

Ageing research in community psychology: Where are our elders?

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The aim of this paper is to map and critique the work of community psychology in the field of ageing. A content analysis (from 1973 to 2012) of four key international community psychology journals identified 63 ageing-related articles; approximately 1% of the total number. Ageing related articles were most abundant in the 1980s. There was a mix of empirical (qualitative and quantitative) research, reviews and editorial pieces; focusing predominantly on social networks and their association with mental health issues. With its strong focus on social inequalities and injustice, community psychology arguably has much to offer studies in ageing and on the socially corrosive effects of age-based discrimination and prejudice but interest of community psychology into such research appears to remain sparse. We consider reasons why this might be so and how it might be changed so that tackling ageism becomes a key area for future research within community psychology.

In 2009, 11 per cent of the global population was believed to be over 60 years of age and the global average life expectancy was calculated as 68 years (World Health Organization, 2010). It has been forecast that within 50 years, the global population of people aged over 60 will triple to nearly 2 billion and the proportion over 80 will quadruple (United Nations, 2001). Increased life expectancies of populations in the Americas (76 years), the Western Pacific (75 years) and Europe (75 years) have been observed which has led to ageing becoming a particular focus in those areas of the world. For example, 29 per cent of the population of Japan are over 60 years (World Health Organization, 2010) – caused by a combination of falling birth and death rates – which has led to Japan being described as facing a ‘demographic crisis’ and ageing becoming a top policy issue for Japan’s politicians (Tamiya et al., 2011). Whilst there is an urgent cause for concern to examine the widening health inequalities both between and within countries (life expectancies range from as low as 48 years [Malawi] to as high as 83 years [San Marino and Japan], and a continued concern over those countries where

life expectancy remains poor (largely due to high levels of infant mortality) the national concerns of many countries in the ‘industrialised West’ has been turning to include a focus on the ‘problems’ caused by more people living into old age.

Longevity may be good news for people who can enjoy a healthy ageing experience. However for many people, particularly those living on the economic margins of society, ageing is fraught with personal dangers, such as learning to live with chronic disease and increasing physical frailty. Inequalities in Disability-Free Life Expectancy (DFLE) point to a clear social class gradient in the amount of years spent in old age free from life-limiting impairment or illness (White & Edgar, 2010) with those from lower socio-economic groups experiencing more years of illness and impairment in old age. When old age intersects with disempowered social identities structured around class, disability, ethnicity, gender, sexuality and so on the results can be extraordinarily oppressive.

Whilst old age has become a further vehicle of social discrimination against those already socially marginalised, it has also become a complex site of discrimination in its

own right. Elders have simultaneously come to be a marker of a successful society (high life expectancy can be seen as a sign of a country's economic prosperity and social development) and a marker of economic burden (elders can be viewed as non-productive members of society who are a drain on public expenditure). Neither abstraction is necessarily empirically supported. The richest countries are not necessarily the healthiest and youth unemployment may be as great or greater an economic problem than elder unemployment. In Australia, for example, 93 per cent of people over 60 live in private dwellings, independently in the community (Australian Bureau of Statistics, 2009). There is need for a much more comprehensive picture of ageing to develop that acknowledges the diversity of experiences of later life, which includes regarding older age as an opportunity for ongoing participation and engagement in a range of activities, and seeing elders as having much to offer society with regards to resources and expertise (Feldman & Seedsman, 2005). Indeed, such a picture is needed to disrupt what is becoming a somewhat hegemonic conception of elders as a burdensome marker of society's economic successes.

The term 'ageism' was coined in the 1960s to refer to the way older people in the United States of America (US) suffered prejudice. Ageism describes discrimination and prejudice suffered by a person wholly as a result of their biological age. In the West, it affects both children and elders as social power rests in adulthood and adulthood sits between the age of majority (usually the point at which society confers on the individual the rights of autonomy and independence) and old age (usually the point at which society takes those rights away – through retirement from the workforce). However, the borders around childhood and old age vary across cultural, economic and social contexts, as does the value placed on

autonomy and independence. Either side of adulthood biological age is used to deny people access to social power (Pilcher, 1995). The result is that children and young people seek to make themselves look older and older people seek to make themselves look younger as they are attracted to the life-stage that gives them the greatest sense of social value and self-worth (to be seen as attractive and useful members of society).

The cultural relativity of the notion of old age is shown by examples of cultures where elders have a socially valued position (e.g., in areas of Africa and Asia). There, elders have a role in educating the young and a position of social power inscribed by tradition and religious beliefs. Though there is always a danger of romanticising the status of elders in such communities (their social status is often much more nuanced than commonly portrayed), there is less danger of over dramatising the increased threats to the social status of elders that are happening at a global level through processes of socio-economic and cultural colonisation by 'the West.' As capitalist consumerism increases its global reach we are seeing the increased spread of industrialisation and urbanisation and materialist values. Here, status of age that comes from the longevity of wisdom from traditional cultural practices is eroded through the speed of technological change (that makes 'old knowledge' redundant and prizes innovation over tradition) and the role of elders as teachers and spiritual leaders in their communities has been displaced through systems of formal state education and growing secularism.

Ageism and elder abuse in particular are becoming key concerns in those countries where the proportion of elders in the population are increasing. For example, in Japan, elders are fast becoming an economically, politically and socially marginalised group (unravelling the cultural stereotype of Japan as a place where elders are valued and respected) (see Ferries, 1996)

and across the West, ageism is fast becoming a cultural norm (Angus & Reeve, 2006). Prevailing and predominantly biological theories of ageing have tended to regard later life as a time of inevitable decline and deterioration, thus feeding into the narrative that elders will be a drain on health and welfare resources and be a general burden on society. Whilst it is true that we deteriorate physically in older age the process begins at around 30 years of age, not at 60. Still, a 30-year-old who has a moment of forgetfulness is considerably less likely than a 60-year-old to have that described as a sign of age-related cognitive decline. The dominant narrative is that health is normal in the young and abnormal in the old and that illness is abnormal in the young and normal in the old. Old age is seen as the place where the body decays and the mind deteriorates (Hockey & James, 1993). This negative stereotyping hits women much harder than men – “Late life is a time when men become grey-haired, distinguished, wise and experienced whilst women are typified as worn-out, menopausal, neurotic and unproductive” (Victor, 1994, p. 82).

The problem of ageism is increasingly recognised in social policy. In the United Kingdom (UK), anti-discrimination legislation in relation to ageing first appeared in 2006 in Employment Equality (Age) Regulations and has been extended more broadly in the UK Equality Act to include making discrimination unlawful in the provision of goods and services to elders as well as employment opportunities. Legislation is also increasingly sought to remedy what has come to be known as ‘elder abuse.’ In the UK, it has been estimated that 500,000 are being abused at any one time (House of Commons Health Committee, 2004). Such abuse includes physical, psychological, sexual, financial, neglect and discrimination. Recently, scandals have surfaced in the UK showing how elders have been regularly over

prescribed medications to dangerous levels as a means to make them more placid and easier to “care manage” (Smith, 2009) and of “serious, systemic threats to the basic human rights of older people who are getting home care services” (Equality and Human Rights Commission, 2011, p. 7).

In light of increasing numbers of older people worldwide, innovative approaches and interventions are required to ensure that people can live well into old age and to ensure society can effectively combat prejudice and discrimination against elders. Following the International Year of Older Persons in 1999, the role of psychologists in fostering the wellbeing of older Australians was examined, and it was recommended that a central goal of the profession should be to assist older people to live satisfying lives and combat ageism (Gething et al., 2003). Community psychology appears well positioned to lead the way.

In recognition of widespread oppression and disadvantage experienced by many groups, community psychology emerged to specifically address and examine issues of social inequality and injustice (Dalton, Elias, & Wandersman, 2001; Orford, 1992). Instead of aligning with a victim-blaming approach (which regards disadvantage as something created by the individual and therefore should be fixed at the individual level), a community psychology approach recognises the impact of societal structures that lead to inequitable disadvantage and privilege experienced at the individual level. Furthermore, community psychology tends to look beyond individual deficits or problems, and acknowledges individual strengths and the expertise inherent in life experience. In this way, community psychology recognises the value of social resources and more macro-level interventions that more traditional and individualistic psychological approaches often overlook. With one of us working as a researcher in a healthy ageing research unit (HR) and both of us having been schooled in community psychology in our doctoral training, we were

curious to learn what work has been done in community psychology around ageing in order to guide and develop our own research. The aim of this paper is therefore to investigate the place of ageing in community psychology. We began this by reviewing every ageing-related article published in four key community psychology journals from 1973. We then critically reflect on the number, content and nature of the studies, and based on this evidence propose key areas for further research and suggest some reasons why elders are mostly invisible in the some of the key journals in community psychology.

Analysis of Community Psychology Journal Papers

There are four prominent international peer-reviewed academic journals where community psychology related articles are published: the American Journal of Community Psychology (AJCP); the Journal of Community Psychology (JCP) (US); the Journal of Community and Applied Social Psychology (JCASP) (Europe); and the Australian Community Psychologist (ACP) (Australia). While there are other journals where community psychology related articles are found, and journals that follow the namesake of community psychology (e.g., the Japanese Journal of Community Psychology), these are the four journals that have come to occupy a strong presence in the field (perhaps largely as a result of being published in parts of the world that have dominated much of the internationally published activity around community psychology (US, Europe and Australasia). ACP and AJCP began publishing in 1973, ACP (formerly known as 'Network') began in 1985 and JCASP began in 1991.

We only reviewed content from these journals that was available via online subscription (to aid computer-based textual analysis). We defined ageing-related journal papers as those papers for which the primary focus was older adults. By 'primary focus'

we mean papers with a stated aim that incorporated the perspectives of older adults and ageing. This definition therefore included conceptual papers, papers that reported on data from participants aged 60 years and over, and papers that investigated attitudes to ageing (which may or may not include older people as participants). The title and abstract of every article accessible online in the four journals was searched on 9 August 2012 for ageing-related terms: ageing, aging, aged, elderly, senior/s, and older. We made the assumption that if ageing or older people were the primary focus of a paper, authors would use these key terms in the title and abstract.

To avoid missing any articles, two databases were searched for relevant articles: the journals' own publishing websites (Wiley Interscience and Springer), and PsycINFO. For the ACP which is not listed in a database, the article titles were accessed manually via the home page of the journal (<http://www.groups.psychology.org.au/ccom/publications/>). The majority of articles identified in the search were relevant to ageing and older people and thus included in the review. However, several articles were excluded because some articles used the words 'senior' and 'older' in a different context (e.g., 'senior employees', 'older than'). The total number of included articles from each journal, the number of these as a percentage of the total number of articles published, and the journal impact factors are recorded in Table 1.

Full texts of all included articles were retrieved and reviewed. For each article, key information was tabulated including year of publication, authors, article type, country of origin, setting (e.g., community-based, residential aged care), key words, research design, and general content.

Findings

Descriptive Results

Sixty-three articles were included in the review. The majority ($n = 56$, 89%) of these were from the two US journals (AJCP and

Table 1
Number and Percentage of Ageing-related Articles Published in Key Community Psychology Journals

Journal Title	Country of Publication	Impact Factor	Searched From	No. of Relevant Articles	Percentage of ageing-related articles in journal
American Journal of Community Psychology (AJCP)	US	1.736	1973	27	1.2
Journal of Community Psychology	US	0.985	1973	29	1.4
Journal of Community and Applied Psychology (JCASP)	UK	1.247	1991	7	0.7
Australian Community Psychologist (ACP)	AUS	N/A	2006*	0	0

Note. *Formerly known as Network which was established in 1985— online access only

JCP). The number of ageing-related articles as a percentage of the entire contents of each journal ranged from 0 to 1.4 per cent; the US journals had the highest percentage (1.4) of ageing-related articles; no articles were found in the Australian journal (ACP).

The average number of ageing-related articles published each year between 1973 and 2012 was 1.6, ranging from 0 to 10. Articles were published in 27 discrete years, during the total 39 year time period. At least one article was published each year from 1986 to 1998. The longest period between ageing-related publications was four years, with no articles published between 1999 and 2002 inclusive. The 1980s was the most prolific decade for ageing-related articles ($n = 24$) (see Figure 1). The year with the most publications ($n = 10$) was 1984, owing to a special issue of the *Journal of Community Psychology* entitled 'Community Psychology and Older Adults.' The reason for the special issue was twofold: (1) in recognition that older adults comprised a group with particular needs; and (2) to suggest new ways

of thinking about responding to the needs of this group. Since 1991, when there were six articles published, the total number published per year did not exceed two until 2009 when seven articles were published. The reason for the increase in publications in 2009 is unknown.

The majority of articles ($n = 50$, 79%) originated from the US (i.e., empirical studies involving US-based participants, and review articles written within a US context). The remaining articles were associated with the following countries: UK (4); Canada (2); Hong Kong (2); China (1); Holland (1); Africa (1); and Belgium (1). One article had a global focus (Cheng & Heller, 2009). All four journals accept articles from authors all over the world; however, the majority of articles in the US journals had US authorship.

Seventy-one per cent ($n = 45$) of articles were empirical studies, utilising predominantly quantitative (34), qualitative (3), mixed methods (1), case study (5) and secondary data analysis approaches (2). The remaining articles ($n = 18$, 29%) were

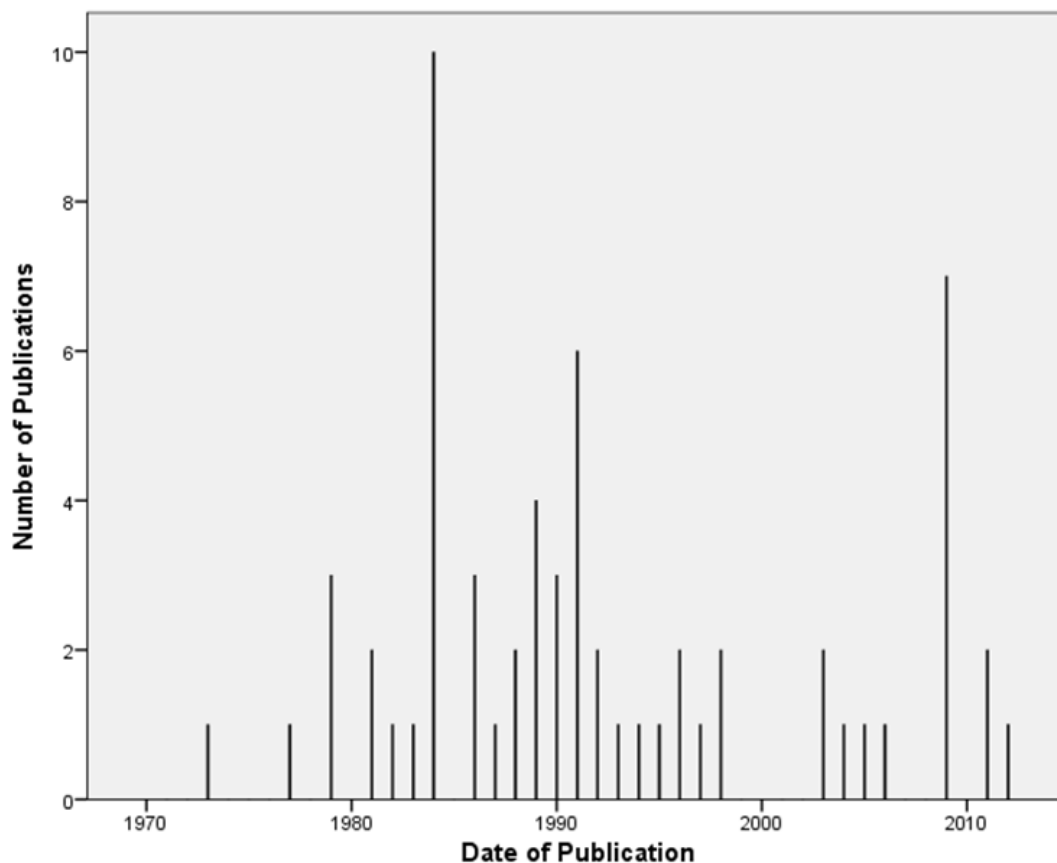


Figure 1. Number of publications by year.

reviews (10), commentaries (7), and editorials (1).

Conceptual Themes in the Ageing-Related Community Psychology Literature

The main focus in the ageing-related community psychology literature was around social support and networks and their association with mental health and wellbeing. The earlier studies employed a range of psychological and psychosocial measures for assessing older people's mental health, particularly depression and anxiety (e.g., Dean, Kolody, & Ensel, 1989; Husaini et al., 1990), stress (e.g., Cohen, Teresi, & Holmes, 1986; Wallsten & Snyder, 1990), and coping skills (e.g., Matson, 1995). While these topics appear to have been more prevalent prior to the turn of the century, they still feature in recent literature, such as a longitudinal study

of Hispanic older adults by Brown et al. (2009) which concluded that neighbouring behaviour may be a protective factor against depressive symptoms.

The role of the community as a key resource for promoting wellbeing has permeated the literature throughout the decades; Maton (1989), for example, investigated the role of the community as a stress buffer, and Nystrom and Jones (2003) used community building as a way to enhance the social support systems of older lesbians. Articles from the 1980s and 1990s featured studies about alternative, increasingly sustainable, and empowering service delivery, in recognition that the common practice of one-to-one service delivery by clinical psychologists is unviable. Several articles reported on the use of paraprofessionals (people who work

alongside professionals but do not have formal qualifications) as an addition to more formal service delivery (e.g., Fretz, 1979; Santos, Hubbard, McIntosh, & Eisner, 1984), and also the use of older adults as paraprofessionals themselves; the latter in recognition that older people are experts in their own lives and have much to offer others (Gatz & Hileman, 1984). Building on this notion of the peer as a potential resource, other researchers have investigated the use of peer counselling (Gatz & Hileman, 1984; Losee, Auerbach, & Parham, 1988), peer support telephone dyads (Heller, Thompson, Trueba et al., 1991; Heller, Thompson, Vlachos-Weber, Steffen, & Trueba, 1991; Stein, 1991; Wills, 1991), and older adults as community workers (Gatz et al., 1982).

Community programs and interventions were commonly evaluated and described. For example, Reinke, Holmes and Denney (1981) evaluated the impact of a 'friendly visitor' program on the cognitive functioning and morale of older nursing home residents. More recently, Schensul, Radda, Coman, and Vazquez (2009) reported on a successful multilevel participatory intervention designed to increase senior public housing residents' abilities to make informed decisions about the influenza vaccine. Similarly, Wood and Alberta (2009) employed a community-driven behavioural healthcare program which sought to address inequalities and stigma of mental health while empowering community participants. This program demonstrated that dramatic recoveries from depression were possible as a result of culturally-specific approaches that enable people to have meaningful involvement in decisions about the program. More recently, an intergenerational intervention was evaluated on a London housing estate and found to reduce age-group stereotypes (Alcock, Camic, Barker, Haridi, & Raven, 2011). Several articles reported on the experience of ethnic minority groups. Topics examined included social support amongst Hispanic

Americans (Brown et al., 2009; Husaini et al., 1990; Starrett, Bresler, Decker, Walters, & Rogers, 1990), social isolation and use of services by African American women (LaVeist, Sellers, Brown, & Nickerson, 1997), dementia care in Asian populations (Milne & Chryssanthopoulou, 2005), social support in Japanese Americans (Nemoto, 1998), acculturation of former Soviet immigrant women in Chicago (Miller, Birman, Zenk, Wang, Sorokin, & Connor, 2009), and interventions to prevent influenza infections in a culturally diverse area (Schensul et al., 2009). These publications allude to the additional disadvantages experienced by minority ethnic groups, as compared to white majority groups. The most recent contribution builds on this sense of disadvantage but from another perspective, providing evidence that right-wing attitudes mediate the association between ageing and ethnic prejudice (Franssen, Dhont, & Heil, 2012).

Cheng, who has authored five articles included in this review (Cheng, 1992, 1993; Cheng, Chan, & Phillips, 2004; Cheng & Heller, 2009; Cheng & Siankam, 2009), was responsible for some of the more atypical articles; atypical in that they adopted a more critical approach to ageing issues. In 1993, Cheng reflected on how social changes in Hong Kong have led to a booming private residential home industry and he highlighted the potential disadvantage for those on social security benefits who could not afford to pay their rates (Cheng, 1993). In 2009, he published on the impact of the HIV pandemic in sub-Saharan Africa, reflecting on the high rates of older people living with grandchildren and how the changes in family structure meant that older people were less able to rely on their children for support as they aged (Cheng & Siankam, 2009).

Methodological Themes in the Ageing-Related Community Psychology Literature

The literature included a mix of empirical (qualitative, quantitative, mixed

methods and case studies) research, reviews and editorial pieces. The empirical research predominantly employed traditional quantitative methods (surveys and structured questionnaires being the main data collection method), and adopted a positivist epistemological framework.

Departing from this more traditional approach, were two qualitative studies. Saegart (1989) investigated the experience of older, low income, black women living in Harlem. At the outset of the study, closed-ended short answer questionnaires were prepared. The author quickly realised the inappropriateness of the method and it evolved into a grounded theory study utilising semi-structured interviews. A feminist perspective allowed the author to acknowledge the inequity of the experience of poverty, and provide participants with an opportunity to have a voice that was not entirely directed by the researchers. Hodgetts, Pullman, and Goto (2003), using both focus groups and key informant interviews, adopted a social constructionist approach to investigate the experience of care-giving. It was a useful technique to expose the increasing intra-psychic tensions associated with the care-giving role, and how participants negotiated and legitimised their familial obligations.

Cheng et al. (2004) used a mixed method approach to develop a model of quality of life in older people; information gathered from focus groups with older people formed the basis of a questionnaire which was administered to a large, representative sample of older people in Hong Kong. The third and final stage consisted of further focus groups with a different sample of older people to elicit feedback about the proposed model.

Discussion

This review has drawn attention to the dearth of ageing-related articles in the key community psychology journals. This

supports Cheng and Heller's (2009) finding that, to date, ageing has not been a popular focus for community psychology researchers and practitioners and is well-demonstrated by no more than three references to 'elderly persons' in a 1000 page handbook of community psychology (Rappaport & Seidman, 2000). Social power is concentrated in adulthood and is siphoned away from both childhood and old age. Perhaps community psychologists too find themselves attracted to the core of social power? Or are community psychologists uncomfortable with ageing and the concept of dying?

This lack of reference to ageing and older people is reflective of the wider literature in other fields and society more broadly, where ageing issues, or funding for ageing-related issues, do not feature high on the agenda. It is further reflective of the pervasiveness of ageism and specifically how older people may be deemed unworthy or uninteresting subjects of research. Community psychology, however, is a relatively young and small discipline, originating in the US in the 1960s (Rappaport & Seidman, 2000). The gaps in the evidence base and the scope for further research are therefore plentiful, and if ageing is explored more fully using a community psychology lens, there is potential for significant advancements in our current knowledge (e.g., to gain greater understanding about the nature and construction of age-discrimination). There were a higher number and higher relative proportion of ageing-related articles in the US journals, as opposed to the Australian and UK journals. Perhaps the US is more sensitive to human rights issues and marginalisation; or ageing is a greater priority area, with more funding available to conduct ageing-related research.

No articles were identified about disease-specific issues, such as dementia or stroke. This is perhaps unusual considering that ageing is often closely associated with ill health and disease (although as previously

noted, the inevitability of illness in later life is widely contested). Authors may have chosen to publish such articles in medical, clinical and geriatric focused journals especially considering that these journals generally have higher impact factors and thus offer considerably better incentives for academics.

One might argue that the lack of ageing-specific literature in community psychology literature is due to its focus on 'community' level issues, and thus it overlooks specific sub-populations in the community. However, this argument does not hold true for all sub-populations, as youth and refugee populations are always well-represented in the community psychology arena.

The peak ($n = 10$, 1984) in publications in the 1980s, which has almost been matched by the number published in 2009 ($n = 7$), is an interesting finding. Optimism that this observation is indicative of more attention being given to ageing-related issues in the future may be substantiated, especially in light of an upcoming special issue on 'Ageing and Community' in the *Journal of Community and Applied Social Psychology*. Special issues are one way in which community psychology journals can encourage greater interest and research on issues of importance to older adults. Alternative strategies, such as promoting networking between community psychology and ageing interest groups, outreach to gerontology graduates, and demonstration projects may provide important additional avenues.

By conducting a search strategy such as the one employed for this review, we do not necessarily want to endorse the production of research that invites the segregation of older people as a focus for research. It is not always necessary or beneficial for older people to be the focus of research to promote better outcomes for older people. What is of importance, however, is that research should be inclusive of older people's perspectives,

and relevant to their experiences and issues they face.

This review has highlighted that the literature addresses some important issues regarding the health and wellbeing of older people (e.g., the role of social support in promoting health and wellbeing, and innovative strategies to improve the effectiveness of health service delivery). In the community psychology field, the more recent literature is less focused on treatment with a growing emphasis on aspects of prevention and health promotion. Innovative participatory and community wide approaches aimed at promoting wellbeing in ways that empower and recognise the expertise of community members are evident (e.g., Wood & Alberta, 2009). This is a promising sign. It is also encouraging to see a range of studies that specifically address the issues faced by older ethnic minority groups, especially given increasing global migration rates.

However, despite finding some interesting and important studies, some key areas in ageing have not been discussed or examined. Primarily, this relates to structural inequalities that lead to the widespread disadvantage and marginalisation that older people continue to face. One example is current workplace practices that continue to discriminate against older workers; with contracts ceasing at the age of 65, and reluctance to hire older people. This is an outcome of pervasive ageist policies and practices; as the concept of youth is still revered in many cultures. This has a significant and detrimental impact on older populations, and it is somewhat surprising that this has not received more attention considering that each of us is ageing and most of us want to live as long as possible. Despite living in an ageing society, our perceptions of ageing and the elderly have not significantly changed (Angus & Reeve, 2006), and there is an ongoing tendency to think of older people as 'others' and different

from ourselves. This review therefore lends support to Cheng and Heller's (2009) opinion that community psychology has an important role "in producing the conceptual shifts needed to change societal attitudes now dominated by negative age stereotypes" (p. 161).

Limitations

This review was limited to four key community psychology journals. Community psychology is a difficult field to define and has contested boundaries (Fryer & Laing, 2008). The field overlaps with community development, health promotion and social work and has many guises; related work may be found in more abundance in not only other journals, but other publication formats.

We also acknowledge the different time periods for sampling publications. ACP, for example, was only accessed from 2006 compared to 1973 for the US journals. This could have constrained our interpretation, particularly in relation to cross national comparisons. For this reason, it would also have been good to review 'Network' (which was established in 1985 and became ACP in 2006) to see if any ageing-related articles were published in the Australian journal prior to 2006, and to see how it compares to the UK and US journals. If conducted in the future, however, this review will have to be a manual exercise as the journal is only stocked in hard copy at limited locations.

Furthermore, issues related to ageing and older people may emerge in literature that is not exclusively concerned with the ageing experience. Such a comprehensive search was not feasible for the current exercise given time restraints and limited resources. For a more comprehensive investigation, the search could have included books and book chapters, websites and archived electronic discussion boards. The search could also have been extended to the identification of other publications by key authors identified in the current search.

Finally, direct requests for information and interviews with community psychologists in both the research field and in practice, as well as via electronic forums, could have provided additional insights.

Conclusion

This review confirms the lack of attention paid to ageing-related issues by the field of community psychology as indicated by the small number of publications in the field's key journals. With increasing numbers of older people worldwide, new and innovative approaches and interventions to address ageing-related issues are urgently required. The discipline of community psychology, with its focus on addressing social inequalities and injustice, has a lot to offer the field of ageing. Yet the discipline appears to be an untapped resource, because it has yet to engage with some important issues associated with an ageing society. Community psychology is a small field and not widely known or acknowledged as a discipline in its own right. In the Australian context in 2010, for example, community psychology came close to not being endorsed by the national psychology registration board as a specialist discipline. Perhaps by engaging more comprehensively with a greater range of issues, such as ageing, the discipline of community psychology may demonstrate its worth more broadly and establish itself more prominently as a field with a significant contribution to make.

By drawing attention to this deficit, we hope it will inspire new research dialogues, solutions and action amongst community psychologists in readiness for the global ageing boom. This review has, by mapping the existing literature, provided an important first step in the process. However, it seems that much more can be done (e.g., by conducting multi-method, multi-level research studies that incorporate ecological and critical approaches to ageing phenomena) to drive the engagement of community psychology with gerontological

issues in order to advance developments in ageing research.

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