Ageism and perceptions of vulnerability: Framing of Age during the Covid-19 Pandemic

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Abstract

Media representations of the Covid-19 pandemic and its devastating consequences have shaped people’s fears, anxiety, and perceptions of vulnerability. Social scientists have examined the consequences of how information is “framed.” Framing theory asserts that issues can be portrayed differently by emphasizing or de-emphasizing aspects and information. According to Lakoff (2004) the impact of a message is not based on what is said but how it is said. Theories of framing focus on how the media frames issues, which then structure and shape attitudes and policies. A news article serves as a frame for an intended message. This paper examines the ways that “age” has been framed during the Covid-19 pandemic. One of the most dominant frames in terms of COVID-19 coverage is how the pandemic has been analyzed through the lens of age and framed in terms of age discrimination. The results of news articles appearing in several prominent newspapers indicate that the perceptions of elders and their vulnerabilities to severe consequences from Covid-19 are likely to help perpetuate or create age discrimination.
Ageism and Perceptions of Vulnerability: Framing of Age During the COVID-19 Pandemic

People’s understanding of the world is shaped by how information is presented. A theory of framing asserts that issues can be portrayed differently by emphasizing or de-emphasizing aspects and information. Framing may be thought of as the core element of a message structure. It is the "central organizing idea or story that provides meaning "to a series of unfolding events” (Gamson & Modigliani, 1987, p. 145). The manner in which news is presented creates a “frame” for that information. Goffman’s (1986) classic work on frame analysis addressed ways that frames can be used “for making sense out of events and to analyze the special vulnerabilities to which these frames of reference are subject” (p. 10). Everyday events are vulnerable to misrepresentation; from an individual’s point of view, something that may appear to be happening may not be a reality, but a misunderstanding of events (Goffman, 1986). According to Lakoff (2004), the impact of a message is not based on what is said but how it is said. Theories of framing focus on how the media frames issues, which then structure and shape attitudes and policies. The work of Kahneman and Tversky (1984) explored the fact that people do not behave in a rational manner; they tend to take mental shortcuts in their reasoning and decision making. These shortcuts are based, to a large extent, on how information is framed. Clearly, the way that information is framed is a powerful influencer.

A news article serves as a frame for an intended message. Framing is a form of interpretation usually based on a conscious choice made by the writer. Since a person’s background, values, and philosophy influences their writing, a certain degree of “framing” is unavoidable. Political actors compete in shaping issue frames, and frames can be seen as a strategic tool to focus attention to particular aspects of an issue and to persuade others of the
Framing news stories goes beyond the personal; it also has political consequences. From a variety of social science research, it is clear that linguistic frames influence social and political perceptions and policies (Ryan & Gamson, 2006; Shen & Edwards, 2005; Gamson, 1992; Iyengar, 1991; Kinder & Sanders, 1990; Terkildsen & Schnell, 1997). Framing also shapes prejudices and stereotypes (Mendelberg, 1997). Social science researchers have explored how framing has influenced a variety of issues including immigration (e.g., Haynes, Merolla, & Ramakrishnan, 2016), gun control (Callaghan & Schnell, 2001), welfare (Iyengar, 1991), same-sex marriage (Ryan and Gamson, 2006), abortion (Terkildsen, Schnell, & Ling, 1998; Chong & Druckman, 2007; Ryan & Gamson, 2006). Framing also has powerful implications on how the public views the 2020 public health crisis. The COVID-19 pandemic provides a useful lens through which one can examine the causes and consequences of issue framing. Given its novelty, it is particularly sensitive to media framing as it is an area that is new to the public and not yet fully understood or defined.

**Framing Age**

One of the most dominant frames in terms of COVID-19 coverage, however, is how the pandemic has been analyzed through the lens of age and framed in terms of ageism. Not surprisingly, all news coverage in all media outlets was dominated by the pandemic. For example, between 01/31/2020, the day the U.S. government issued a proclamation banning entry to the U.S. from China for non-U.S. citizens until 05/15/2020, the New York Times published 6552 articles containing the key words ‘COVID-19,’ Coronavirus,’ ‘pandemic,’ or ‘epidemic.’ Fifty-one percent of these articles contained keywords related to the dominant aging frame (i.e.,
‘age,’ ‘aging,’ ‘seniors,’ ‘old,’ ‘older,’ or ‘geriatrics’). Patterns were similar for the Wall Street Journal and the Washington Post. During this time period, there were a total of 5365 articles in the Washington Post, 51% of articles discussed the outbreak in the context of age. Of the 5066 articles in the Wall Street Journal, 37% utilized the aging frame to cover the disease.

Methods and Results

A comprehensive content analysis of COVID-19 coverage is beyond the scope of this short article. Nevertheless, in order to obtain a sample reflective of national news coverage, we examined a random sample of daily articles from the New York Times, Wall Street Journal, Washington Post, and Boston Globe featured between March 1st and April 30th, 2020. We examined a total of 118 articles, age was the dominant frame in about 50% of them. The newspapers we relied upon were selected because they are often regarded as newspapers of record which influence smaller media outlets. They have a large circulation and their news-gathering functions are considered meeting high standards of journalism such as editorial independence and attention to accuracy.

Thus, the COVID-19 epidemic has been predominantly analyzed through the lens of age. An examination of media frames related to COVID-19 shows a range of media messages centered on age, typically emphasizing the vulnerabilities of the population of older Americans or highlighting intergenerational conflict and strife.

The old, sick, and vulnerable

There is hardly any news coverage about the pandemic that does not highlight older Americans’ vulnerabilities. And although it is true that older individuals are more likely to be hospitalized and die of COVID-19, this is true for many diseases. As of May 2020, there were 54,861 recorded COVID-19 deaths in the U.S. Of those, groups 65 and older accounted for 44,932 of the 54,861 deaths, or about 80% of all COVID-19 deaths. Specifically, 1,432 were
from groups ages 44 and under; 2,772 were in the 45-54 age group; 6,725 were in the 55-64 age group; 11,524 were in the 65-74 age group; 14,930 were in the 75-84-year age group; and 17,478 were in the 85 years and older age group (CDC, 2020b; see also Garg et al., 2020).

This pattern, however, holds true for many diseases. Individuals aged 65 years or older accounted for 82% of all deaths attributable to cardiovascular disease (Yazdanyar & Newman, 2009). In a similar vein, nearly half – 46% in 2017 – of all people who die from cancer are age 70 or older. Another 41 percent are between the ages of 50 and 69 years old, meaning that 87% of all cancer victims are older than 50 years old (Roser & Ritchie, 2020). Yet, media representations of cancer and cardiovascular diseases are not exclusively dominated by older patients. And although men are more likely to die of COVID-19 (males had 1.2 times the Covid-19 death rate of females as of May 2020; CDC, 2020b), it appears that the patient of choice for coverage of the pandemic is typically an older American, male and female.

Almost all media coverage on COVID-19 highlights older patients and often they are described as frail and vulnerable and, thus, in need of the younger generations’ protection. As a result, social distancing is often framed as an altruistic deed one has to perform to protect the elderly. For example, Jay Inslee, Governor of Washington has stated that “You might be killing your granddad” if you don’t follow social distancing measures (Bissel Brown, 2020).

The dominant language in these frames is often paternalistic. For example, an article in the Wall Street Journal (Agronin, 2020) reports that those between ages 30-50 “saw their responsibilities as going beyond merely serving as an occasional drop-by driver, porter or tech support [for their older loved ones]. They were now protectors, especially of those who they imagined were skirting rules in ways that seemed as crazy and irresponsible as the hordes of spring-breakers crowding the Florida beaches.” There appeared to be a similar narrative in
analyzed new articles, a narrative in which older adults were described in passive terms, thus, denying agency (i.e., the ability to protect themselves) to these cohorts of Americans. Something has to be done to help them, even if they don’t cope well with the circumstances — especially because older adults are not tech savvy (e.g., “Uncomfortable with tech, many are struggling to use modern tools to keep up with friends and family in the pandemic,” Conger & Griffith, 2020) or are not diligent in following social distancing protocols (e.g., “When Older Relatives Shrug at Coronavirus Restrictions; Fingersh, 2020). Although the virus poses a heightened threat to older people, some of their middle-aged children feel they are not taking it seriously enough. [They are] going to the market and post office… play[ing] cards with friends”; Fingersh, 2020).

These examples illustrate the media’s criticism of the older women and men for failing to practice social distancing. On the other hand, polls indicate that older adults are more likely to engage in social distancing than their younger counterparts. In a poll from The Associated Press-NORC Center for Public Affairs Research, 92% of respondents over 60 reported taking strict social distancing measures compared to 78% of those under 30 (Fingerhut, 2020).

**The old vs. young and inter-generational conflict**

While the frames that depict the old as vulnerable are probably well intentioned, they compete with more malicious frames that highlight the generational divide that the COVID-19 outbreak has precipitated. The meme ‘Boomer remover,’ trending since mid-March 2020, epitomizes the worst of this intergenerational conflict. It creates a generational narrative of older people being out of touch with current issues and using a disproportionate share of resources.

Less hurtful, though within the same frame, are discussions about the older generation’s need to sacrifice. For example, Texas Lieutenant Governor Dan Patrick’s expressed these sentiments when he suggested that senior citizens take a chance on their survival in exchange for
“keeping the America that all America loves for your children and grandchildren” (Sargent, 2020). These types of frames underscore the competition between generations and reinforce the idea that one generation’s loss is another cohort’s gain. For example, *The Boston Globe* portrays the allocation of resources as a zero sum game where only the young or the old can win: “Do we disrupt the lives of millions of young people — literally including their access to healthy food — or do we accelerate the spread of a disease among the old?” (Pariser, 2020).

Nevertheless, it should also be noted that it is not always the group of older citizens that encounters demand for sacrifice. Like older adults, young adults are at times portrayed negatively. There were plenty of media stories and pictures of young people unwilling to cancel their spring or summer breaks, crowding on beaches and in bars and describing their actions as “selfish” (e.g., Flynn, 2020).

**The Consequences of Framing**

Frames matter. They have significant consequences because they shape opinions and influence behavior. First of all, framing COVID-19 as a condition primarily lethal to older people ignores the real risks to younger generations and might have slowed down some countries’ responses. World Health Organization (WHO) Director-General Tedros Adhanom Ghebreyesus stated that some countries deemed the coronavirus threat “less worthy of the best efforts to contain it” because older people were most affected (Aronson, 2020). In *The New York Times*, Aronson (2020) criticized an article from NBC News (Edwards, 2020) entitled “Not just old people: Younger adults are also getting the coronavirus”, which seemed to suggest that COVID-19 was only significant if young people were getting it. Aronson (2020) wrote that “No one wants young people to die. So why are we OK with old people dying?” Still, others on social media have dismissed the virus, communicating that “only the sick and old need to worry, so
who cares?” (Kukula, 2020) and that “Real People won’t die, only Non-People like old and
disabled people will” (Mastroianni, 2020), as if these deaths are somehow more acceptable.
News outlets have communicated similar messages: On Fox News, Bill O’Reilly stated in an
interview with Sean Hannity that “Many people who are dying [of COVID-19], both here and
around the world, were on their last legs anyway” (Glick & Cuddy, 2020). Dr. Gilad
Hirschberger, a professor of psychology, explains this phenomenon as follows: “When
something like a pandemic happens, not only do we look for someone to blame, we also look for
a way to protect ourselves from the possibility that this could happen to us.” The pandemic
primarily affects older adults, which provides “psychological protection” to those under 65, who
feel “It’s not us” (Yuko, 2020).

Framing also reinforces stereotypes and evokes emotions (Mendelberg, 1997). By
ignoring the diversity of older people, it homogenizes age cohorts. Because of this tendency,
older adults have collectively been viewed as vulnerable, selfish and in need of protection. They
are also seen as technologically inadequate and non-compliant with social distancing measures.
Such stereotypes ignore the diversity of this age group. After all, the nation’s leading infectious
disease expert, Dr. Fauci, is 79 years old. Additionally, the CDC (2020a) has noted that people at
the highest risk for COVID-19 are those who are older and who have serious underlying medical
conditions. Not all older people have serious underlying medical conditions: In a CDC (2009)
study, about 22% of older adults aged 55 and older and 15% of those 65 and older did not report
any chronic diseases. Furthermore, the highest percentage of severe outcomes were among those
85 and older, rather than those between 65 and 84 (Sadruddin & Inhorn, 2020). Besides this,
older adults are diverse in other aspects, including race, ethnicity, and socioeconomic status,
which can come with health advantages and disadvantages. For example, a white, middle- or
upper-class individual who is 70 years old may have greater access to health care than someone of the same age of a different race, ethnicity, or socioeconomic status. As Jo Ann Jenkins, the CEO of AARP, says, “Coronavirus and aging have something in common: No one is immune from either. The fact is, COVID-19 is having devastating impacts on people no matter age, geography, or any other characteristic” (Yuko, 2020).

Discussions about weighing a few more deaths against the health of the economy also reinforce the notion that older adults are not contributing to society anymore. In reality, people today are living longer than they have in the past, and adults 60 and older are increasingly make important economic and social contributions to our society (Sadruddin & Inhorn, 2020). Moreover, such discussion also suggests that older adults are expendable. As Friedman (2020) writes, “Debates over who is most at risk for coronavirus, who should receive priority for ventilators, and when to reopen the economy really all boil down to a single question: How much are our lives worth?” Whether we are aware of it or not, we are assigning value to the lives of others when we debate such issues. Unfortunately, “the price tags routinely placed on human lives have major ramifications, yet are often neither transparent nor fair… Undervalued lives are left underprotected and more exposed to risks than more highly valued lives” (Friedman, 2020). This creates a zero-sum choice where one group’s gain is the other’s loss and where we have to choose between saving the economy and saving older people.

**Recommendations**

Our analysis has demonstrated that coverage of the pandemic has been overwhelmingly framed in terms of age and ageism. Media have portrayed older adults as vulnerable, in need of protection, or as a liability that sets back the hopes and aspirations of younger people. Given this coverage, and also acknowledging that older adults are more at risk for complications related to
COVID-19, it is particularly important to frame information relating this phenomenon in such a way that reduces the stigmatization and marginalization of older adults. There is no doubt that they are the prime victims of the virus. Nonetheless, they should not have to experience the double jeopardy of being portrayed as expendable. Statistics about different health outcomes are clearly important for illness management; however, because they increase feelings of vulnerability among older adults, they should not be at the center of news coverage.

The above examples illustrate that media coverage of the pandemic reflects common patterns of ‘othering’ older Americans. Similar patterns describe the coverage of many public policies where intergenerational conflict frames dominate. Again, the images created suggest that one group’s gain is the other’s loss. What is needed is the realization that well-being in later life is shaped by the same social and economic policies (e.g., housing, transportation, health) that affect the health and wellbeing of all age cohorts.

While these recommendations apply to the aggregate level, it is also important to be cognizant about how individual use of language can shape perceptions about aging. Referring to older adults using pronouns “they” and “them” contributes to the “us vs. them” narrative and portrays the older as ‘others.’ Instead, the use of more inclusive wording in conversations such as “we” (as in “when we get older, we need”) should be used to emphasize how inclusive policies benefit all age cohorts. Such language also has the benefit of not portraying aging as a battle one needs to fight (Sweetland, Volmert, & O’Neil, 2017). Further, statements such as “We are in this together” convey a message of solidarity (Sadruddin & Inhorn, 2020). After all, anyone who lives long enough will go through the process of aging and become older adults.
References


