareness to the topic of ageism to people of all ages, as well as empower those who have experienced its effects. It also talks about self-directed ageism and how expressive arts therapies can prevent or repair certain perspectives of self and others to reduce undesired feelings such as loneliness. Reverse ageism does exist, though it’s not as widespread of an issue as traditional negative ageism. While this paper will give mention to reverse ageism, the focus is ageism as it’s received by the older population. This paper also examines the topic of ageism in general, how ageist behavior affects people both physically and mentally, and how social activism using expressive therapies within our communities can help change perspectives on aging. Ageism isn’t just about people acting negatively towards older people, it exists across the lifespan and is a perception that a person might be too old or too young to do something (Officer & de la Fuente-Núñez, 2018).

Keywords: ageism, expressive arts, older adulthood, late adulthood, drama therapy, music therapy, art therapy, social activism, community engagement.
Exploring Ageism Intergenerationally with the Expressive Arts

Introduction

The topic of ageism is so important because if we are fortunate enough, we all live to an age where ageism could affect us. Unlike other -isms like sexism or racism, everyone could end up being the recipient of ageist remarks or behaviors. This topic is also important because studies show that it’s the most prevalent form of prejudice, but the least talked about (Rupp, Vodanovich, & CredÉ, 2005). Older adults have often felt and been considered invisible. “Many felt that they were becoming increasingly invisible. They felt they were aggregated into a seniors’ class, where others saw them only as older adult clichés” (Anderson, Fast, Keating, Eales, Chivers & Barnet, 2017, p. 21). It’s the problem nobody talks about maybe because they deem it less serious of a problem. Ageism is alive and well, and it’s not going away anytime soon, so it’s important to engage, educate, and communicate with others that this is a problem that affects people in very negative ways.

I hoped to learn enough about this topic, and how it negatively impacts older adults, to learn how I could help change perception using the arts in a community setting. I set out to learn what types of activities could essentially help educate people of all ages feel empowered enough to take the knowledge I share while continuing to educate others. I chose this topic because I have seen first hand how ageism can negatively impact the lives of those around me, myself included. I have seen how despite skills and expertise, people can be turned away from jobs based on age through my mother and sister. I have also witnessed that a sense of purpose can give anyone, but particularly people in an assisted living, a new attitude, through connections I
have made there. I have learned first-hand how comments like, “You don’t look at all like you’re in your forties” doesn’t feel great when it lands and it’s a comment I hear often, especially in graduate school.

Through this paper I hope to raise awareness of these issues, and to promote change using the arts. Action on this very important social justice issue is crucial. Arming people within our communities how to act is a key step in turning around perceptions of aging. In the next section different studies will be discussed, and the results of these studies will suggest that community engagement, intergenerational work and the expressive arts combined can accomplish great things.

Within the literature review, an overview of ageism and the different types (implicit, explicit, negative, positive, institutional and self-directed) of ageism are explained. There are likely other forms of ageism, but for the purpose of this paper only those mentioned are examined. Then a brief explanation is given about what expressive arts therapy and expressive arts therapies are before reviewing the studies that combine both expressive arts and ageism. Next within the literature review, studies about how expressive arts help connect those in different generations and how it helps everyone involved as well as how the arts can help the wellbeing of older adults will be discussed.

The research and personal conversations I had during a meeting at a senior center were the inspiration for the intervention I planned and conducted which will be described in detail. I scheduled and held a workshop at a local church. The workshop was called “Using Art to Explore Ageism,” and it was advertised and open to the public as part of a learning series the
church holds every Wednesday evening after a community dinner. I went in having no expectations of who my audience would be with a presentation I was hoping they’d find interesting enough to stay through to the end and create art to close out the evening. The first thing I did during my presentation at the church, after introductions, was to give a brief overview and history of ageism, which as stated previously, is what I cover first in this next section.

**Literature Review**

As people age, the opportunity to develop new social relationships becomes limited, and they may start to feel invisible (Anderson et al., 2017). Different community groups that are developed through universities, senior centers, and even churches could possibly lead to a better quality of life for elders within those communities. Researchers have found that those in creative arts programs like community theater have improved in both physical and emotional health (Stephenson, 2013). With an aging population that is growing so fast it will become more important to find ways for older adults to achieve a meaningful healthy quality of life (Stephenson, 2013).

I critically reviewed several journal articles and studies, all of which use expressive arts. Some are quantitative, some qualitative and some arts-based research studies that focus heavily on how art therapy as well as other expressive therapies can help adults, both young and old perceive older adults differently. Throughout the literature, I noticed a theme of how arts based activities like dramatic performances and arts based groups can lead to a better quality of life for our aging population. Another theme became apparent through research online and in the literature that if those groups were intergenerational it can benefit people of all ages, while
helping to reduce stereotypes of people over the age of sixty. Because a better understanding of ageism was needed to be able to bring the topic to the community, a fair amount of the literature examined was to learn about ageism, the different types there are and how it can impact people. Once I got a good understanding of that, I researched how art forms can combat some of the effects ageism can have on the older population, and found many articles describing expressive arts as a good direction to take.

**About Ageism**

Ageism is a very broad term and under its umbrella lives categories like negative ageism, positive ageism, institutional ageism, implicit ageism, explicit ageism (likely the most well-known), and self-directed ageism. In order to bring this topic to communities and discuss the impact or non-impact of individuals I met, I’m going to briefly walk through the different types of ageism to provide a better understanding of the differences.

Robert Butler coined the phrase “ageism” in 1969 and defined it simply as “prejudice by one age group toward other age groups” (Iversen, T. N., Larsen, L., & Solem, P. E., 2009, p. 6). He later went on and redefined it as “a process of systematic stereotyping and discrimination against people because they are old, just as racism and sexism accomplish this for color and gender” (Iversen et al., 2009, p. 6), which is the definition that is still widely used. Negative ageism is the type his definitions refer to which is prejudice or stereotyping older adults. Another type of ageism not addressed in his definition is the opposite, positive ageism. A good example
of positive ageism is assuming that because someone is older, they automatically have more wisdom or knowledge than a younger person (Iversen et al., 2009).

An example of institutional ageism is a result of when older adults are given improper or poor quality of care within a hospital (Fitzpatrick, 2009). Explicit ageism is when a statement or an action is obviously ageist, where implicit ageism is more subtle, and it could even be accidental (de Paula Couto, Maria Clara Pinheiro & Wentura, D. (2012). Self-directed or internalized ageism is likely the one people don’t think about as much as the other forms since it’s one's own thoughts directed toward themselves (Officer & de la Fuente-Núñez, 2018). A simple example of this is lying about one’s own age, and a more dangerous example is when older adults take on social norms that devalue older adults and end up devaluing themselves. Another problem that arises with self-directed ageism could lead to physical health problems. “Ageism has been shown to have significant impact on our participation in society, health and longevity” (Officer & de la Fuente-Núñez, 2018, p. 295). If older adults attribute a symptom that is uncomfortable or even painful and doesn’t get medical attention because it’s just a matter of “getting older” is a serious health risk.

Ageism is not talked about as much as other types of discrimination (Iversen et al., 2009), and one paper that will be reviewed here touches on how this is still a serious issue for older adults, and how different techniques can start to change viewpoints and preconceived notions of what it’s like living in an older body. Rupp, Vodanovich, and Credé set out to explore group differences in ageism by using different methods of measurement. “Past empirical research has found that younger people are more ageist than older people” (2005, p. 338), though other research mentioned within the article suggests that ageism stems from within (Rupp et al., 2005).
Because research has been so inconsistent, the authors used the Fraboni Scale of Ageism (FSA) to study the effect of chronological age on ageism scores (Rupp et al., 2005). The scale was developed by Fraboni, Saltstone, and Hughes in 1990 to “measure antagonistic, discriminatory attitudes and the tendency toward avoidance, to represent a more complete measure of ageism” (Rupp et al., 2005, p. 337). The FSA is a test that uses a scale of 1 (strongly disagree) to 4 (strongly agree) and consists of 29 questions which assesses cognitive and affective factors of ageism (Rupp et al., 2005).

The hypothesis in this study was that younger adults, and more specifically males, would score higher on ageism scores than any other subgroup. There were two sample groups, with a total of 554 participants, all of which were undergraduate students at a public university in the United States. One sample group took the FSA only and the other group completed the FSA in addition to other tests of measurement. The purpose of giving one group only the FSA and the other a few different tests to measure ageism was to observe the differences in the results of the group and to further prove or question the validity of the FSA (Rupp et al., 2005). The results of the study suggest that younger people are more ageist than older people that were tested, and men even more so than women (Rupp et al., 2005). There were a few limitations noted at the end of the paper mostly having to do with the lack of research of the FSA (Rupp et al., 2005). The variance of the FSA scores were low, and due to how the FSA was scored, they believe additional research of how effective it is in addition to developing more factors could be useful for future studies (Rupp et al., 2005). Lastly, to really validate the FSA test, they recommended it be tested against other similar forms of measurement (Rupp et al., 2005). Rupp et al. also suggested that it would be a good idea to do cross cultural studies on ageism since other
countries are starting to pass legislation that will outlaw discrimination against older adults (2005). Through the literature I have learned that ageism is very real and even though it does affect people of all ages, the population it affects most are older adults, which is why this paper is focused on that population.

Expressive Art Therapy

Expressive arts therapy has been described in various ways by many authors and professors over my course of study. When I’m asked how it differs from other expressive therapies, I explain how expressive therapies include several modalities like art, music, dance, and drama, and all of these have a deep focus on their main modality. I go on to say expressive arts therapy uses them all and frequently will use a combination of them and the transitioning from one modality to another is looked at more deeply sometimes than the modalities themselves. “Expressive arts therapy (EXA) connects the creative arts, the imagination, arts rituals, and the creative process into a therapeutic approach,” is a very well written definition by Donohue (2011, p. 497).

Because expressive arts therapy is the newest of the expressive arts therapies, there is not a lot of literature in general, so there is not a lot of information of using it with the aging population or to specifically combat ageism. Therefore, my approach was to find literature using different expressive therapies to gather ideas for my own intervention, which ended up inviting people to use their imagination to help with a social justice issue with a combination of storytelling, writing and art.
I had hoped that by using the expressive arts within my community it would help contribute to an understanding of ageism, but also hopefully help people to perceive growing older differently with less negative stigma attached. Because my intervention involved my community, I find the definition given by The International Expressive Arts Therapy Association (IEATA) to be a very good fit for this paper. The organization describes it as combining “the visual arts, movement, drama, music, writing and other creative processes to foster deep personal growth and community development” (The International Expressive Arts Therapy Association Homepage, 2017).

**Expressive Therapies with Older Adults**

Within this section different studies and interventions using drama and art with older adults, as well as interventions created for intergenerational participants will be reviewed. Hopefully a better understanding will be gained on how helpful expressive arts therapies can be in the lives of both older and younger adults, and even more powerful if all generations collaborate.

The first study I will discuss was by Glozman and Naumova (2014) and it was to search for “possibilities and special conditions for mobilizing personal resources in the elderly” (p. 81). To achieve this, they developed an art therapy program containing three units of measurement: activation of the potential personality resource, solving contradictions and incoherence in life, and self-realization and self-presentation of competence in life (Glozman & Naumova, 2014, p. 82). Glozman & Naumova’s definitions of the units are as follows:
1. “Activation of the potential personality resource” — increase in the reflexivity level and the
stimulation of creative activity, life resistance, and the tolerance of incertitude. A
structured and not structured art activity were used together with some elements of life
resistance, creativity and psychosomatic regulation training. 2. “Solving contradictions
and incoherence in life” — developing a concordant attitude in the one’s present and for
the future, discovery of new meanings in life, and the activation of anticipation processes.
We used the methods of phototherapy, musical therapy, sand therapy and corporal
therapy. 3. “Self-realization and self-presentation of competence in life” — realization of
one’s active attitudes and one’s own competence in life, self-acceptance in the new state,
and the realization of the importance of social units. We used therapy composed of
well-known pieces of art, elements of performance, installations, and mandalas. (p. 82)

The study was performed at the Kamchatka library and had 120 participants, slightly
more women than men, and within the ages of 57-80 years. Within the study they used
questionnaires from the rules of training experience which measures personal subjectivity and
evaluation of the psychological resources of self-regulation to gauge sense of self within their
personal life experiences as well as self-regulation to create a control group and an experimental
group for the study (Glozman & Naumova, 2014). Groups were not randomly assigned and it
wasn’t made clear why. The latter group displayed things like intolerance of determination,
reduced independence, poor life purpose, and a deep feeling of insignificance in addition to
many other negative self-descriptors (Glozman & Naumova, 2014). From the results of the
surveys given, they determined that the control group, overall, has a more positive outlook on
life and within themselves (Glozman & Naumova, 2014). Art therapy sessions where participants
were allowed to choose their activity were given to both groups and concluded finding significant improvement in the experimental group. Examples chosen were writing, drawing and collage. They suggest based on their data that “participation in new types of activities actualizes latent resources in the participants, with a consecutive enhancement of personal experience and a new enrichment of life resources” (Glozman & Naumova, 2014, p. 87).

Next, I shall discuss literature that aligns nicely with Glozman and Naumova’s study that in fact art making and the creative impact of expressive therapies can help promote the health and well-being of older adults. Multigenerational groups and groups of all older adults are the focus, and the theory of gerotranscendence is defined. They garnered similar results and claim that the use of expressive therapies programming can be beneficial in late adulthood for several reasons. The first discusses the importance of art programming for older adults in a multigenerational setting, and the second takes a slightly deeper dive into how art alone can be therapeutic, with or without guidance or prompts.

The article entitled “Translating Knowledge: Promoting Health Through Intergenerational Community Arts Programming” discusses the benefits of an arts program with a group that consisted of both older adults and university students. The groups were held at a community theater company and were professionally led by a drama professor from a local university. The goal of the study as stated by the authors was to examine how the program benefited the well-being of both groups of people (Anderson et al., 2017).

Both the students and older community members described their experience as an “engaging community space that encouraged university students and older adults to get to know
one another, exchange resources, and cultivate deeper social connections” (Anderson et al., 2017, p. 17). The older adults came into the group describing how social connections were limited and they sometimes felt invisible, and the students talked about bullying and sometimes feeling alone (Anderson et al., 2017). After the group, both sets of individuals explained how their preconceived notions of the other generations were dispelled (Anderson et al., 2017).

Stephenson discussed different observations made over six years leading an open art studio group with older adults, whose ages ranged from 58-99. During the groups, the leader would propose questions that might allow the guests to explore different aspects of their lives. In observation, the group members “increased their repertoire with new approaches and techniques to art making along with an expanded ability to tap into thoughts or feelings within themselves in new and enlightening ways through art” (Stephenson, 2013, p. 154). Another interesting and useful part of this study was that members relationships flourished beyond the walls of the group. Many became friends, met for lunch, and even more importantly checked in on each other, particularly if someone fell ill (Stephenson, 2013). Stephenson also promoted gerotranscendence in her study, which is a theory that offers a deeper understanding of developmental achievements in late adulthood (Stephenson, 2013). This is an important term for therapists to know who work with older adults, particularly ones who are hesitant and consider themselves “not artistic.” I have actually used this term to offer a developmental perspective with people who were doctors or lawyers and by doing so, they became more open to join in groups.

Both articles of qualitative research discussed issues of isolation and loneliness and the power of expressive therapy groups. As observed by Stephenson (2013), Anderson, Fast,
Keating, Eales, Chivers & Barnet (2017) expressive arts promote community, and even can create friendships after the groups disperse.

A study about drama therapy within an aged care facility, the researcher used video sessions of the drama therapy as data. The study was done with residents in an aged care facility ranging in from 73-96, in a goal-oriented drama therapy program, however, facility staff were also members of the cast. The goal of this study was to measure with video how impactful the drama therapy was on the participants physical and emotional wellbeing (Freeman, 2006). The researcher aimed to “draw attention to recreational programs as a major player in aging well and combine traditional and arts-based research as qualitative research” (Freeman, 2006, p. 86).

Freeman used film three different ways as the data in her arts-based research methodology. She wanted to make sure the individual was in the foreground, enable a greater likelihood of authenticity while relaying accurate information, and lastly to enhance the understanding of the subject and the person viewing the performance (Freeman, 2006). “My words would be an interpretation of a description, but they would be incapable of capturing the essence - as noted earlier, the people themselves hold that” (Freeman, 2006, p. 88). Freeman also hoped that this type of arts-based research would lead to others incorporating some of the approaches she used so more older adults could live fulfilling lives, not just find things to fill up their time (Freeman, 2006).

Rehearsals took place over four months and the musical they completed was *Fiddler on the Roof*. Freeman reported that due to the community factor, residents hardly missed a minute of rehearsals for fear of letting others down even if they weren’t feeling one hundred percent.
Videos provided data showing that despite the physical pain these people were experiencing, this activity could lead to better physical and emotional well-being. People in the videos responded to the prompts as actors, not frail older adults with, in some cases with severe physical health problems. The video is a way to record data, and the data is the enactment and the behavior shifts in the actors. However, the article doesn’t link to any of the videos, which would have been very helpful to the readers to understand the data better.

Self-reported results were overwhelmingly positive claiming that confidence and self-esteem were lifted, and that their own perception of an assisted living residence changed (Freeman, 2006). One of the most confirming results was that “rather than perceiving residential care as an unavoidable necessity for security at the ends of their lives, some people are finding, by their own admission, unexpected possibilities and opportunities to extend their life experiences and unimagined fulfilment in their continuing lives” (Freeman, 2006, p. 90).

The arts-based data in the next article were partly created by three resident artists in a large teaching hospital in Dublin, Ireland. The aim of the study was to create quality art work that would reflect lived experience of those living with dementia and to promote a better understanding of their experiences (Moss & O’Neill, 2017). The arts were used as a reflective research tool to highlight the patients experiences rather than just clinical information. Three artists were given full access to patients suggested by hospital staff, their caregivers and families. They were at the hospital for 12 weeks and visited patients for 1-2 days a week. The artists sometimes shadowed the patient going to meetings, MRI’s, nursing interventions and other types of therapy appointments.
The artists also engaged in creative sessions with the patients, and conducted some individual interviews, which were all documented by the artists. After a day's work, the artists would return to their studios to create and reflect. The results of these sessions are summarized as original art works, opportunities to increase understanding and awareness of dementia, and to be used as a tool for students to learn (Moss & O’Neill, 2017).

The musician in the study composed a piece that explains what it’s like for a person with dementia to go to an appointment with family members, staff, therapists and physicians. The music is said to be chaotic representing all the noise and clinical information during the conversation and ends with the saxophone playing softly representing the person with dementia. The artist created a series of group works with families and patients using brain scans as a source for the collages, but then worked on one large piece with only caregivers. And the dancer created a fifteen-minute original dance based on her residency that represented the humanity under the skin of the patients and how people with dementia respond to touch.

All the results were shown at an event in a medical science building deliberately as to communicate the power of the results to the medical profession. The projects supported “role of ABR as a qualitative research method which can contribute to illuminating and exploring the lived experience of health and illness” (Moss & O’Neill, 2017, p. 7). The authors did explain that ABR is a controversial and new research method and talked about the fact that artists were collecting and creating the data. The three goals of the study that seemed to have been reached was to see dementia through the patient's eyes, raise awareness, and to be a tool for students to learn. The data presented and described seemed to have reached the goals of the researchers.
In the literature review, ageism and several subsets of it were defined and studies were mentioned to help support those definitions as well as to point out how prevalent ageism is. Next several studies were mentioned on how expressive therapies were used in just the older adult population as well as intergenerational groups. None of the studies reviewed had results that negatively impacted anyone who participated, in fact most of the results showed how the interventions positively impacted those involved. I used the literature as a platform to develop my method for my community engagement project by combining imagination, making connections and creating art in pairs in hopes that those in attendance may look at aging in a different light.

Method

For this thesis, community engagement was chosen based on personal interest in addition to the supporting evidence that human connection and intergenerational work impact the older population aging in a positive way. “Art seemed to be an ideal medium to foster intergenerational relationships because participants were required to step outside what was comfortable and engage in an expressive activity” (Rubin, Gendron, Wren, Ogbonna, Gonzales, & Peron, 2015). The initial idea to choose this direction for the capstone was a story heard at a senior center about someone walking into a gift shop and reading a very offensive and ageist greeting card. She told the story in such a meaningful way about how hurtful it was, however after giving it some thought, she acted. She walked right back into that store and confronted the owner, and in the end the owner agreed with her and removed the cards from their shelves. This
story inspired my idea of redesigning cards like the one she found with members of my community.

My local church has adult education every week. When I reached out to the new pastor, she liked my idea and had room for me to bring the topic into her programming. So, I developed a workshop that would hopefully engage, educate and inspire anyone who showed up. The groups are not mandatory and don’t require people to sign up, so I had no expectations of who would attend or how many. I had ninety minutes total for the workshop, and I knew I wanted to set up the room so people would be able to easily communicate. In the end, if I didn’t get enough variation of age, I would have wanted to run the workshop again considering my interest in the power of intergenerational integration. When older adults work with younger people and those relationships are encouraged, deep connections can be made, and resources shared that neither generation may have the opportunity do with within their own social circles (Andersen et al. 2017). However, the topic did garner enough interest and twenty people were present, five presented as male, the rest female and ages ranged from pre-teen to older adults.

**Structure of the Workshop**

I began by introducing myself and asking those attending to also introduce themselves and to briefly describe why they decided to come to the workshop. After introductions I invited them to take part in an exercise. I briefly put up five photographs of different people. I didn’t tell them who the people were or any information about the photos. I put the photos up one by one and gave them one to two minutes to write the first three things that came to their minds when looking at the photo, presumably not knowing who the person was. For reference, the five photos I showed were of Marina Abramović, Dr. Hawa Abdi, Brian Duperreault, Eddie C Brown, and
Emma Gonzalez and were chosen specifically because they aren’t famous or easily recognizable by the general population (see Appendix A for photographs shown). I did not give them an explanation of why they were essentially describing the photos at this point. I did this because I didn’t want to persuade their personal observations of the people in the photos in any way in hopes that by not knowing who they were and only given a short time to write, I’d get the most honest responses. After they were given the chance to write down their observations, I did give them a short description of the accomplishments of each person in the photographs, which are also found in Appendix A.

Next, I gave a brief history on the actual term ageism, when it was coined, the different types, and a couple different definitions of the word, one more simplistic from dictionary.com, the other more fully defined and inclusive of the subtleties of ageism. The one I prefer is the latter and was written by Iversen, Larsen & Solem (2009). "Ageism is defined as negative or positive stereotypes, prejudice and/or discrimination against (or to the advantage of) elderly people on the basis of their chronological age or on the basis of a perception of them as being 'old' or 'elderly'. Ageism can be implicit or explicit and can be expressed on a micro-, meso- or macro-level" (Iversen et al., 2009, p. 15). Micro-level is individual or personal, meso-level involves people within your social network, and macro-level is the larger cultural group (Iversen et al, 2009).

After the education I asked if anyone had questions. Then I showed a video by AARP for their Disrupt Aging Campaign (AARP, 2016) that showed an interesting and eye-opening example of age stereotyping. I wanted to break up the lecture and this was shared with me by my supervisor at an assisted living and I liked that it showed specific examples of stereotypes being
broken within the video. An example would be one man perhaps in his early twenties stated that he thought fifty was old. He was then introduced to a woman who was fifty and they were asked to teach each other something they knew. He could not do the yoga balancing moves, yet she could easily do his boxing exercise which in turn changed his mind on what old is. I was also inspired to use this video in hopes that maybe some would look into themselves and identify their own strengths. In Stephenson’s study people involved “discovered new ways of connecting to themselves and relating to others that previously had been unexplored (2013, p. 155).

Next, I showed them different examples of ageism in marketing and on social media. I searched Twitter for examples of users tweeting “S/he looks good for their age,” and we read together seven samples found. To give an example of one, Jennifer Lopez was described as looking great for almost being in her fifties (Girod, 2019). All the people referenced in the tweets were between the ages of forty-five and fifty-nine years. I then showed them a marketing billboard for an airline where the tagline was “Fool Around with a Younger, Hotter Airline” (see Appendix B for reference).

The last part of the presentation I showed them three examples of cards sold in stores and online that are ageist (see Appendix C for reference). We discussed the cards and how they felt about them, and how it was near impossible to find cards that are mean or offensive over the age seventy but were plentiful and easy to find for ages thirty to seventy. After showing the cards I left room for discussion, and the discussion questions were: 1. Can you think of other examples of ageism in the media? 2. Does anyone care to share their own thoughts on ageism? 3. Does anyone feel comfortable enough to share experiences they have had regarding ageism? 4.
Anyone want to share any words they may now think are ageist regarding the photographs we looked at earlier?

The last twenty minutes were reserved for the activity. The prompt was to invite people to pair up and work together to rewrite the tweets, rewrite the marketing campaign, or redesign a greeting card. I mentioned the card could be a birthday card or could be a card celebrating age. They were given about fifteen minutes to work in pairs, leaving five minutes to share their work and discuss with one another. I took part in the activity as well as observed those participating. Before they left messages of thanks were given and I asked how they felt doing the exercise.

In summary, those in attendance participated in a descriptive exercise, got a brief history on ageism as a term, and a description of different types of ageism. We watched a video that beautifully showed with light hearted warmth how prevalent ageism is and how stereotypes against the older population are very much alive. We all then looked at different types of ageism in the media, looked at greeting cards that are offensive and sold online today. After that, we took part in an expressive art therapy experiential that included imagination, storytelling, writing and art making. After the share and ending the workshop I immediately wrote down important notes and observations to include in the next section.

Results

In this section I will be describing how the presentation went and how the use of the expressive art therapy intervention was received during the entire workshop. Right after the workshop ended, I wrote down my observations and collected notes from the members of the community. I also wrote down quotes that I thought could support my idea that community engagement, while promoting social action, can engage and empower community members.
During the introduction part of the workshop people seemed genuinely interested in the topic of ageism as evidenced by comments like “well, I’m aging so I’m interested in what you have to say.” A few people were there because they were close relatives of mine and they were interested in what I’m learning and what I’m bringing to our church community. And one came specifically because they said they knew what I was studying based on church conversations and they were interested in learning more about how the arts could potentially help the aging population. One person said he came because he’s “old.”

After introductions when I showed the five photos previously mentioned of Marina Abramović, Dr. Hawa Abdi, Brian Duperreault, Eddie C Brown, and Emma Gonzalez. Someone said “Oh, I think I already know why you are showing these,” but then that person's face looked puzzled in my opinion when I got to the Emma Gonzalez photograph. I mentioned at this point that I would come back to why I had them do this exercise and I could see that some of them were already curious as to the reason. Only about 30% knew admittedly who Emma Gonzales was.

After the photo exercise I went straight to the history of ageism as well as describing all the types of ageism I have researched. I saw a few people takes notes during this part but there were no questions. However, when I described self-directed ageism, I saw a bit of body shifting and more of a reaction than when I described all the other types.

After the brief history lesson, I showed the four-minute video from AARP’s Disrupt Aging Campaign about stereotypes younger adults carry about older adults. While the video was playing there were a few verbal reactions like gasps and laughter. After the video played, I asked what people thought of the video. A couple people agreed with each other that it was a clever
and entertaining way to show people's stereotypes as well as their reactions and surprise when
their own thoughts were questioned on what “old” means. One person thought it was funny, and
another shared that they were surprised at how young [50] was considered old in the video.

Next, we talked about ageism in the media. I reiterated that I chose Twitter because the
tweets nicely showed how prevalent implicit ageism is on social media. Someone asked who
Linda Holliday was, to which I replied “Does it matter? Whoever she is, how do you think she
felt when she read that tweet?” My question was met in a nod and agreement. When I showed
the ad from an airline, I heard a few sighs, likely due to sadness that an airline would advertise
that way. A woman piped up with how they are losing entire audiences of people with that
campaign. I mentioned how I wasn’t spending a lot of time on this subject (marketing) due to
time constraints and wanting to get to the discussion as well as expressive arts section of the
workshop.

Next, when I showed the cards most did not find them funny, however one person did
find the first one funny due to her chuckle at the card. After I showed the cards I asked for
thoughts. The women who chuckled said how she thought it was funny and how she knew others
who were older who would also think the card is funny. I asked her to consider all the people
who perhaps didn’t share her beliefs and whose feelings could potentially be hurt by receiving
the card. I explained how we likely would not laugh at a racist greeting card, and that we
sometimes need to consider how the message would be received by others and not just ourselves.
She accepted that response and seemed to genuinely agree with it. I did mention a website
(yoisthisageist.com)
at this point, as I wanted to validate her feelings that some cards or actions that may seem ageist and funny, may not really cross that line. For example, the website shows a street lined with birthday signs saying “Greg is 50!”, someone asked the author who is an expert in ageism if that is ageist and her response was that it was funny because they were just stating a fact in a very big hilarious way.

Next was the discussion. In response to the media question I heard from several group members how in ads models were mostly younger and what people consider beautiful. Another example given by a participant was how television and movie actresses struggle to get parts, while it doesn’t appear to be as difficult for men overall. Nobody came up with anything for people they witnessed personally standing up to ageism, so I offered up a news story I came across about fashion week during my research. It was how prior fashion week models who were older picketed the latest show since they weren’t getting hired anymore due to age. When I asked if anyone had experienced ageism, I got quite a few shares and I likely would have gotten more if time allotted. One man said “I have crossed the border of waitresses helping with the menu and being offered the senior discount.” A woman shared about how when she was in graduate school, she had to raise a concern to her professor due to the overwhelming amount of ageist remarks by other members of the class. A teen shared a grocery story about her 51-year-old dad being told there was a senior discount on Tuesdays. And now they don’t go to that store anymore.

The last question I asked if anyone wanted to share their descriptions of the photographs I showed in the very beginning; I got several shares. The words I got for our first photograph of Marina Abramovic were: elderly, rich, Jewish, greasy face, weird nose, rich, movie star, kind, older, clean cut, fancy, professional, red, earrings, strict, glamorous, wealthy, and confident. The
words shared for Dr. Hawa Abdi were: Reflective, loving, thoughtful, black, serious, African garb, wisdom, grandmother, fashionable, wise, seasoned, African American, colorful, older, lives or lived in Africa, and Native American. The words received for Brian Duperreault were: Rich, American, professor, male, CEO, major donor, gray eyes, 50ish, hair loss, gentleman, well dressed, happy, mustache, business, friendly, and content. The words given for Eddie C Brown were: Happy, grandfather, kind, black, businessman, friendly, professional, kind, humble, politician, educated, high position job, and congressman. And lastly the words shared for Emma Gonzalez were California, gun laws, activist, depressed, cancer survivor, inspirer, young, determined, needs kindness in her life, focused, creative, deep with thought, serious, and sad. I didn’t question peoples descriptors but did allow some time on personal reflection of their words if they chose to share.

After our lively conversation, I moved onto the activity. I let everyone know they should have drawing paper and different art supplies in front of them. I also mentioned that there was a pile of other art supplies up front if people wanted other options than what was in front of them. I invited people to group up or pair up and either rewrite the tweets, ads or cards, design them, or both. Some worked alone after the prompt, while others did group up and worked on their ideas together. I noticed that those who grouped together started off joking a bit, but then towards the end got a bit more serious in their conversations. The people who worked alone just seemed very focused and quiet while working.

After I noticed most seemed to be finished, I asked if anyone would want to share their ideas. Everyone wanted to share, and I was surprised as well and delighted by the results and the shares. Only one person opted to rewrite the tweets and he did so by just simply crossing out all
the references to age. The rest all chose to design greeting cards. One just said, “Happy Birthday” in various colors on the front with the message inside of “You are amazing, wonderful, kind, loving and fun to be around.” Another was a beautiful watercolor that said “Happy Birthday” on the cover in warm tones with a wildflower in the corner and inside simply said “I Love You” in the same tones with a watercolor heart in the center. One person drew a mountain with a stick figure climbing to the top that said, “You’ve climbed another year”, and on the inside it said, “The view just gets better!”. Another had painted flowers on the front and inside it said, “Happy birthday to the prettiest bloom in the room”. One person took my print out of the card that on the front said “Happy Birthday. I decided not to get you a funny card this year...” and rewrote the inside to say, “You have no sense of humor!” He took out the age reference on the inside, but still kept it rather mean. People were all very supportive during the share.

After it was over, I felt I did get the results I had hoped for. One member after writing and making art with his wife described the expressive art activity as “empowering.” A teen that participated came up after and said, “Thank you, I didn’t even know ageism was a word.”

Discussion

My results and the outcome of the workshop exceeded my expectations, mainly because I went in with a lot of unknowns. I did not know how many people would show up, if I was going to get the intergenerational mix I was hoping for, or if they would even choose to participate in the expressive art therapy experiential. People were engaged, asking questions and most
importantly communicating with each other and seemed to really be listening to one another during the discussion section.

One limitation was the lack of time. I had to cut discussion short, and there was much less time for the art making than I had originally planned for. People did stay later than scheduled to share, though I did go over the allotted time given to me by the church so I may have appeared rushed or made people feel so. That was my first thought upon completion of the workshop, because reaching more people and groups that are intergenerational is how I can continue to fight the prejudice against older adults and educate people young and old what ageism is and how art can help to foster change. If I were to do it again, I would perhaps have a workshop series. I would also have included a section about expressive art therapies, and how expressive art therapy is just one of many types of expressive therapies. People seemed genuinely interested in it. I did give a brief description of just the expressive arts when I introduced myself, but I got the feeling they would have liked to learn more.

I feel as though I need to research the topic of ageism to educate myself more if I were to hold more community engagement projects in the future. The more I know about the topic itself, the better I will be able to educate others and use tools from my expressive therapies toolbox to further demonstrate how much work needs to be done to change the perceptions and preconceived notions the general public has towards the older population. However, I would encourage anyone to run intergenerational workshops of any kind as there seem to be benefits of all ages when generations collide to make art.

I do firmly believe based on the research I’ve done and my own community engagement workshop that the expressive arts can and should be used more to promote healthy aging, educate
the public, and empower the young and old to change the way aging is perceived. “Changing people’s understanding, social behaviours and political determination around age and ageing is possible and essential to foster healthy ageing, the ability for all people to live long and healthy lives and do what they have reason to value” (Officer, A., & de la Fuente-Núñez, V., 2018, p. 295). It needs to be discussed far more than it is, and more studies should be done to show how powerful the expressive arts combined with social action can be. I also believe more research needs to be done using expressive arts therapy with the older population since most of the literature I found focused on art or drama therapy.

Each piece of literature on its own wasn’t entirely helpful to the focus of this research, but looking at them and combining them, one focusing on ageism alone and the other on self-perception in relationship to age, and a few different interventions used, I did get more ideas on what to research in the future. Based on the literature, I am interested in learning more about whether men are more ageist overall. I am also interested in reading more studies of the power of intergenerational work. I find that qualitative studies and the first-hand comments and observations made by participants within those studies as well as my own intervention are so valuable to our field and can genuinely add to the betterment of not only older adults, but all human beings. Comments, reactions, imagination and art making may not “prove” anything with numbers, but the data is rich and useful for anyone willing to use it to better the lives of others.

My results, quotes, and observations were not collected as data, but more so a way for me to learn and to share what could benefit others working with an older population. What I observed as well as collected was that only people who appeared to be over fifty mentioned age in their observations, which I just found interesting. All of the men in the group mentioned age in
some way when responding to the photographs. One of the younger people in the group didn’t know anything at all about ageism. As previously mentioned, she came up after the workshop was over and thanked me saying she didn’t even know ageism was “a thing”. Also mentioned previously, when I asked how creating the cards made them feel, a man in attendance answered “empowered”. Getting just those two comments, to me, made my ninety minutes of time worthwhile and showed how powerful expressive art therapy can be. To me, getting those two comments by two people generations apart is a great example of what educating, engaging and empowering is. Hopefully some of the people in the workshop pay it forward by sharing some of what they learned during their time with me to others.
References


Girod, Tara [TaraGirod]. (2019, January 26). She's getting up there in age but looks great for almost being in her 50's. VIDEO: https://www.youtube.com/watch?time_continue=4&v=ITSM3TrlXml [Tweet]. Retrieved from https://twitter.com/TaraGirod/status/1089034509121716228


Appendix A

Photographs Shown During First Exercise of Workshop

<table>
<thead>
<tr>
<th>Marina Abramović, Serbian-American Artist*</th>
<th>Dr. Hawa Abdi. Nobel Peace Prize Recipient*</th>
<th>Brian Duperreault, CEO of AIG and philanthropist*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eddie C Brown, Investment Manager,</td>
<td>Emma Gonzalez. Gun Control Activist*</td>
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<tr>
<td>Entrepreneur and Philanthropist*</td>
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*All images used from Google Images are for educational purposes only.
Appendix B
Appendix C

...because your age is no laughing matter. 

LOL!

We’re not going to make any tasteless jokes about your age.

We’re genuinely sorry about how old you are.

Happy Birthday!
Some birthdays are fun to celebrate.

60

Isn’t one of them.
THESIS APPROVAL FORM

Lesley University
Graduate School of Arts & Social Sciences
Expressive Therapies Division
Master of Arts in Clinical Mental Health Counseling: Expressive Arts Therapy, MA

Student's Name: _____Sarah Masciave______________________________

Type of Project: Thesis

Title: _______Exploring Ageism Intergenerationally with the Expressive Arts_____________________

Date of Graduation: _____May 18, 2019______________________________

In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

Thesis Advisor: _____Elizabeth Kellogg, Ph.D.______________________________