

Language in Society

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Language, Society and the Elderly

Discourse, Identity and Ageing

Nikolas Coupland, Justine Coupland and Howard Giles



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Language and Later Life: Incipient Literatures

The language sciences have generally been slow to contribute to our understanding of social ageing. There is a dawning recognition (which has come later to the UK than to the USA) that academic research, like the broader community, must revise its assumptions and upgrade its knowledge about a rapidly ageing population. It is common to come across statistical predictions of profound demographic changes in Western societies producing an enduringly large 'elderly' segment of the population living longer into a healthier old age. Gravell (1988), for instance, notes that 11.3 per cent of people in the UK in 1980 were over 65, while it is predicted that this figure will rise to 18.3 per cent by 2030 (for an overview of trends, see Tinker, 1984). From a specifically generational perspective, these trends are establishing vividly new patterns of within-family relationships. Hagestad (1985), for example, reminds us that until very recently it was only a lucky few young adults who had living grandparents. Now we assume multigenerational ties are normal, and count on them to be durable (p. 34). Patterns of family composition are changing so rapidly that, Hagestad argues, the grandparenting role no longer has any clear normative expectations attached to it (p. 36). In many respects, then, we are, societally, in the process of rediscovering and even reconstituting cross-generational relations, and even ageing itself.

But demography alone does not explain the absence of a sustained literature upon which this book and the developing field of 'gerontological sociolinguistics' might have drawn. After all, if we are only now rediscovering the elderly, it is because we have studiously overlooked them in the past, for what McCready (1985) calls 'murky and ineffable reasons' (p. 49). Our academic neglect of older people

has perhaps mirrored society's own reticence to engage with older people and ageing concerns. For whatever cause, the elderly do not as yet feature at all consistently as a visible social group within the paradigms of sociolinguistics, the social psychology of language, conversation and discourse analysis – indeed, within the language and communication sciences as a whole. When language research has considered age and human development, this has almost uniquely been taken to mean *child* language development.

Still, several important overviews of 'communication and ageing' have appeared. It is, in fact, the (predominantly North American) tradition of communication research – for example, the work of the Speech Communication Association's Commission on Communication and Aging – that has been most conscientious in thematizing life-span concerns and ageing itself as appropriate and necessary issues for linguistic research. But in many cases it has been the clinical psychological and psycholinguistic traditions that have dominated in published overviews – for example, Bayles and Kaszniak, 1987; Maxim and Thompson, 1990; Obler and Albert, 1980; Wilder and Weinstein, 1984. For more interdisciplinary perspectives, see also N. Coupland, Coupland and Giles, in press; Giles and Ryan, 1986; Nussbaum, Thompson and Robinson, 1989; Oyer and Oyer, 1976; and Shadden, 1988. Despite these efforts, the research we shall survey in this chapter, as a backdrop to the volume's own contribution, is incipient and partial in several respects. At the same time, it should be seen as raising issues that no other sociolinguistic domain can afford to ignore. Inevitably, the life-span perspective (explicitly argued for by Nussbaum, 1989) will both inform and challenge established findings in the study of virtually any context of language use. Generalizations made in other research areas are, no doubt, skewed by under-representing elderly populations' behaviours, beliefs, orientations and assessments.

In this chapter's introductory review we shall mainly be concerned to identify general orientations to language and later life that have emerged or are emerging. In doing this we hope to contribute to a debate about the appropriate priorities for gerontological linguistic and communication research, and to introduce and defend the essentially qualitative, interactionally grounded methods exemplified in later chapters. Although we shall see that there is a valuable fund of existing empirical work to draw upon, there is a need to reconsider theoretical and ideological foundations before significant, concerted

progress can be made. In particular, we shall review existing work in relation to two key concepts: *diachrony*, the perspective on change over time, and *decrement*, progressive decline in health or competence. These concepts are bound to be relevant to sociolinguistic studies of ageing, but they can be invoked in crucially different ways.

A whole tradition of existing work, the deficit paradigm, is in danger of adopting a stereotypically based set of assumptions about how diachrony and decrement 'naturally' relate to ageing as a process. The deficit perspective itself determines what we should know and research about elderly populations; it predisposes us to investigate how older people's linguistic competence may be lacking in certain regards, and how their involvement in conversational interaction may be problematical. The second and converse orientation, which we discuss under the heading 'The anti-ageism paradigm', articulates a more liberal ideology, and resists assumptions about 'natural' decline with years. It treats these assumptions as pernicious and ill-founded.

We review empirical studies in these two traditions after a more detailed discussion of how diachrony and decrement surface as themes in research on language and ageing.

Involving Diachrony and Decrement

The study of linguistic and communicative impairment is in some ways an obvious component of gerontological linguistics. Specific pathologies and syndromes of impairment, such as Alzheimer's (Emery and Emery, 1983) and Parkinson's disease, Huntington's chorea, and related aphasia (cf. Cummings, Benson, Hill and Read, 1985), are probabilistically associated with late life (Beasley and Davis, 1981). But, from another perspective, it is at least as important to establish the normal elderly as a population open to language and communication research, and to resist the assumption that the normal linguistic condition of late ageing is predictably and progressively decremental; it clearly is not. Boone, Bayles and Koopmann (1982) are adamant that 'the typical person over age 65 communicates very well. Age per se is not a deterrent to "good communication"' (p. 313). It is, of course, true that studies of impairment are necessary, both in their own right and to establish the boundaries of some

specific dimensions of normal language and communication in ageing. But there is also an obligation upon socially based research to redress the balance and move away from the cognitive and psycholinguistic concerns that have come to dominate the literatures. It is ultimately inadequate to characterize the linguistic and communicative dimensions of normal social ageing as the avoidance of decremental pathologies.

Concern with change over time also appears to surface 'naturally' in gerontological contexts, if only because older people's most obvious defining characteristic is the fact that they occupy a certain band of the life span. But, again, this perspective can be unnecessarily limiting. It is just as feasible to approach the elderly as a relatively stable social group as to assume that ageing is inherently a decremental process. The issue is not merely terminological. Important implications follow from old age being researched in relation to earlier and later time periods, not least that such treatments impose an essentially *transitional* character upon the condition of old age.

Even where the focus of interest is apparently a more static phenomenon – a social group, 'the elderly' – some diachronic focus can be implicit. Research questions are often generated relating to the group's language or communication behaviour, but framed by past or projectable changes in those behaviours. And since change, for the old, is represented in stereotyped formulations as ineluctable progress towards incapacity and, eventually, death, the keyword is not generally development but in fact, again, *decrement*.

Therefore, our own starting point is that the diachronic perspective and the associated expectation of decremental change are built in to the mythology of ageing and in the ideologies and common practices of linguistic research into normal ageing. If we leave them unchallenged, these assumptions systematically misrepresent the conditions and experiences of later life. Linguists, sociologists and psychologists are in danger of asking excessively narrow questions about elderly language and communication: questions about declining competence. On the other hand, there is also a naivety in the converse position, which explicitly or implicitly denies the importance of diachrony and decrement as elements of our experiences of ageing. Later chapters will show how the social identities of many elderly people are bound up with *precisely these* parameters, influencing their conversational goals and styles, and those of younger people they interact with. So,

perhaps ironically, diachrony and decrement come to be crucial factors in the interpretation of elderly talk; but as themes in its constitution, and not as premisses for its interpretation.

Approaches to the Elderly as a Social Group

We have suggested that it can be damaging to approach the elderly exclusively as a social group in transition. There is certainly a need to give attention to older people as an independent social collectivity, for reasons parallel to those that have led to the existence of, for example, a feminist sociolinguistics, a discourse and racism paradigm, or a (child) developmental linguistics. We can point to unique issues of social practice and policy affecting the elderly as a group: the characteristic communication networks of some elderly groups (for example, in retirement, Muir and Reitzes, 1981); their particular needs from the health and caring services (Montgomery and Borgatta, 1987); persistent (predominantly negative) social attitudes to old people, and associated stereotypes (Braithwaite, 1986; Crockett, Press and Osterkamp, 1979) and social inequalities (Ward, 1984). All of these factors act together to generate recurring patterns of elderly and intergenerational language use, which research has only recently begun to explore.

Where we find stable group characteristics or processes, objective or subjective, we can draw on at least three distinct interpretations of intergroup variation. First, we might suggest that the very condition of being elderly is enough to explain behavioural configurations: that is, an appeal to *inherent causes*. From this perspective it might seem natural to look to cognitive factors at the root of, for example, 'deficiencies' that are taken to reflect elderliness itself.

Second, it is possible to make derivative inferences, assuming that the roots of elderly speech or language characteristics lie in the absence of change, or in limited change from time past: appeal to *historical causes*. A clear instance of this line of interpretation is Labov's 'apparent time' methodology for the study of dialect change. Labov (1972), for example, has used elderly informants to identify changes in the pronunciation of postvocalic /r/ in New York City coinciding with the Second World War. In this methodology old speakers are not under investigation in their own right, but are taken

as exemplars (within recognized limits) of 'the way it was' dialectally. The technique is highly informative in its own terms, though it risks marginalizing specifically gerontological issues in language.

A study by Clyne (1977) raises the possibility of a third set of interpretive possibilities. The pattern of L1 regression (reverting to first-language use in a second-language community setting) that Clyne finds among elderly German-English and Dutch-English bilinguals may, he suggests, be best interpreted as the consequence of one or more factors in the elderly's current social circumstances: that is, an appeal to *environmental causes*. Elderly people, as in the case of Clyne's data, may revert to their first languages because they participate in less extensive or less differentiated sociolinguistic networks of the sort that would require multiple language use or code-switching. (Clyne, in fact, considers several different explanations for L1 regression.) Kutner (1962) has likewise distinguished social/socio-psychological from physiological/cognitive dimensions of intrinsic elderly characteristics.

Socially and socio-psychologically based interpretations of elderly language use are remarkably rare. Yet, the *contexts* of communication across age-groups can be demonstrably distinct, even to the extent that we can reasonably regard the generations as culturally distinct groups (cf. Giles and Coupland, 1991a). Bengtson and Kuypers (1971) argue that the 'drama of generations' is sustained by unique drives and anxieties, particular 'generational stakes' that each group holds in relation to other groups.

A recent investigation of different generation groups' beliefs about talk itself as an activity suggests that these cultural differences may show up quantitatively in elicitation tests. For example, in interviews, some groups of older people (British, in their 60s) were found to construe talk in more positive terms than younger groups (Giles, Coupland and Wiemann, in press). The younger (student) groups in the study appeared to have negative stereotypical conceptions of the elderly's own beliefs about talk. They thought elderly people valued small-talk greatly, with a strong tinge of perceived egocentricism. The older groups believed that young people were more sceptical about the value of small talk than older people in general. These subtle differences in belief structure, which need to be refined and clarified in new studies, may well lie at the root of the sorts of cross generation differences in styles and contents of talk that we are only now starting to become aware of.

A social group perspective on the elderly does not in any way stop us recognizing *diversity*, and often extreme diversity, within populations we decide to call 'elderly'. Age in years, chronological age, of course offers us scope for differentiating elderly populations, given that 'elderliness' by some token can comprise at least three decades of life for many people. It is conventional to distinguish at least two numeric elderly age-groups, the 'young-old' and the 'old-old' (distinguished by an age boundary in the mid-70s). Socio-economic class, sex, generational position (grandmothers versus great-grandmothers, etc.) and many other cross-cutting dimensions could, within their own limitations, provide further independent variables, few of which have been successfully controlled in contrastive studies. But age in years itself, or, for that matter a classification based on cohort membership (groupings by birth dates), may be a poor predictor of generation placement. Hagestad (1985) illustrates this by saying that 'an 18-year-old can have maternal and paternal grandfathers who are not only strikingly different in age and vigor, but who also represent sharp contrasts in life experiences' (p. 32).

Another perspective on diversity is the ecological one developed by Bengtson, Kasschau and Ragan (1977) in considering the impact of life events, triumphs, disasters and changes upon behaviours through the life span. Ethnicity and intercultural variation are further crucial areas (cf. Markides and Mindel, 1987; Palmore, 1975) where we have very little language variation data as yet.

But an important observation for the approach we shall adopt in this volume is that objective criteria for differentiating elderly populations may often take secondary place to subjective processes in their explanatory value. Smith (1985) has noted that individual men and women must not be assumed to be perfect exemplars of their gender groups. In the same way it is likely that purely objective dimensions of ageing will have low predictive value in accounting for patterns of language use and communicative behaviour in general. There is little agreement about the earliest age in years at which it is reasonable or necessary to consider individuals to be 'elderly', except when our social institutions impose arbitrary boundaries, such as statutory retirement ages or the age-bands used by life-insurance companies. In fact, important departure-points for our own studies are that age category labels are: (a) socially constructed by particular communities, for particular purposes; and (b) subjectively interpreted by individuals (cf. Cole and Gadow, 1986). Therefore, a person's

'psychological age' (Montpau and Lachman, 1989) may be a better candidate for interpreting behavioural differences. Similarly, A. M. Rubin and Rubin's (1982, 1986) measure of 'contextual age', an aggregated index of life-circumstantial and subjective factors, has proved to be a useful predictor of patterns of television viewing.

Some research has focused explicitly on typologies of elderly personality prototypes, as in the work of Brewer, Dull and Lui (1981). Neugarten, Crotty and Tobin (1964) empirically derived a typology of grandparenting styles, which they labelled 'formal', 'fun-seeking', 'distant figure', 'surrogate parent' and 'reservoir of family wisdom'. Although these typologies still adopt a more deterministic view of middle age and elderly identity profiles than seems appropriate for interactional research, they are a valuable reminder of how inadequate, and often ageist, simple group designations of 'the elderly' can be.

There are many challenges here for future language and communication research to explore these dimensions of potential variability among middle-aged and older people. Indeed, we want to argue that analyses of interaction have a key role to play in the social scientific study of ageing generally. A discourse analysis perspective recognizes the constitutive potential of talk as a vehicle for *formulating* life positions, and responses to them by old and young alike, interactively and relationally. This is the case we argue at the end of this chapter and then illustrate in the analyses of intergenerational talk presented in later chapters. Before that, we review the linguistic perspectives that have come to dominate ageing research.

The Deficit Paradigm

In the existing literature, language and communication in normal ageing are most often characterized through an appraisal of residual competence, with research focusing on precisely those dimensions of language use that are known potentially to show, or are suspected of showing, decrement. As a result, language use in normal ageing tends to be represented by providing evidence of an adult group's non-impaired competence in some respect, or sometimes their achieving a higher score on some index than an impaired group achieves. Sometimes, the 'normal elderly' themselves will be shown to have

declined on some psycholinguistic measure in relation to a younger group. Very many facets of speech production, linguistic knowledge and processing have been investigated from these perspectives over more than three decades, producing complex and sometimes inconsistent results. We refer below to only a sub-set of representative studies.

One band of research has characterized the acoustic and articulatory characteristics of the ageing voice. Studies have shown that elderly voices are regularly discriminable from younger voices. Ptacek and Sander (1966), for instance, showed that people over 65 and under 35 could be identified even on the basis of single prolonged vowels. Ramig (1983) found that physiological ageing is associated with increased vowel spectral noise, stemming from degenerative changes in the larynx. In Liss, Weismer and Rosenbek's (1990) study, 87- to 93-year-old male voices sometimes showed notable similarities to the voices of Parkinson's disease patients. Clearly, then, voice quality, just like pitch perturbation and pitch itself (see below) has the potential to act as a social marker of elderly speech (Helfrich, 1979, gives a useful general review).

On the issue of receptive processing and recall of language, Obler, Nicholas, Albert and Woodward (1985) report a linear decline by age (across decades from 30s to 70s) in scores on a sentence-comprehension and -completion task. In Feier and Gerstman's (1980) study declining scores were again found among people in their 60s and 70s (and not in younger groups) on a task requiring comprehension and production of complex sentences. Goodglass and Kaplan (1972) found an age effect on levels of comprehension of written sentences and paragraphs, but none on an auditory comprehension sub-text.

In an influential series of studies of discourse comprehension and recall, Ulatowska and colleagues (1985, 1986) found significant differences between young-old (64-76) and old-old (77+) subjects on test items requiring inferencing from the original text. S. K. Gordon and Clark (1974) similarly found lower levels of information recall among older subjects. More recent studies have continued to report older people's inferior levels of understanding (for example, of information about medical prescriptions (Morrell, Park and Poon, 1980)) and recall relative to young adults. But some have pointed to how effects are mediated by the particular types of language texts involved. Tun (1990) shows that age-related differences in recall are

partially reduced when the task involves remembering *narrative* texts. Petros, Norgaard, Olson and Tubor (1989) report similar findings.

In terms of sentence production, Obler (1980) found older speakers (50–80) used more elaborate and indefinite terms than younger speakers. Gold, Andres, Arbuckle and Schwartzman (1988) identified so-called 'off-target verbosity' among elderly speakers, when speech 'quickly becomes a prolonged series of loosely associated recollections increasingly remote from, relatively unconstrained by, and irrelevant to the present external contextual stimuli' (p. 27). The authors found no direct association between such talk and age itself, but suggest that it 'becomes manifest in older people who are extroverted, socially active, not concerned with others' impressions of them, undergoing more stress and experiencing declining performance in nonverbal cognitive functioning' (p. 32). While Gold et al. are not able to commit themselves to a single interpretation of their findings, they consider cognitive impairment once again as a candidate explanation for behavioural characteristics of elderly talk.

From a series of formal tests of sentence comprehension and manipulation (including many varying in syntactic complexity), Emery (1986) reports no significant age differences, at either phonological or lexical levels, except in speed of response. But in morphological respects and on every measure of syntactic function she finds repeated, significantly lower levels of performance among the normal elderly (aged 75–93) than among the pre-middle-aged (30–42). Kynette and Kemper (1986) likewise report that subjects in their 70s and 80s produced more syntactic errors and used less complex syntactic structures (which impose lower memory demands) in interview responses than people in their 50s and 60s. Kemper (1986) also reports that elderly adults (70–89) were less able to imitate complex syntactic constructions than young adults (30–49).

Nebes and Andrews-Kulis (1976), on the other hand, report no decremental age effects in subjects' construction of grammatical strings. Cooper (1990) finds no relationships between age (across people aged 20–78) and several measures of speech production, elaboration, complexity dysfluency, conciseness or information imparted. Adams, Labouvie-Vief, Hobart and Dorosz (1990) report that older people (mean age 66 years) used a 'more integrative and interpretive' style (p. 17) than young adults (mean age 19 years) in written tests of narrative recall.

Bayles and Kaszniak's (1987) balanced conclusion, after a thorough review of a good deal of the available experimental psycholinguistic research on ageing, is that 'The study of possible age effects on the ability to communicate is extremely demanding because effects, when present, are generally subtle, and most tasks are influenced by the subject's intelligence, education, life history, motivation, sensory integrity, mental status, and vigor. Few researchers have been able to control all of these variables in a convincing way' (p. 152). The authors single out comprehension and inferring as the areas of most clearly documented differential performance between young and old: 'Age effects are most obvious when information to be comprehended is new, complex, and implied and the time allowed for processing is short' (p. 153), but they suggest that, in terms of linguistic production, evidence is more difficult to interpret, again suggestive of some decline with age, though not necessarily through deterioration of the lexicon. Contra the findings of Emery (above), Bayles and Kaszniak conclude that 'An individual's knowledge of grammar is well preserved across the life span' (p. 153).

Generally, the deficit paradigm of later life research interprets the notion of 'normality' in confusing ways. In most studies the 'normal' elderly (labelled this way according to criteria of general health, and particularly absence of specific sensory problems) are shown to be performing 'abnormally' in some linguistic/communicative respect, if the norm is defined by young adult performance. So, Emery (1986) concludes from her study that 'diminished linguistic processing appears to be a concomitant of normal aging' (p. 60). In ways that are reminiscent of early and problematical studies in the area of language and social class, ageing research produces results that are very difficult to interpret in any socially sensitive frame. There is generally no consideration of attitudinal or motivational factors that might mediate different levels of performance (why do older people respond more slowly in some experimental conditions?); or of contextual factors (in what range of test circumstances do older people use less complex syntax, understand or remember less?); or of real-life implications (do measured differences have any socially contrastive or 'emic' significance (cf. Robinson, 1972) to everyday people in everyday settings outside of the test situation?); or of semiotic impact (which elderly characteristics, in fact, connote 'elderliness', to whom, and with what evaluative weighting?).

As a rule, the rationale behind the studies we have examined so far

is the assumption that there is a 'normal' continuum of decrement during ageing. Differences in linguistic performance can indeed be shown to exist, if selectively and variably, and we do not mean to suggest that the investigation of linguistic performance (or 'under-performance') during normal ageing is not interesting. Our point is that the very design of this sort of research presupposes that decrement is normal. Even if specific findings do not themselves offer evidence of decrement, the studies have oriented to decrement as the researchable question in linguistic gerontology. The research is framed within the scope of a decrement model, and therefore legitimizes it.

A more elaborate conceptualisation of decrement in later life is the *inverted-U* model, which implies that elderly linguistic and other behaviours are in some specific respects not only moving towards lower levels of competence but moving *back* to the levels and types of behaviour associated with the early years of life. The model feeds off the more general mythological association of the old with children in our society – old age as a 'second childhood'. Realizations of this myth include visual images of the old as physically smaller and stooping (for example, as portrayed on UK road signs near residential old people's homes), and the conventional grouping of elderly people with children – for example given reduced-cost bus and rail-fares and cheaper admission to cinemas, theatres, etc. Myths of the 'success' and 'naturalness' of interaction between elderly people and children are perhaps to be interpreted similarly.

In matters to do with language, explicit claims are sometimes made about regression in later life. Emery (1986) concludes that there is 'a direct relationship between language deficits and age, a direct relationship between language deficits and linguistic complexity, and what appears to be the concomitant inverse relationship between sequence in language deterioration and sequence in [child] language development, i.e. the more complex the linguistic form, the later the development of that form . . . the quicker the deterioration of that form' (p. 57). Even though this same claim has been discredited in aphasia research (Lesser, 1978) and in any case has no practical value for therapists, the elderly-as-child myth seems to recur in other dimensions of ageing research. Beyond syntactic complexity, several characteristics of elderly speech can, with some creativity, be taken to fit the inverted-U. Elderly males' higher vocal pitch and lower speech rate, as reported in some studies (for example Hollien and Shipp,

1972; Mysak, 1959), might be seen as regressive features and stereotypically associated with young children's speech. Egocentricity (one interpretation of Gold et al.'s (1988) verbosity data) is again stereotyped as both an elderly and child characteristic, and so on.

Societal Ageism

As researchers, we are not immune from societal stereotypes and myths (see Kite and Johnson's (1988) meta-analysis of stereotyping studies). Miller (1987) has expressed concern about 'the degree to which our society imputes social and moral meanings [e.g., of "rolelessness"] even to unconditionally legitimate behaviors in the aging role [for example retirement]' (p. 146). In the past, 'rolelessness' (Bengtson, 1973; Rosnow, 1973) and 'disengagement' (Cumming and Henry, 1961) have been put forward as theories to explain social ageing, in a way that is very controversial today. Miller (1987), on the other hand, stresses how society itself problematizes the elderly: 'Medical and social control agents tend to construct an ageing role which emphasizes disengagement, pathology, and the development of secondary deviance . . . These processes tend to present the elderly as a deprived problem group based on the factor of age alone and to undercut the view of normal or healthy aging as part of the life-cycle' (p. 152). According to J. Levin and Levin (1980), an ageist ideological slant pervades gerontological research. They argue that the gerontology literature is 'shot through both with the assumption of decline with age and, perhaps partly as a result of this assumption, with the findings of physical, psychological and sociological deterioration in ageing individuals' (p. 2).

From this viewpoint, the deficit tradition in language research may therefore be just another branch of cultural prejudice against the elderly, with its selective designs and pervasive concern with linguistic decrement. The fact that only modest and qualified evidence of suppressed performance levels has been produced does not seem to have challenged the work's ideological assumptions. We have already referred to some instances where more positively construed elderly communicative characteristics have been evidenced; elderly subjects have sometimes been shown to 'outperform' young communicators.

Smith, Reinheimer and Gabbard-Alley (1981) found that elderly women (mean age 71) coped better with the demands of crowded and close communication environments than young women (mean age 20): 'Task performance among younger subjects deteriorated in close interaction conditions, whereas the performance of older subjects was improved by spacial intrusion. Further, older subjects exhibited positive communication behaviours [including friendliness and involvement] in response to close conversation' (p. 259).

Overall, it seems appropriate to remind ourselves of what Guggenbuhl-Craig (1980), in an intriguing analysis, has called 'the pitfalls of the health/wholeness archetype' (p. 21): the blinkered concern with perfect competence and with individuals' deviations from it to which Western society is prone. If we can remove these blinkers, we can begin to explore the diverse processes through which language and communication impinge upon the experience of old age and on society's orientation to the old.

The Anti-ageism Paradigm

In many approaches to sex/gender, social class and race across the social sciences we can identify a coherent perspective that assumes and tries to demonstrate that its research populations are disenfranchised and undervalued. In social gerontology there is no shortage of statements that elderly people are such a group. Tyler (1986), for example, argues that ageism is structurally integrated into contemporary British society. J. Levin and Levin (1980) review the diverse forms of societal ageism and its origins. As factors in the construction of an ageist climate they identify how social groups concerned with their own status and self-esteem show hostility to minorities they perceive as weak, powerless or inferior. Economic forces create further pressures in the form of competition between young and old over scarce resources and jobs. J. Levin and Levin also recognize a specific condition that they label 'gerontophobia', fear of one's own ageing, of the elderly and of association with death (p. 94; cf. also Bunzel, 1972). Butler (1969) similarly defines ageism as 'a deep-seated uneasiness on the part of the young and middle-aged - a personal revulsion to and distaste for growing older' (p. 243).

A critical manifestation of gerontophobia is to be found in the caring professions, where, according to Norman (1987), 'The poor image of old age inevitably rubs off on those who are working in this field. Work with old people is not a prestigious occupation and there is a vicious circle in that jobs with low prestige tend to attract unambitious or less-skilled workers' (p. 9). For J. Levin and Levin (1980), ageism shows up as a propensity to 'blame the [elderly] victim', to blame 'biology or the ravages of time' for the states and conditions of old age, rather than focus on the social forces that make old age 'a difficult, even dreaded stage of life' (p. 35). Age-prejudicial forces have been documented in several other domains too: literature (Berman and Sobkowska-Ashcroft, 1986), humour (Palmore, 1971), magazine fiction (Martel, 1968), television drama and commercials (Kubey, 1980).

Research has set out to demonstrate the ways in which parts of the language system itself play a part in the reproduction of ageist attitudes. Covey (1988) traces the changing meanings of terms relating to old age. The etymology of the word 'old' itself, for example, associates it with the meaning 'to nourish', and it has for a long time carried connotations of experience, skill and wisdom (p. 293). More recently, it has been associated with meanings of endearment ('old friend', 'Old Bright'), but also conservatism ('old guard'); it has been used in references to the Devil ('Old Harry', 'Old Nick') and very often in derogatory terms ('old hag', 'old fogey', 'dirty old man'). Covey claims that 'contemporary older people do not like to use the word old in describing themselves or their membership groups' (p. 293), and concludes generally that terminology in this area reflects 'a decline in the status of the elderly and the increased focus on the debilitating effects of aging' (p. 297).

Nuessel (1984) similarly argues that there is a vast lexicon of ageist language in everyday usage, within which most terms are used to describe or refer to the elderly in a pejorative way, or at least carry negative overtones. Instances relating to females, often prefixed by 'old', (most from Nuessel) include: 'biddy', 'crone', 'bag', 'hag' and 'battleaxe'; referring to males: 'gaffer', 'duffer' and 'geezer'; 'old fool', 'old fart' and others are also in wide currency. Pejorative adjectives often used to describe elderly people include: 'cantankerous', 'crotchety', 'fussy', 'garrulous', 'grumpy', 'rambling'. 'Wrinklies' has recently been adopted fairly widely in the UK as a demeaning group noun. Studying group labels experimentally in the USA, Barbato and

Feezel (1987) asked people of different ages (17-44, 45-64, 65+) to evaluate the connotative meanings of ten words referring to an older person. Some terms (including 'mature American', 'senior citizen' and 'retired person') were positively rated on the scales 'active', 'strong', 'good', 'progressive' and 'happy'. On the other hand, 'aged', 'elderly' and nouns using 'old' were evaluated more negatively. An interesting finding was that there were few differences between the responses of the different age groups.

There is much scope for further research, both observation and controlled experimentation, into the connotative content of age-related vocabulary. It will be important to distinguish terms of reference (ingroup and outgroup) from terms of address (cf. Wood and Ryan, *in press*), and to establish where, when and by whom they are used. By these means we should be able to produce better-founded and more particular statements of the distribution of age-related terms and expressions in everyday usage, and of the evaluative effects they produce in particular listeners. Research also needs to consider carefully the *discursive* contexts in which these terms are used; for example, whether in serious, glib or humorous talk, whether in general reference or perhaps particularly when speakers account for their reactions to interaction with elderly people. Our interpretation of the significance of these usages, and the extent to which we do in fact need to view them as ageist, depends on this more sophisticated approach. Certainly, the hope that Oyer and Oyer expressed in 1976 of making vocabulary relating to the elderly 'more accurate and complete' and so of reducing or eliminating ageism from language seems premature.

Talk to the elderly has been the subject of some of the most sustained research to date, mostly driven by concern for what is thought to be the proper treatment of older people in conversation. Ashburn and Gordon (1981) compared specific formal and functional characteristics of care-givers' and volunteers' speech among themselves and to elderly residents in a nursing home. They found that staff and volunteers used more questions and repetitions to elderly residents than among their peers, and that staff used more questions to non-alert than to alert residents. Rubin and Brown (1975) found that students used significantly shorter utterances, and hence arguably simpler syntax, to explain the rules of a game to older adults (who they assessed to have lower intellectual abilities) than to young adults.

Again there is a need for more contextual sensitivity in work of this sort, and quantitative contrastive designs will inevitably tend to obscure the conversational dynamics involved. Multilevel research has, however, begun to produce important findings. Greene, Adelman, Charon and Hoffman (1986) found no differences in the frequencies of questions, compliments or negative remarks made by physicians to older (over 65) and younger (under 45) patients in medical interviews. But they still concluded that it was more difficult for elderly patients than for young patients to 'get their agendas addressed'; also that 'physicians were less respectful, less patient, less engaged and less egalitarian with their old than with their young patients' (p. 121). Greene et al. take these differences of approach by physicians as evidence of ageist professional practices in medical encounters (see also Adelman, Greene and Charon *in press*).

The focus of Caporael and colleagues' research (Caporael, 1981; Caporael and Culbertson, 1986; Caporael, Lucaszewski and Culbertson, 1983; Culbertson and Caporael, 1983) has been the use of secondary baby-talk (BT) by care-givers to the institutionalized elderly. BT, defined as a specific set of prosodic configurations including high and variable pitch, was found in the 1981 study to be frequent in care-givers' talk to residents (up to 20 per cent), and to be indistinguishable when content-filtered from primary BT (that is, talk actually addressed to children). As Caporael's term 'BT' shows, the research parallels other sociolinguistic traditions investigating simplified addressee registers, not only baby-talk (or 'motherese', cf. Snow and Ferguson, 1977) but also 'foreigner talk' (Ferguson, 1981).

While overlaps in language and communication styles to these diverse groups are of course interesting, and while there might be implications in these similarities for a universal theory of linguistic complexity and simplification, each demographic context has its unique considerations of social motivation, evaluation and consequence (De Paulo and Coleman, 1986). For example, Brown (1977) considers a possible pedagogic intent behind using simplified registers to children; descriptively similar styles of language used to non-native speakers may conceivably be intended to suppress linguistic and cultural integration (Valdman, 1981); simplified talk to the visually handicapped may be demeaning because it overgeneralizes from a particular sensory handicap (N. Coupland, Giles and Benn, 1986). Therefore, an approach that glosses 'talk to the elderly' as one of a family of speech registers will inevitably obscure the social

processes at work. In fact, Caporael and colleagues' important research (to which we return below) clearly demonstrates the value of integrating sociolinguistic and socio-psychological analyses in specific research contexts.

The quantitative social evaluation paradigm has also considered age-discriminatory responses to vocal styles. The stimuli are audio recordings of elderly and young-adult speakers, either genuine or (most often) imitated, with vocal characteristics that differ along specified dimensions – the so-called 'matched guise' technique. Stewart and Ryan (1982), for example, found that younger adults can be rated more positively than older adults in competence-stressing situations (cf. also K. H. Rubin and Brown, 1975). Research findings have not been entirely consistent. Crockett, Press and Osterkamp (1979) found relatively favourable reactions to older speakers, and attributed the finding to the effects of judges' negative stereotypical expectations of elderly speakers being disconfirmed. In Ryan and Johnston's (1987) study the variable 'effective' versus 'ineffective' message was the only factor significantly influencing competence ratings across younger and older speakers, with no main effects emerging for age itself.

Ryan and Cole (1990) asked two groups of elderly women to evaluate messages addressed to them in different speech styles. They found that the younger group, who lived in the community, were less tolerant of styles used in speech to them; the older, institutionalized group perceived and preferred speech that was slower, simpler and clearer. Ryan and Cole identify a predicament for those wishing to speak most 'effectively' to older people: that speech styles that convey support and nurturance are also liable to suggest an expectation of diminished competence.

Giles, Herwood, Coupland, Harriman and Coupland (submitted) again found that, in a matched-guise design, speech rate was a more potent variable than either accent (standard versus non-standard voice) or age (older versus younger speaking guise). But there was also some evidence that an elderly voice in conjunction with a non-standard accent and a low speaking rate conspired to produce very high ratings of perceived 'vulnerability'. In an open-ended phase of the investigation respondents were found to invoke stereotypes of age and class to rationalize the evaluative rankings they had made across all conditions of the study. For example, while the non-standard speaking guises called up images of a homely, provincial speaker, the

elderly vocal guises were associated with incompetence, forgetfulness and disaffection.

Other studies have shown detrimental age stereotypes intervening not only in abstract judgements but also in behavioural choices. Carver and de la Garza (1984) found that, after a supposed road accident, the sorts of information asked for from younger and older drivers varied in stereotype-consistent ways. Drivers labelled 'elderly' tended to be asked to give information about their physical, mental, sight and hearing competence; 'young' drivers tended to be asked whether they had been speeding or had drunk alcohol. In an extension study Franklyn-Stokes, Harriman, Giles and Coupland (1988) found similar patterns of differential questioning, though distributed incrementally across ages 22, 54, 64, 74 and 84 years (these were the ages given for the supposed addressee). Health and physical condition featured increasingly often in subsequent questions as the age of the driver increased. To this extent, information seeking can be seen to be ageist across the adult life span.

Generally, then, research in what we have been considering the anti-ageism paradigm has pointed to very different sorts of association between language and prejudicial beliefs about elderly people. Identifying speakers as 'elderly' often results in downgraded evaluations of their competence, and causes people to act in discriminatory ways towards them. Perhaps even the language system itself has reified society's ageist assumptions in its vocabulary. There is growing evidence that people modify their speech to at least some groups of older people, and some suggestion that these styles can be unwarranted and demeaning. In medical encounters patients of different ages are at times treated differently by doctors, and this could in turn have profound implications for the success of health care (Kreps, 1986). It is not surprising that one of the major growth areas in social gerontology is study of the role of social support in elderly health and well-being, and of how relationships may be able to act as buffers against stress (for example Krause, 1986; Rook and Pietromonaco, 1987; see Giles, Coupland and Wiemann, 1990 for an overview). Certainly there is an important place for sociolinguistic research in this enterprise.

Discourse and Ageing: An Integrative Perspective

The studies we report in later chapters, and gerontological sociolinguistics generally, can find a useful basis in the wide-ranging research we have reviewed in this chapter. On the other hand, many of these studies have worked in laboratory settings; inevitably, most of them have approached language and social ageing in a rather fragmented way. As we have already suggested, much of the existing work is reminiscent of early eras in other sociolinguistic areas, with contrastive, decontextualized and non-interactive designs predominating. There have been very few attempts to cross-refer between research traditions, although studies of attitudes, stereotypes, speech characteristics, addressee styles, interaction and social support all have their place in an adequate sociolinguistic perspective on ageing.

Caporalet and her colleagues have shown the value of more integrated research in their case for understanding the complexity of issues involved in the use of secondary BT styles to institutionalized elderly people. They found that even in one physical setting, speakers' goals and listeners' attributions and evaluations were highly differentiated. The Caporalet et al. study established that care-givers predicted that residents with low functional ability would like to be spoken to with BT, and felt that non-BT speech would be ineffective for interacting with them. Also, it emerged that BT was indeed judged by some institutionalized elderly people to be demeaning, but to be *nurturing* by others. Dependent elderly people were more likely to hear BT as nurturing, and BT was found to be associated with a high frequency of 'encouraging comments'. Other dimensions of 'elderspeak' also may be facilitative in some social situations. Cohen and Faulkner (1986), for example, reported that speech styles with exaggerated primary word-stress had positive effects on elderly people's comprehension and recall. Findings like these mean that we need to be cautious in the claims and judgements we make in particular settings. What may appear a case of ageist behaviour, where negative stereotypes of ageing are taken to dictate language and communication choices to the detriment of elderly recipients, may at times be better described as well-judged and accommodative adaptation.

These contextual considerations show that a variety of research

methods is needed, and that our interpretations will often need to reflect how talk is embedded in multiple layers of textual as well as social and psychological contextual considerations. Since quantitative, contrastive, survey-type designs cannot hope to control such considerations as variables, it seems inevitable that sociolinguistics will increasingly use more qualitative discourse analytic methods. And it is the label 'discourse analysis' that best characterizes the research orientation we adopt in the following chapters, however diffusely the term has come to be used (cf. Potter and Wetherell, 1987). Mainly through close examination of particular sequences of talk involving specific elderly people, speaking either to age peers or younger individuals, we explore a range of questions to do with the management of elderly identity and intergenerational relations.

Unlike most of the approaches we have reviewed in this chapter, we try to adopt a thoroughly interactional perspective. If we are to move beyond quite gross attempts to specify what 'elderly language is like' or how 'the elderly are talked to', we have to reflect the local organization of talk and its textualization – what Maynard (1988) has called the 'interaction order' (p. 312). Appreciating the sequential organization of talk – which has always been the primary goal of conversation analysis – is the basic means of exploring the relational possibilities and constraints of individual conversations as they develop in real time. In fact, a recurring theme of this book is that older conversationalists frequently have their interactional roles, and key aspects of their life-span identities, constructed *for* them by younger people. At many points we are drawn to the conclusion that important subjective dimensions of ageing itself are accomplished interactionally.

At the same time, we assume that conversation sequencing *alone* is too narrow a source for interpretation, and that the broader social and cultural frameworks in which talk is conducted exert powerful, if often unseen, influences on what is said and what is inferred. In talk between the generations there is always the possibility of speakers aligning as age-group members, with their talk being interpreted through a screen of 'intergroup' evaluations and attributions, in Tajfel's (1978) terms. So, our interpretations often appeal to macro as well as micro dimensions of context, to the life experiences, assumptions, priorities and goals of the people whose talk is under analysis. We recognize that this procedure can sometimes be uncomfortably subjective, but we find support in the ethnographic

background work on which our analyses are based: the group discussions and interviews that are occasionally referred to in the text, and our own long-term interactions with the elderly people who constitute our principal research populations.

A Preview

In the next chapter we specify the range of interactional considerations that a discourse analysis, as we conceive of it, must encompass. We draw on case-study data and previous research to identify general strategies of intergenerational talk, and trace their psychosocial origins and their consequences. Using the general concepts of speech accommodation theory (Giles, Coupland and Coupland, 1991), we identify overaccommodative and underaccommodative modes of talk, which lie at the root of many intergenerational conflicts and problems. We use these and related concepts in analysing more extensive interactional sequences in later chapters.

In chapter 3 we examine data from 40 videotaped first-acquaintance interactions between women aged 70–87 and women in their 30s. This is the initial database for several of the discourse processes explored in the volume. We focus on a range of discourse strategies that are involved in the management of *age identity* in different interpersonal contexts. These strategies make salient, and even define, the 'contextual' life positions of older speakers, and of younger speakers relative to them. *Variable* age identities, as regards their independence, mobility, life satisfaction, and so on, are in fact projected by *and for* elderly people in different contexts. We interpret the data as showing the active role that interaction can play in the social construction of ageing.

The focus of chapters 5 and 6 is more particular: the management of so-called 'painful self-disclosure' (PSD) in cross- and within-generation talk. PSD refers to the revealing of personal and often intimate information about ill health, bereavement, immobility, loneliness, and so on. Chapter 5 develops a taxonomy of the interactional alternatives available to disclosers and listeners to introduce, encode, respond to and close PSD sequences. This taxonomy is then used in chapter 6 to overview how PSD is in fact

managed in the 40 interaction corpus as a whole. The patterns we find suggest a range of *positive* identity functions for older people's disclosive behaviour, though such intimacy in first-acquaintance settings also incurs social costs.

• In chapter 6 we consider patterns of *age-telling*, trying to account for the high frequency of this further type of self-disclosure in elderly talk. We again focus on the local management of age-telling, and show how age in years is structurally integrated with appraisals of own and other's health. Age-telling is therefore a further resource for projecting and modifying age identity in talk.

• In chapter 7 we use data from group discussions *about* intergenerational talk, gathering further insights from what older people say about their priorities and goals for talk and how younger people react to the talk of their elders. Discourse analyses of group discussions show something of the intergroup divide across which intergenerational talk can proceed, a filter of generation-specific beliefs and predispositions.

• Lastly, what broader implications follow? The final chapter reviews recent data from three institutional settings, all involved with forms of care for the elderly. The way age- and health-identity are construed can impinge very directly on health itself, perhaps particularly in medical and caring contexts (Kaplan, Barell and Lusky, 1988). Talk in these settings deserves attention – not least from professionals and care givers themselves. We therefore consider aspects of the training that is provided for home helps and nurses who will care for the elderly, and how conversations in fact proceed in long-stay caring institutions. We evaluate the potential for sociolinguistic research to influence day-to-day practices in these contexts.

Sociolinguistic priorities

At this point in this chapter's general argument, then, there is an irony. We argued early on that theory-driven explorations of elderly language and communication are often unduly narrow in being limited to considerations of diachrony and decrement. Now, in the *data-driven, discourse analytic investigations into elderly and intergenerational communication* that this volume will present, diachrony

and decrement clearly underpin some of the most distinctive observable characteristics of talk: the thematizing of own ill health and decrement and the telling of age.

There is no contradiction in this. The discourse analytic approach, perhaps above all, invites an analysis of how social actors make sense of their social circumstances, and not least of themselves, through interaction. It is for these reasons that discourse theorists have for some time resisted deterministic assumptions about the constitution of social categories and their 'effects' upon linguistic performance (cf. P. Berger and Luckmann, 1967; Potter, 1988; Shotter and Gergen, 1989). In gerontology, as West and Zimmerman (1985) have suggested for gender research (p. 119), a shift of attention from a demographic category treated as an isolated sociolinguistic variable to speech as a mode of action between humans of varying situational identities allows us to develop a much richer understanding of how discourse helps to construct the fabric of social life.

Perhaps, then, the greatest challenge for studies of language and later life is to explore how themes of ageing, ageism and anti-ageism arise in social discourse where the elderly are participating or in question. If we see 'elderliness' as a collective subjectivity as much as a physiological end-point, it is important to explore the social construction and reproduction of old age through talk. An interactional focus is essential if we assume, as independent research suggests, that elderly people are prone to assimilate society's devalued appraisals of their own elderly group, and so lower their self-esteem (Bengston, Reedy and Gordon, 1985).

There is evidence in the following chapters that, for at least some elderly people, locating oneself in relation to past experiences, to one's own state of health, to chronological age and to projectable future decrement and death is functional at a profound level. Discourse can enact a negotiative process centring on life position and life prospects, with immediate consequences for morale and psychological well-being. If in these ways language has the potential to influence our most fundamental experiences of ageing, for better or for worse, the language sciences' historical neglect of elderly people seems all the more regrettable. Sociolinguistics may in future prove to have a key independent contribution to make to applied gerontological concerns.

2

Discourse, Accommodation and Intergenerational Relations

Sociolinguistics has not generally adopted the interactional, relational and constitutive perspective that we argued in favour of at the end of chapter 1. Many analytic frameworks in sociolinguistics, such as the widely used correlational approach associated with Labov's work, are too static to allow us to be sensitive to the local interactional processes that we suggest help to define experiences of ageing. But any coherent analysis at least needs a principled set of concepts, a repertoire of interpretive possibilities to draw on. Because we have argued that discourse analysis needs to reflect social and social-psychological dimensions of context as well as the organization of talk itself, it will be helpful to have a model that recognizes how linguistic variables intersect with speakers' and listeners' attitudes, goals and strategies, and with the outcomes of interaction.

Communication accommodation theory (CAT; see N. Coupland and Giles, 1988; Giles and Coupland, 1991a; Giles, Coupland and Coupland, 1991) has been developed as an integrated interdisciplinary model of discourse and context, and offers us some useful initial concepts and hypotheses. In this chapter we briefly introduce the CAT model and use it to sketch out how talk can be involved in one generation group's alignment to another, and some of the likely sources of intergenerational conflict. We review some theoretical research that has already used the accommodation model to describe 'young-to-elderly' speech styles; we then elaborate on this approach using data from a case-study of intergenerational talk. One value of CAT is that it allows discourse studies to engage with recent theory in social psychology, in line with our attempts to provide a multidisciplinary analysis.