

Review Paper


Clarification of Ageism in the Care System




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**Key words:**  
Clarification, Ageism, Concept analysis, Walker and Avant, Ageing, Care

**ABSTRACT**

**Objectives** The analysis of the concept of ageism will help us to achieve a similar, clear, and understandable definition of ageism in the care system. The aim of this study was clarification of the ageism in caring system.

**Methods & Materials** We utilized the Walker and Avant's model in this study. In a review of literature from 1969 to September 2018, sources were included on the basis of the definition, functions, properties, premises, consequences, and empirical referents of the ageism concept.

**Results** According to our analysis, the main attribute of the concept of ageism is that the ageism is a discriminatory process towards the elders which can have a positive or negative aspect with a conscious and unconscious manifestation in the cognitive, affective, and behavioral components in three micro, meso and macro levels and can be self-directed or other-directed.

**Conclusion** Since the concept of ageism in our country is relatively new and unknown, this concept analysis by clarifying the ageism, with understanding this concept in the care system, can improve implementation of more extent studies and development of research tools for identification of its barriers and facilitators and its execution.

**Extended Abstract**

**1. Introduction**

**D**iscrimination in the provision of care to the elderly due to their advanced age is called age discrimination. Butler first defined the issue in 1969 as "prejudice against one age group over other age groups" [1]. Age discrimination leads to the misconception that providing care to the elderly is not important enough [2]. Therefore, age discrimination against the elderly in health care centers

could have harmful consequences and weaken the health status of the elderly [3].

On the other hand, evidence has shown that caregivers are unaware of their discriminatory treatment of the elderly [2, 4]. Providing quality care depends on having sufficient knowledge about the concepts, dimensions and characteristics of the care [5]. A review of the conducted researches also showed the existence of multiple definitions and ambiguities in the concept of age discrimination. Different definitions cause ambiguity in understanding a concept. Based on the fact that the analysis of a concept in a scientific way can help to create a clear picture of it [6], the present study

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was conducted with the aim of analyzing the concept of age discrimination in the field of care system.

## 2. Methods & Materials

This research was a review study that was performed using the eight-step approach of Walker and Avant concept analysis [7]. The steps of concept analysis in this approach included: concept selection; determining the purpose of the analysis; identification of all possible uses of the concept; creation of the defining attributes; identification of model case of the concept; identification of the borderline, adversarial and innovative cases; identification of antecedents and consequences; and definition of empirical referents [7].

To search for sources, the keyword “ageism” was first searched in Pubmed, Web of Science, Scopus, ProQuest, CINAHL, Irandoc, Magiran, and SID databases (from 1969 to September 2018). The Google Scholar search engine also was searched for related articles. In addition, a manual search was performed on the selected articles’ references.

Inclusion criteria of the articles (in Persian and English) included studies discussing the following: age discrimination in hospital care; causes, backgrounds and consequences of age discrimination; and, a general definition or description of age discrimination. A total of 342 articles were found in the initial search.

First the titles and then the abstracts were reviewed and a number of articles were deleted. Then, the remaining articles were reviewed independently by two researchers to determine the inclusion and exclusion criteria. After reviewing the selected studies, finally 20 articles were used for concept analysis. Articles unrelated to care and age discrimination were excluded.

The reasons for choosing the concept of age discrimination were: the increasing number of the elderly referred to hospitals; existence of many problems in clinical care of the elderly [8]; recommendation of the World Health Organization to combat the phenomenon of age discrimination [9]; the effect of societal values and culture on the concept of age discrimination [10]; the need to introduce this concept to all health care providers; and finally, the lack of research on this concept in Iran [11].

## 3. Results

Butler's classic definition of age discrimination has been widely used since 1969 [1, 12]. It is believed that age discrimination has three dimensions: stereotypes (cognitive dimension), prejudice (emotional dimension) and discrimi-

nation (behavioral dimension) [11]. In a 2009 study, Iverson described age discrimination as prejudice, stereotyped behavior, and discrimination against old people or groups known as the elderly [13].

In his 2017 study, Sao José added two other aspects to Iverson's definition, including self-directed discrimination and other-directed discrimination [14]. The present research on the definitions and applications of the concept of age discrimination showed its important features as follows:

- Age discrimination is a discriminatory process against the elderly [6, 12, 13, 15, 16].
- It can have a positive or negative aspect [12, 13, 15-17].
- It can be conscious or unconscious [12, 13, 15-17].
- It is manifested in cognitive, emotional and behavioral dimensions [12, 13, 15-17].
- It can exist at low, medium and high levels [12, 13, 16, 17].
- It can be self-directed or other-directed [2, 6, 12, 14, 16].

The causes of age discrimination can be rooted in individuals, society, culture and government policies [18-20]. Therefore, the antecedents that lead to discrimination in providing care to the elderly were identified as follows: a. The presence of the elderly in care centers to receive care; b. Caregivers with negative beliefs and attitudes towards the elderly, which lead to discriminatory behaviors towards the elderly.

These are among the main consequences of age discrimination: endangering the health of the elderly; reducing the quality of care; exacerbating the disease; increasing the cost of care; unsafe care environment; abuse of the elderly; increased dissatisfaction with the hospital; escape from hospital and obstruction of medical communication of the elderly [20, 21]. Also, the Fraboni [22], Yilmaz [23] and Kogan [24] scales have been used in most studies to measure age discrimination.

## 4. Conclusion

The present study defined age discrimination as “discrimination against or for the benefit of the elderly in adult care centers; this means that health care providers (overtly and covertly, or guided by the elderly themselves or by another person) discriminate in the quantity and quality of care provided to the elderly compared to other age groups.

This study, because it clarified the concept of age discrimination in Iran for the first time, can be the basis for further research to build tools for measuring age discrimination and conducting intervention studies in this regard. Also, this study can be an introduction to conduct preventive measures and improve the quality of care provided to the elderly. In addition, due to the fact that the self-directed dimension has recently been added to other dimensions of age discrimination concept, further studies are suggested to clarify this dimension.

## Ethical Considerations

### Compliance with ethical guidelines

All ethical principles in this article have been approved by the ethics committee of the University of Social Welfare and Rehabilitation Sciences with the Code IR.USWR.REC.1396.263.

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### Authors' contributions

All authors were equally contributed in preparing this article.

### Conflicts of interest

The authors declared no conflict of interest.