

Combatting ageism in the Western Pacific region

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Summary

The present viewpoint examines the manifestation of ageism, defined as stereotypes, prejudice and discrimination towards people because of their age, in the Western Pacific region. Research is still equivocal concerning the nature of ageism in the Western Pacific region, especially in East and South-East Asia (e.g., Eastern countries). There has been plenty of research to support as well as question the general notion of Eastern cultures and countries as being less ageist compared to Western cultures and countries at individual, interpersonal, and institutional levels. Although varied theoretical explanations have aimed to explain East-West differences in ageism such as the modernization theory, the pace of population aging, the proportion of older people in the country, cultural hypothesis, and GATEism, none of these theories fully accounts for the mixed findings. As such, it is safe to conclude that targeting ageism should be an important step in ensuring a world for all ages in Western Pacific countries.

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Ageism, defined as stereotypes, prejudice and discrimination towards people because of their age, can be manifested at the macro (institutional) level, meso (interpersonal) level, and micro (individual) level.¹ Ageism can be directed towards both younger and older members of society and can be either positive or negative. It may be experienced across the life course at different stages of life. However, there is more evidence on the widespread prevalence and detrimental impact of ageism at older ages.² The present viewpoint is mainly focused on negative aspects of ageism directed towards older people.

Ageism has a substantial impact on our lives and wellbeing. For instance, holding negative perceptions about one's own aging process results in 7.5 fewer years of life, compared with holding more positive views of aging.³ Negative perceptions regarding one's own aging have also been associated with a higher risk for falls⁴ and worse physical health and mental health status.⁵ Additionally, age discrimination has been shown to be associated with worse mental health,⁵ a greater intention to retire from work,⁶ and a lower tendency to use healthcare services or to engage in positive health behaviors.⁷ At a financial level, a recent analysis has estimated that the cost of ageism, negative self-perceptions of aging, and age discrimination in the United States healthcare system is about \$63 billion per year.⁸ These findings and others have led the WHO to launch a global campaign to combat ageism in order to change

the way we think, feel, and act towards age and aging to ensure a world for all ages.⁹ More recently, ageism was identified as one of the pillars of the UN Decade of Healthy Ageing following the understanding that reducing and possibly eliminating ageism is essential to ensure healthy aging and healthy longevity in a society for all ages.¹⁰

The Western Pacific region

According to WHO, the Western Pacific region comprises 37 countries and areas with diverse cultures and income levels. The countries vary widely in the proportion of older adults in their total population. From “old” countries like Japan with almost 30% of its population over the age of 65 to “young” countries like Cambodia and Laos with less than 5% of their population in the 65+ age group, the Western Pacific region boasts of immense regional diversity.¹¹ Moreover, the region includes several upper-middle and high-income countries like China, South Korea, Japan, Singapore, and New Zealand whose populations account for increasingly larger numbers of older adults.

Most countries in the region, large and small, are known for their “traditional” cultures in which filial piety plays a central role.¹² Indigenous populations in the region are also known to have social structures in which intergenerational support and living arrangements are the norm. In the backdrop of such regional sociocultural variations, we aim to address the topic of ageism in the Western Pacific region by examining whether norms surrounding filial piety effectively

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combat ageism towards older adults. For this, we rely on studies on filial piety and ageism undertaken in specific countries as well as cross-cultural studies comparing the prevalence and manifestation of ageism in Western countries versus non-Western (East and South-East Asian) countries. Finally, we suggest methods to identify and combat ageism in the Western Pacific region.

The distinction between traditional and westernized cultures is somewhat arbitrary given the large variability found within countries and the fact that differences are not only a function of geographic location.¹³ Nonetheless, this distinction has been used in past research to better understand cross-cultural differences.^{14–16} Broadly defined, English speaking countries, such as the United Kingdom, Canada, the United States, Australia, New Zealand as well as Western European countries are thought to represent Western cultural values, whereas countries across Asia, Africa, and South America, though situated at varying levels of modernization and westernization, are considered to represent traditional cultural values. Amongst these, for this article, we focus specifically on Western Pacific countries like China, Japan, South Korea, The Philippines, Singapore, Vietnam, Cambodia, Laos, and others that broadly represent “Eastern” cultural values. These countries are recognized for their extensive historical and deep cultural roots that shape and govern social customs and norms. Common among them is a cultural reverence for elders and emphasis on filial piety.^{17,18}

Broadly speaking, Eastern and Western cultures are thought to be holding distinct attitudes, behaviors, and feelings towards older people.¹⁴ Eastern cultures emphasize the value of filial piety, which represents the debt that children owe to their older parents and ancestry.¹⁹ Filial piety is considered a central moral obligation which ensures societal order. Historically, older people in Eastern countries were seen as having the highest moral standard and their children were expected to care for them and guarantee their material wellbeing, obey their wishes and preferences, and bring them honor and respect.²⁰ These values stem from a collectivist approach, which emphasizes interdependence between individuals, rather than independence and individuality. Interdependence between young and old is thought to contribute to solidarity between the generations and to decrease the potential of intergenerational conflict.

Ageism and filial piety in the Western Pacific region

One area in which differences between East and West are observed is in the notion of what constitutes desired or ideal aging. The successful aging model, which originated in the United States²¹ is considered ageist because of its emphasis on the disharmony between body and mind.²² Moreover, it is considered prescriptive and

overly focused on individual health status. The successful aging model is thought to pose impossible standards and expectations for older people’s absence of disease and decline. In contrast, the term harmonious aging, is thought to be derived from Eastern philosophy.²¹ Harmonious aging implies balance and harmony, which are open to both change and stability across time and space and accept physical and functional changes over the life course, rather than deny or excessively modify their existence through medical means. Moreover, the authors claim that in Eastern cultures, interdependence between the generations and the receipt of assistance from younger generations are not seen as a failure, but rather are viewed as signs of good aging,²¹ intergenerational cooperation, and value-based upbringing of younger generations. These values are thought to promote more cooperative and less ageist contact between the generations and also lower levels of self-ageism, associated with meeting an ideal (though unattainable) standard of what constitutes old age.²¹

In contrast, some have claimed that filial piety in Eastern cultures is a myth.¹⁹ One example for the erosion of status of older people in Eastern cultures can be found in China’s “Protection of the Rights and Interests of Elderly People” (also known as the Filial Piety Law), that was passed in July 2013, which aims to protect older adults from abuse which includes isolation, disrespect, non-filial behaviors, caregiver neglect, psychological abuse, financial exploitation, abandonment, and, in a rare case, death by confinement and starvation.²³ The law explicitly dictates that adult children must visit their older parents frequently.²⁴ Accordingly, adult children are expected to take care of their parents both financially and psychologically in an era in which pensions, healthcare, and accommodation are no longer universally granted to older people. Although ensuring the welfare of older people by law is no doubt a positive move, the presence of an official law implies that filial piety might not be the norm in all families. The stringent punishments attached to non-observance of the filial piety law, such as blacklisting of credit score and public humiliation of adult children, are further indicators of declining social norms surrounding filial piety.²³

In the Philippines, according to the country’s Human Rights Commission, instances of elder abuse have been reported by up to 28% of the public; adult children and family members are the main perpetrators of physical violence, financial exploitation, neglect, and psychological/emotional abuse.²⁵ In 2018, the country passed the “Anti-Elder Abuse Act” that provides for penalties for acts of abuse committed on older individuals who are increasingly being considered a “burden” on their family members.²⁶ Similarly, Cambodia’s “National Aging Policy 2017-2030” recognizes that, “with pressures of caregiving mounting on younger family members they may feel trapped in the role of caregiver and tend to neglect or even abuse older

persons". The policy also highlights the feminization of aging in the country and the unique challenges faced by less empowered older women.²⁷

A cross-cultural study on intergenerational communication across the Pacific Rim involving 1400 students from four Western countries (United States, Australia, Canada, and New Zealand) and four East and Southeast Asian countries (Japan, Korea, Hong Kong, and The Philippines) found that, compared to Western participants, Asian students reported lower intentions of providing practical care and communicative support to older relatives than was expected of them.¹⁷ Consistently, a recent systematic review and meta-analysis on filial piety and caregiver burden among adult children found that although strong filial piety and positive psychological processes may lessen or offset caregiver burden in Eastern cultures, the very concept of filial piety must be re-assessed, updated, and expanded to include other regions and cultures of the world.²⁸ A similar view is put forth by Woo¹⁹ who states that the Confucian ethic of filial piety does not serve modern needs and that compared to other parts of the world, "the strongest levels of senior derogation was observed in East Asia", with a marked rise in ageism and ageist stereotypes pertaining to older people. In support of this claim, a recent systematic review of filial piety in Chinese adult children has found caregiving stress, role strain, and poorer self-rated health to be associated with higher levels of filial piety.²³ These normative changes can partially be attributed to modernization processes and demographic shifts that are taking place in the region. These changes are characterized by longer life expectancies, a decrease in family size, economic hardships/rising costs of living and healthcare, the migration of adult children to urban areas/other countries, and the entrance of women into the workforce,²⁹ among other factors.

For years, there has been an assumption that modernization brings with it a reduction in the status of older people, especially in relation to urbanization, education, economics, and health technologies.¹ Following the invention of print, the introduction of new technologies, and the migration of the younger generations to urban areas, the status of older people has declined,³⁰ and older adults have lost both familial and economic roles, effectively rendering them obsolete in modern times. This perspective has courted significant controversy over the years, especially because this trend is often reversed in industrialized nations. Many countries in the Western Pacific region, however, are far from being fully industrialized. Moreover, regardless of modernization, almost all countries in the region have deep-rooted cultural norms that are hard to dismantle completely. For example, in South Korea, a high-income, industrialized country, it is common to ask a stranger their age so as to address them correctly and show appropriate respect. Several countries in the Western Pacific region are still in transition. Unlike the

developed world that grew rich before it grew old, lower-middle income Western Pacific countries like Cambodia, Vietnam, and Mongolia are growing old before growing rich.³¹ This is naturally straining countries' resources, communities, and families, especially in the absence of formal programs to support a rapidly aging population.³²

Even countries that have already developed, such as Japan, South Korea, and Singapore, the income security, social support, and healthcare maintenance of the aging population is being affected due to sharply declining fertility rates and contracting working population size.^{33–35} Consequently, regardless of development status, progressive laws, and tax incentives, in most Western Pacific countries, families continue to remain the primary source of support and care for older adults while governments scramble to set up adequate infrastructure for the aging population.^{36,37} The dependence on family and relatives for care and support, however, is leading to instances of elder abuse and abandonment which are prompting governments to enact laws to penalize family carers, thereby exacerbating an already untenable situation. The transition of traditional societies is possibly linked to the evolution of socio-cultural values that govern intergenerational relationships. However, modernization alone cannot explain the complexities that shape these interactions.

At the same time, it is possible to point to parallel modernization processes that have taken place in the West. These might be responsible for comparable status of older people in Eastern and Western societies. For instance, a study that examined the valence of age stereotypes in the United States vs. China has found limited differences between the countries, concluding that both cultures hold negative views of mental and physical traits of older people.³⁸ A different study, conducted in 26 countries has found a consensus across countries, which tended to report a perceived decline in the status of older people in society, with respect to their appearance, ability to learn, and to perform everyday tasks. Simultaneously, perceived wisdom and knowledge accompanied by increased respect also were reported. The study also found some differences between Eastern and Western countries, with Eastern participants holding more positive views towards aging. However, they also held less favorable perceptions towards wisdom in old age. The authors concluded that differences between Eastern and Western countries diminish once the proportion of older people in the population is considered.³⁹

In contrast, a recent meta-analysis has found that the status of older people in Western countries is actually better than the status of older people in Eastern countries.¹⁴ However, geographic variability emerged even within Eastern countries, with the strongest devaluation found in East Asia compared with South- and South-East Asia and non-Anglophone Europe. The authors

attributed the high levels of ageism in Eastern countries to the fact that Eastern countries experience accelerated aging. With a one-child policy in China and a reduction in birth rate in Japan and other Eastern countries, the percentage of older people in society is increasing rapidly. In contrast to expectation, cultural individualism was positively related to respect towards older people. This has yielded a new hypothesis concerning the value of individualism in post-modern societies, which are more tuned towards compassion and respect of weaker members of society, including older people. As such, it is Western cultures, which are more accommodating and respectful toward older people rather than Eastern cultures.¹⁴ A different study, however, concluded that it is not the pace of population aging, but the percentage of older people in society. The study, based on the World Value Survey has found moderate to high levels of ageism in 34 out of 57 countries. The study concluded that higher levels of ageism are found in countries with lower healthy life expectancy and a lower proportion of older people in the country.⁴⁰

A recent commentary⁴¹ has attempted to untangle modernization from ageism and evaluate their relationship in current times. The authors state that modernization theory, one of the most widely used theories to explain ageism, focused on the status of older people and not on ageism. According to them, ageism can be both positive and negative and can co-exist (for example, older people are often described as warm but incompetent). Moreover, a high social status does not necessarily imply lower levels of ageism and vice-versa. Citing other studies, the authors have pointed out that higher levels of ageism have been found in East Asian countries and lower levels in European countries, contradicting the claim that modernization lowers the status of older adults which subsequently leads to ageism. Such findings further highlight the complicated nature of age-based intergenerational interactions and perceptions in traditional societies undergoing sociocultural transition.

Vauclair, Hanke⁴² aimed to explain inconsistent findings concerning differences between Eastern and Western cultures by promoting a cultural hypothesis. The authors made a distinction between cultural norms and personal opinions as well as between the varied components of ageism (e.g., stereotypes, prejudice, and discrimination). Accordingly, Easterners might hold more positive cultural norms concerning the status and contribution of older people. However, even though people of Eastern cultures might hold greater respect for older people as a social norm, their own personal opinions might vary. Variations might also be due to the exact component of ageism being measured. Indeed, the authors have found more positive meta-perceptions of competence and admiration among the Taiwanese. However, consistent with the general prototype of older people, the Taiwanese sample, just like the United Kingdom sample, reported greater meta-

stereotypes of warmth than competence. Moreover, envy and contempt towards older people also were more common in the Taiwanese sample. Results were mixed regarding personal opinions and feelings concerning older people.⁴²

Related to these proposed distinctions, a recent theoretical model proposed that in addition to chronological age, generation (cohort), tenure (number of years in the organization) and experience (accumulated over time) serve as mechanisms (GATEism) that pull or push people away from the workforce. Using examples from China and the United States, the author concludes that each of the four components functions differently in the different countries, thus, accounting for different work experiences of older workers in the two countries.¹⁵

Ageism, however, is not only directed towards older people by other members of society but may represent the self-perceptions that older people hold towards their own age and aging. Like research conducted in Western countries, there is ample research to support the association between negative self-perceptions of aging and varied negative health and mental health outcomes in Eastern countries.⁴³⁻⁴⁷ This association, however, might be more complex given the interdependence between family members. In South Korea, for example, research has found a tendency towards negative self-perceptions of aging among older people,^{48,49} with both intergenerational and spousal relations and contexts (including health status) being associated with one's self-perceptions of aging, thus, stressing the interdependence between family members.⁵⁰ There also are variations in self-perceptions of aging across different age cohorts, with younger Japanese cohorts reporting better self-perceptions of aging compared with older cohorts,⁴⁷ as well as variations across geographic areas, with rural Chinese older adults reporting poorer self-perceptions of aging.⁴⁴ These findings point to specific population groups that might benefit from further interventions as well as to the importance of addressing all family members when attempting to improve self-perceptions of aging, given the strong interdependence within families. The findings also stress the fact that differences within a culture (e.g., gender, race, geographic location) or country should be acknowledged as they are often equally or more prominent than differences between countries.

How can we combat ageism?

The recent WHO report on ageism has identified four possible strategies to reduce ageism.⁵¹ These include educational events for transmission of knowledge and development of empathy; intergenerational interventions to recognize the potential of different generations and encouragement to work together in solidarity; policy frameworks and laws aimed towards reducing age-based discrimination and protecting the human rights

of all individuals; and the use of social media to spread the message to a large audience.

Both educational interventions and intergenerational contact have shown effectiveness in reducing ageist stereotypes towards older people.⁵² A first step, however, should be the introduction of the term “ageism” and its local interpretations to the public. The term ageism was originally coined by Robert Butler more than five decades ago.⁵³ After its introduction to the English language, the term had to be translated to other local languages to ensure that ageism is noticed and reported by those who experience it. However, this is not the case everywhere in the world. A recent study conducted in Israel has shown that many Israeli respondents were not familiar with the term ageism in Hebrew. These individuals also were less likely to report the experience of ageism. However, after the term ageism was defined, more people acknowledged the experience of ageism and even were able to provide concrete examples to illustrate their experiences.⁵⁴ Therefore, it is highly likely that any educational intervention that targets ageism should start by introducing the concept and explaining it to people in their local languages. This likely will result in an increase of reports concerning the experience of ageism at least in the early stages when the term ageism is just starting to emerge as part of the culture. At the same time, it is important to keep cultural contexts in mind when defining ageist vs. non-ageist behaviors and practices. For example, helping or asking to help an older person carry out certain tasks may be considered interfering or ageist in cultures where independence is highly valued, but may be expected and seen as a sign of good manners and upbringing in cultures where interdependence is the norm.

Cultural context, therefore, should be considered paramount to avoid risking unnecessary clash of values. At the same time, it is important to consider the fact that cultural values evolve over time. For example, according to Confucianism, adult children are required to support their elders and care for them at home. Failing to do so may carry social stigma for both older parents and adult children. However, it is now more acceptable in urban Asian societies to place older relatives in long-term care institutions.¹⁹ Similarly, traditionally, information about medical diagnoses and end-of-life care were the domain of adult children with the intention of shielding older relatives from distressing news. Now, in line with Western medical ethics on informed consent, many older adults prefer “truth telling” and making their own medical decisions.¹⁹ Therefore, one way to define and subsequently combat ageism could be to involve older adults in the creation, identification, and definition of the concept of ageism in their own language and culture within their societal context.

As for intergenerational relations to reduce ageism, a recent study based on the 2006 East Asian Social Survey has found both continuity and change in intergenerational relations in four East Asian countries: China, Japan, South Korea, and Taiwan. As intergenerational contacts within

the family might be less common, the need for intergenerational interventions that possibly broaden the scope of intergenerational contact beyond the family to reduce ageist attitudes in society is stressed. A recent systematic review, which has focused on East Asia has found that both younger and older generations reported improved attitudes following participation in an intergenerational intervention. The authors concluded that culturally specific interventions which address status concerns between generations are needed.⁵⁵ Intergenerational living, learning, and reciprocity have traditionally been the mainstay of Eastern cultures. However, the forces of modernization, urbanization, and westernization have led to the dismantling of multigenerational families in favor of nuclear setups. This has affected older as well as younger generations and it is important to acknowledge these transitions in future interventions. While it may not be possible to fully restore multigenerational living arrangements, interventions that bring school children and older adults together may be useful and beneficial to both groups, especially in the transmission of traditional knowledge and skills in addition to battling loneliness and social isolation among older adults and (single) children in nuclear families. In this context, it is particularly important to acknowledge a recent study,⁵⁶ which has found that acknowledging the value of filial piety results in reduced stereotype threat among older Chinese respondents. A different systematic review has found that the value of filial piety also results in reduced depression among older people.⁵⁷ This points to one mechanism which can possibly reduce ageism in this population of older adults.

Legal interventions also are thought to be effective in reducing and/or preventing ageism. Currently, there is no UN convention to protect the rights of older people. This results in a limited international legal framework to guide policy in the field of aging. Moreover, this lacuna requires domestic, regional or sub-regional measures to address the rights of older people⁵⁸ as such, there are differential legal measures to address ageism in different countries. For instance, South Korea has enacted an anti-discrimination law by providing stiff penalty for age discrimination. However, it was claimed that the new law has both structural and definitional weakness which may reduce its effectiveness in decreasing age discrimination.⁵⁹ Similarly, Japan and Singapore employ anti-age discrimination acts in employment and service accessibility. This was seen as allowing older Japanese workers to remain in the workforce for longer periods.⁶⁰

Nonetheless, there is still a long way to go concerning the protection of older people from age-based discrimination. This should take place both at the international level via a UN convention for the rights of older people, accompanied by anti-age-discrimination laws at the local and regional levels. It also is important to note that the discrimination of older people does not occur only in the workplace or in the service domain

but also in the healthcare system, the media, the digital world, and other spheres of everyday life.^{1,61} Hence, legal interventions should be broad enough to cover a variety of instances and different domains of life.

Additionally, it must be noted that although strong notions of filial piety have been found to reduce caregiving burden to an extent, enacting laws mandating filial piety and penalizing family carers for their inability and/or unwillingness to provide care to older generations may not be a sustainable solution to address the needs of older populations. Most Asian countries already have large numbers of older adults with fewer members of younger generations available for the provision of care. Other countries in the region will face similar challenges in the near future. Therefore, governments must step up to not only protect older adults from age discrimination in various spheres of life but also actively provide for the older population in terms of affordable housing, adequate healthcare, food and energy subsidies, income security, social opportunities and other facilities and provisions as required.

Finally, although there is not enough research evidence to support the use of social campaigns as a means to reduce ageism,⁶² their effectiveness to target stigma in other domains has been supported.⁶³ One concern in the case of social campaigns is their local vs. global nature. As clearly there are some country/regional variations in the manifestation of ageism, it is highly likely that campaigns too should be country and culture specific. For instance, a recent review of social campaigns during the COVID-19 pandemic in Israel has found an emphasis on the successful aging model in an attempt to sway the public image of older people.⁶⁴ This likely stems from the successful aging theory⁶⁵ which colors the experiences of aging in Western society. In Eastern cultures and countries in contrast, harmonious aging might be a more appropriate image to advocate for in social campaigns that target ageism.²¹ This strategy may be especially effective in reducing ageism amongst the younger generations as it can help build compassion, empathy, kindness, and cooperation across generations. Using balanced messaging and images of aging in social media may also help reduce internalized ageism among the older population, thereby improving their quality of life and enhancing social participation.

Conclusions

Research is still equivocal concerning the nature of ageism in the Western Pacific region. On the one hand, there is a strong tradition of filial piety and interdependence that possibly results in greater acceptance of the aging process and its losses and gains in Eastern societies.²¹ However, on the other hand, there has been plenty of research to question the general notion of Eastern cultures and countries as being less ageist compared with Western cultures and countries both at the

individual or interpersonal levels and at the institutional level.^{14,42}

It is safe to conclude that to date, there is no consensus on the source of cross-cultural differences in the reports and experiences of ageism. The modernization hypothesis, the pace of population ageing, the proportion of older persons in the population, GATEism, and the exact dimension/s of ageism measured were proposed as possible theoretical grounds for differences between countries and cultures. However, none of these explanations fully accounts for empirical findings. Thus, there is a need to further refine the theoretical basis between countries and cultures in the report and experience of ageism. A more refined understanding of the complexity of the concept and cultures involved can assist in grounding the findings within a more adequate theoretical framework.

Nonetheless, it is safe to conclude that targeting ageism should be an important step in ensuring a world for all ages in the Western Pacific region. Current tools to target ageism consist of educational intervention, intergenerational contact, legal interventions, and social campaigns. Given the unique features of the Western Pacific region and the high variability within this region, interventions should be specifically tailored to change attitudes, behaviors, and feelings in specific cultural contexts, rather than rely on a one-size-fits-all approach that originated in the West.

Contributors

LA- First draft and critical revisions

SR- Critical revisions

Declaration of interests

Prof. Ayalon is a co-secretary of the NGO Committee on Ageing in Geneva, she is a board member of the International Psychogeriatric Association, a member of the WHO Global Network on Long Term Care, an advisory board member of the older persons' council of the Israel Ministry of Social Equality, and the director of the Impact Center for the study of Ageism and Old Age.

References

- 1 Ayalon L, Tesch-Römer C. *Contemporary perspectives on ageism*. Springer Nature; 2018.
- 2 Officer A, Schneiders ML, Wu D, Nash P, Thiyagarajan JA, Beard JR. Valuing older people: time for a global campaign to combat ageism. *Bull World Health Organ*. 2016;94(10):710.
- 3 Levy BR, Slade MD, Kunkel SR, Kasl SV. Longevity increased by positive self-perceptions of aging. *J Pers Soc Psychol*. 2002;83(2):261.
- 4 Ayalon L. Satisfaction with aging results in reduced risk for falling. *Int Psychogeriatr*. 2016;28(5):741-747.
- 5 Vogt Yuan AS. Perceived age discrimination and mental health. *Soc Forces*. 2007;86(1):291-311.
- 6 Bayl-Smith PH, Griffin B. Age discrimination in the workplace: identifying as a late-career worker and its relationship with engagement and intended retirement age. *J Appl Soc Psychol*. 2014;44(9):588-599.

- 7 Ayalon L, Cohn-Schwartz E. The relationship between perceived age discrimination in the healthcare system and health: an examination of a multi-path model in a national sample of Israelis over the age of 50. *J Aging Health*. 2021. <https://doi.org/10.1177/08982643211058025>.
- 8 Levy BR, Slade MD, Chang ES, Kanno S, Wang SY. Ageism amplifies cost and prevalence of health conditions. *Gerontologist*. 2018;60(1):174–181.
- 9 Officer A, de la Fuente-Núñez V. A global campaign to combat ageism. *Bull World Health Organ*. 2018;96(4):295.
- 10 Mikton C, de la Fuente-Núñez V, Officer A, Krug E. Ageism: a social determinant of health that has come of age. *Lancet North Am Ed*. 2021;397(10282):1333–1334.
- 11 CIA World Factbook. 2022. Available from: <https://www.cia.gov/the-world-factbook/>.
- 12 World Health Organisation. 2014.
- 13 Bergman YS, Bodner E, Cohen-Fridel S. Cross-cultural ageism: ageism and attitudes toward aging among Jews and Arabs in Israel. *Int Psychogeriatr*. 2013;25(1):6–15.
- 14 North MS, Fiske ST. Modern attitudes toward older adults in the aging world: a cross-cultural meta-analysis. *Psychol Bull*. 2015;141(5):993.
- 15 North M. Chinese versus US workplace ageism as GATE-ism: generation, age, tenure, and experience. *Front Psychol*. 2022;337.
- 16 Yun RJ, Lachman ME. Perceptions of aging in two cultures: Korean and American views on old age. *J Cross Cult Gerontol*. 2006;21(1):55–70.
- 17 Gallois C, Giles H, Ota H, et al. Intergenerational communication across the Pacific Rim: The impact of filial piety. In: Lasry J-C, Adair J, Dion K, eds. *Latest Contribut Cross-cultural Psychol*. Lisse, Netherlands: Swets & Zeitlinger; 2009:192–211.
- 18 Canda ER. Filial piety and care for elders: a contested Confucian virtue reexamined. *J Ethnic Cult Diversity Soc Work*. 2013;22(3-4):213–234.
- 19 Woo J. The myth of filial piety as a pillar for care of older adults among Chinese populations. *Adv Geriatr Med Res*. 2020;2(2).
- 20 Mehta KK, Ko H. Filial piety revisited in the context of modernizing Asian societies. *Geriatr Gerontol Int*. 2004;4:S77–S78.
- 21 Liang J, Luo B. Toward a discourse shift in social gerontology: from successful aging to harmonious aging. *J Aging Stud*. 2012;26(3):327–334.
- 22 Calasanti T, King N. Beyond successful aging 2.0: inequalities, ageism, and the case for normalizing old ages. *J Gerontol Ser B*. 2021;76(9):1817–1827.
- 23 Dong X, Xu Y. Filial piety among global Chinese adult children: a systematic review. *Res Rev*. 2016;2(1):46–55.
- 24 Bu Q. To legislate filial piety: is the elderly rights law a panacea? *Statute Law Review*. 2019;42(2):219–240.
- 25 Commission on Human Rights of the Philippines. Guiding questions for the “A” status NHRIs, GANHRI and its Regional Networks Eight Session-Working Group. 2017. Available from: https://www.ipsnews.net/Library/2020/06/Elder-Abuse-CommissionHumanRights_Philippines.pdf.
- 26 Republic of the Philippines, House of Representatives. House oks bill for protection vs elderly abuse 2018. Available from: <https://www.congress.gov.ph/press/details.php?pressid=10548#:~:text=House%20Bill%207030%20or%20the,distress%20to%20a%20senior%20citizen>.
- 27 Royal Government of Cambodia. National Ageing Policy 2017-2030. 2017.
- 28 Pan Y, Chen R, Yang D. The relationship between filial piety and caregiver burden among adult children: a systematic review and meta-analysis. *Geriatr Nurs (Minneap)*. 2022;43:113–123.
- 29 Leung JCB. Family support for the elderly in China. *J Aging Soc Policy*. 1997;9(3):87–101.
- 30 Nelson TD. Ageism: prejudice against our feared future self. *J Social Issues*. 2005;61(2):207–221.
- 31 Chan A. Aging in Southeast and East Asia: issues and policy directions. *J Cross Cult Gerontol*. 2005;20(4):269–284.
- 32 O’Keefe PB, Umapathi N, Somanathan A, et al. Live long and prosper: aging in East Asia and Pacific. *East Asia and Pacific Regional Flagship report*. 2015:227–249.
- 33 Ogawa N, Retherford RD. Shifting costs of caring for the elderly back to families in Japan: will it work? *Popul Dev Rev*. 1997;29:94–94.
- 34 Doling J, Ronald R. Meeting the income needs of older people in East Asia: using housing equity. *Ageing Soc*. 2012;32(3):471–490.
- 35 Chan A. Ageing in Singapore: policy challenges and innovations. In: Fu T, Hughes R, eds. *Ageing in East Asia: Challenges and Policies for the Twenty-First Century*. Routledge: Oxford; 2009:139–153.
- 36 Nizamuddin M. Population ageing: policy responses to population ageing in Asia and the Pacific. *Fifth Asian and Pacific Population Conference*. 2000.
- 37 Wyse M, Walker W. Financing long-term care in Asia and the Pacific. 2021.
- 38 Boduroglu A, Yoon C, Luo T, Park DC. Age-related stereotypes: a comparison of American and Chinese cultures. *Gerontology*. 2006;52(5):324–333.
- 39 Löckenhoff CE, De Fruyt F, Terracciano A, et al. Perceptions of aging across 26 cultures and their culture-level associates. *Psychol Aging*. 2009;24(4):941–954.
- 40 Officer A, Thiagarajan JA, Schneiders ML, Nash P, de la Fuente-Núñez V. Ageism, healthy life expectancy and population ageing: how are they related? *Int J Environ Res Public Health*. 2020;17(9):3159.
- 41 De Tavernier W, Naegele L, Hess M. A critical perspective on ageism and modernization theory. *Soc Inclusion*. 2019;7(3):54–57.
- 42 Vaclair CM, Hanke K, Huang LL, Abrams D. Are Asian cultures really less ageist than Western ones? It depends on the questions asked. *Int J Psychol*. 2017;52(2):136–144.
- 43 Sun T, Zhang S-E, Yan MY, et al. Association between self-perceived stigma and quality of life among urban Chinese older adults: the moderating role of attitude toward own aging and traditionality. *Front Public Health*. 2022;10. <https://doi.org/10.3389/fpubh.2022.767255>.
- 44 Hou Y, Wu Q, Zhang D, Jin X, Wu W, Wang X. The differences in self-perceptions of aging, health-related quality of life and their association between urban and rural Chinese older hypertensive patients. *Health Quality Life Outcomes*. 2020;18(1):154.
- 45 Gu R, Zhang D, Jin X, et al. The self-perceptions of aging were an important factor associated with the quality of life in Chinese elderly with hypertension. *Psychogeriatrics*. 2019;19(4):391–398.
- 46 Zhang X, Kamin ST, Liu S, Fung HH, Lang FR. Negative self-perception of aging and mortality in very old Chinese adults: the mediation role of healthy lifestyle. *J Gerontol Ser B*. 2020;75(5):1001–1009.
- 47 Nakagawa T, Ito D, Yasumoto S. Cohort differences in aging self-perceptions among Japanese older adults. *PsyArXiv*. 2021. <https://doi.org/10.31234/osf.io/qwae4>.
- 48 Choi EY, Ko SH, Jang Y. Better be dead than grow older: a qualitative study on subjective aging among older Koreans. *J Aging Stud*. 2021;59:100974.
- 49 Jo A, Oh H. Attitude toward one’s own aging among Korean middle-aged adults and the elderly. *Korean J Adult Nurs*. 2017;29(1):41–50.
- 50 Kim Y, Kim K, Boerner K, Han G. Aging together: self-perceptions of aging and family experiences among Korean baby boomer couples. *Gerontologist*. 2018;58(6):1044–1053.
- 51 World Health Organization. Global report on ageism. 2021.
- 52 Burnes D, Sheppard C, Henderson Jr CR, et al. Interventions to reduce ageism against older adults: a systematic review and meta-analysis. *Am J Public Health*. 2019;109(8):e1–e9.
- 53 Butler RN. Age-ism: another form of bigotry. *Gerontologist*. 1969;9(4_Part_1):243–246.
- 54 Okun S, Ayalon L. Ageism: the importance of the linguistic concept for the construction of the experience. *Ageing and Society*. 2022:1–15. <https://doi.org/10.1017/S0144686X22000708>.
- 55 Lou VWQ, Dai AAN. A review of nonfamilial intergenerational programs on changing age stereotypes and well-being in East Asia. *J Intergenerational Relationships*. 2017;15(2):143–158.
- 56 Tan SC, Barber SJ. Confucian values as a buffer against age-based stereotype threat for Chinese older adults. *J Gerontol Ser B*. 2018;75(3):504–512.
- 57 Wu MH, Chang SM, Chou FH. Systematic literature review and meta-analysis of filial piety and depression in older people. *J Transcult Nurs*. 2018;29(4):369–378.
- 58 Gardiner CM. The human rights of older peoples in Asia. *Routledge Handbook of Human Rights in Asia* Routledge Taylor & Francis. New York: Routledge; 2018.
- 59 Harte RJ. Unreasonable distinctions: a comparative analysis of the definitional framework of Korea’s new anti-age discrimination law. *J Korean Law*. 2009;9:245.
- 60 Shankardass MK. Policy initiatives on population ageing in select Asian countries and their relevance to the Indian context. In:

- Giridhar G, Sathyanarayana KM, Kumar S, James KS, Alam M, eds. *Popul Ageing India*. Cambridge University Press; 2014:155–179.
- 61 Horhota M, Chasteen AL, Crumley-Branyon JJ. The many forms of ageism: age differences in experience type, emotional impact, and coping strategies. *Innov Aging*. 2018;2(suppl 1):614–615.
- 62 World Health Organization. Campaigning to tackle ageism. 2020.
- 63 Sampogna G, Bakolis I, Evans-Lacko S, Robinson E, Thornicroft G, Henderson C. The impact of social marketing campaigns on reducing mental health stigma: results from the 2009–2014 Time to Change programme. *Eur Psychiatry*. 2017;40:116–122.
- 64 Okun S, Ayalon L. Eradicating ageism through social campaigns: an Israeli case study in the shadows of the COVID-19 pandemic. *J Soc Issues*. 2022:1–26. <https://doi.org/10.1111/josi.12540>.
- 65 Rowe JW, Kahn RL. Successful aging. *Gerontologist*. 1997;37(4):433–440.