# Age for change: Tackling ageism in the workplace

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In recent years, several European governments have introduced policies to improve older employees' employability and ban age discrimination from the workplace. Notwithstanding these efforts, ageism continues to be a black spot on Europe's labor market (Abrams, Russell, Vauclair, & Swift, 2011). As workforces worldwide grow older, the number of older employees that are susceptible to the psychosocial stressors of age stereotypes (AS) and discrimination will increase significantly. Despite this, few systematic attempts have been made to combat AS in the workplace (e.g., Paluck & Green, 2009; Posthuma & Campion, 2009). This paper argues that there is a clear need for theory- and evidence-based strategies to design, implement and evaluate interventions aimed at reducing AS in the workplace. Taking a step in that direction, recommendations for AS reduction interventions in the workplace are presented.

## AS in the workplace: Content and Psychosocial Consequences

Stereotypes about older employees comprise a combination of negative and positive dimensions (Bal, Reiss, Rudolph, & Baltes, 2011; Posthuma & Campion, 2009). In diverse cultural and organizational settings, older employees are perceived as less flexible, creative and adaptable to change, but also as more reliable and trustworthy compared to younger employees (e.g., Chiu, Chan, Snape, & Redman, 2001; Van Dalen, Henkens, & Schippers, 2010). Despite their prevalence, dominant stereotypes about older employees are often erroneous (Ng & Feldman, 2013). In fact, there is a business case for hiring and retaining older employees, as they engage slightly more in organizational citizenship behavior (Nauta, Bruin, & Cremer, 2004), have lower rates of absenteeism, and are generally more committed (Brosi & Kleiner, 1999).

Outcomes of AS are commonly recognized as age discrimination (Posthuma & Campion, 2009). In Europe and abroad, older employees face considerable barriers to re-enter employment (OECD, 2006; Wood, Wilkinson, & Harcourt, 2008). As a result of AS in the workplace, older employees may be more severely sanctioned for mistakes they make (Rupp, Vodanovich, & Credé, 2006), more frequently laid off (Posthuma & Campion, 2009), receive fewer training and promotion opportunities (Taylor & Walker, 1998) and poorer performance evaluations (Posthuma & Campion, 2009). Coping with these and other forms of discrimination has been shown to be a significant stressor in the lives of older employees, with several psychosocial consequences. Perceived everyday age discrimination in the workplace negatively effects job satisfaction (Taylor, Mcloughlin, Meyer, & Brooke, 2012), commitment, perceived power and job prestige (Redman & Snape, 2006) and may lead to lowered self-efficacy (Maurer, 2001). In order to cope with the threat of being part of a stigmatized group, some older employees decide to leave their employer (Johnson & Neumark, 1997) or retire early

(Desmette & Gaillard, 2008).

Despite the importance of the topic, surprisingly few systematic attempts have been made to reduce AS in the workplace (Kulik, Perry, & Bourhis, 2000; Paluck & Green, 2009). As a consequence, both scholars and practitioners are left largely in the dark as to what distinguishing factors can diminish AS. To facilitate and motivate future research, in the following recommendations for AS reduction interventions in the workplace are presented.

## Recommendations for AS reduction interventions

Drawing from literature in the field of health promotion, we recommend that AS reduction interventions are designed and implemented in a structured fashion, in four major phases: diagnosis, development, implementation and evaluation (Green & Kreuter, 1999). Comparable phases have been used to effectively promote (psychosocial) health in the workplace (Goldhar, LaMontagne, Heaney, & Landsbergis, 2001). Furthermore, to be most effective, primary AS reduction interventions should be directed at managers. First, managers' behaviors may be seen as exemplars by other organizational members (Carmeli, 2008). Second, and most importantly, managers' AS significantly affect perceived age-discrimination climates (Kunze, Boehm, & Bruch, 2013).

The central aim of the diagnosis phase is to conduct a needs assessment to identify the critical beliefs about older employees among managers in the target organization where the intervention will take place. The prominence of AS differs per organizational context (Posthuma & Campion, 2009), making it necessary to identify the specific AS beliefs among managers. The subtle nature of AS warrants caution when relying on self-reports, especially because stereotypes about older employees operate – in part – on an unconscious and implicit level (e.g,. Malinen & Johnston, 2013).

Acknowledging the subtle nature of AS in the workplace, alternative methods to measure AS are therefore recommended (e.g., Paluck & Green, 2009). Potentially, actual behavior can be observed by, for example, measuring the relative number of older and younger employees that are assigned to training activities or received promotions (Taylor et al., 2012). Additionally, it is suggested to complement explicit questionnaires with implicit measures, such as the Implicit Association Test (Greenwald, Mcghee, & Schwartz, 1998).

Secondly, in the development phase, the objectives of the intervention should be defined on the basis of the needs assessment results. The specific stereotypical beliefs that will be targeted and associated outcome measures should be formulated. Theory- and evidence-based insights should be used to design an optimal intervention that may accomplish desired change in AS. Three possible strategies are suggested that are worth investigating further: awareness and concerns, motivation to avoid AS and practical recommendations. Because there is an urgent need for AS reduction interventions in the workplace, it is suggested to combine these strategies in an attractive and effective web-based environment, tailored to the needs assessment of specific organizations, while easily adaptable and implementable elsewhere. Close collaboration with managers that will take part in the program is vital in this phase, to warrant actual adoption (see Bos, Schaalma, & Pryor, 2008).

Before people become motivated to avoid stereotyping, they firstly must be aware of their biases, and secondly concerned about consequences of prejudice (Plant & Devine, 2009). Providing managers with feedback about

their implicit level of AS, as measured in the first phase, might be an effective manner to make them aware of their unconscious AS. Additionally, dominant AS found in phase 1 should be discussed, and it should be clarified that these beliefs result from a lack of accurate information on the productivity characteristics of older employees. To target concerns, managers should be informed about the possible consequences of their AS across diverse workplace situations. Here, the goal is to increase managers' insights into the negative effects that AS may have on the psychosocial health of individual employees and, consequently, the sustainable profitability of their organization. Similar approaches have been shown to successfully increase awareness of bias and concerns about its effects, ultimately leading to long-term reduction of implicit prejudice (Devine, Forscher, Austin, & Cox, 2012).

A second strategy in the development phase is to target managers' motivation to avoid AS. People who are motivated to avoid stereotyping are less likely to activate and apply stereotypes

(Kunda & Spencer, 2003). The motivation to avoid stereotyping may be intensified by a desire to comply with egalitarian social norms (Plant & Devine, 1998). In an organizational setting, this motivation can, for example, be reinforced with organizational non-discrimination disclaimers and visible statements which communicate that AS is not tolerated.

Last, AS reduction interventions should enhance managers' self-efficacy to address workforce aging, by offering practical recommendations on how they can reap the benefits of organizational demographic changes, while avoiding its challenges. An important part of this guideline should be an example of diversity-friendly HR policies, because the endorsement of these policies has been shown to negatively influence perceived age-discrimination climates (Kunze et al., 2013).

In the third phase, an implementation strategy should be designed. Again, it is vital to closely collaborate with the program participants. Both the practical implementation as well as the maintenance of the program should be planned

Table 1

*Recommendations for AS reduction interventions in the workplace*

| Phase | 1. Diagnosis | 2. Development | 3. Implementation | 4. Evaluation |
|---|---|---|---|---|
| Recommendations | Conduct a needs assessments to identify critical AS among managers in target organization.<br><br>Use observational data and a combination of explicit and implicit measures. | Formulate outcome measures based on phase 1.<br><br>Collaborate with target group.<br><br>Use theory- and evidence-based strategies to design the AS reduction intervention:<br><br><br>Awareness and concerns<br>Motivation to avoid AS<br>Practical recommendations | Collaborate with target group.<br><br>Encourage and plan program maintenance. | Measure effectiveness in RCT.<br><br>Track possible side-effects. |

and discussed. The flexibility of using a web-based intervention is likely to prove its benefits during this phase, allowing managers to follow the training when they do not have other formal obligations.

In the fourth phase, the effectiveness of the intervention should be determined. Systematic and rigorous evaluations of workplace interventions targeting AS are necessary to draw conclusions about effectiveness, both in terms of the process and outcomes, preferably using a randomized controlled trial (Paluck & Green, 2009). Also possible negative side-effects should be monitored, such as resistance to the intervention. Table 1 provides a summary of the recommendations.

## Conclusion

Although the number of employees at risk of AS will increase due to workforce aging, only few systematic attempts have been made to combat AS in the workplace. To facilitate and motivate future research on this topic, challenges and opportunities for AS reduction interventions are discussed, and recommendations formulated. These recommendations contribute to insights into how AS can be combatted in the workplace, and herewith help to prevent significant psychosocial stressors in the working life of the rapidly growing group of older employees, while simultaneously improving their actual employability. In age-tolerant organizations, older workers will experience more formal and informal employability opportunities, such as equal access to professional training and career development, which will contribute to both the psychosocial wellbeing and sustainable employability of older workers.

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