

INTERGENERATIONAL CONTACT, AGING ANXIETY, AND AGEISM: A STUDY WITH YOUNG ADULTS

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INTRODUCTION

- An unprecedented shift in aging demographics is occurring around the world. As the population of older adults grows, ageism, negative stereotyping, and prejudice toward older adults is increasing. Exposure to negative views of aging may not only influence older adults' mental and physical health but can also influence younger individuals who believe in and come to embody negative aging stereotypes.

INTERGENERATIONAL CONTACT

- It is often assumed that more frequent interactions between younger and older individuals lead to reduced ageism and fewer negative stereotypes (Henry et al., 2024; Long et al., 2022)
- However, literature also suggested that this relationship is not linear (Verhage et al., 2021), depending on a range of factors, including the quality and nature of contact, previous personal experiences, family dynamics, and individual characteristics.

AGING ANXIETY

- Younger individuals typically hold a mix of positive and negative stereotypes about aging, often simultaneously perceiving both strengths and losses associated with growing older (Anderson & Gettings, 2022; Davis & Graf, 2024; Long et al., 2022; Rothermund & de Paula Couto, 2024; von Humboldt et al., 2021)
- Aging anxiety directly influences how younger adults envisage and evaluate their own aging process (Kornadt et al., 2020; Sun & Li, 2025).

AGEISM

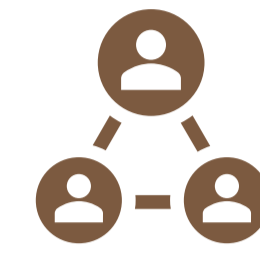
- More favorable views on aging are associated to lower levels of depression, higher life satisfaction, and enhanced emotional well-being (Liu et al., 2021; Miguel & Carvalhais, 2025; Miguel & Pedrosa-Chaparro, 2025; Miguel et al., 2025; Park & Hess, 2020; Smith et al., 2023; von Humboldt et al., 2013)
- Consistent, meaningful contact with older adults reduces ageism and anxiety, fostering more empathetic and nuanced views of aging (Davis & Graf, 2024).

AIMS:

- Analyze the influence of intergenerational contact on the expression of ageism;
- Examine the mediating role of aging anxiety in the relationship between intergenerational contact and ageism.

METHOD

Participants



N = 369 young adults

- 18 to 30 years old (M = 22.78; SD = 3.63)
- Mostly female (n = 230, 62.3%).

Measures



Intergenerational Contact Scale – ICS (Hutchison et al., 2010):

- 2 subscales: frequency of contact; quality of contact
- Likert scale : 1 = *strongly disagree*, 5 = *strongly agree*



Anxiety About Aging Scale -AAS (Lasher & Faulkender, 1993)

- 4 subscales: fear of older adults; psychological concerns; physical appearance; fear of losses
- Likert scale : 1 = *strongly disagree*, 5 = *strongly agree*



Fraboni Scale of Ageism – Portuguese Short Form FSA-PSF (Neto & Neto, 2024)

- 3 subscales: avoidance, stereotypes, discrimination
- Likert scale : 1 = *strongly disagree*, 7 = *strongly agree*

Procedures



- Ethical procedures: informed consent, confidentiality and anonymity
- Online data collection

Analyses



- Regression analyses were conducted using the PROCESS macro from SPSS to examine mediating effects. Intergenerational (frequency and quality) served as the independent variables, anxiety about aging as the mediator, and ageism as the dependent variable. Gender and grandparents' health were introduced as covariates. Statistical significance was determined at $p < .05$.

RESULTS

Table 1. Summary of mediated regression analyses between intergenerational contact (frequency and quality), aging anxiety and ageism

Variable	Aging anxiety (Step 1)				Ageism (Step 2)						
	b	SE	t	p	95% CI Lower, Upper	b	SE	t	p	95% CI Lower, Upper	
Model 1											
IC_Frequency	-.171	.029	-5.81	<.001	[-.228; -.113]	-.385	.102	-3.773	<.001	[-.586; -.184]	
Aging anxiety	–	–	–	–	–	.368	.205	1.792	.074	[-.036; .772]	
Gender (covariate)	.001	.052	.028	.978	[-.101; .104]	.699	.171	4.091	<.001	[.362; 1.035]	
Grandparent's health (covariate)	-.098	.051	-1.933	.054	[-.197; .002]	.053	.166	.321	.748	[-.274; .381]	
Indirect effect						-.063	.021	–	–	[-.085; -.001]	
Model 2											
IC_Quality	-.192	.028	-6.930	<.001	[-.246; -.137]	.083	.104	.803	.423	[-.121; .288]	
Aging anxiety	–	–	–	–	–	.702	.216	3.254	.001	[.462; 1.146]	
Gender (covariate)	.024	.050	.470	.639	[-.076; .123]	.804	.174	4.632	<.001	[.462; 1.146]	
Grandparent's health (covariate)	-.080	.049	-1.617	.107	[-.177; .017]	.056	.171	.330	.742	[-.280; .393]	
Indirect effect						-.135	.044	–	–	[-.231; -.057]	

DISCUSSION

Results of the present study also suggest that increased contact with older adults – whether in frequency and in quality – has benefits for reducing aging anxiety

Intergenerational contact has been shown to improve attitudes toward older adults and lower levels of aging anxiety (Allan & Johnson, 2009; Barnett & Adams, 2018; Flamion, 2020), whilst a lack of intergenerational contact contributes to greater aging anxiety (Lasher & Faulkender, 1993).

A dual pattern in the reduction of ageism: while the frequency of intergenerational contact directly decreases young adults' levels of ageism, the quality of contact only has an indirect influence on, through aging anxiety

Frequent interactions may reduce prejudice via increased familiarity and exposure, consistent with the contact hypothesis (Drury et al., 2016).

IMPLICATIONS:

- Programs aiming to reduce ageism might incorporate anxiety-reduction techniques, such as mindfulness or social skills training, to prepare younger individuals for positive engagement with older adults.
- Policymakers and community organizers should consider designing structured, supportive intergenerational activities that foster trust and comfort, helping younger people overcome fears associated with aging.
- Raising awareness and education about aging and ageism could complement contact-based interventions by challenging stereotypes and promoting empathy.