

Ageism

This handout accompanies the [online module](#) from the E4 Center on this topic



Older adults may experience and talk about mental health concerns differently than younger adults. Older adults also are at increased risk for death by suicide. Building your understanding about older adult mental health can help you more effectively support older adults (and possibly their caregivers) during a crisis. Be attentive to common life transitions, grief, medical conditions, medications, substance use, cognitive function, and social support, as these can all affect older adult mental health. Become curious about your own beliefs and attitudes about aging and older adults. Awareness of common ageist beliefs can ensure your callers get the proper support and referrals they need. Consult with your supervisor and consider whether it's appropriate to request an in-person safety check.



Practical Strategies

- **Understand the older adult's attitudes about aging.** Explore unhelpful or inaccurate beliefs about aging. Offer alternative ways to think about aging in a more balanced and realistic way.
- **Be aware of intergenerational cultural experiences that may affect interactions with an older adult.** If you sense that there may be a generational gap between you and the caller, be aware of how that may affect your interactions. Acknowledge any barriers that may be affecting communication. Convey that you want to learn more about their perspective.

Key Facts

- Ageism is one of the most widespread and socially-acceptable forms of discrimination in the US and in many other places.
- Many people are unaware of their attitudes, stereotypes, and prejudices about aging and this can lead to ageist actions or discrimination.
- Ageism hurts everyone, including the people who hold ageist beliefs and those who are discriminated against.
- Ageism negatively impacts mental and physical health. Ageism results in poorer care, such as minimizing health complaints, missing reasons for suicide, and misjudging the level of suicide risk.
- Elderspeak, which is using "baby talk" when speaking with an older adult, is one common form of ageist behavior that can be damaging – and can be changed.

- **Stay present and engaged in the conversation.** Your conversation may be among the most important interactions they have experienced recently. Listen actively, reflect their emotional experience, and provide validation- *“I am hearing that you have been struggling to get a doctor to take your pain seriously. That must be so frustrating! How have you been coping with that frustration?”*
- **Check in with yourself about your own attitudes on aging.** Consider how implicit bias regarding aging may affect your work with older adults.

The five item Attitudes Toward Own Aging (ATOA) subscale of the Philadelphia Geriatric Morale Scale can be used to do a quick check. Answer **YES** or **NO** to each question below.

1. Things keep getting worse as I get older. YES/**NO**
2. I have as much pep as I did last year. **YES**/NO
3. As you get older, you are less useful. YES/**NO**
4. As I get older, things are better than I thought they'd be. **YES**/NO
5. I am as happy now as when I was younger. **YES**/NO

Score 1 point for each **bolded** answer. The total score ranges from 0 (most negative ATOA) to 5 (most positive ATOA).

Learn More:

This link to the [Philadelphia Geriatric Morale Scale](#) is the larger measure that the 5-item Attitudes Toward Own Aging (ATOA) subscale above is a part of.

This quiz from [EveryAGE Counts](#), an advocacy campaign aimed at tackling ageism against older Australians, covers many important points about ageism.

Harvard University has created a [series of tests to assess our implicit bias against a variety of groups](#), including older adults. Test your own implicit bias.

Suggestions for What to Ask and Say

Empathy about aging. If the older adult describes the difficulties they are experiencing, it is important to listen actively, be curious and nonjudgmental, and convey empathy.

EXAMPLE: *I heard you say you feel it is terrible being old. I imagine that lots of people feel that way sometimes. Can you tell me what makes you feel that way right now?*

Words matter. The caller's language around aging may indicate negative attitudes about aging or concerns about how their aging impacts others. Consider your own word choice and what it says to the older person.

EXAMPLE: *You described feeling that you are a “burden” to your family and are worried that you might “burn them out.” I can hear that you are really concerned about how your care needs may affect your family. [Note that providing assistance is a way that some families show they care. Many people do not consider acts of caring as burdensome. After the person responds, you might talk about this.]*

