



engage
Together for Tomorrow

Overarching Issue

Ageism






AGEISM

Learning Objectives

Ageism

At the conclusion of the module on ageism the learner should:

<p>KNOW</p> <ul style="list-style-type: none"> • Definition of ageism • How ageism presents at institutional, intersocial, and individual levels • Impact of ageism, including concepts of implicit and explicit bias 	<p>DO</p> <ul style="list-style-type: none"> • Know how to take action to prevent or manage ageism • Use the shared vocabulary to better serve the comprehensive needs of older adults • Practice from an age-friendly perspective
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Case 1 Mrs. James

Mary James (80 years old) lives alone. She was married for 58 years. Her husband died 6 months ago at home. She oversaw all aspects of his care for the last year of his life.

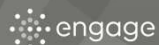
Mrs. James visits her Primary Care Provider (PCP) as she continues to have low back pain that began when she was caring for her husband in the final months of his life. It is limiting her ability to get in/out of the car, go to church, and grocery shop, to name just a few. She also reports not sleeping well and feeling "blue."

Her PCP says, "Well, you are 80 – what do you expect? My back hurts, too," and chuckles, following with, "Take ibuprofen and use a heating pad." Regarding feeling "blue," he tells her to "get outside and enjoy some fresh air every day. It does wonders."



Definitions

- ! Geriatric Syndrome
- ✓ Screening
- 🔍 Assessment
- 🏠 Treatment
- ★ Ageism

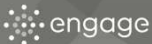



AGEISM

Definitions

! Geriatric Syndrome

- A multifactorial condition that is prevalent in older adults and develops when an individual experiences accumulated impairment in multiple systems that compromise their compensatory abilities.
- Common geriatric syndromes include Cognitive Impairment, Chronic/Persistent Pain, Delirium, Depression, Falls, Frailty, Incontinence, Malnutrition, Polypharmacy, Pressure Injury(ies), and Sleep Disturbance.

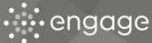



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Definitions

☑ Screening

- Screening tools are tests or measures to evaluate for diseases and health conditions before symptoms appear.
- Screenings allow for earlier management and referral to appropriate providers.
- An age-friendly provider conducts screenings for conditions that are prevalent in older adults.

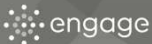



AGEISM

Definitions

🔍 Assessment

- Assessment tools are tests and measures used to evaluate the patient's presenting problem, confirm a diagnosis, determine its severity, and aid in identifying specific treatment options.
- An age-friendly provider uses appropriate assessments, makes referrals, and communicates with the patient's care providers.

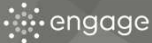



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Definitions

🏥 Treatment

- An age-friendly care provider considers the 4Ms when making treatment recommendations so that what matters to the patient is always part of the plan of care.
- An age-friendly provider communicates with the patient, family, and interdisciplinary team.





AGEISM


Definitions

★ **Ageism**

- The stereotyping and discrimination against individuals or groups on the basis of their age.
- Ageism can take many forms, including prejudicial attitudes, discriminatory practices, or institutional policies and practices that perpetuate stereotypical beliefs.

 GLOSSARY





AGEISM

Ageism Statistics

Everyday Experiences ¹

In a 2020 national poll...

82% older adults reported experiencing ageism regularly	65% older adults reported experiencing ageist messages from the media	45% older adults reported ageism in interpersonal interactions
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AGEISM

Ageism Statistics



Risk Factors ^{2, 3}

Higher Rates of Illness
Ageism reduces people's physical and mental health, increasing their care needs and reducing quality of life.

Higher Healthcare Spending
According to the [WHO](#), the United States spends billions of dollars per year treating health conditions due to ageism.

Lower Life Expectancy
Ageism is associated with earlier death, causing a decrease of 7.5 years on average.

Poverty
Higher healthcare costs, as well as a lack of health insurance, exacerbates poverty. This can be especially difficult for people who are retired, who have lost their partner or spouse, or who cannot work due to disability or illness. Poverty also worsens health, creating a vicious cycle.





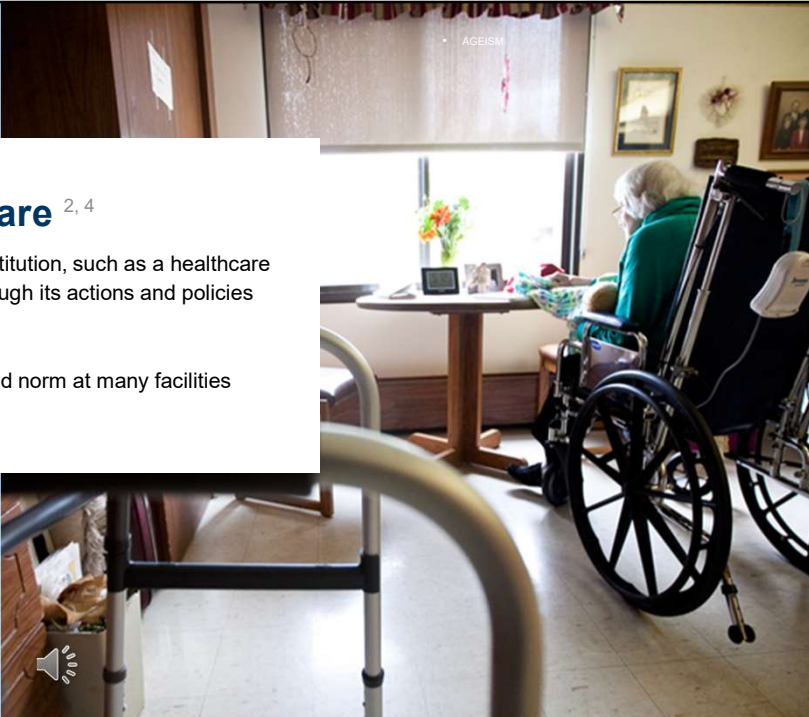
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Ageism in Healthcare

^{2, 4}

- Institutional ageism
- Interpersonal ageism
- Internalized ageism







AGEISM

Ageism in Healthcare ^{2, 4}

Institutional ageism: When an institution, such as a healthcare institution, perpetuates ageism through its actions and policies

Example:
Poorer quality of care is an accepted norm at many facilities that focus on older adults.


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Ageism in Healthcare ^{2, 4}

Interpersonal ageism: When social or formal interactions perpetuate ageism

Examples:

- Healthcare providers (HCPs) may dismiss a treatable pathology as a feature of old age.
 - Dismissing a person's report of pain as in our case.
 - Not recommending hearing aids to a person who is older.
- HCPs may share ageist jokes or may have implicit ageist thoughts and behaviors toward elderly patients without conscious awareness.
- HCPs may treat "aging" as a disease.



Ageism Is Everywhere^{2, 4}

Internalized ageism: When a person internalizes ageist beliefs and applies them to themselves (anxiety of aging, biases)

Example:

The older adult who doesn't seek care because of their own beliefs that nothing can be done.



Hostile and Benevolent Ageism^{5, 6}

Hostile Ageism

Having openly aggressive beliefs towards people based on their age group.

Example:

A patient intentionally receiving neglectful care because they are older

Benevolent Ageism

Having patronizing beliefs towards people based on their age group.

Examples:

- When healthcare providers speak to older adults in oversimplified ways, using terms of endearment, and/or a speech register that sounds like baby talk. This is referred to as "elderspeak."
- Under-dosing of physical activity or exercise



Implicit and Explicit Bias ^{7, 8, 9}

Another way to consider ageism depends on whether a person is conscious of their own biases or not.

Explicit Ageism

- Conscious awareness of actions

Implicit Ageism

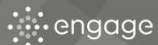
- The attitudes or stereotypes that affect our understanding, actions, and decisions in an unconscious manner
- We all have implicit biases
- This kind of bias occurs automatically as the brain makes judgments based on past experiences, current concerns, education, and background.
- A 2015 systematic review of implicit bias in medical providers revealed at least moderate levels of implicit bias for most healthcare providers.



AGEISM

A variety of strategies are being investigated to identify and address implicit bias.

A widely used and well-recognized option for becoming aware of implicit bias is available through Harvard's Project Implicit. These publicly available, computer-based reaction tests are built on the premise that more timely or accurate responses indicate more strongly held connections.



Harvard IAT – Age Task

<https://implicit.harvard.edu/implicit/Study?tid=-1>



Ageism Comes in Many Forms⁹

Consider these examples:

- Viewing older people as out of touch, less productive, or stuck in their ways
- Bullying or harassing an older adult
- Treating patients as though they are invisible, unintelligent, or expendable based on their age
- Making ageist jokes that imply someone is less valuable or less worthy of respect, based on their age
- Making offensive generalizations about a specific generation, e.g., that millennials are entitled; that old people are useless



Ageism Comes in Many Forms⁹

Consider these examples:

- Speaking to a family member about the patient and ignoring the patient when the patient is in the room
- Disregarding someone's concerns or wishes due to their age
- Taking advantage of someone's age for personal gain, such as to make money
- Using someone's age as justification to undermine, deceive, or control them
- Using derogatory terms – ageist terms in professional communication



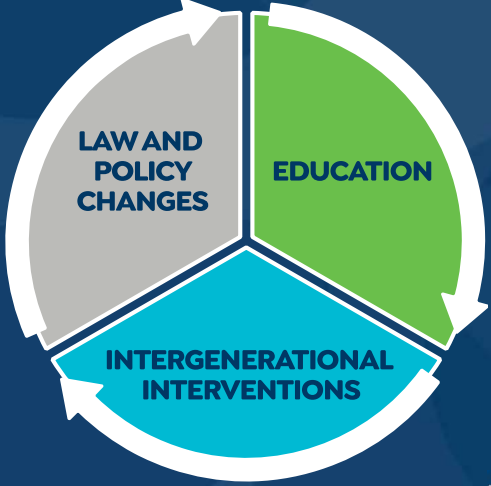
Stopping Ageism

What Can You Do?



AGEISM

Stopping Ageism: Societal Level⁵



Education to dispel myths and raise awareness


Intergenerational interventions to support cooperation and empathy between groups

Law and policy changes to reduce inequity and discrimination

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Stopping Ageism: Individual Level²



Become Aware
Reflect on how ageism shapes one's own thoughts, feelings, and life experiences.

Learn
Listen to personal stories, read, study the research.

Develop Skills
Learn about and practice advocacy skills, such as knowing when to speak up and when to step back.

Take Action
Put this knowledge into practice. Try correcting ageist stereotypes, challenging ageist jokes, or speaking out against ageist discrimination.

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Remember Mrs. James?

Identify the ageist treatment she received from her PCP

Mary James (80 years old) lives alone. She was married for 58 years. Her husband died 6 months ago at home. She oversaw all aspects of his care for the last year of his life.

Mrs. James visits her Primary Care Provider (PCP) as she continues to have low back pain that began when she was caring for her husband in the final months of his life. It is limiting her ability to get in/out of the car, go to church, and grocery shop, to name just a few. She reports not sleeping well and feeling “blue.”

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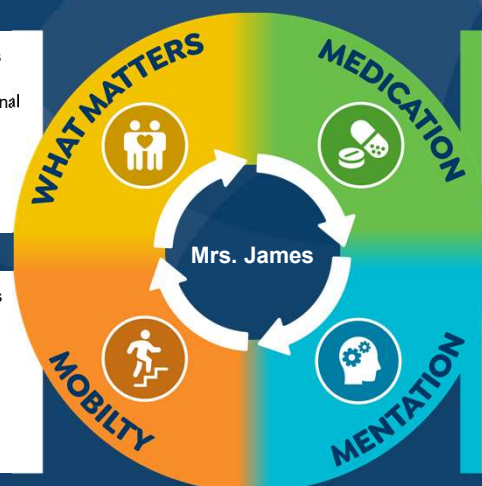
Mrs. James



Ageism – Unfriendly Care (4Ms)

- PCP ignores her ADLs and IADLs concerns.
- PCP does not address the emotional and physical toll of caregiving nor the profound impact of grief.
- PCP does not complete a reasonable workup for symptoms.

- No consideration of other referrals and/or modalities for pain.
- PCP invalidates and/or minimizes her report of back pain.



- PCP recommends potentially inappropriate medication (ibuprofen).
- No consideration of other medication options for pain.

- PCP invalidates her disclosure of depression symptoms and/or her grief.



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Age-Friendly Care (4Ms)

LISTEN and VALIDATE:

- Her desire to engage in ADL and IADLS.
- Her role as a caregiver.
- The magnitude of her loss.

DISCUSS OPTIONS and EFFECTS

- Medication reconciliation.
- Develop optimal medication regime, including nonpharm options.

SCREEN and REFER:

- Ask about sleep quality.
- Ask about activity level.
- Screen for musculoskeletal concerns.
- Refer to a physical therapist.

SCREEN and REFER:

- Screen for depression.
- Consider referral to counselor, community groups for grief support.

AGEISM

Mitigate Ageism by Being an Age-Friendly Provider... Everyday... With Each Patient Encounter

What Matters
Know and align care with each older adult's specific health outcome goals and care preferences including, but not limited to, end-of-life care, and across settings of care.

Medication
If medications are necessary, use Age-Friendly medications that do not interfere with What Matters, Mentation or Mobility.

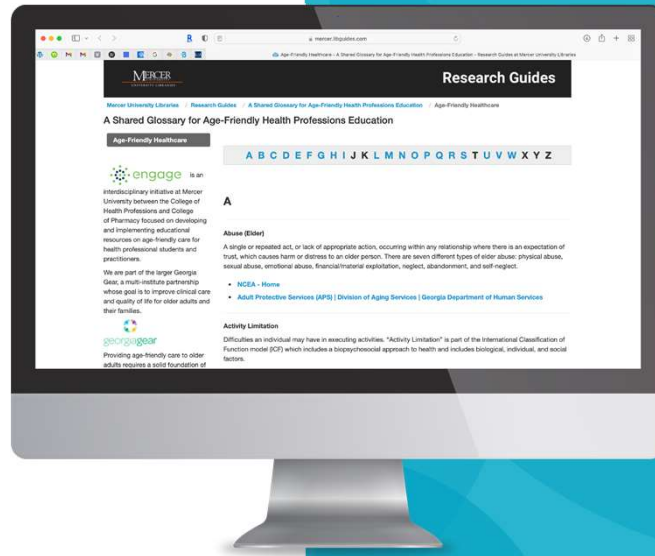
Mentation
Prevent, identify, treat and manage depression, dementia and delirium across settings of care.

Mobility
Ensure that older adults move safely every day in order to maintain function and do What Matters.

Know and Use the Shared Language...



GLOSSARY



Ageism



Clinical Pearls

Self Evaluation

- Reflect and become aware of our own implicit and explicit ageist biases
- Read, listen, and learn

Actions

- Dispel myths, raise awareness
- Support laws and policies that reduce inequity and discrimination against older adults

References

1. [University Of Michigan Library – National Poll on Healthy Aging](#)
2. [World Health Organization – Ageing: Ageism](#)
3. [American Psychological Association – Fact Sheet: Age and Socioeconomic Status](#)
4. [Medical News Today – Ageism](#)
5. [The Journal of Psychology – Benevolent ageism: Attitudes of overaccommodative behavior toward older women](#)
6. [Medical News Today – Ageism](#)
7. [National Center for Cultural Competence at Georgetown University – Two Types of Bias](#)
8. [Harvard – Project Implicit](#)
9. [BMC Medical Ethics – Implicit bias in healthcare professionals: a systematic review](#)
10. [Medical News Today – Ageism](#)



About Engage



Engage is part of Georgia Gear, a multi-institute partnership whose goal is to improve clinical care and quality of life for older adults and their families.

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