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Representations of older adults in COVID-related newspaper articles: A comparison between the perspectives of older and younger adults

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ABSTRACT

During the COVID-19 pandemic, media sources discussed diverse perspectives on aging and older adults, providing opportunities to examine representations of older adults during times of crisis. This study aims to explore representations of older adults during the first month of the pandemic in the U.S. by comparing the perspectives of older and younger adults in national newspapers. A systematic search identified 115 articles published in four major newspapers in the U.S. between March 11 and April 10, 2020, in which older and younger adults were quoted on topics related to the intersection of COVID-19 and aging. Quotes were inductively reviewed using content and thematic analytic strategies. A total of 265 quotes were identified from older adults (n = 104, 39%) and younger adults (n = 161, 61%). We identified three primary themes: impacts on “vulnerable” older adults, debates over the value of older adults’ lives, and a counternarrative of resiliency. Older adults were represented as a vulnerable group during the pandemic, in need of protection and support, while debates over the value of their lives similarly evoke images of frailty and dependency. Such depictions frame older adults as a burden on society and reduce their agency and subjectivity. Ageist biases were not only present in quotes from public figures and professionals, but also evident in quotes from older adults themselves. However, older adults also spoke to their own resiliency, survival, and strengths, thereby positioning themselves as elders worthy of respect and able to share wisdom with younger generations. These findings highlight the importance of listening to older adults’ voices in order to understand their experiences from their own perspectives through their own agentive positioning and promoting intentionally age-positive and nuanced representations of older adults in public discourse.

Introduction

On March 11th, 2020, the World Health Organization (W.H.O.) declared the rapidly spreading coronavirus outbreak a pandemic. In the months that followed, information about the virus and related restrictions were in seemingly constant flux, dominating the media landscape for nearly two and a half years to date. Both the virus and its related sociocultural and political responses have provoked high levels of uncertainty, anxiety, dread, and unrest among populations with diverse concerns and needs. Central to COVID-related media coverage, particularly in the pandemic’s early months, were older adults and individuals living with chronic conditions who were deemed most at risk to the potentially fatal and long-term impacts of the virus (CDC, 2020). Ageist hashtags such as #BoomerRemover and its counterpart #notdyingforwallstreet took opposing views on the relative societal worth of the aging population. Columnists such as Dr. Louis Aronson (2020) queried, “Why are we okay with old people dying?” while older adults lamented feeling as though they were “acceptable losses,” “disposable,” or as if the virus “didn’t matter much if it was a scourge only among the old” (Jen, Jeong, Kang, & Riquino, 2021).

From a public communications perspective, the pandemic serves as a “focusing” or “framing” event in which public attention and imagination are briefly focused on a particular social or cultural event, such that the highlighted attention and frequency of messaging might have long-term implications for future representations or possible narratives among certain populations (Scheufele & Tewksbury, 2007). In the context of the pandemic, the contrasting narratives of older adults presented in popular media sources offer varied possible representations of aging and...
later life. Such narratives may have long-lasting implications for how society views older adults and the value of their lives. Here we define representations as a linguistic or visual means of signifying an object, subject, or idea that produces shared meaning-making and disseminates particular beliefs or attitudes (Hall, 1997). While narratives can refer to subjective experiences described in a logical or linear order, here we use the term to describe socially constructed scripts or storylines that can “contribute to our identities… and help to determine the nature of our… unique positionings in the social and cultural world” (McAdams, 2001, p. 115). Representations, through influencing societal beliefs around a subject, might also open or close potential ways of being or self-understandings available to those subjects, including older adults. Representations are also inherently shaped by the social positioning of both those framing and receiving such messaging (Hall, 1997). To better understand pandemic-related narratives framed from multiple perspectives, this study sought to examine media representations of older adults during the first month of the COVID-19 pandemic by comparing representations from the perspectives of older adults to those from the perspectives of younger adults.

**Background**

Historically, online media and television representations of older adults have been disproportionately infrequent, and negative representations have been more common than those of younger populations (Milner, Van Norman, & Milner, 2015). Among the most common representations of older adults in the media are images of the “disconnected” elder, isolated from intergenerational connections, or an older adult receiving another person’s care or supervision (Cartensen & Hershfield, 2021). Because representations serve the function of disseminating ideological beliefs, “problematic representations can have negative consequences for political and social decision-making and can be implicated in sustaining social and political imagery” (Fürsch, 2010, p. 115). Ageist imagery tends to evoke narratives of frailty, vulnerability, and dependence, which are underscored by similarly homogenized terms used to reference older adults such as “the elderly” or “senior citizens” (Berridge & Hooyman, 2020). Absent or demeaning images of older adults also shape the value placed on their lives and contributions to society, thereby underlying and perpetuating societally-held ageist sentiment (Levy, 2009). Such messaging might also negatively impact older adults’ self-perceptions, provoking internalized ageism (Levy, 2009) and lowering their self-esteem (Harwood, 1997).

Within the context of the COVID-19 pandemic, early media analyses of pandemic discourses and portrayals found that older adults were largely represented as a homogenous, biomedically-framed population “at risk” and “vulnerable” to the effects of the virus (Jen et al., 2021; Previtalli, Allen, & Varlamova, 2020; Zhang & Liu, 2021). The media’s mention of skilled nursing facilities also tripled in the early stages of the pandemic, focusing attention on staggering infection and death rates (Miller, Simpson, Nadash, & Gusmano, 2021). Even when portrayed within more positive framings, older adults were still depicted as being served by another population, such as being described as recipients of neighborly good deeds or beneficiaries of senior shopping hours (Jen et al., 2021; Zhang & Liu, 2021), supporting notions of older adults as weak or helpless and in need of protection against COVID-19 (Jimenez-Sotomayor, Gomez-Moreno, & Soto-Perez-de-Celis, 2020). As a consequence of the negative portrayal of older people in the media, older adults may be viewed more negatively by younger individuals. Due to such media coverage, the pandemic may also play a critical social and cultural role in shaping long-lasting images associated with later life and contributing to increased societal ageism (Meisner, 2021). Preliminary evidence also indicates that greater media exposure during the pandemic is associated with negative health impacts among older adults, including higher rates of anxiety (Wong et al., 2021), poor mental health (Negarestani, Rashedi, Mohamadzadeh, & Borhaninejad, 2021), fear, and psychological distress (Trnka & Lorencova, 2020).

**Theoretical framing**

The goals of this study align with the theoretical framing of symbolic interactionism in that we see the media as playing a key discursive role within society and view representations as socially constructed, but deeply influential social tools which disseminate ideologies, attitudes, and values (Hall, 1997; Willig, 2008). Symbolic interactionism postulates that human interaction and meaning-making are mutually constitutive processes, such that the meaning individuals assign to their experiences is constructed through social interaction and they, in turn, make decisions, take action, and influence others in ways that are informed by this meaning (Blumer, 1986). In this way, meaning-making processes, which can include the creation and consumption of media and cultural discourses, are influential and important social phenomena in their own right. Specific to aging representations, meaning making can inform the ways in which older and younger adults make sense of their social positioning relative to age and how they take action to shape their own aging futures.

Social identity theory, as an extension of symbolic interactionism and labeling theory, suggests that identities are formed around social groupings, including along lines of age. Tajfel (1981) defines social identity as being the perception of one’s affiliation with a social group and the significance attached to that membership is based on the shared beliefs, actions, intentions, and attitudes of the groups to which they belong or from which they are excluded (Tajfel, 1974). Individuals are inclined to view the group they belong to (in-group) favorably while the other group (out-group) is viewed negatively (Chonody & Teater, 2018), often resulting in stereotyping and prejudice between groups (Tajfel & Turner, 1979). The concept of “in-group” and “out-group” allows us to better understand the dynamics between younger and older adults (Kang, 2020). Within age-based relations in society, a positive sense of identity can be created for younger people by differentiating themselves from older generations and elevating themselves in comparison (Lev, Wurm, & Ayalon, 2018). Such theoretical claims are supported by numerous studies that suggest younger adults hold negative attitudes toward older adults (Bergman & Bodner, 2015; Bodner & Lazar, 2008). Social identity theory may also explain why older adults have been observed distancing themselves from relatively older individuals (i.e., those in their 60’s distancing themselves from individuals in their 70’s or 80’s); thus, separating themselves from an ever-dwindling out-group by claiming access to “younger” qualities such as mobility, cognitive sharpness, or knowledge of current trends (Jones, 2006; Lev et al., 2018). However, this rhetorical gesture may be less successful among older adults as their advancing age renders the act of creating conceptual distance more challenging and requires them to buy into the idea that older age is equated with holding lesser value. This suggests that individuals’ internalized personal value and how they position themselves in society both inform and are informed by the discourses to which they are exposed, as well as the ways in which they navigate and orient to those discourses through their own rhetorical acts (Jones, 2006). Such framing also indicates the potential utility of critically examining and dismantling oppressive media representations in order to avoid the negative social ramifications they might provoke or sustain (Gurska, Schmitt, Branscombe, & Hummert, 2004).

From this perspective, the news media are not only an important means by which information is diffused in society but also play a crucial role in shaping perceptions of the pandemic and variously impacted populations (Milner et al., 2015). In disseminating diverse perspectives during the pandemic, the media might be an important tool through which to quickly spread beliefs and information to communities and society. Since “representations are embodied in communication and in individual minds” (Bauer & Gaskell, 1999, p.167), the media might also be a key source of societal representations. Thus, in exploring representations of older adults in national newspapers, we can quickly reflect on contextualized perspectives on older adults during the pandemic.
Method

Data collection

The data for this analysis were drawn from a larger study on ageism in COVID-19 and aging-related media (Jen et al., 2021). The original inclusion criteria involved a designated time period, data sources, and search terms to produce a systematic sample of newspaper articles. In particular, the first month of the pandemic was crucial in changing societal understandings of health priorities and the need for protecting vulnerable populations at high risk of contracting coronavirus, such as older adults. During the first month of the pandemic, news media continuously described the impact of COVID-19 on people’s daily lives, which may have affected perceptions of older adults because they were highlighted more frequently than usual in the media. The specific period from March 11, 2020, to April 10, 2020, was chosen in order to identify immediate effects of the coronavirus outbreak on representations of older adults in U.S.-based newspapers. We identified the top 6 U.S. national newspapers by circulation: USA Today, The New York Times, New York Post, Los Angeles Times, Washington Times, and The Wall Street Journal. The Wall Street Journal was excluded due to its financial focus, as was The New York Post, which contains more social commentary and human-interest stories, leaving us with four major new sources. We only identified textual column pieces which referenced both COVID-19 and older adults in the U.S., excluding videos, photo series, or letters to editors.

To facilitate our search, two categories of search terms were created: terms relevant to older adults (“old”, “older”, “elder”, “elders”, “senior”, “seniors”, and “aging”), and terms related to COVID-19 (“Coronavirus”, “COVID-19”, and “pandemic”). Each possible combination of terms from these two categories (such as “older” and “pandemic”) was used to search each newspaper website. The search yielded 287 articles, all of which were examined in the original study. A complete description of the original study can be found in Jen and her colleagues’ study in 2021. For the present analysis, we sought to examine representations of older adults from the perspectives of older and younger individuals themselves. We narrowed the sample based on the study by Jen and her colleagues’ study in 2021 to include only articles with direct quotes from older or younger adults, which produced a final sample of 115 articles and 265 direct quotes ranging from a brief sentence (e.g., “It doesn't scare me,” he said, “I haven't had a cold in 30 years”) to several lines of text. This process resulted in a sample of 115 newspaper articles published in the Los Angeles Times (n = 32, 28%), The Washington Post (n = 28, 24%), The New York Times (n = 28, 24%), and USA Today (n = 27, 23%) including direct quotes from older adults (n = 104, 39%) in the Los Angeles Times (n = 41, 25%), The Washington Post (n = 54, 34%), The New York Times, (n = 26, 16%), and USA Today (n = 40, 25%) as well as the quotes from younger adults (n = 161, 61%) in the Los Angeles Times (n = 38, 37%), The Washington Post (n = 20, 21%), The New York Times, (n = 28, 27%), and USA Today (n = 17, 16%).

Data analysis

Older adults were distinguished from younger adults when quoted individuals defined or positioned themselves as older adults (e.g., one individual said, “I am older”) or when their age was stated as being 65 years old or over in the articles. Younger adults were distinguished from older adults when quoted individuals did not position themselves as older adults (e.g., “As a young generation, I am...”) or when their age was stated as being less than 65 years old. Instances in which this positioning was unclear or the age of the individual being quoted was not provided were limited, occurring in less than 3% of the data excerpts. In these cases, individuals were categorized as “younger” as they were not explicitly positioned as an older adult. Data analysis was completed using thematic content analysis (TCA) in Dedoose data analysis software (version 8.3.41). TCA allows for a descriptive presentation of qualitative data and enables the identification of common themes in the content of textual data (Anderson, 2007). In this analysis, TCA was applied to assess frequency of codes and identify patterns in representations of older adults from the perspectives of both younger and older adults. TCA enabled us to identify common themes and patterns associated with COVID-19 within the representations of older adults. This approach offers both a description of the frequency and content of quotes, as well as a thematic interpretation which, in combination, offers deeper insight into the representation of older adults in the pandemic era. While TCA is not often used in more interpretive analyses, we focused our identification of themes on those which held the most meaning for representative interpretation and meaning-making around how older adults were viewed during the pandemic. Thus, the themes which are presented here do not reflect patterns of frequency or indicate generalizability, but are those which were more salient for meaning-making and therefore, may impact the subjectivity of older adults most acutely.

In an initial round of coding, the first two authors inductively reviewed the 115 articles which were included. In those 115 articles, we identified 265 quotes that related to the narratives of older adults from both older and younger people. To deepen our understanding of and potential for interpretation of quotes, we also returned to each quote excerpt in context of full articles in order to understand how speakers were positioned and in what context they were quoted. It is notable, for instance, that several of the younger individuals quoted in the media were professionals working with older adults, such as physicians, researchers, and advocates, which reflects how the media tends to incorporate “expert” voices to speak on topics of public interest. We attended to this distinction in our analysis to avoid conflating professional opinions on aging with opinions or perspectives among other younger individuals. The first and second authors then individually reviewed and inductively coded all quotes to identify initial findings. They then reviewed emerging patterns and themes relevant to the representation of older adults during the first month of COVID-19 before conducting a second round of deductive coding to confirm the relevance of identified themes. To improve trustworthiness, the fifth author reviewed the coding analysis and offered suggestions on emergent patterns and themes of representations of older adults as a part of peer debriefing process. Although a total of 54 total codes were applied during the analytic process, we have chosen to focus on co-occurrence of codes with quotes from both populations that were most relevant to this study, meaning that they held the richest implications for the construction of social identities and positioning of older adults in society during the pandemic. All articles were assessed for code frequency and their co-occurrences to identify frequency of quotes.

Findings

While comparing patterns that were common or disparate between older and younger individuals, three key themes emerged: 1) impacts of COVID-19 on “vulnerable” older adults, 2) debated perspectives over the value of older adults’ lives, and 3) a counternarrative of “resiliency”, particularly found among older adults.

Impacts of COVID-19 on “vulnerable” older adults

One of the most common topics that emerged was the overall impact of the pandemic on older adults (n = 90, found in 35% of all quotes). Quotes from both older adults (n = 60) and younger adults (n = 33) showed similar patterns related to negative impacts of the pandemic on older adults’ daily lives. Older adults mainly focused on the emotional impacts of the pandemic, citing experiences with loneliness, isolation, fear, anxiety, and uncertainty. In contrast, younger adults tended to focus on older adults’ challenges in accessing basic needs and caregiving dilemmas, such as family caregivers’ experiences of having to make the decision to move older family members out of long-term care facilities or
assessing risk regarding visiting parents during quarantine.

Due to the initial lockdown in the first month of the pandemic, older adults often expressed negative emotional reactions such as fear and uncertainty around their living situation and health. For example, Ilin Lo, an 87-year-old living alone in Queens New York said, “I’m very afraid of dying alone […] If I had a normal illness, I could ask my children to come to New York. But with the coronavirus, I cannot ask them” (New York Times, April 7). In this quote, Lo frames their experience as an elder who must request help and support from their family, but cannot burden others in light of the risks associated with the pandemic. Additionally, their fear is constructed here not as a fear of dying, but of dying alone, suggesting a deeply felt social, not physical, need. Similarly, many older adults portrayed their emotional challenges in regard to social isolation particularly. For instance, David Brooks, an opinion columnist, quoted an older woman who said:

The combination of isolation and stress is having a compounded impact. I am 65, and a single woman with no nearby family. My surviving sibling lives several hours away. Six months ago, my older brother died … My neighbors are not very friendly, and not once has anyone asked if I needed anything. […] I cry a lot, which is my new norm. […] So to sum it up, I’m feeling totally alone in this crisis and hopeless (New York Times, April 9).

Although younger adults also reported concerns and worry about older adults who were alone during the first month of the pandemic, their concerns were more often linked with the safety and basic needs of those older adults, such as accessing food, rather than emotional or social impacts. Younger adults also named logistical challenges which were described as causing food access issues, such as a lack of transportation and the perceived high infection risk at grocery stores. Marla Spindel who is co-founder and executive director of DC KinCare Alliance said, “I’m worried about their ability to get food. They don’t necessarily have transportation. A lot of them don’t have cars. They can’t just go to another suburb to see if another grocery store has food” (Washington Post, March 18). This focus on basic needs may be informed by Spindel’s position as a professional who might hope to inspire others to offer support by naming an issue -of which other younger individuals may not have been cognizant.

Quotes from both older and younger adults related to impacts of COVID-19 revealed common subthemes including highlighting the perceived vulnerability of older adults, both emotionally and logistically, who may lack needed resources during the pandemic. Such impacts were often intermingled with advice to promote the safety of older adults, such as statements that, “older Americans should avoid nonessential travel” and “stay home” to prevent infection (Los Angeles Times, March 11). Such suggestions were more often directed toward younger individuals than older adults themselves, such as suggesting that “young people must resist their urge to party to protect their grandparents from coronavirus” (Washington Post, March 18). Such indirect recommendations also supported the idea of older adults being vulnerable and in need of protection. Yet the framing of older adults as in need also seemed to inspire supportive actions on the part of younger individuals, such as grocery retailers offering designated “senior” shopping hours to support safe food access. Younger adults also described how they helped older neighbors, such as helping someone who might have trouble accessing the technology needed to connect with family members or delivering needed items. For instance, 45-year-old Allison McGill said:

I am about to drop off toilet paper to a senior citizen who couldn’t find any. Then I am dropping off bleach to another senior citizen who is a resident at a public housing complex and needs to clean out a community room (Washington Post, March 17).

While the framing of older adults as in need may inspire and motivate public sympathy and benevolent support, this may come at the cost of promoting a public perception of aging that reinforces existing stereotypes of the frail and ailing older person an image which often emphasizes physical vulnerability (Milner et al., 2015). In contrast, the older adults who were quoted highlighted another form of need, in the area of socialization, which may indicate that they wish to be seen for their social contributions and needs rather than solely as the recipient of sympathy or charitable acts.

Many of the younger adults quoted were also pre-pandemic caregivers for older adults in their lives and often spoke about caregiving dilemmas related to balancing healthcare, housing, isolation, and whether to see or visit with older family members. These risk assessments were particularly poignant in relation to older adults residing in long-term care facilities. Due to the coronavirus’ rapid progression through these facilities, family caregivers also reported angst around the decision to have an older adult remain in a facility versus caring for them at home in hopes of decreasing COVID-19 transmission risk. There were frequent descriptions of emotional reactions of caregivers, such as from Elizabeth Penner, whose 71-year-old father was in a skilled nursing facility, who said, “should I pull him out of there [nursing home]? What should I do?” (Washington Post, March 18). These dilemmas reflect the tension between basic needs and social and emotional impacts, creating uncertainty around prioritization of social connection or safety from the virus. This framing also re-centers attention not on older adults, but on their caregivers and positions the older adult as a care dilemma to be solved, thereby rhetorically removing agency and subjectivity from the older adult in question.

Debated perspectives over the value of older adults’ lives

While discussion of impacts illustrated tension between social and basic needs among older adults and raised issues of subjectivity, another tension emerged in conversations surrounding the value of older adults’ lives within society. Both groups compared the value of older adults’ lives to the value of supporting and maintaining the economy and broader societal needs. These debates provided a backdrop for discussions about healthcare rationing, triage, and economic turmoil. For instance, medical professionals across the U.S. were facing ethical dilemmas in relation to the prioritization of treatment based on age. Dr. Virginia Caine, the director of Marion County’s public health department in Indianapolis, used a similar comparison when she asked: “should age play a role? […] If I have a 75-year-old and I have a young mom with three children, there would be no one to take care of the children with the mom gone. But the 75-year-old has lived a good life” (Los Angeles Times, March 19). Such quotes demonstrate that representations of older adults have come to symbolize ethical dilemmas in the age of COVID-19. These ethical dilemmas raise the questions: how do we judge the value of a person’s life and whose life is more valuable?

As evidenced by the quote from Dr. Caine, the value and contributions of older adults’ lives were often assumed to be less impactful for the benefit of society simply due to their age. This bias is particularly concerning when presented from the perspective of a health care professional who may be perceived as an expert on the issue by a public audience. Both older and younger individuals suggested that older adults should sacrifice their safety for the benefit of the economy or to protect the needs of younger people, indicating the pervasive and internalized nature of the assumption that the needs of younger populations should be prioritized over the safety of older adults. For example, Dan Patrick, 69-year-old lieutenant governor of Texas at the time, was frequently quoted, and criticized by older adult and ageism advocates, for saying that he would not want to sacrifice the younger generation’s economic future in exchange for his own safety. Again, due to the highly visible and influential role that politicians play in society alongside experts and professionals, this narrative is particularly concerning due to its visibility and prominence of the individual quoted.

Others have actively critiqued this framing, such as in a quote from Dr. Louise Aronson, age 56 and a geriatrics professor at the UC San Francisco School of Medicine, who warned that the pandemic may cause
people to be, “judged based on age and social contributions” or that older adults might receive the implicit message to “just lay down and die” (Los Angeles Times, March 30). Such quotes called attention to the implicit or explicit ageism in these discussions, with older individuals stating that they felt undervalued or stigmatized during this time, including one woman who said “it’s hard enough being an older adult in this country without all of a sudden feeling stigmatized” (Los Angeles Times, March 18) in response to Patrick’s quote regarding prioritizing the economy. Thus, the representation of older adults in the media during the pandemic may serve to deepen pre-existing negative biases toward older adults and their contributions to society through the propagation of ageist discourses about the relative value of individuals of different ages.

To deepen the complexity of this rhetorical framing, one woman who positioned herself as a “senior” said:

As a senior, I understand how we become “invisible.” Seeing articles about the ethical choices medical professionals might have to make about who lives and who dies, followed by the example of a 20-year-old versus an 80-year-old, really disgust me. […] I suggest that doctors give older patients information about the situation, and then ask them outright what they should do as doctors. Patients’ responses would vary tremendously, but I’ve had a wonderful life, and I hope my response would be to give the ventilator to a person who needed it more (Los Angeles Times, April 4).

There is important rhetorical positioning being done in this quote. While this woman criticizes the ageist nature of discussions regarding the value of older adults’ lives, she also positions herself as one of the selfless older adults who would personally, hopefully, sacrifice herself. This narrative that because the quoted individual has lived their own lives when asked. Thus, while she argues that older adults should have agency in making such decisions themselves in an informed way, there remains a clear “right” or morally superior answer to this question.

An older adult’s counter-narrative: resiliency

In contrast to the prior two themes describing the representation of older adults as vulnerable and less valuable found in both older and younger adults’ quotes, a theme that emerged particularly in quotes from older adults is emphasizing vulnerability and a lack of agency (Previtali et al., 2020; Zhang & Liu, 2021). Similarly, the present analysis found that older adults were likely to recall their experiences with past national events such as the polio scourge in the 1940s and remember how they survived during those times. Based on their past experiences, they were able to put the pandemic into a broader historical perspective. Ms. Aric, a regular at the Sunnyside Senior Center, who said:

“It’s a completely different way of living. But I know we are going to get through this. I try to say, ‘nothing is forever, not the good times, not the bad times.’ We all try to get through (New York Times, March 18).

Based on past experiences living through challenging times, older adults expressed confidence in their ability to manage the impacts of the pandemic. For example, Mr. Berkowitz said, “Wow! Lucky me. I actually managed to survive one pandemic to be here for another one” (New York Times, April 8) when referencing his experience during the first month of the pandemic. Some also described how they improved their ability to survive and developed resiliency through specific past events such as the HIV crisis or Vietnam War. Mr. Rubenstein, for example, said:

I have lived with AIDS for 35 years; I have fought three distinct types of cancer with enough surgery, chemotherapy and radiation for 20 more should they come; I’ve lost sight in one eye, and my hearing’s going south as well; and I’ve had six back surgeries. I have not fought my way through all of that to be a willing statistic to this virus (Los Angeles Times, April 4).

In a few cases, younger adults also described older adults as resilient, such as one geriatric neuropsychiatrist who said, “there’s this sense that older people are vulnerable, sick and needy, but that’s not true. They are strong mentally. They have so many strengths they hardly realize” (Los Angeles Times, April 4). While this quote draws attention to the strengths of older adults through the perspective of a healthcare professional, it also positions older adults as lacking knowledge of those strengths, which contrasts with the narratives of older adults who actively claimed resiliency in other quotes.

In addition, older adults described coping with stressors, such as social isolation, to protect their mental health. For instance, to pass the time while in quarantine, Jackie Voskamp and Joyce Kriesmer, 91-year-old identical twins, described reading the newspaper and books, arranging photo albums, phoning friends, and playing card games (Los Angeles Times, April 3). Furthermore, some older adults provided advice to younger adults to help them cope with the pandemic, such as Lucille Ellson, age 102, who said, “I’ve been through so many things. To cope with this virus, and all that’s going on, I would tell people to not get stressed about planning far ahead” (Washington Post, April 5). Quotes from older adults that addressed resiliency and coping provide a counter-narrative to the representation of older adults as vulnerable or devalued by allowing them to claim their strengths and social value as survivors, examples of resiliency, and sources of knowledge. This rhetorical work offers an alternative positioning for older adults in contrast to that of the needy or frail elder whose life lacks worth. By positioning themselves in this way, older adults can enjoy the subjectivity of feeling proud, lucky and worthy of offering advice to younger generations, allowing them to speak from a position of authority and claim their own value in the face of a global crisis.

Discussion

Since the onset of the COVID-19 pandemic, media representations of older adults have emphasized their physical dependency and frailty (Jon et al., 2021). Older adults have been represented as a homogeneous group based solely upon their chronological age, ignoring their internal diversity (Zhang & Liu, 2021). Similarly, the present analysis found that older adults were frequently represented in an unfavorable but consistent manner, being depicted as a vulnerable group who offer debatable or little value to society. These findings add to the growing evidence base suggesting that during the pandemic, media sources have contributed to and maintained existing ageist representations of older adults (Meisner, 2021; Ng, Chow, & Yang, 2021) through depictions emphasizing vulnerability and a lack of agency (Previtali et al., 2020; Zhang & Liu, 2021).

Regarding the negative impacts of COVID-19 on older adults, there were diverging perspectives between older and younger adults. While older adults highlighted the importance of attending to social and emotional well-being, younger individuals more often emphasized basic needs and physical vulnerabilities they perceived among older adults. At times, this perspective and emphasis on access needs was perpetuated by gerontological professionals or advocates cited in the media who seemingly encouraged younger adults to offer logistical support to the older adults in their lives. While this framing of older adults as being in need may be useful in the short-term (e.g., during moments of crisis to motivate benevolent offerings of support), the long-term discursive impacts will likely be less positive given emphasizing a narrative of vulnerability and need may reinforce long-standing perceptions elders seen as a burden more so than purposeful, contributing members of society. In contrast,
movements such as the Reframing Aging Initiative (2021), a long-term strategic communication plan to improve understanding of aging and older adults, offer examples of engaging in advocacy with older adults that includes the disruption of ageist discourses as a foundational strategy of their approach. As we see the pandemic as a “focusing” event which highlights social issues and brings them into public discussion, the narratives constructed during the pandemic may have a long-term impact on solidifying existing assumptions about aging and older adults, or alternatively might offer new discourses which disrupt those preconceived ideas. Additionally, framing older individuals through their social and familial roles rather than solely based on their age can also combat negative framings of older adults during the pandemic while emphasizing their contributions and value to society (Ng & Indran, 2022). Therefore, taking a longer view of aging justice and intentional development of age-positive discourses might provide a useful starting point for offering more empowering narratives around aging in and beyond the pandemic.

A common tension across thematic findings was one in which older adults were framed as either agentive and emotional subjects or disempowered objects of support. The contrast in perceptions of younger and older adults in terms of areas of greatest impact of the pandemic sheds light on this tension, as younger individuals came to the conclusion that basic needs were most pressing, but older adults, when speaking to their own needs, emphasized social fears and needs instead. Similarly, the narrative of family caregivers navigating care dilemmas alongside their older family members decenters older adults within their own stories and allows their care to be framed as a burden. This same framing is evident in debates over the value of older adults’ lives in which older adults are expected to set their own needs aside for the benefit of others and both add to an ongoing policy-orientated framing of older adults’ care as burdensome (Ayalon, 2020). Notably, older adults themselves also contribute to these discursive representations of later life, suggesting that those who have lived fulfilling lives should be willing to sacrifice themselves. Thus, the findings indicate evidence of internalized ageism alongside ageist statements from prominent public figures and healthcare professionals assuming that older adults’ lives are less valuable or that they should sacrifice their wellbeing for the good of society. The very fact that the value of older adults is debatable suggests that these biases are widespread and deemed relatively socially acceptable and, therefore, a useful target for disrupting unjust social discourses.

Finally, issues of agency are also evident in the reframing of older adults as resilient from their own perspectives. Though the majority of media coverage during the pandemic focused on the vulnerability of older adults, some studies have found that older adults have developed an internal resilience to cope with changes caused by COVID-19 (Fuller & Huseth-Zosel, 2021; Sadang, Palompon, & Sukasatn, 2021). It is also notable what counternarratives of resiliency can accomplish in a discursive sense as evidenced by the present findings. By claiming their resiliency and grit in times of crisis, older adults position themselves as bearers of wisdom and knowledge to share with others. The offering of advice further illustrates this subject position of an empowered elder, from which one can feel valued, useful, and active. This subject position contrasts sharply with that of the frail elder in need depicted by discourses of vulnerability and the devaluing of older adults as members of our communities. However, resiliency as a concept has been critiqued for promoting the notion that individuals should bear the burden of responsibility in times of crisis, an expectation often placed on marginalized individuals who are expected to be resilient so as not to require the support of others or the systems around them. As such, there is a need to discursively balance the need for support with counter-narratives of resiliency, thereby acknowledging that older adults can simultaneously require support and offer strengths and value to their societies.

There are several limitations to this study. First, this study defined older adults as individuals who represented themselves as older adults or who were described as aged 65 or older. We did not, however, differentiate between the potentially varying needs and experiences of individuals in different stages of older life nor did our analysis differentiate individuals based on health status. It may be that those in poorer health, such as individuals living in long-term care facilities, had unique challenges and perspectives during the onset of the pandemic and represented themselves differently from other older adults. Future research could explore the heterogeneity of self-perceptions and self-representations among older adults in response to crises. Additionally, we did not anticipate the common inclusion of “expert” voices in the form of gerontological professionals representing “younger” individuals. While we attempted to be sensitive to this distinction in our analysis and drawing conclusions, in future studies it may be worthwhile to separate expert voices into their own category of analysis. Additional attention to other geographic regions and intersectional identities, though not always presented consistently in print media, would also deepen the potential implications of future analyses. An additional limitation of the present study was the scope of the analyzed time frame. During the initial study on ageism in newspapers during the onset of the pandemic (Jeon et al., 2021), the authors recognized a need to analyze a subset of data specific to quotes from older and younger adults, and how those quotes informed representations of older adults in media. Given that the pandemic’s effects are ongoing, future research could usefully investigate changes in perceptions over time of older and younger adults as portrayed in the media.

Despite some limitations, our results shed light on the discursive importance of how older adults are framed during times of crisis and potential long-term implications of such representations. The findings suggest that despite prevailing representations of older adults in media, they offer informed perspectives on their own needs and strengths that may contrast with the perceptions of others. Such findings illustrate the importance of listening to older adults’ voices and narrations of their experiences. Examining such narratives also requires attention to the complex ways in which older adults position themselves relative to other older adults, enabling a nuanced critique of internalized ageist notions which maintain discourses of aging as inflicting vulnerability among individuals and burden on societies. Additionally, researchers, advocates, and those contributing to media representations can and should participate in the promotion of more nuanced narratives capable of balancing claims to resiliency with calls for support, such as by emphasizing the agency, social roles and contributions of older adults. This may help to avoid the pitting of generations against one another during a period of extreme interconnection.

These may also serve as useful approaches to shaping intentionally age-positive representations of older adults long beyond the pandemic. No financial relationships or conflicts of interest to report.

Data availability

Data will be made available on request.

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