A FTER READING THIS NEWSLETTER THE BEHAVIORAL OBJECTIVES LEARNER WILL BE ABLE TO:

1. Discuss ageism and two common examples of ageism seen in society, as well as in healthcare settings.

2. Describe five common myths regarding the elderly, as well as implications for the healthcare provider.

A negative and stereotypical perception of aging adults is pervasive in American society. These attitudes are readily apparent in such areas as language and media. For example, such commonly used phrases as "over the hill" and "don't be an old fuddy-duddy" denote old age as rigid and too old to be useful. Ageism occurs throughout society in varying degrees, in advertising, television and movies, hospitals, and jobs.

Over 40 years ago, the first director of the National Institute on Aging, coined a term, ageism, to refer to such biases against older adults in America. Prejudicial attitudes towards older people, old age, and the aging process are still common today, in part due to a personal uneasiness of young and middle-aged facing growing old and a pervasive fear of death in Western society. Since youth is valued in our society, to many, ageism reflects distaste for growing old, disease, and disability. Such attitudes allow young and middle-aged adults to view older adults as different from themselves, causing feelings of superiority and discrimination. Unlike sexism or racism in which gender and race remain constant, an individual's age classification changes throughout the life cycle. Unless death occurs at an earlier age, no one is exempt from achieving the status of being old, and thus experiencing ageism.

This newsletter will discuss ageism and related examples in society, as well as in the healthcare setting. Common myths regarding the elderly will be described, as well as implications for the healthcare provider.

AGEISM

Ageism reflects a deep seated uneasiness on the part of the young and middle-aged - a personal revulsion to and distaste for growing old, becoming ill or disabled, as well as a fear of dying.

THE AGEING POPULATION

Americans are living longer. In 1900, life expectancy was 49 years. In 1970, it was 70 years. Today, women live to an average age of 83; 79 years old for men.

Most developed world countries have accepted the chronological age of 65 years as a definition of 'elderly' or older person. However, there are wide differences among seniors in their chronological age. Sixty year olds are different in their life experiences and abilities than 90 year olds. People aged 65-74 more closely resemble people under age 65 than they do those aged 85, in terms of their abilities or impairments. People, aged 85 and over, on the other hand, are the older adults most likely to be characterized by disabling conditions that are associated with "old age."

The rate of growth of the elderly population has far exceeded the growth of the population of this country as a whole. As the 'baby boomer' generation turns 65 (between 2010 and 2030), the number of Americans, 65 and older, is projected to double over the next two decades from 35.9 million to nearly 70 million. The oldest old (85+) is the fastest growing age group in the United States and is projected to increase in numbers to 9.6 million in 2030. Currently, over 60% of hospitalized patients are over 65 years of age. This percentage will increase. Healthcare providers must be aware of their own beliefs about aging and age discrimination practices.

AGEISM IN AMERICAN SOCIETY

Ageism is commonly seen in advertising. Greeting-card and novelty companies make billions on "Over the Hill" products, such as "coffin gift boxes" featuring prune juice and anti-aging soap, and birthday cards stereotyping and mocking the appearance and stereotypical negative attributes of this age group. Although adults of all ages buy cars, for example, television and print ads for products almost invariably feature youthful actors and models. According to the AARP, aging Americans account for half of all consumer spending but are targeted by just 10 percent of marketing. The media, ranging from television to novels, also commonly places an emphasis on youth, physical beauty, and sexuality. Older adults are primarily ignored or portrayed negatively. Ageist images of older people being irritating, unattractive, uninteresting, frail, poor, lonely, and unproductive, are common. It is also not unusual for aging to be portrayed as being synonymous with senility, becoming wrinkled and "saggy", as well as being submissive, dependent, and unreliable.
The emphasis on youth in advertising not only affects how older individuals are perceived, but also how older individuals perceive themselves. Persons who are dependent on physical appearance and youth for their identity are likely to experience loss of self-esteem with aging. Millions of dollars are spent annually in this country on anti-aging products and surgery in an effort to appear more youthful.

**Myths about Aging Adults**

Negative attitudes towards older persons often stem from myths and ignorance about aging, the aging process, and being old, including:

**Myth: Older people are alike.**

**Fact:** Older adults, like persons within any age-group, are individuals. The aging population is more diverse than it has ever been in history. This micro-culture represents the broadest range of races, languages, ethnic groups, as well as political, educational, religious, immigration and historical experiences ever witnessed in this country.

**Myth: With aging there is an inevitable mental decline, loss of memory, and an inability to learn.**

**Fact:** If there are no major health problems, most people remain at the same ability level until very late in life. Memory lapses occur throughout life and are generally associated with other factors, such as depression or tiredness. Memory and intelligence show very little decline with aging. And, the educational level of the older adult population is steadily increasing.

**Myth: Older people are senile.**

**Fact:** The vast majority of older adults are not senile, nor will they become senile. Alzheimer’s disease and other dementias affect only 2% of people in their 60s. Of those over 85, 70% show no signs of dementia.

**Myth: Physical decline and frequent illnesses come with aging, making old people frail.**

**Fact:** Over three-fourths of older adults are healthy enough to carry out their normal activities without help. Old age is not synonymous with disease. The risk of health problems, particularly chronic illnesses, does increase with age, but older adults are not necessarily incapacitated by these problems. Even an elderly patient with a disease and/or disability is healthy and well to some degree. Health is often viewed differently by older adults than by youth, including many healthcare providers. To elderly Americans, wellness may mean being able to care for themselves, having a good appetite and/or having lots of friends.

**Myth: The elderly are difficult and rigid.**

**Fact:** Personality remains relatively constant throughout life. Numerous studies have found that one’s personality doesn’t change considerably after age 30. So, if a person is cheerful and gregarious in their 40s, they can be expected to have the same personality traits in their 80s. Marked personality changes are not due to normal aging, but to a condition, such as dementia, stroke, pain and/or depression. When a person doesn’t feel heard or understood, regardless of age, frustration and anger may occur.

**Myth: Old people live in the past, the “good ole days.”**

**Fact:** People of all ages respond to current situations based on their previous experiences. Older adults have more life experiences to draw from. Reminiscing – telling stories is common in advance ages and helps validate the elder’s life. Listening is important.

**Myth:** The elderly should live in nursing homes.

**Fact:** Most aging adults live independently. Only 3% of people over 60 live in nursing homes, with only 19% of those over 85 requiring skilled care. Assisted living facilities are on the rise, providing independence and care when needed. Older adults are major consumers of healthcare in our country and overwhelmingly want the ability to make decisions regarding their health. When communicating with the elderly, it’s important to talk to them, not around them.

**Implications:**

The elderly constitute the most diverse and rapidly increasing groups within the Western culture; however they continue to be stereotyped – by society at large, and all too commonly, by healthcare providers. Age bias has a negative impact on the provision of care. Elderly patients are sometimes ignored by healthcare providers, excluded from making decisions, and treated as objects, such as staff exposing their naked bodies when lifting, moving or cleaning them. They may also be labeled, negatively, such as “bed-blockers” or “old geezers.” Additionally, if they are kind or even pleasant, they are seen as “a sweet little old lady” or “cute.” If they are energetic, they are “feisty.”

Elderly patients are also commonly patronized. Strangers call them “dear” or “love.” Elderly patients are all too often treated like children, and calling them names that are usually used in adult-child relationships contributes to the problem. Calling elderly patients “honey,” “gramps,” or “sweet pea,” while often intended well, runs the risk of sounding patronizing and harming a patient’s dignity. These are discriminatory labels which tend to demean or devalue the individual. Calling an elderly patient by their first name, unless you’ve been given permission, is also disrespectful. It is also commonly, but inappropriately, assumed that old people would prefer to be young - “How are you today, young lady?” Many patients might not mind - but then again, many other patients might feel disrespected and not speak up about it. The way we address people matters. Elders deserve to be addressed respectfully and properly. It’s all about respect.

Ageism consists of a negative bias or stereotypical attitude toward aging, the aging process, and the aged. Healthcare providers who are aware of their own attitudes towards the older population are more able to respond to the unique needs of this diverse population and be sensitive to others, including elderly patients and co-workers. Healthcare providers need to monitor – “You may not realize it, but how you were talking to Mr. Lore, was quite patronizing.”
AGEISM… THE PROBLEM & IMPLICATIONS

You are assigned to care for an 86 year old female, Ina Smith, who recently lost her husband. She has one son and is the grandmother of five. She recently moved to an assisted living facility.

1. A respectful greeting for this patient is which of the following?
   a. “Hello Mrs. Smith. I’m Beth and I’ll be your nurse today.”
   b. “Hi. Dear. Is there anything you need?”
   c. “Ina, what brought you to hospital?”
   d. “I’ll be taking care of you today. Don’t worry about a thing, Love.”

2. Patients who are Ina Smith’s age are among the fastest growing population in America.
   a. True
   b. False

3. You are preparing this patient for surgery. She begins telling you stories about her grandchildren and her childhood growing up on a farm. This behavior:
   a. indicates she is lonely and depressed.
   b. helps her validate her life.
   c. is attention-seeking behavior.
   d. points to a personality change.

4. As Ina Smith is reminiscing, it is correct to:
   a. interrupt her frequently and focus on her upcoming surgery.
   b. ignore her and perform other tasks.
   c. finish her sentences whenever possible, to avoid her talking so much.
   d. listen and repeat your understanding back to her.

5. The majority of aging adults are unable to live independently.
   a. True
   b. False
POPULATION/AGE-SPECIFIC EDUCATION POST TEST

GROWN UP...
Caring For Adolescents, Adults, and Aging Adults

AGEISM... THE PROBLEM & IMPLICATIONS

6. This patient is being taken to the operating room on a stretcher by two other staff members. You overhear the following. Which is NOT an example of ageism toward this patient?

a. “Don’t worry about your gown. We all have the same thing.”
b. “Isn’t she cute?”
c. “Have you had surgery before?”
d. “She can’t hear us. Tell me about your date last night?”

7. Which of the following is a myth about aging adults? They are:

a. at increased risk for health problems.
b. unable to make decisions about their health.
c. a diverse group of individuals.
d. major consumers of healthcare.

8. Ageism includes all of the following EXCEPT:

a. discrimination.
b. patronizing.
c. labeling.
d. respect.

9. Since 40 years ago, ageism and diversity among aging adults is decreasing in America.

a. True
b. False

10. Ageism is caused by:

a. advertisements and the media.
b. the inferiority of the dominant culture.
c. the high value society places on aging.
d. a personal distaste for growing old and dying.