

Centre for Policy on Ageing  
Information Service

Selected Readings

**Ageism and Age  
Discrimination**

February 2023

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## Centre for Policy on Ageing

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2022

Age Discrimination and Employability in Healthcare Work: A Double-Edged Sword for Older Workers?; by Karen Pak, Trude Furunes and Annet H De Lange.

Sustainability, vol 14, no 9, April 2022.

Due to the ageing workforce, older workers, especially in the healthcare industry, must remain employable. However, older healthcare workers may face age discrimination that can limit their employability chances. This study examined (a) the causal direction of the relationship between age discrimination and internal employability and (b) differences between age groups (young ( $\leq 30$ ), middle-aged (31-44), and older ( $\geq 45$ ) healthcare workers) in this relationship. Based on the Selection Optimisation Compensation theory, the study postulated that (i,ii) internal employability and age discrimination are inversely negatively related to one another over time and that (ii-iv) this relationship would be strongest for older employees compared to other age groups. The authors conducted a two-wave complete panel study among 1478 healthcare professionals to test these hypotheses. The results of the multi-group structural equation modelling analyses suggested that internal employability is a significant negative predictor of age discrimination. Moreover, results suggested that internal employability and age discrimination have a reciprocal relationship among older workers but are unrelated for younger and middle-aged workers. Theoretical and practical implications of the results are discussed.

From : <https://doi.org/10.3390/su14095385>

Ageism in Working Life: A Scoping Review on Discursive Approaches; by Federica Previtali, Katri Keskinen, Miira Niska and Pirjo Nikander.

The Gerontologist, vol 62, no 2, March 2022, pp e97-e111.

This review investigates the contribution of discursive approaches to the study of ageism in working life. It looks back on the 50 years of research on ageism and the body of research produced by the discursive turn in social science and gerontology. The study followed the 5-step scoping review protocol to define gaps in the knowledge on ageism in working life from a discursive perspective. About 851 papers were extracted from electronic databases and, according to inclusion and exclusion criteria, 39 papers were included in the final review. The selected articles were based on discursive approaches and included study participants along the full continuum of working life (workers, retirees, jobseekers, and students in training). Three main themes representing the focal point of research were identified, namely, experiences of ageism, social construction of age and ageism, and strategies to tackle (dilute) ageism. The study finds that discursive research provides undeniable insights into how participants experience ageism in working life, how ageism is constructed, and how workers create context-based strategies to counteract age stereotypes, prejudice, and discrimination. It also finds that discursive research on ageism in the working life needs further development about the variety of methods and data, the problematization of age-based labelling and grouping of workers, and a focus on the intersection between age and other social categories. Further research in these areas can deepen our understanding of how age and ageism are constructed and can inform policies about ways of disentangling them in working life.

From : <https://doi.org/10.1093/geront/gnaa119>

The association between ageist attitudes, subjective age, and financial exploitation vulnerability among older adults; by Gali Weissberger, Yoav S Bergman, Amit Shrira.

Journal of Applied Gerontology, online first, October 2022.

Ageism, or age-based negative stereotypes, prejudice, and/or discriminatory behaviours toward older adults, has been linked with various detrimental physical and psychological consequences. The current study examined the relevance of ageist attitudes to financial exploitation vulnerability (FEV) among older adults and investigated whether feeling older than one's chronological age (i.e., older subjective age) moderated the ageist attitudes-FEV association. 230 participants (mean age = 72.08, SD = 5.74) filled out scales assessing ageist attitudes, subjective age, and provided relevant sociodemographic information. High levels of ageist attitudes and an older subjective age were associated with increased FEV. Moreover, the ageist attitudes-FEV association was significantly stronger among participants reporting an older subjective age. The results highlight the importance of taking into account ageism and subjective age in order to gain a deeper understanding of the underlying mechanisms which render older adults vulnerable to financial exploitation. Practical and empirical implications are discussed. (NL/RH)

ISSN: 07334648

From : <https://doi.org/10.1177/07334648221132130>

Combating ageism through adult education and learning; by António Fragoso, Joséia Fonseca. *Social Sciences*, vol 11, article number 110, 2022, 12 pp.

The demographic data and projections show that the world is ageing at a high pace and that this has detrimental consequences for society. The available data on ageism show that it constitutes the most prevalent form of discrimination in Europe. Whilst this seems logical because ageism, potentially, affects everybody (unlike sexism or racism), public debate on the phenomenon is rare. The awareness of people of its importance is minimal, the resources and investigation devoted to understanding it are relatively small, and the initiatives towards combating ageism are inadequate. There is a mismatch between the dimension of the phenomenon and the attention that we have given it. Ageism has various negative consequences for the older adults themselves, for the institutions at large (but especially for the working world institutions), and for countries. In a fast-ageing world that will witness structural changes in age groups, ageism is a complex phenomenon that needs to be counteracted. So far, in Europe, combating ageism through law and public policy seems to have produced poor results. However, the literature shows that adult education and learning can provide very effective means for improving mutual knowledge between generations, combating myths and prejudice, and deconstructing age-based stereotypes. (OFFPRINT). (RH)

From : <https://doi.org/10.3390/socsci11030110>

Covid-19 and age discrimination: benefit maximization, fairness, and justified age-based rationing; by Andreas Albertsen.: Springer, October 2022, 9 pp.

*Medicine, Health Care and Philosophy*, October 2022, 9 pp.

Age-based rationing remains highly controversial. This question has been paramount during the Covid-19 pandemic. Analysing the practices, proposals and guidelines applied or put forward during the current pandemic, three kinds of age-based rationing are identified: an age-based cut-off, age as a tiebreaker, and indirect age rationing, where age matters to the extent that it affects prognosis. Where age is allowed to play a role in terms of who gets treated, it is justified either because this is believed to maximise benefits from scarce resources or because it is believed to be in accordance with the value of fairness understood as (a) fair innings, where less priority is given to those who have lived a full life, or (b) an egalitarian concern for the worse off. By critically assessing prominent frameworks and practices for pandemic rationing, this article considers the balance the three kinds of age-based rationing strikes between maximising benefits and fairness. It evaluates whether elements in the proposals are, in fact, contrary to the justifications of these measures. Such shortcomings are highlighted, and it is proposed to adjust prominent proposals to care for the worse-off more appropriately and better consider whether the acquired benefits befalls the young or the old. (OFFPRINT) (RH)  
ISSN: 15728633

From : <https://doi.org/10.1007/s11019-022-10118-8>

Cross-generational understandings of ageism and its perceived impacts on personal-public health; by Diana M Mayo, Thomas M Meuser, Regula H Robnett, Megan E Webster, Carly E Woolard.: Taylor and Francis, October 2022, pp 711-727.

*Journal of Gerontological Social Work*, vol 65, no 7, October 2022, pp 711-727.

In 2016, the World Health Organization (WHO) launched a global campaign to combat ageism, emphasizing its potential harm to personal and public health. This qualitative focus group study explored generational differences in understanding the WHO's definition and impact of ageism among northern New England, United States baby boomers (ages 60-72; n = 17) and silent generation members (ages 78-85; n = 10). Verbatim transcripts were analysed via a grounded theory approach, and representative themes and quotations were extracted by consensus. Members of both age groups initially downplayed personal impacts of ageism in favour of a broader discussion of age-related discrimination on a societal level. As each discussion progressed, however, participants acknowledged economic, social and health impacts linked with ageism, but primarily for others. Both groups noted ageist actors in places of employment, healthcare settings, restaurants, retirement communities and within family networks. Interestingly, each group rated risk of harm by ageism as greater for the other group. The findings highlight challenges associated with the translation of a broad public health campaign to engage specific stakeholder subgroups. The authors discuss future research, education, and training initiatives across all ages to address the detrimental impacts of ageism. (RH)

ISSN: 01634372

From : <https://doi.org/10.1080/01634372.2021.2019865>

Discriminatory abuse: time to revive a forgotten form of abuse?; by Karl Mason, Anusree Biswas Sasidharan, Adi Cooper (et al).: Emerald, 2022, pp 115-125.

*Journal of Adult Protection*, vol 24, no 2, 2022, pp 115-125.

Discriminatory abuse has been a distinct category of abuse in safeguarding adults policy since 2000 but it is rarely used in practice according to recent official statistics. As part of a larger project, the authors undertook a

literature review to clarify the concept, explore reasons for low reporting and consider recommendations for practice. The review comprised 35 sources, which were identified using three academic databases, reference harvesting and sector-specific websites. Examples of discriminatory abuse for the purpose of this study would include hate crime and/or mate crime, homophobia, racism and disability abuse. Findings from the review showed that definitions of discriminatory abuse stretch from an interpersonal emphasis in policy documents to a more structural approach. There are open questions about the status of discriminatory abuse as a category of abuse due to the complicated interface between discriminatory motivations and the abusive acts through which they are experienced. A range of factors can obscure its identification, particularly the hidden, stigmatised and normalised nature of discriminatory abuse. Some recommendations for practice are identified, but more work is needed to develop the practice vocabulary and required skills. (JL)

ISSN: 14668203

From : <https://www.emeraldinsight.com/loi/jap>

Embodied ageism: "I don't know if you do get to an age where you're too old to learn"; by Sarah Vickerstaff, Mariska van der Horst.

Journal of Aging Studies, vol 62, September 2022, 8 pp (pre-publication).

More people are extending their working lives through choice or necessity; and as a result, there is an increasing focus on the experiences of older workers. Access to training and development at work are seen to be one way of maintaining older workers' motivation, productivity and job satisfaction; but at the same time, we know that older workers typically get less training at work than younger members of the workforce. This article explores how ageist environments in society and in work organisations affect how older workers view the opportunities for training at work. Speech about training and development is analysed in semi-structured interviews conducted with 104 older workers, 25 line managers and 27 human resource and occupational health managers in the United Kingdom. Managers commonly spoke in ageist terms about older workers being less motivated or less able to undertake training and development. These stereotypes were also embodied or internalised by many older workers, who expressed the view that they were now 'too old' for training and/or promotion, either because of their career stage, or because of the 'inevitable' physical and cognitive decline that comes with age and which makes learning new things more difficult. As access to training and development are recognised as one way of facilitating good and longer working lives, understanding the impact of ageist environments as well as direct discrimination against older workers is necessary to enable, encourage and motivate older workers to engage in development activities. (OFFPRINT). (RH)

ISSN: 08904065

From : <https://doi.org/10.1016/j.jaging.2022.101054>

Expanding benevolent ageism: replicating attitudes of overaccommodation to older men; by Jennifer F Sublett, Michael T Vale, Toni L Bisconti.: Taylor and Francis, May-June 2022, pp 220-233.

Experimental Aging Research, vol 48, no 3, May-June 2022, pp 220-233.

Older adults are stereotyped in a paternalistic manner (warm, but incompetent), deserving of assistance regardless of their need; however, little is known about how gender contextualises these attitudes. This study extends previous work that examined the malleability of the paternalistic older adult stereotype. The study uses a two-part experimental vignette, whose goals included: (1) examining attitudes of benevolent ageist behaviour toward a male target; (2) confirming whether attributions made toward an older male target change if they defy or confirm the paternalistic stereotype; and (3) examining the distinct roles of age and gender on an act of benevolent ageism. In previous work, a female target was offered unnecessary assistance, which is replicated in the current study with a male target. The age (young vs old), response (accepting vs declining assistance), and gender (male vs female) of the target were manipulated and then rated by a young adult sample (N = 698). These findings replicated earlier work, in that over-accommodative behaviours were endorsed more so for the older target than the younger target, which corroborates support for the Stereotype Content Model in that older adults are viewed paternalistically. Additionally, the older male target and the older female target were viewed differently when they respectively defied the paternalistic stereotype, indicating distinctness between benevolent ageism and benevolent sexism. These findings add to the growing body of benevolent ageism literature and highlight the intersection of gender and age. (RH)

ISSN: 0361073X

From : <https://doi.org/10.1080/0361073X.2021.1968666>

Expressions of self-ageism in four European countries: a comparative analysis of predictors across cultural contexts; by Belia Schuurman, Jolanda Lindenberg, Johanna M Huijg, Wilco P Achterberg, Joris P J Slaets.: Cambridge University Press, July 2022, pp 1589-1606.

Ageing and Society, vol 42, no 7, July 2022, pp 1589-1606.

Self-ageism has a significant negative impact on older people's ageing experiences and health outcomes. Despite ample evidence on cross-cultural ageism, studies have rarely looked into the way cultural contexts affect self-ageism. In this article, the authors compare expressions of self-ageism and its possible predictors across four European countries (France, Poland, Portugal and the Netherlands) based on two questionnaires in a study sample of 2,494 individuals aged 55 and older. The authors explore how predictors of self-ageism are moderated by cultural values in a comparative fixed-effects regression model. They empirically show that similarly to ageism, self-ageism is not present in the same way and to the same extent in every country. Moreover, the level to which cultures value hierarchy and intellectual autonomy significantly moderates the association between self-ageism and individual predictors of self-ageism. This study adds to the small existing body of work on self-ageism by confirming empirically that certain expressions of self-ageism and individual predictors are susceptible to change in different cultural contexts. The research results suggest that self-ageism interventions may benefit from a culturally sensitive approach and imply that more culturally diverse comparisons of self-ageism are necessary to figure out fitting ways to reduce self-ageism. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20001622>

Gendered ageism and gray hair: must older women choose between feeling authentic and looking competent?; by Vanessa Cecil, Louise F Pendry, Jessica Salvatore, Hazel Mycroft, Tim Kurz.

Journal of Women & Aging, vol 34, no 2, 2022, pp 210-225.

Ageing women frequently use hair dye to disguise their age in order to avoid being stigmatised as 'old'. Recently, however, some have chosen naturally grey hair. Informed by Goffman's theory of stigma, this study investigated why they would do so in the face of age discrimination, and their experiences of the process. It identified two major, oppositional themes, competence and authenticity. Despite wanting to avoid perceptions of old-thus-incompetent, women risked grey hair in order to feel authentic. However, they employed other beauty practices to mitigate the effects of grey hair, indicating conflict between a (subjectively) authentic appearance and societal perceptions of competence.

From : <https://doi.org/10.1080/08952841.2021.1899744>

Is ageism an oppression?; by Paul Higgs, Chris Gilleard.

Journal of Aging Studies, vol 62, September 2022, 6 pp.

The concept of ageism as oppression has become an important point of reference in contemporary gerontology. Apart from its giving substance to the negative experiences impacting on older people, the idea of ageism as oppression is used in many different contexts, with different meanings. In this paper, the authors argue that the positioning of ageism as oppression, rather than constituting a deepening of gerontological focus, seems to serve as a way of connecting those using it with other social movements for whom oppression and its overcoming have been critical to their historical development. The authors argue that in and of itself, ageism as oppression has little instrumental value in effecting change over and above that associated with the identification of discrimination experienced by older people in various settings. Furthermore, it risks reinforcing a homogenised perspective of later life that masks the complex and contradictory position that later life occupies in most ageing societies. (OFFPRINT.) (RH)

ISSN: 08904065

From : <https://doi.org/10.1016/j.jaging.2022.101051>

Is part of ageism actually ableism?; by Mariska van der Horst, Sarah Vickerstaff.

Ageing and Society, vol 42, no 9, September 2022, pp 1979-1990.

Ageism is a widely used term that is not (yet) well understood. We propose a redefinition of ageism and to separate it from ableism. We believe this to be important as remedies may depend on whether someone is experiencing ageism or ableism. While focusing the discussion on older workers as a sub-group of older people who (can) experience ageism, we assess the usefulness of critical (feminist) disability studies for ageism research. We hope that redefining ageism and analytically separating it from ableism (without suggesting that both concepts should be studied independently from one another) will provide guidance for researchers who study ageism and will allow for more specific policy guidance on how to solve difficulties experienced by older workers.

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20001890>

A scoping review of ageism towards older adults in cancer care; by Kristen R Haase, Schroder Sattar, Sophie Pilleron, Yentl Lambrechts, Michelle Hannan, Erna Navarrete, Kavita Kantilal, Lorelei Newton, Kumud Kantilal, Rana Jin, Hanneke van der Wal-Huisman, Fay J. Strohschein, M. Pergolotti, Kevin B. Read, Cindy Kenis, Martine Puts, Nursing and Allied Health Interest Group, International Society of Geriatric Oncology (SIOG).

Journal of Geriatric Oncology, October 2022.

Ageism towards older adults with cancer may impact treatment decisions, healthcare interactions, and shape health/psychosocial outcomes. The purpose of this review is twofold: (1) To synthesize the literature on ageism towards older adults with cancer in oncology and (2) To identify interventions that address ageism in the healthcare context applicable to oncology. The authors conducted a scoping review following Arksey and O'Malley and Levac methods and Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. They conducted an exhaustive multi-database search, screening 30,926 titles/abstracts. Following data abstraction, and conducted tabular, narrative, and textual synthesis. The study extracted data on 133 papers. Most (n = 44) were expert opinions, reviews, and letters to editors highlighting the negative impacts of ageism, expressing the need for approaches addressing heterogeneity of older adults, and calling for increased clinical trial inclusion for older adults. Qualitative studies (n = 3) described healthcare professionals' perceived influence of age on treatment recommendations, whereas quantitative studies (n = 32) were inconclusive as to whether age-related bias impacted treatment recommendations/outcomes or survival. Intervention studies (n = 54) targeted ageism in pre/post-licensure healthcare professionals and reported participants' improvement in knowledge and/or attitudes towards older adults. No interventions were found that had been implemented in oncology. Concerns relating to ageism in cancer care are consistently described in the literature. Interventions exist to address ageism; however, none have been developed or tested in oncology settings. The study concludes that addressing ageism in oncology will require integration of geriatric knowledge/interventions to address conscious and unconscious ageist attitudes impacting care and outcomes. Interventions hold promise if tailored for cancer care settings.

From : <https://doi.org/10.1016/j.jgo.2022.09.014>

Value systems as motivational forces for the suppression of ageism towards older people amongst young adults: an analysis across countries; by Adrian Stanciu.: Cambridge University Press, April 2022, pp 868-895.

Ageing and Society, vol 42, no 4, April 2022, pp 868-895.

What explains ageism towards older people? Several answers exist in the literature, but it is still unclear whether the ageism people express has been altered by motivational forces (i.e. factors which carry or enact motivation, leading to action or thought) or whether an original, primal ageism can be expressed directly. Investigating populations of young adults (45 and younger), this article suggests that value systems are sources of internal and external motivational forces which work to either suppress or to justify both subtle and blatant forms of ageism. It was hypothesised that, at the individual level, values precede any threat perception and negative stereotypical beliefs associated with older people, leading to forms of ageism which match the motivational goals of a person's values. It was further expected that, at the cultural level, values represent the climate in which people express ageist beliefs. It was found that self-transcendence values can bypass the negative effects of threat perception and negative stereotypes, resulting in less-negative forms of ageism. A sample comprising a clear majority of hierarchical, non-Western cultures showed that self-enhancement values also contributed motivational strength for the suppression of blatant ageism. A practical implication of these findings is the possibility of further developing existing strategies of combating ageism by working to effect appropriate long-term changes in the values of young adults. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20001257>

Visual ageism and the subtle sexualisation of older celebrities in L'Oréal's advert campaigns: a Multimodal Critical Discourse Analysis; by Lame Maatla Kenalemang.

Ageing and Society, vol 42, no 9, September 2022, pp 2122-2139.

This study focuses on the recent increase in the use of older celebrities in cosmetics advertising. It asks what kinds of ideas and values these images may attribute to discourses of ageing. Drawing on a Multimodal Critical Discourse Analysis (MCDA) perspective, this study focuses on L'Oréal UK and Ireland Web advertisements, examining how these advertisements use older celebrities to redefine/reposition ageing and exploring how they relate to the notion of 'successful ageing'. In these advertisements, using cosmetics is presented as a positive, empowering choice. The advertisements simultaneously promote new discourses about ageing in which older women's sexuality is presented as a form of power. However, the analysis shows that the underlying discourse pathologises ageing and presents ageing as something which can be evaded through the consumption of cosmetics. It thus turns ageing into a choice, but one where the 'right choice' aligns with neo-liberal ideas about ageing well. For women, decision-making about ageing seems to be a never-ending process that requires

constant construction, promoted through the older celebrity's sexualisation. Women are expected to always look good and present the best versions of themselves, even at the latest stages of life, which reproduces and legitimises sexist and ageist expectations about women's appearances, including the expectations that for older women to remain visible and attractive, they must hide outward signs of ageing.

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20002019>

## 2021

Acknowledging systemic discrimination in the context of a pandemic: advancing an anti-racist and anti-ageist movement; by Ernest Gonzales, Stacey Gordon, Cliff Whetung (et al.): Taylor and Francis, April-May 2021, pp 223-237.

Journal of Gerontological Social Work, vol 64, no 3, April-May 2021, pp 223-237.

The purpose of this commentary was to draw together the confluence of current events, namely the COVID-19 pandemic and racial injustice. It is argued that vulnerability to COVID-19 cannot be understood by age alone but within the context of inequity. The authors first review how COVID-19 has disproportionately affected Black and Latino populations across the life span with the latest data from New York City Department of Health. They then discuss critical race theory and analyse longstanding inequities in health, economic and social conditions that heighten the risk for vulnerability. The study concludes with a discussion for the social work profession on the issues of defunding the police to undoing stereotypes. (JL)

ISSN: 01634372

From : <https://www.tandfonline.com>

Associations of ageism and health: a systematic review of quantitative observational studies; by Rita Xiaochen Hu, Mengsha Luo, Anao Zhang, Lydia W Li.: Sage, August-September 2021, pp 311-322.

Research on Aging, vol 43, nos 7-8, August-September 2021, pp 311-322.

This systematic review synthesizes observational studies on the relationship between ageism and health. We searched 10 electronic databases and included 67 articles. The operationalization of ageism in these studies can be classified into three constructs: age stereotype, self-perceptions of aging, and age discrimination. Most ageism measures were used within a single study, and many lacked information about psychometric properties. Seven health domains - disease, mortality, physical/functional health, mental health, cognitive function, quality of life, and health behaviour - have been used as outcomes. Evidence supports a significant association between ageism and health, particularly between self-perceptions of aging and health. Nine studies report moderators, which helps to identify those more vulnerable to negative effects of ageism and inform the development of interventions. The review suggests that the literature has examined limited dimensions of ageism, and that developing valid and reliable instruments for ageism-related concepts is a priority.

ISSN: 01640275

From : <https://doi.org/10.1177%2F0164027520980130>

Can adults discriminate between fraudulent and legitimate e-mails?: Examining the role of age and prior fraud experience; by Alison M O'Connor, Rebecca A Judges, Kang Lee, Angela D Evans.: Taylor and Francis, June-July 2021, pp 181-205.

Journal of Elder Abuse and Neglect, vol 33, no 3, June-July 2021, pp 181-205.

This Canadian study assessed how accurate adults are at detecting fraudulent e-mail activity. A total of 100 younger (18-26 years) and 96 older adults (60-90 years) categorized a series of e-mails as legitimate or as fraudulent phishing scams and self-reported their fraud experiences. Younger and older adults did not differ in accuracy rates when categorising the e-mails (72%), but older adults used a "high-suspicion" strategy where they were more likely to mislabel a legitimate e-mail as fraudulent compared to younger adults. Younger adults were less likely to be targeted by fraud than older adults, but the groups were victimised at similar rates. Being a previous victim of fraud negatively related to e-mail detection performance, but this differed across age groups and the extent of fraud experience. Together, these results provide insight into the relation between fraud experience and the ability to detect e-mail scams and can inform fraud prevention and education initiatives.

(RH)

ISSN: 08946566

From : <https://www.tandfonline.com>



Chronological quarantine and ageism: COVID-19 and gerontology's relationship with age categorisation; by James Rupert Fletcher.: Cambridge University Press, March 2021, pp 479-492.

Ageing and Society, vol 41, no 3, March 2021, pp 479-492.

In March 2020, the government of the United Kingdom advised all people aged 70 and above to self-isolate stringently for a minimum of 12 weeks in response to COVID-19. The British Society of Gerontology criticised the government for ignoring individual differences, deeming the approach ageist. Former British Geriatrics Society president David Oliver contested accusations of ageism, arguing that the approach was pragmatic discrimination based on epidemiological evidence. This debate catalyses core gerontological tensions regarding ageism, discrimination, categorisation and heterogeneity. A critical realist perspective reveals that both the government and gerontology are struggling to negotiate these irresolvable tensions. Contrary to the binary debate, age-based isolation simultaneously represents pragmatic discrimination and value-driven ageism. However, it does so partly because it relies on a chronologic epistemology that positions age as a potent biosocial axis of meaningful difference, thereby reflecting gerontology's own ageism. The ethical purism of gerontological accusations of ageism is thus somewhat misplaced, potentially obscuring an opportunity for reflection on value-laden engagements with age in social research.

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20001324>

The Comparative Macro-Level Ageism Index: an international comparison; by Ju-Hyun Kim, Ahyoung Song, Soondool Chung (et al.): Taylor and Francis, November-December 2021, pp 571-584.

Journal of Aging and Social Policy, vol 33, no 6, November-December 2021, pp 571-584.

Ageism, the socially constructed discrimination against older people, influences their quality of life. This study aimed to compare ageism in 15 Organisation for Economic Cooperation and Development (OECD) countries using the scientifically developed Comparative Macro-Level Ageism Index (CMAI). A research team developed the CMAI by reviewing previous index research on the life of older people and by conducting expert interviews using a Delphi method. They identified five domains, economic status, health, employment, environment, and social participation, and 17 indicators of ageism. Standardised ageism scores were compared across 15 OECD countries. The results indicated that the overall ageism score was highest in Turkey and lowest in Japan. Turkey was the most likely while South Korea was the least likely to practice age discrimination in the workplace. Yet, South Korea had the highest score for discriminating against seniors based on economic status while Spain had the lowest score in this domain. Japan had favourable conditions for economic status, health status and social participation for older adults. Implications of this study and suggestions for further studies on developing an objective indicator of structural age discrimination are discussed. (RH)

ISSN: 08959420

From : <https://www.tandfonline.com>

Counting the costs of ageism: discrimination and COVID-19; by Cassie Curryer, Peta S Cook.: Wiley, September 2021, pp 237-240.

Australasian Journal on Ageing, vol 40, no 3, September 2021, pp 237-240.

This brief literature review looks at the rampant prevalence of ageism in Australia and around the world, particularly in the context of the COVID-19 pandemic. During COVID, the dangerousness and insidiousness of ageism have been strongly evident across care provision and policy responses. This has been witnessed in the questioning of the abandonment and resultant deaths of older people in aged care and ongoing debates about the ethics of refusing care and lifesaving support to older COVID patients. Extra burdens placed on older people have included restricting or limiting access to health services, and lockdown measures that have led to increased physical and mental health problems. Ageism as a social determinant of health interacts with other forms of discrimination and negatively impacts older people as individuals. Recognising the human rights of older people is an important first step in addressing the consequences of ageism for individuals and society. (JL)

ISSN: 14406381

From : <https://doi.org/10.1111/ajag.12993>

How to avoid ageist language in aging research?: An overview and guidelines; by Carmen Bowman, Weng Marc Lim.: Taylor and Francis, October-December 2021, pp 269-275.

Activities, Adaptation and Aging, vol 45, no 4, October-December 2021, pp 269-275.

Language carries and conveys meaning that feeds assumptions and judgments. Such is the case with ageist language which perpetuates prejudice, stereotyping and discrimination against people based on their age. Of particular interest in this article is the widespread use of ageist language in research on ageing and the need for guidelines to mitigate it. In 'The economic, social and cultural rights of older persons' (1995), the United Nations Committee on Economic, Social and Cultural Rights rejected the term "elderly" in preference for "older persons". However, a search on Google Scholar for the term "elderly" in the titles of articles published between

2000 and 2020 returns more than 140,000 results, and a search for the term anywhere within articles returns more than 2,000,000 results. These observations highlight the prevalence of ageist language in the literature. The authors suggest guidelines for and provide exemplars of age-related language in two areas: language describing older people, and language describing activities. In doing so, they hope to address the problem of ageist language and to promote dignified and respectful language use in commentaries and studies on ageing. This is in line with the World Health Organization Decade of Healthy Ageing (2021-2030), a plan of action for combating ageism. (RH)

ISSN: 01924788

From : <https://www.tandfonline.com>

Recent versus lifetime experiences of discrimination and the mental and physical health of older lesbian women and gay men; by Anthony Lyons, Beatrice Alba, Andrea Waling, Victor Minichiello, Mark Hughes, Catherine Barrett, Karen Fredriksen-Goldsen, Samantha Edmonds, Michelle Blanchard.: Cambridge University Press, May 2021, pp 1072-1093.

Ageing and Society, vol 41, no 5, May 2021, pp 1072-1093.

This study examines the potential health-related impact of recent versus lifetime experiences of sexual orientation discrimination among older Australian lesbian women and gay men. In a nationwide survey, a sample of 243 lesbian women and 513 gay men aged 60 years and over reported on their experiences of sexual orientation discrimination and their mental and physical health, including psychological distress, positive mental health and self-rated health. Among both lesbian women and gay men, recent discrimination uniquely predicted lower positive mental health after adjusting for experiences of discrimination across the lifetime and socio-demographic variables. In addition, recent discrimination uniquely predicted higher psychological distress among gay men. Experiences of discrimination over the lifetime further predicted higher psychological distress and poorer self-rated health among gay men after adjusting for recent experiences of discrimination and socio-demographic variables. However, there were no associations between lifetime discrimination and any of the outcome variables among lesbian women. Overall, recent and lifetime experiences of sexual orientation discrimination were related to mental and physical health in different ways, especially among the men. These findings have potential implications for policy/practice, and suggest that distinguishing between recent and lifetime experiences of discrimination may be useful when assessing potential health-related impacts of sexual orientation discrimination among older lesbian women and gay men, while also taking account of differences between these two groups.

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X19001533>

Special issue: The Covid-19 pandemic and older adults: experiences, impacts, and innovations; by Edward Alan Miller (ed).: Taylor and Francis, July-October 2021, pp 305-569.

Journal of Aging and Social Policy, vol 33, nos 4-5, July-October 2021, pp 305-569.

The COVID-19 pandemic has disrupted life globally through virus-related mortality and morbidity and the social and economic impacts of actions taken to stop the virus' spread. It became evident early in the pandemic that COVID-19 and the strategies adopted to mitigate its effects would have a disproportionate impact on older adults. This special issue of the Journal of Aging & Social Policy reports original empirical research and perspectives on the ramifications of the COVID-19 pandemic for this population. The articles are arranged in four sections covering these themes: personal experiences; long-term care system impacts; end-of-life care; and technology and innovations. An introductory essay by the editor - 'Shining a spotlight: the ramifications of the COVID-19 pandemic for older adults' - highlights key issues pertaining to the impact of COVID-19 on older adults and their families, caregivers and communities. (RH)

ISSN: 08959420

From : <https://www.tandfonline.com>

Structural discrimination and abuse: COVID-19 and people in care homes in England and Wales; by Jonathan Parker.: Emerald, 2021, pp 169-180.

Journal of Adult Protection, vol 23, no 3, 2021, pp 169-180.

The purpose of this paper is to explore the significant and high death toll of COVID-19 on care home residents and social care staff in England and Wales. These mortality figures, alongside differential treatment of residents and staff during the pandemic, are conceptualized as a form of structural abuse. Arguments are made for the inclusion of structural abuse as a separate category of elder abuse. The paper is predominantly conceptual but it also draws on available secondary data, such as mortality statistics, media reports and developing research. The paper finds that the lack of appropriate personal protective equipment, paucity of guidance and high mortality rate among care home staff and residents during the pandemic is indicative of social discourses that, when underpinned by ageism, reflect structural elder abuse. If structural elder abuse was to be included in

classifications, it demands a rethink of social and health-care services and the policies and practices associated with them and reinforces the government message that safeguarding is everyone's business.

ISSN: 14668203

From : <https://doi.org/10.1108/JAP-12-2020-0050>

Workplace age discrimination and affecting factors in Turkey: a validation study; by Emine Ozmete, Melike Pak, Serdarhan Dudru.: Taylor and Francis, October-December 2021, pp 436-450.

Experimental Aging Research, vol 47, no 5, October-December 2021, pp 436-450.

A sample of 465 Turkish women and men (aged 18+) with an active working life participated in this study, which was undertaken to adapt the Workplace Age Discrimination Scale (WADS) to Turkish. Corrected item total correlation and Cronbach's alpha, internal consistency coefficient were calculated for reliability of WADS. High order confirmatory factor analysis was performed to test the theoretical suitability and construct validity for Turkish context. In this study, WADS has one factor construction. Cronbach's Alpha Reliability Coefficient was found to be 0.904 for WADS. Predictors of workplace age discrimination in Turkish population were determined as age, hierarchical structure, job satisfaction and income satisfaction. These results showed that the Turkish version of WADS may be used as a valid and reliable tool in determining workplace age discrimination and in other relevant research. Exploring the validity and reliability of the scale should be repeated in groups which have different socio-demographics and health situations. (RH)

ISSN: 0361073X

From : <https://www.tandfonline.com>

## 2020

Addressing age stereotyping against older workers in employment: The CJEU and UK approach; by Lyndsey Bengtsson.

International Journal of Law and Management, Vol 62, No 1, March 2020, pp 67-92.

The purpose of this paper is to report on an analysis of direct age discrimination cases by the Court of Justice of the European Union (CJEU) and the UK courts and employment tribunals over an 11-year period. The paper focusses upon age stereotyping towards older workers and analyses whether it is endorsed at the European level and/or national level. This research has analysed a sample of 100 employment tribunal judgments concerning direct age discrimination together with 28 CJEU decisions on direct age discrimination. This paper highlights that there are a number of cases in which age stereotyping has been endorsed at the CJEU level. By contrast, the UK courts and employment tribunals have adopted a more robust approach. The main limitation is that it only considers case law from the European Court and the influence on the UK case law, without analysing the eventual decisions of the other EU member states.

From : <https://doi.org/10.1108/IJLMA-01-2019-0019>

The consequences of ageist language are upon us; by Clara Berridge, Nancy Hooyman.: Taylor and Francis, August-October 2020, pp 508-512.

Journal of Gerontological Social Work, vol 63, nos 6-7, August-October 2020, pp 508-512.

The COVID-19 pandemic has highlighted the ease in which ageist language is employed and ageist stereotypes are used to characterise older adults. These are harmful and display an impressive lack of future thinking \_ as younger and middle-aged adults who use this language and forward these concepts also hope to live long lives. The disproportionately negative outcomes for older adults in this pandemic in part, reflect social and economic inequalities that are manifest throughout the life course of marginalised groups including people of colour. They also reflect major problems with institutional living be it in prisons or nursing homes. Social workers and allied professionals can work to address these manifestations of ageism in part by employing inclusive language \_ as advised by the Reframing Aging Project, working to build and support strong intergenerational relationships, working to eradicate social and economic disparities at all life stages, and advocating for a more critical look at institutionalisation of older adults. (JL)

ISSN: 01634372

From : <https://www.tandfonline.com>

The COVID-19 pandemic exposes limited understanding of ageism; by Laurinda Reynolds.: Taylor and Francis, July-October 2020, pp 499-505.

Journal of Aging and Social Policy, vol 32, nos 4-5, July-October 2020, pp 499-505.

During the COVID-19 pandemic, justification for orders to shelter in place have emphasised the vulnerability of older people. Although other at-risk groups were sometimes mentioned, the emphasis on older people could have effects on attitudes about ageing and older people for decades to come. This essay provides a comprehensive biopsychosocial description of ageism. It discusses the pandemic as a "focusing event" that

exemplifies the extreme social consequences of ageism for the entire older population. It suggests revisions to the Elder Justice Act of 2009 and utilisation of programmes such as the Reframing Aging Initiative, the Age-Friendly University (AFU), and Ageism First Aid (AFA) to reduce ageism in the wake of the pandemic. (RH)  
ISSN: 08959420  
From : <https://www.tandfonline.com>

Dimensions of work-related age stereotypes and in-group favoritism; by Verena Kleissner, Georg Jahn.: Sage, March-April 2020, pp 126-136.  
Research on Aging, vol 42, nos 3-4, March-April 2020, pp 126-136.  
Examines the effects of age stereotypes in the context of 380 German nurses aged between 19 and 63 years. Older nurses were seen as more competent, less physically strong and less adaptable whereas younger nurses were seen as less reliable, more adaptable and less warm. (NH)  
ISSN: 01640275  
From : <http://www.journals.sagepub.com/home/roa>

Elder sexual abuse and implicit ageism: examining the warm-incompetent bias among mock jurors; by Maggie L. Syme, Tracy J. Cohn.: Taylor and Francis, January-February 2020, pp 1-26.  
Journal of Elder Abuse and Neglect, vol 32, no 1, January-February 2020, pp 1-26.  
Implicit ageist beliefs about the warmth and incompetence of older adults may influence jurors' perceptions and judgments of an older adult's competence in legal cases hinging on capacity and consent, including elder sexual abuse. However, little is known about the nuances of implicit ageism in elder sexual abuse cases, and if it can be attenuated. The current study proposed to address these gaps via a randomized vignette design administered to a community sample of 391 US adults. Mock juror participants evaluated an elder sexual abuse case involving an older married couple, in which the victim had dementia. Results suggest that implicit ageism was present among mock jurors, consistent with a warm-incompetence bias, and was predictive of mock jurors' guilt ratings. Age- and dementia-relevant jury instructions and mock juror gender were not found to be predictive of guilt ratings. Implicit ageism among jurors should be addressed to reduce the potential for implicit age bias to affect elder sexual abuse cases.  
ISSN: 08946566  
From : [www.tandfonline.com](http://www.tandfonline.com)

The ideology of ageism versus the social imaginary of the fourth age: two differing approaches to the negative contexts of old age; by Paul Higgs, Chris Gilleard.: Cambridge University Press, August 2020, pp 1617-1630.  
Ageing and Society, vol 40, no 8, August 2020, pp 1617-1630.  
The development of social gerontology has led to the emergence of its own terminology and conceptual armoury. 'Ageism' has been a key concept in articulating the mission of gerontology and was deliberately intended to act as an equivalent to the concepts of racism and sexism. As a term, it has established itself as a lodestone for thinking about the de-valued and residualised social status of older people in contemporary society. Given this background, ageism has often been used to describe an overarching ideology that operates in society to the detriment of older people and which in large part explains their economic, social and cultural marginality. This paper critiques this approach and suggests an alternative based upon the idea of the social imaginary of the fourth age. It argues that not only is the idea of ageism too totalising and contradictory but that it fails to address key aspects of the corporeality of old age. Adopting the idea of a social imaginary offers a more nuanced theoretical approach to the tensions that are present in later life without reducing them to a single external cause or explanation. In so doing, this leaves the term free to serve, in a purely descriptive manner, as a marker of prejudice.  
ISSN: 0144686X  
From : <https://doi.org/10.1017/S0144686X19000096>

Older people and COVID-19: isolation, risk and ageism; by Joanne Brooke, Debra Jackson.  
Journal of Clinical Nursing, vol 29, nos 13-14, July 2020, pp 2044-2046.  
First published on 2 April 2020, this editorial argues that, over the course of the pandemic, we have seen evidence of openly ageist discourses, which complicate the experiences of living through COVID-19 for older people. These ageist discourses suggest that the death of an older person is not as important as that of a younger person, or that care should be rationed to the disadvantage of older people, undermining feelings of self-worth or promoting a sense of being a burden. There is an urgent need to support older people, to mitigate the negative impacts on their physical and mental health from social isolation and ageist discourses around COVID-19. There is a need to support older people to have and retain their connectedness and communality with others, to better enable a sense of belonging. One element that needs to be highlighted is the possibility of previously vigorous older people becoming increasingly frail due to reducing their activities, especially walking, and

leading an (enforced) more sedentary lifestyle, which will likely impact on their mobility and well-being over time. (NL/RH)

From : <https://doi.org/10.1111/jocn.15274>

Six propositions against ageism in the COVID-19 pandemic; by Hans-Joerg Ehni, Hans-Werner Wahl.: Taylor and Francis, July-October 2020, pp 515-525.

Journal of Aging and Social Policy, vol 32, nos 4-5, July-October 2020, pp 515-525.

The risk of developing severe illness from COVID-19 and of dying from it increases with age. This statistical association has led to numerous highly problematic policy suggestions and comments revealing underlying ageist attitudes and promoting age discrimination. Such attitudes are based on negative stereotypes on the health and functioning of older adults. As a result, older people's lives are devalued, including in possible triage situations and in the potential limitation of some measures against the spread of the pandemic to older adults. These outcomes are unjustified and unethical. The authors develop six propositions against the ageism underlying these suggestions to spur a more adequate response to the current pandemic, in which older people's needs and dignity are respected. Proposition 1: older adults are highly heterogeneous ? their health and functioning is better than negative stereotypes suggest. Proposition 2: age limits for intensive care and other forms of medical care are inappropriate and unethical. Proposition 3: mass deficit views of old age are dangerous to older citizens and societies at large ? intergenerational solidarity must be strengthened. Proposition 4: resisting the assumption of a paternalistic attitude toward older adults in the crisis is important. Proposition 5: the COVID-19 crisis demands fostering the use of modern information and communication technologies among older people. Proposition 6: the COVID-19 crisis not only demands the best of virology, but also the best of gerontology for policy guidance and understanding the consequences of the crisis at large. The authors outline what lessons can be learned to improve the situation for older people after the pandemic, citing examples not only from Germany but also other European countries. (RH)

ISSN: 08959420

From : <https://www.tandfonline.com>

Sticks and stones: perceived age discrimination, well-being, and health over a 20-year period; by Jeffrey E Stokes, Sara M Moorman.: Sage, March-April 2020, pp 115-125.

Research on Aging, vol 42, nos 3-4, March-April 2020, pp 115-125.

Perceived age discrimination may have behavioural and psychological implications for adults' physical as well as mental health. This 20-year longitudinal study of 3,034 adults in middle and later adulthood in the United States finds that discrimination in general can be harmful both between and within people, that is, the experience of being exposed to discrimination and the effects it has on an individual's personality and other internal characteristics. (NH)

ISSN: 01640275

From : <https://doi.org/10.1177/0164027519894875>

## 2019

Ageism in breast cancer; by Brian Beach, Sally Bowell, Jennifer Mitchell, International Longevity Centre UK - ILC UK. London: International Longevity Centre UK, 2019, 43 pp.

Age discrimination in the provision of health and care services was banned in the UK in 2012. However there continue to be age-related discrepancies in the prevalence, treatment and outcomes experienced by people with breast cancer. This report examines the extent to which ageism plays a part in the diagnosis, treatment and care of people with breast cancer in England. It also examines some attempts by the Westminster government, and by healthcare systems at a local level in England, to address differences in breast cancer outcomes by age. It recommends that data collection remains a priority, and that system leaders across the NHS ensure that care and support needs are not barriers to accessing treatment or to clinical cancer trials. The NHS should also promote age-relevant awareness-raising campaigns for older women, including the AgeX age extension trials, screening and programmes for (some) women aged 47-73. (RH)

From : International Longevity Centre UK, 36-37 Albert Embankment, London SE1

[7TL.ps://ilcuk.org.uk/ageism-in-breast-cancer/](https://ilcuk.org.uk/ageism-in-breast-cancer/)

Ageist Britain?; by SunLife.: Sunlife, 2019, 24 pp.

Casual ageism is this report's subject of research, which asks why do we discriminate against older age? The focus is on three areas. First is consumer research of 4,000 UK adults, to understand how and when people experience ageism, how many of us admit to being ageist, and if people feel progress is being made to stamp it out. The research is based on nationally representative survey conducted by Opinium in August-September 2018 and May 2019. Second, an analysis of the use of ageist phrases across blogs and Twitter. Researchers also

searched for the report's ageist terms in the national newspapers The Sun, The Daily Express and the Daily Mail. Third, a review of some of the UK's biggest brands' representation of the over 50s in marketing communications. The report identifies L'Oreal, Barclays Bank, No7, Dove and B&Q as brands as examples of non-ageist best practice. Among the report's ten main findings is that a fifth don't believe the UK is a good place for over 50s to live; and 31% say they believe ageism is a bigger problem today than three years ago. (RH)  
From : <https://www.sunlife.co.uk/siteassets/documents/ageist-report-2019.pdf>

Associations between age discrimination and health and wellbeing: cross-sectional and prospective analysis of the English Longitudinal Study of Ageing; by Satrah E Jackson, Andrew Steptoe.  
The Lancet Public Health, vol 4, no 4, April 2019, pp e200-e208.

Age discrimination (or ageism) is pervasive in society. Other forms of discrimination (such as racism) have been linked with adverse health outcomes, but age discrimination has not been well studied in public health. The authors conducted a longitudinal observational population study with data from the English Longitudinal Study of Ageing (ELSA), a nationally representative sample of older men and women, to examine associations between perceived age discrimination and health and well-being in England. Participants (7731) were aged 50 years or older, and reported experiences of age discrimination via face-to-face computer-assisted personal interview and a self-completed questionnaire between July 2010 and June 2011. Self-rated health, chronic health conditions and depressive symptoms were assessed July 2010-June 2011, and May 2016- June 2017. Logistic regression was used to test cross-sectional associations between perceived age discrimination and baseline health status and prospective associations between perceived age discrimination and incident ill health over 6 years. Analyses were adjusted for age, sex, and wealth. Perceived age discrimination was reported by 1943 (25.1%) participants. Patients who perceived age discrimination were more likely to self-report fair or poor health (odds ratio [OR] 1.32 [95% CI 1.17-1.48]), and to have coronary heart disease (1.33 [1.14-1.54]), chronic lung disease (1.37 [1.11-1.69]), arthritis (1.27 [1.14-1.41]), limiting long-standing illness (1.35 [1.21-1.51]), and depressive symptoms (1.81 [1.57-2.08]) than those who did not perceive age discrimination. Follow-up data collected 6 years after the baseline assessment were available for 5595 participants. Longitudinally, perceived age discrimination was associated with the deterioration of self-rated health (OR 1.32 [95% CI 1.10-1.58]) and incident coronary heart disease (1.66 [1.18-2.35]), stroke (1.48 [1.08-2.10]), diabetes (1.33 [1.01-1.75]), chronic lung disease (1.50 [1.10-2.04]), limiting long-standing illness (1.32 [1.10-1.57]), and depressive symptoms (1.47 [1.16-1.86]) over 6 years. Among older adults living in England, perceived age discrimination was associated with increased odds of poor self-rated health and risk of incident serious health problems over a 6-year period. These findings underscore the need for effective interventions at the population level to combat age stigma and discrimination. (RH)

From : [https://doi.org/10.1016/S2468-2667\(19\)30035-0](https://doi.org/10.1016/S2468-2667(19)30035-0)

Building on intergenerational climate to counter ageism in the workplace?: A cross-organizational study; by Martine Lagace, Lise Van de Beeck, Najat Firzly.: Taylor and Francis, 2019, pp 201-219.

Journal of Intergenerational Relationships, vol 17, no 3, 2019, pp 201-219.

The negative outcomes of ageism in the workplace have been well documented. This study looks at potential factors that may counter such outcomes. Relying on Intergroup Contact Theory (ICT), it is hypothesised that a positive intergenerational workplace climate as well as knowledge sharing and donating practices contribute to lower levels of perceived ageism from the perspective of the older worker. In turn and in continuity with previous studies, it is hypothesised that perceived workplace ageism is negatively linked to feelings of satisfaction and successful ageing at work. A total of 415 Canadian older workers filled a questionnaire measuring concepts under study. The results suggest that a healthy intergenerational workplace climate exerts a significant and positive impact on perceived ageism in the workplace; in turn and as predicted, ageism significantly lowers feelings of satisfaction at work. Moreover, the importance of a healthy intergenerational workplace climate is demonstrated through a direct link with older workers' level of satisfaction. Theoretical and practical implications are discussed. (RH)

ISSN: 15350770

From : <http://www.tandfonline.com>

Everyday discrimination in the neighbourhood: what a doing perspective on age and ethnicity can offer; by Anna Wanka, Laura Wiesbock, Brigitte Alex (et al.): Cambridge University Press, September 2019, pp 2133-2158.

Ageing and Society, vol 39, no 9, September 2019, pp 2133-2158.

Despite the fact that urbanisation, population ageing and international migration constitute major societal developments of our time, little attention has been paid to studying them together in a comprehensive manner. The authors argue that, when treating age and ethnicity as practical processes for addressing and identifying with social groups, it is necessary to do so from a 'doing' perspective. The question they ask focuses on which

social memberships are made relevant or irrelevant in residential environments, and how that relevance or irrelevance is established. Drawing upon a quantitative study among individuals of Turkish migrant origin living in Vienna, Austria, the authors find that it is rather common for the respondents to have been assigned to multiple intersecting social groups, and that they were treated unfairly in their own neighbourhoods. However, such ascriptions do not necessarily correspond to objective categorisation of research or subjective identification. Hence, the discrimination that is present in a neighbourhood does not necessarily lead to decreased place attachment or a diminishing sense of home. In fact, the authors find that the 'satisfaction paradox' is quite common in environmental gerontology, and that it may actually intersect with the 'immigration paradox'. Applying processual intersectionality is not only fruitful for research; it can also improve the conceptualisation of age-friendly cities. (RH)

ISSN: 0144686X

From : <http://www.cambridge.org/aso>

How young and older people differ in discriminatory behaviour towards older people?: An explanation of the knowledge-attitude-behaviour continuum model; by Soondool Chung, Hyunju Park.: Cambridge University Press, September 2019, pp 1996-2017.

Ageing and Society, vol 39, no 9, September 2019, pp 1996-2017.

This study examined the causal relationship between knowledge, attitudes and discriminatory behaviour towards older people. The study further explored age-group differences using multi-group analysis. Data were collected from 1,500 Korean adults aged 20 and older in 2011 using the multi-stage quota sampling method. Trained investigators collected data with a developed survey questionnaire in person. A structural equation modelling method was used for data analysis. Attitudes towards older people was measured using two variables: 'image of older people' and 'prejudice against older people'. The findings revealed that the younger and older generations demonstrated differences regarding the causal relationship between knowledge, attitudes and discriminatory behaviour towards older people. The paths model between independent and dependent variables in the structural equation modelling was non-equivalent in younger and older groups. For both groups, knowledge about ageing and older people led to a positive influence on their image of and prejudice against older people. The effect of prejudice on discriminatory behaviour was significant in the younger group, but not in the older group. Further implications for practice and future research to reduce ageism are discussed. (RH)

ISSN: 0144686X

From : <http://www.cambridge.org/aso>

The impact of experiences of ageism on sexual activity and interest in later life; by Wendy Heywood, Victor Minichiello, Anthony Lyons (et al.): Cambridge University Press, April 2019, pp 795-814.

Ageing and Society, vol 39, no 4, April 2019, pp 795-814.

Experiences of ageism are associated with poorer health outcomes. Sexual activity and interest are areas in life where the impact of ageism may also be evident, as popular culture often depicts the older body as asexual, undesirable or sexually impotent. The authors used data from a study of Australians aged 60+ to explore the possible links between experiences of ageism and sexual activity and interest in later life. They explored characteristics of those who were more likely to have experienced ageism (measured using the Ageism Survey) and the relationships between experiences of ageism and measures of sexual interest and/or activity in later life (N = 1,817). Experiences of ageism were greater among those without a partner, unemployed participants, those with lower incomes and poorer self-rated health. Adjusting for these differences, experiences of ageism were more likely to be reported by those who had not had sex in the past two years, and were not sure about their hopes or plans for sex in the future. Those who reported their sexual interest had increased or decreased since age 60 also reported greater levels of ageism experience, as did those who wanted to have sex more frequently in the future. Ageism appears to affect sexual activity and interest in different ways. It is critical that social policy aims to reverse attitudes that reinforce the view of the ageist asexual and unattractive older body or person. (RH)

ISSN: 0144686X

From : <http://www.cambridge.org/aso>

This chair rocks: a manifesto against ageism; by Ashton Applewhite. London: Melville House UK, 2019, 250 pp.

Originally self-published by the author in America in 2016, 'This chair rocks: a manifesto against ageism' is a call to wake up to the ageism in and around us, and to adopt a more nuanced, accurate view of growing older. Geriatrician Robert Butler had coined the term "ageism" in 1969, defining it as a combination of combination of prejudicial attitudes towards older people, old age and ageing itself. The author looks at the roots of ageism and how it divides and debases society. Having considered ageism, where it comes from and what it does, she examines ageism in relation to: identity; the older brain; the older body; sex and intimacy; the workplace; the

independence trap; and the end of life. The last chapter, 'Occupy age! Beyond ageism', suggests how we could move towards an all-age-friendly world. (RH)

From : Melville House UK, Suite 2000, 16/18 Woodford Road, London E7 6HA. [mhbooks.com](http://mhbooks.com)

## 2018

The birthday card exercise: replicating research as active learning; by Dana Sawchuk.: Taylor and Francis, October-December 2018, pp 481-490.

Gerontology and Geriatrics Education, vol 39, no 4, October-December 2018, pp 481-490.

One means of uncovering common attitudes toward ageing and older adults is to perform content analyses of popular print media forms, such as newspapers, magazines, and even greeting cards. This active learning activity involves small groups of undergraduate students replicating, in a limited way, elements of a published research study on the messages conveyed by age-related birthday cards. In the exercise, each group of students is asked to analyse a set of 15 different birthday cards, and to share qualitative and quantitative findings with classmates before submitting a written "discussion section" on their results to the instructor. Since this exercise is aligned with key course learning outcomes as well as with coursework preceding and following the activity, the author demonstrates how the exercise is integrated into the course's overall learning environment. Comments on student findings, the potential benefits of and modifications to the exercise, and the transferability of the exercise to other course contexts are also provided. (RH)

ISSN: 02701960

From : <http://www.tandfonline.com>

Everyday discrimination in the Australian workplace: assessing its prevalence and age and gender differences; by Philip Taylor, Christopher McLoughlin, Catherine Earl.: Wiley, December 2018, pp 245-251.

Australasian Journal on Ageing, vol 37, no 4, December 2018, pp 245-251.

This study aimed to increase understanding of the nature and prevalence of discriminatory experiences in the workplace, focusing on issues of age and gender. The concept of everyday discrimination was operationalised in a survey of a representative sample of Australian workers. It was observed that overall, experiences of everyday discrimination were rare. Among men, such experiences declined with age, whereas for women almost no age differences were observed. It is argued that the nature of labour market age barriers has been misunderstood and the extent of discrimination faced by older workers possibly overstated. From a policy perspective the study indicates that there would be value in considering how discrimination manifests itself among workers with different characteristics. It is suggested that an intersectional approach that takes contextual factors and other grounds for discrimination into consideration might lead to tailored solutions that address specific sources of discrimination affecting men and women in particular industry sectors or specific age groups (JL)

ISSN: 14406381

From : <http://www.wileyonlinelibrary.com/journal/ajag>

Frailty: mind the gap; by Alison M Mudge, Ruth E Hubbard.: Oxford University Press, July 2018, pp 508-511.

Age and Ageing, vol 47, no 4, July 2018, pp 508-511.

Frailty has become the focus of considerable research interest and media attention in recent years. While it has much to offer geriatric medicine potential pitfalls also need to be acknowledged. The conceptualisation of frailty in very different ways \_ as a syndrome or a risk state \_ has created semantic dissonance: the frailest patients by one definition may have early sarcopenia, by another be bedbound and in institutional care. Caution is required in transferring findings between studies enrolling these different populations. Furthermore a yawning gap has emerged between the number of studies reporting the associations of frailty and those investigating interventions such that the empirical benefits of identifying and treating frailty currently remain unclear. Perhaps most importantly, frailty research has evolved with little account of the perspectives and preferences of patients themselves. The label of 'frail', being linked to mental or moral weakness, has pejorative implications and care should be taken to avoid the adverse functional effects of negative priming. In this study pathways are suggested for future studies to provide a stronger evidence base to apply this important concept. This research is essential to avoid frailty becoming the new cloak of ageism, a tool for discrimination and disempowerment applied to the most vulnerable. (JL)

ISSN: 00020729

From : <https://academic.oup.com/ageing>

How are you ageing today?: Art, activism and ageing; by David James Martin.: Emerald, 2018, pp 121-128.

Working with Older People, vol 22, no 2, 2018, pp 121-128.

This paper aims to highlight the need to challenge ageism and to draw attention to how art, especially art activism, can challenge ageism and bring about a new personal understanding of ageing. The paper is a



summary of personal reflections by the author. Its findings explore the pervasive, ageist, stereotypical attitudes developed at an early age, also the possible means to challenge and transform thinking through art. Artist and arts organisations, their commissioners and funders could consider focusing on ageing across the life course, and commission and create work which challenges thinking and the status quo on ageing, reflecting society's adjustment to an ageing society. Art and especially art activism could make a fundamental contribution to a raft of strategies, not only to combat ageism, but also assist personal understanding of our ageing. Currently, there are relatively few artists and arts organisation focusing on ageing across the life course. The author states the view that such art activity could assist with new ways of understanding personal ageing and challenge ageist attitudes. (RH)

ISSN: 13663666

From : <http://www.emeraldinsight.com/loi/wwop>

Identifying age-related stereotypes: exercising with older adults; by Jochen G Bocksnick, Mary Dyck.: Taylor and Francis, October-December 2018, pp 278-291.

Activities, Adaptation and Aging, vol 42, no 4, October-December 2018, pp 278-291.

Kinesiology students represent a group of future professionals who might work with older adults in an exercise environment. These encounters may also be affected by the presence of age-related stereotypes. To identify these beliefs, 22 kinesiology students provided two written reflections on a group of older adults participating in an exercise programme. The students' first response was written after viewing a 13-minute video of older individuals' exercising; the second response occurred after their active exercise participation with the older adults. Thematic, qualitative analysis of the data suggested the students' stereotypes concerning the exercise behaviour of the older adults. (RH)

ISSN: 01924788

From : <http://www.tandfonline.com>

Impact of life stories on college students' positive and negative attitudes toward older adults; by Takashi Yamashita, Sarah J Hahn, Jennifer M Kinney (et al).: Taylor and Francis, July-September 2018, pp 326-340.

Gerontology and Geriatrics Education, vol 39, no 3, July-September 2018, pp 326-340.

Gerontological educators are increasingly interested in reducing college students' negative, and promoting their positive, attitudes toward older adults. Over the course of a semester, students from six 4-year institutions viewed three life story videos (documentaries) of older adults, and completed pre- and post-test surveys that assessed their positive (Allophilia Scale) and negative (Fraboni Scale of Ageism) attitudes. The authors assessed changes in attitudinal scales between treatment (with videos, n = 80) and control (no video, n = 40) groups. The "treatment" group showed significant increases in kinship, engagement and enthusiasm, and decreases in anti-locution and avoidance (all ps <.05). There was no significant change in affect, comfort or discrimination. This study demonstrates how video stories affect students' attitudes about older adults. (RH)

ISSN: 02701960

From : <http://www.tandfonline.com>

Interpersonal work context as a possible buffer against age-related stereotyping; by Beatrice I J M van der Heijden.: Cambridge University Press, January 2018, pp 129-165.

Ageing and Society, vol 38, no 1, January 2018, pp 129-165.

This study deals with the impact of relational demography on occupational expertise ratings, and possible moderating effects of interpersonal work context factors in a large Dutch company. The results revealed support for a decrease in supervisor ratings of occupational expertise of their subordinates as an effect of age difference (status incongruence, situations in which supervisors are younger than their subordinates). Moreover, it appeared that transformational leadership style could not moderate this effect. Dyadic tenure appeared to strengthen the negative effect of status incongruence, but only in the case of a longer duration of the relationship between employee and supervisor. Theoretical and practical implications of these outcomes are discussed. (RH)

ISSN: 0144686X

From : <http://www.cambridge.org/aso>

That age old question: how attitudes to ageing affect our health and wellbeing; by Royal Society for Public Health - RSPH. London: Royal Society for Public Health; Calouste Gulbenkian Foundation, UK Branch, 2018, 40 pp.

The Royal Society for Public Health (RSPH) is calling for action to tackle intergenerational isolation, end the stigmatisation of older people, and undo media clichés that keep ageism alive and well. RSPH evaluated ageist attitudes across 12 main areas of life, of which the public are most ageist about memory loss, appearance, and participation in activities (both physical and community). The report presents results from focus groups and a national survey regarding attitudes towards ageing and older people. It finds that while ageist views are held

across the generations, these are most prevalent among "millennials" (aged 18-34), who have by far the most negative attitudes to ageing. A sizeable minority of people (30%) believe that "being lonely is just something that happens when people get old", while a quarter (25%) of 18-34 year olds believe it is "normal" for older people to be unhappy and depressed. The report calls on stakeholders in the media, government, voluntary sector and schools to take action to reframe the way our nation views ageing in a more positive light. It makes recommendations on dealing with ageing by: integrating the generations; educating young people; and getting employers to promote age diversity and support well-being and resilience in the workplace in preparation for later life. It also recommends training those working in health and care settings to understand the effects of ageism. (RH)

From : Royal Society for Public Health, John Snow House, 59 Mansell Street, London E1 8AN. Download: <https://www.rsph.org.uk/uploads/assets/uploaded/010d3159-0d36-4707-ae54e29047c8e3a.pdf>

## 2017

Age discrimination: key points for the workplace; by Acas. London: Acas, February 2017, 27 pp (Guidance). Age is one of nine features known as protected characteristics in the Equality Act 2010, which identifies four main types of discrimination: direct discrimination, indirect discrimination, harassment, and victimisation. Generally, an employee is protected against discrimination because of age. This guide offers guidance on steps to take to prevent age discrimination happening in the workplace. The guide provides examples of how age discrimination might still occur; also how it should be dealt with if it does happen. It identifies areas of employment where age discrimination is most likely to occur: recruitment; training; promotion; pay and terms and conditions of employment; performance management; redundancy; retirement; dismissal; and flexible working. It draws attention to other considerations such as managing the menopause at work, disability, ageist language, and age stereotyping. The reader is directed to many other information sources on keeping informed on other equality or discrimination issues, whether provided by ACAS ([www.acas.org.uk](http://www.acas.org.uk)) or other organisations. (RH)

From : [http://www.acas.org.uk/media/pdf/o/1/Age\\_discrimination\\_key\\_points\\_for\\_the\\_workplace.pdf](http://www.acas.org.uk/media/pdf/o/1/Age_discrimination_key_points_for_the_workplace.pdf)

Age discrimination in the workplace: the more things change ...; by Kate O'Loughlin, Hal Kendig, Rafat Hussain, Lisa Cannon.: Wiley, June 2017, pp 98-101.

*Australasian Journal on Ageing*, vol 36, no 2, June 2017, pp 98-101.

Research carried out by the Australian Human Rights Commission (AHRC) has shown that age discrimination in the workplace is still rife in Australia, in spite of there being age discrimination legislation in place both at a national level (Age Discrimination Act 2004) and within states and territories. The need for legislation and the appointment of an official Age Discrimination Commissioner are indicative of the systemic nature of these ageist attitudes and behaviours and the pervasiveness of the problem. (JL)

ISSN: 14406381

From : <http://www.wileyonlinelibrary.com/journal/ajag>

Age-related references in national public health, technology appraisal and clinical guidelines and guidance: documentary analysis; by Lynne F Forrest, Jean Adams, Yoav Ben-Shlomo ... (et al.): Oxford University Press, May 2017, pp 500-508.

*Age and Ageing*, vol 46, no 3, May 2017, pp 500-508.

Older people may be less likely to receive interventions than younger people. Age bias in national guidance may influence entire public health and health care systems. This study examined how English National Institute for Health & Care Excellence (NICE) guidance and guidelines consider age. The authors undertook a documentary analysis of NICE public health and clinical guidelines and technology appraisals. They systematically searched for age-related terms, and conducted thematic analysis of the paragraphs in which these occurred ('age-extracts'). Quantitative analysis explored frequency of age-extracts between and within document types. Illustrative quotes were used to elaborate and explain quantitative findings. 2,314 age-extracts were identified within three themes: age documented as an a-priori consideration at scope-setting (518 age-extracts, 22.4%); documentation of differential effectiveness, cost-effectiveness or other outcomes by age (937 age-extracts, 40.5%); and documentation of age-specific recommendations (859 age-extracts, 37.1%). Public health guidelines considered age most comprehensively. There were clear examples of older age being considered in both evidence searching and in making recommendations, suggesting that this could be achieved within current processes. There were found to be inconsistencies in how age is considered in NICE guidance and guidelines. More effort may be required to ensure age is consistently considered. Future NICE committees should search for and document evidence of age-related differences in receipt of interventions. Where evidence relating to effectiveness and cost-effectiveness in older populations is available, more explicit age-related recommendations should be made. Where there is a lack of evidence, it should be stated what new research is needed. (JL)

ISSN: 00020729

From : <https://academic.oup.com/ageing>

Ageing and ageism: the impact of stereotypical attitudes on personal health and well-being outcomes and possible personal compensation strategies; by Guy Robertson.

Self & Society, vol 45, no 2, 2017, pp 149-159.

Ageism largely remains a socially tolerated form of discrimination. From birthday cards to anti-ageing advertisements and comedy sketches, stereotypical ideas about older people and the ageing process abound. While generally trivialised in mainstream culture, this article argues that ageism is, in fact, a serious matter. Drawing from a growing evidence base, the article highlights the significant and largely detrimental impact that ageist stereotypes have on people's outcomes in later life. It then goes on to analyse some of the possible mechanisms through which stereotypes generate this effect. It concludes with a brief outline of some of the psychosocial interventions that might enable older people to weaken or neutralise the toxic effects of internalised negative self-perceptions of ageing. It should be noted that the structural and power relationship dimensions of ageism, while hugely important, are not considered in this article. Rather, the focus is on the psychological and emotional dimensions and their impact on personal health and well-being outcomes, an aspect of ageist stereotyping that is seldom discussed. (OFFPRINT) (RH)

ISSN: 23745355

From : <http://dx.doi.org/10.1080/03060497.2017.1334986>

Discrimination and psychiatric disorders among older African Americans; by Dawne M Mouzon, Robert Joseph Taylor, Verna M Keith (et al.): Wiley Blackwell, February 2017, pp 175-182.

International Journal of Geriatric Psychiatry, vol 32, no 2, February 2017, pp 175-182.

This study examined the impact of everyday discrimination (both racial and non-racial) on the mental health of older African Americans. This analysis was based on the older African American subsample of the National Survey of American Life. The authors examined the associations between everyday discrimination and both general distress and psychiatric disorders as measured by the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV). Six dependent variables were examined: lifetime mood disorders, lifetime anxiety disorders, any lifetime disorder, number of lifetime disorders, depressive symptoms as measured by the 12-item Center for Epidemiological Scale of Depression (CES-D), and serious psychological distress as measured by the Kessler 6 (K6). Overall racial and non-racial everyday discrimination were consistently associated with worse mental health for older African Americans. Older African Americans who experienced higher levels of overall everyday discrimination had higher odds of any psychiatric disorder, any lifetime mood disorder, any lifetime anxiety disorder and more lifetime DSM-IV disorders, in addition to elevated levels of depressive symptoms and serious psychological distress. These findings were similar for both racial discrimination and non-racial discrimination. This study documents the harmful association of not only racial discrimination, but also non-racial (and overall) discrimination with the mental health of older African Americans. Specifically, discrimination is negatively associated with mood and anxiety disorders as well as depressive symptoms and psychological distress. (JL)

ISSN: 08856230

From : [www.orangejournal.org](http://www.orangejournal.org)

Factors related to medical students' and doctors' attitudes towards older patients: a systematic review; by Rajvinder Samra, Tom Cox, Adam Lee Gordon (et al.): Oxford University Press, November 2017, pp 911-919.

Age and Ageing, vol 46, no 6, November 2017, pp 911-919.

Studies have sought to identify the possible determinants of medical students' and doctors' attitudes towards older patients by examining links to a variety of factors: demographic, educational/training, exposure to older people, personality/cognitive and job/career factors. The purpose of this review was to collate and synthesise such findings. An electronic search of 10 databases was performed covering the period to February 2017. The main search identified 2,332 articles; of these, 37 studies met the eligibility criteria set. All included studies analysed self-reported attitudes based on correlational analyses or difference testing, therefore causation could not be determined. However self-reported positive attitudes towards older patients were related to: (i) intrinsic motivation for studying medicine, (ii) increased preference for working with older patients and (iii) good previous relationships with older people. Additionally more positive attitudes were reported in those with higher knowledge scores but these may relate to the use of a knowledge assessment which is an indirect measure of attitudes (i.e. Palmore's Facts on Aging Quizzes). Four out of the five high quality studies included in the review reported more positive attitudes in females compared to males. This article identifies factors associated with medical students' and doctors' positive attitudes towards older patients. Future research could bring greater clarity to the relationship between knowledge and attitudes by using a knowledge measure which is distinct from attitudes and also measures knowledge that is relevant to clinical care. (JL)

ISSN: 00020729

From : <https://academic.oup.com/ageing/article/46/6/911/3787763>

Finding the frame: an empirical approach to reframing aging and ageism; by Julie Sweetland, Andrew Volmert, Moira O'Neil, FrameWorks Institute. Washington, DC: FrameWorks Institute, February 2017, 38 pp (A FrameWorks research report).

The authors suggest that ageing is misunderstood in America, and that such misperception creates obstacles to productive practices and policies. In order to effect change, the field of ageing needs to advance a set of core ideas that creates the shifts in public understanding essential to building the political will towards a more age-integrated society. This report is in four sections, and outlines the major findings of the Strategic Frame Analysis and its implications for communications, advocacy, and outreach on ageing. First - Anticipating Public Thinking - outlines how Americans mentally perceive ageing, and pinpoints where these patterns of thinking are likely to challenge efforts to advance an informed public conversation. Second, Communication Traps, cautions advocates against reframing strategies that seem plausible, but are likely to have unintended consequences. Third, Redirections, outlines a series of thoroughly tested communications tools and techniques for reframing ageing and ageism. Lastly, Moving Forward, offers concluding thoughts and a call to action. (RH)

From : [http://frameworksinstitute.org/assets/files/aging\\_elder\\_abuse/aging\\_research\\_report\\_final\\_2017.pdf](http://frameworksinstitute.org/assets/files/aging_elder_abuse/aging_research_report_final_2017.pdf)

Perceived discrimination in primary healthcare in Europe: evidence from the cross-sectional QUALICOPC study; by Lise G M Hanssens, Jene D J Detollenaere, Amelie Van Pottelberge (et al): Wiley Blackwell, March 2017, pp 641-651.

Health and Social Care in the Community, vol 25, no 2, March 2017, pp 641-651.

Recent figures show that discrimination in healthcare still persists in the European Union (EU). Research has confirmed these results but focused mainly on the outcomes of perceived discrimination. Studies that take into account socioeconomic determinants of discrimination limit themselves to either ethnicity, income or education. This article explores the influence of socioeconomic indicators (e.g. gender, age, income, education and ethnicity) on perceived discrimination in 30 European countries. Data from the EU-funded QUALICOPC (Quality and Costs of Primary Care in Europe) study were used. These data were collected between October 2011 and December 2013 in the participating countries. In total, 7183 GPs (general practitioners) and 61932 patients participated in the study, which had an average response rate of 74.1%. Data collection was coordinated by NIVEL (the Netherlands Institute for Health Services Research). Bivariate binomial logistic regressions were used to estimate the impact of each socioeconomic indicator on perceived discrimination. Multivariate logistic regressions were used to estimate the unique effect of each indicator. Results indicate that in Europe, overall 7% of the respondents felt discriminated against, ranging between 1.4% and 12.8% at the country level. With regard to socioeconomic determinants in perceived discrimination, income and age are both important indicators, with lower income groups and younger people having a higher chance to feel discrimination. In addition, significant influences of education, gender, age and ethnicity discrimination were found in several countries. In most countries, more highly educated people, older people, women and the indigenous population appeared to feel less discriminated against. In conclusion, perceived discrimination in healthcare is reported in almost all European countries, but there is large variation between these countries. A high prevalence of perceived discrimination within a country does not also imply a correlation between socioeconomic indicators and perceived discrimination. (RH)

ISSN: 09660410

From : [wileyonlinelibrary.com/journal/hsc](http://wileyonlinelibrary.com/journal/hsc)

Perceptions of health-care professionals' treatment of older people; by Rafat Hussain, Hal Kendig, Kate O'Loughlin, Lisa Cannon.: Wiley, June 2017, pp 102-106.

Australasian Journal on Ageing, vol 36, no 2, June 2017, pp 102-106.

There is a common perception that older people in health care systems often face covert and, at times, overt ageism. The present study presented preliminary findings from a large-scale nationally representative survey in Australia of people regarding trends in perceptions of ageism by health care professionals. In the survey, respondents of different age groups were asked whether they thought that older people were treated better, worse or about the same as younger people by doctors, nurses and other health professionals. Nearly two-thirds of respondents perceived no discrimination towards older people compared to younger people, but 21% considered treatment to be more favourable and 16% perceived worse treatment. Overall the findings suggest that most people do not perceive health care professionals as having ageist attitudes and, of the remainder, perceive slightly more positive than negative treatment. (JL)

ISSN: 14406381

From : <http://www.wileyonlinelibrary.com/journal/ajag>

A social work perspective on how ageist language, discourses and understandings negatively frame older people and why taking a critical social work stance is essential; by Francis Duffy.: Oxford University Press, October 2017, pp 2068-2085.

British Journal of Social Work, vol 47, no 7, October 2017, pp 2068-2085.

As populations age around the globe, social workers will have more and more contact with older people, particularly in the fields of health care and social care services. Language and dominant discourses associated with older people and ageing in politics, in the media and other institutions are often underpinned by ageism and fail to convey accurate accounts and understandings of ageing issues. In response to how this pervasive ageism plays out in health care and social care services practice settings, this paper argues that all social workers urgently ought to move beyond conventional social work, which is most dominant in practice, and embrace more aspects of critical social work in relation to ageing societies and working with older people. This is necessary to identify, critique and challenge ill-informed and oppressive language, labels and discourses used to describe older people and explain ageing issues. Embedding gerontological social work as core learning in social work education is essential to social work achieving what is required to achieve these goals. The author draws mainly on examples found in Australian (and some UK) publications. (RH)

ISSN: 00453102

From : <https://academic.oup.com/bjsw>

## 2016

Exploring the Care Act's potential for anti-discriminatory practice with lesbian, gay, bisexual and trans older people; by John Crossland.: Emerald, 2016, pp 97-106.

Quality in Ageing and Older Adults, vol 17, no 2, 2016, pp 97-106.

The planning and provision of care for older people in the lesbian, gay, bisexual and trans (LGBT) communities is an increasing challenge to traditional welfare systems. This paper explores the potential of the newly implemented Care Act 2014 in England for developing an anti-discriminatory approach. It draws on existing research and conceptual literature to identify how key provisions of the new Act can be interpreted in light of current knowledge. Overall, the provisions of the Care Act lend themselves well to positive interpretation in relation to the needs of older LGBT people and their support networks. A potential tension, however, arises in the locality focus of the legislation that could constrain good practice with geographically dispersed communities. There is also a need to challenge both heteronormative and ageist assumptions that lead to older LGBT people remaining unrecognised. Applied with imagination and commitment, the provisions of the Act could enable new forms of person-centred care to emerge to support older LGBT people. Social workers are in a key position to influence how the Care Act is interpreted and applied in practice, and can act as change agents for a societal move towards older LGBT people having greater choice and control over their well-being. (RH)

ISSN: 14717794

From : [www.emeraldgroupublishing.com/qaoa.htm](http://www.emeraldgroupublishing.com/qaoa.htm)

'I know it exists ... but I haven't experienced it personally': older Canadian men's perceptions of ageism as a distant social problem; by Laura Hurd Clarke, Alexandra Korotchenko.: Cambridge University Press, September 2016, pp 1757-1773.

Ageing and Society, vol 36, no 8, September 2016, pp 1757-1773.

This paper examines how older men perceive, experience and internalise ageist prejudice in the context of their everyday lives. The authors draw on in-depth interviews with 29 community-dwelling Canadian men aged 65-89. Although one-third of the participants were unfamiliar with the term ageism, the majority felt that age-based discrimination was prevalent in Canadian society. Indicating that they themselves had not been personally subjected to ageism, the men considered age-based discrimination to be a socially distant problem. The men explained their perceived immunity to ageism in terms of their youthful attitudes and active lifestyles. The men identified three groups who they considered to be particularly vulnerable to age-based discrimination, namely women, older workers, and frail older people residing in institutions. At the same time, the majority of the participants had internalised a variety of ageist and sexist stereotypes. Indeed, the men assumed that later life was inevitably a time of physical decline and dependence, and accepted as fact that older adults were grumpy, poor drivers, unable to learn new technologies and, in the case of older women, sexually unattractive. In this way, a tension existed between the men's assertion that ageism did not affect their lives and their own internalisation of ageist stereotypes. The authors consider their findings in relation to the theorising about ageism and hegemonic masculinity. (RH)

ISSN: 0144686X

From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)

Intergenerational intervention to mitigate children's bias against the elderly; by Renee L Babcock, Eileen E MaloneBeach, Beini Woodworth-Hou.: Taylor and Francis, October-December 2016, pp 274-287.

Journal of Intergenerational Relationships, vol 14, no 4, October-December 2016, pp 274-287.

An age-segregated society fosters ageism and has negative consequences for both young and old. The persistence of ageism may be due to a cultural fear of growing older, or gerontophobia (Bunzel, 1972), and is actively cultivated through various forms of communication and misinformation. Unfortunately young children are exposed to the damaging effects of ageism through their interactions with an ageist society. Partially in response to this prejudice, intergenerational programmes that involve some form of common activity shared in a multigenerational setting have become popular. The current study utilised the Child-Age Implicit Association Test and two measures of explicit bias to determine whether an intergenerational intervention could mitigate negative age biases in elementary schoolchildren. Though the programme did not seem to reduce bias, it was clear that implicit biases exist and that they seem to be distinct from explicit bias. It is suggested that a different programme or different age groups may be more effective in reducing ageism in children. (JL)

ISSN: 15350770

From : <http://www.tandfonline.com>

Lisbon street campaign against ageism: a promising multi-stakeholder initiative; by Joana Mendonca, Joao Mariano, Sibila Marques.: Taylor and Francis, July-September 2016, pp 258-265.

Journal of Intergenerational Relationships, vol 14, no 3, July-September 2016, pp 258-265.

This article describes the development of an awareness campaign aiming to improve perceptions about ageing and older people in Lisbon, Portugal. This involved the presentation of positive images of ageing through the use of street posters and social networks (eg Facebook). An important feature of the campaign was the collaboration of various stakeholders from different fields and with different societal roles. This diversity of contributions and perspectives on ageing allowed the creation of an awareness campaign that gathered consensus among several social agents. Generally the campaign received positive comments and reactions in the social networks. Congratulatory and other favourable messages came from individuals of different ages and occupations, from researchers to professional caregivers. (JL)

ISSN: 15524256

From : <http://www.tandfonline.com>

Mental health and well-being in older people: Butler's three constructs of ageism in Australasian Journal on Ageing; by Sue Malta, Colleen Doyle.: Wiley, December 2016, pp 232-235.

Australasian Journal on Ageing, vol 35, no 4, December 2016, pp 232-235.

The term 'ageism' was initially proposed by Robert Butler, founding director of the U.S. National Institute on Aging. Ageism is typically expressed as discrimination against people on the basis of their age and is manifested through negative stereotypes and perceptions about older adults. Butler identified three distinct but related aspects of ageism: attitudes and beliefs, behavioural discrimination and formalised policies and practices. The purpose of this virtual issue editorial was to select and review papers published in the Australasian Journal on Ageing (AJA) from 1982 to the present day that illustrate Butler's three constructs. In all, 25 papers were found. The study concludes that despite many research initiatives designed to highlight and address ageist practices, ageism is still prevalent in Australia as with the rest of the world. (JL)

ISSN: 14406381

From : [wileyonlinelibrary.com/journal/ajag](http://wileyonlinelibrary.com/journal/ajag)

Surprising effects of ageism; by Hannah J Swift.: AARP International, 2016, pp 45-48.

AARP International: The Journal, 2016, pp 45-48.

In the United Kingdom and Europe it has been found that ageism is the most commonly experienced form of prejudice. This article highlights some of the lesser-known negative consequences of ageism that permeate society. The study begins by examining some of the psychological processes underpinning ageism that older people may face by revealing how people of different ages use and apply the category labels 'old' and 'young'. The author argues that age categories are more than labels \_ they are also imbued with both negative and positive meanings that denote status and power. (JL)

From : [journal.aarpinternational.org](http://journal.aarpinternational.org)

2015

The association between discrimination and depressive symptoms among older African Americans: the role of psychological and social factors; by Sarah B Nadimpalli, Bryan D James, Lei Yu (et al).: Taylor and Francis, January-February 2015, pp 1-24.

Experimental Aging Research, vol 41, no 1, January-February 2015, pp 1-24.

Several studies have demonstrated a link between perceived discrimination and depression in ethnic minority groups, yet most have focused on younger or middle-aged African Americans, and little is known about factors that may moderate the relationship. Participants were 487 older African Americans (60-98 years old) enrolled in the US Minority Aging Research Study (MARS). Discrimination, depressive symptoms, and psychological and social resources were assessed via interview using validated measures. Ordinal logistic regression models were used to assess (1) the main relationship between discrimination and depression, and (2) resilience, purpose in life, social isolation, and social networks as potential moderators of this relationship. In models adjusted for age, sex, education, and income, perceived discrimination was positively associated with depressive symptoms (odds ratio [OR]: 1.20, 95% confidence interval [CI]: 1.10-1.31;  $p < .001$ ). However, there was no evidence of effect modification by resilience, purpose in life, social isolation, or social networks (all  $ps = .05$ ). Findings provide support for the accumulating evidence on the adverse mental health effects of discrimination among older African Americans. Because the association was not modified by psychological or social factors, these findings do not support a role for a buffering effect of resources on discrimination and depressive symptoms. Further studies are needed to examine a wider range of coping resources among older adults. (RH)

ISSN: 0361073X

From : <http://www.tandfonline.com>

Can ageist beliefs impact on older adults' performance on neuropsychological assessment?; by Stefania Parks.: British Psychological Society, October 2015, pp 70-74.

Psychology of Older People: The FPOP Bulletin, no 132, October 2015, pp 70-74.

The link between ageist self-beliefs and self-stereotypes and performance on neuropsychological assessment is explored. The self-stereotype literature suggests that ageist beliefs are internalised at a young age. The stereotype threat literature suggests that environment cues that threaten a person with the possibility of being considered an older adult, which could affect that person's performance. Psychologists using neuropsychological assessments should be aware of how the context and way in which a test is conducted can reduce self-stereotyping or stereotype threat reaction, and should consider such factors when interpreting results. The author believes that psychologists have a responsibility in day-to-day life to intervene and highlight alternative narratives of ageing. (RH)

ISSN: 13603671

From : [www.bps.org.uk/networks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop](http://www.bps.org.uk/networks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop)

Challenging gerontophobia and ageism through a collaborative intergenerational art program; by Sadie E Rubin, Tracey J Gendron, Courtney A Wren ... (et al).: Taylor and Francis, 2015, pp 241-254.

Journal of Intergenerational Relationships, vol 13, no 3, 2015, pp 241-254.

Prejudices against older adults have been shown to reduce effective care delivery and to impact their long-term health outcomes. In an effort to combat these prejudices, intergenerational - and often unidirectional - programmes focus on challenging ageism. The PALETTE programme takes this further to employ collaborative activities as a way to challenge the gerontophobia that often accompanies ageism. Promoting Art for Life Enrichment Through Transgenerational Engagement (PALETTE) is an innovative programme for interprofessional undergraduate and graduate students that combines intergenerational arts activities with formal education on ageing, ageism and gerontophobia. Having demonstrated success in changing the attitudes of students, PALETTE serves as a model for an internationally replicable programme that has the potential to improve person-centered care while educating future generations of older adults about positive, optimal ageing. (JL)

ISSN: 15350770

From : <http://www.tandfonline.com>

Gerontology and youth-focused service learning: the relation between service recipient age and student responses; by Kristopher J Kimbler, Anandi C Ehman.: Taylor and Francis, October-December 2015, pp 384-395.

Gerontology and Geriatrics Education, vol 36, no 4, October-December 2015, pp 384-395.

Service learning is a pedagogical technique that integrates traditional coursework with activities outside the classroom that meet the needs of the community. Gerontology-focused service learning has been incorporated

into many courses that cover ageing content and is believed to be beneficial to the learning process. Other research has demonstrated that service learning in general has benefits, regardless of the age of the service recipient. It is unclear whether benefits associated with gerontology-focused service learning are unique to experiences with older adults or are a product of the general benefits associated with this pedagogy. This study examined student responses to gerontology-focused service learning compared to youth-focused service learning. The results revealed that students working with older adults reported more negative expectations related to the assignment, more positive experiences interacting with the service recipients, and more reports of learning benefits attributed to service learning. (JL)

ISSN: 02701960

From : <http://www.tandfonline.com>

## 2014

Sexism and ageism in the media; by Feminar Group of Feminism.

Older Feminists Network Newsletter, no 209, August-September 2014, pp 7-10.

A precis of a meeting (called the Feminar) held in July 2014, which brought together instances reflecting attitudes to ageism, sexism and feminism on the part of newspapers, online sources, television and radio. (RH)

From : <http://www.olderfeminist.org.uk>

Workforces in an ageing world; by Mark Allen, Sarah Hillcoat-Nalletamby, Judith Phillips.: British Society of Gerontology, November 2014, pp 11-16.

Generations Review, vol 24, no 3, November 2014, pp 11-16.

Some theorists from the field of social gerontology have argued that old age has been defined in terms of social structures such as retirement systems which create pre-defined notions of ageing in terms of set ages of retirement. In Western societies especially, retirement policies have been used by employers to reduce and restructure their workforces, resulting in perceptions of the age at which workers may be considered 'too old'. The devalued status of older workers approaching retirement has resulted in a 'grey ceiling' that denies older workers equitable treatment. Research findings suggest that stereotypical attitudes towards older workers need to be targeted if age barriers to employment are to be removed. Along with population ageing, population decline is expected to increasingly characterise demographic change in the 21st century, due to fertility decline which in turn will result in fewer younger cohorts entering the workforce. The author argues that rather than focus on older workers or an ageing workforce, employers need to address the concept of workforces in an ageing world, as the impact of population ageing permeates the lives of everyone in paid employment. (JL)

From : [www.britishgerontology.org](http://www.britishgerontology.org)

## 2013

Achieving age equality in health and social care; by Caroline Bernard.: Emerald, 2013, pp 19-24.

Working with Older People, vol 17, no 1, 2013, pp 19-24.

The subject of this paper is the ban on age discrimination in goods and services that came into force on 1 October 2012. It sets out the policy context, and details how the age equality recommendations were made through an independent review. It provides an overview of the Achieving Age Equality Toolkit (produced by the National Development Team for Inclusion, NDTi), to give the background to its development, and to advise readers of the ways in which it has already been successful in the health and social care arena. Older people have different experiences of health and social care services, but most want to be able to access support when they need it. Age as a barrier to treatment and screening in areas such as mental health and cancer continue to give cause for concern. Organisations need to ensure they are working in an "age equal" way across services. Implications for further research could include an assessment of the extent of "institutional ageism" in services after the ban on age discrimination in goods and services on 1 October 2012. The article uses case studies to illustrate how use of the Toolkit enables an organisation to better identify where changes are needed towards embedding anti age discrimination practice. As well as obeying legal requirements, ending age discrimination in health and social care requires a change in hearts and minds towards encouraging society to think differently about the ways in which older people are supported by health and social care services. Since the review, there have been repeated cases of age discrimination in goods and services, illustrating the need for change. (RH)

ISSN: 13663666

From : [www.emeraldinsight.com](http://www.emeraldinsight.com)



Cross-cultural ageism: ageism and attitudes towards aging among Jews and Arabs in Israel; by Yoav S Bergman, Ehud Bodner, Sara Cohen-Fridel.: Cambridge University Press, January 2013, pp 6-15.

International Psychogeriatrics, vol 25, no 1, January 2013, pp 6-15.

While it is generally agreed that traditional societies are more favourable toward their elders, research findings have been inconsistent. This study presents a cultural comparison between Jews and Arabs in Israel in attitudes toward older adults and personal views regarding one's own ageing. It was assumed that Arabs would rate their culture as more tolerant toward older adults, would report spending more time with them and express lower ageism and ageing anxieties. 154 native Israeli citizens - 86 Jewish and 68 Muslim Arabs - completed measures of ageism, ageing anxieties and cultural views of older adults. Results showed that Arabs rated their culture as more tolerant toward their elders, perceived older adults as significantly more contributing to society and reported engaging in less avoiding behaviours toward them. Arabs also exhibited less general fears of growing old and concerns over one's physical appearance in old age. But it was interesting to note that Arab women reported higher scores of ageing anxieties and ageist attitudes in comparison to Arab men, whereas no such differences were found among Jews. These findings show that the cultural importance of elders for the Arab cohort transcends beyond Westernisation processes which affect the Arab society in Israel, and reflect the demanding role of Arab women as primary caregivers for the elders in the family. Limitations and implications of the study are discussed. (JL)

ISSN: 10416102

From : [journals.cambridge.org/ipg](http://journals.cambridge.org/ipg)

Dementia does not discriminate: the experiences of black, Asian and minority ethnic communities; by Sally Greengross (chair), All-Party Parliamentary Group on Dementia. London: All-Party Parliamentary Group on Dementia, July 2013, 44 pp.

This inquiry brings together evidence and understanding about the experience of people with dementia from black, Asian and minority ethnic (BAME) communities. It finds that high quality services are few and far between, and many people receive too little support from the National Health Service (NHS) or local authorities. Service providers need to be sensitive to the cultural needs of communities who are assumed to "look after their own". An appendix provides case studies illustrating good practice examples of services that have been tailored to the needs of people with dementia from BAME communities. (RH)

From : All-Party Parliamentary Group on Dementia, House of Commons, London SW1A 0AA. E-mail: [appg@alzheimers.org.uk](mailto:appg@alzheimers.org.uk)

Does tip-of-the-tongue for proper names discriminate amnesic mild cognitive impairment?; by Onésimo Juncos-Rabadán, David Facal, Cristina Lojo-Seoane, Arturo X Pereiro.: Cambridge University Press, April 2013, pp 627-634.

International Psychogeriatrics, vol 25, no 4, April 2013, pp 627-634.

Difficulty in remembering people's names is very common in the early stages of Alzheimer's disease and mild cognitive impairment. Such difficulty is often observed as the tip-of-the-tongue (TOT) phenomenon. The main aim of this study was to explore whether a famous people's naming task that elicited the TOT state can be used to discriminate between amnesic mild cognitive impairment (aMCI) patients and normal controls. 84 patients with aMCI and 106 normal controls aged over 50 years performed a task involving naming 50 famous people shown in pictures. Univariate and multivariate regression analyses were used to study the relationships between aMCI and semantic and phonological measures in the TOT paradigm. Univariate regression analyses revealed that all TOT measures significantly predicted aMCI. Multivariate analysis of all these measures correctly classified 70% of controls (specificity) and 71.6% of aMCI patients (sensitivity), with an AUC (area under curve ROC) value of 0.74, but only the phonological measure remained significant. This classification value was similar to that obtained with the Semantic verbal fluency test. TOTs for proper names may effectively discriminate aMCI patients from normal controls through measures that represent one of the naming processes affected, that is, phonological access. (JL)

ISSN: 10416102

From : [journals.cambridge.org/ipg](http://journals.cambridge.org/ipg)

Elder mistreatment, ageism, and human rights; by Simon Biggs, Irja Haapala.: Cambridge University Press, August 2013, pp 1299-1306.

International Psychogeriatrics, vol 25, no 8, August 2013, pp 1299-1306.

Elder mistreatment, social ageism and human rights are increasingly powerful discourses in positioning older people in society, yet the relationship between them has rarely been subjected to critical investigation. This perceived relationship will have implications for how mistreatment is understood and responded to. Reports of public attitudes toward mistreatment suggest that it is thought to be more common than scientific evidence would suggest, however reporting is much lower than prevalence. While the discourse over mistreatment has

tended to focus on interpersonal relationships, ageism has emphasised social attitudes, and human rights have concentrated on relations between the state and the individual. In this paper a series of models are examined which mark a tendency to restrict and then attempt to reintegrate individual, interpersonal and social levels of analysis. It is concluded that a focus on the processes of transaction across boundaries rather than contents would facilitate both integrative modelling and deeper understanding of the qualities of abusive situations. (JL)  
ISSN: 10416102

From : [journals.cambridge.org/ipg](http://journals.cambridge.org/ipg)

Everyday discrimination in the work place, job satisfaction and psychological wellbeing: age differences and moderating variables; by Philip Taylor, Christopher Mcloughlin, Denny Meyer, Elizabeth Brooke.: Cambridge University Press, October 2013, pp 1105-1138.

*Ageing and Society*, vol 33, no 7, October 2013, pp 1105-1138.

This article explores the importance of 'everyday discrimination' and other psycho-social variables for psychological wellbeing in the context of the workplace, considering differences according to age, gender and socio-economic position. Using employee survey data collected within Australian organisations the study looks at a statistically reliable model of the relationship between aspects of the psycho-social work environment, psychological wellbeing and job satisfaction. The employee survey was carried out in two phases during mid-2007 and mid-2008 in a national representative sample of Australian organisations. Structural Equation Modelling was used to configure a model including psycho-social factors: respect, support, training, job insecurity and personally meaningful work. Everyday discrimination and consultation with supervisor were considered in terms of their direct effect on psychological wellbeing and job satisfaction and their indirect effect via the psycho-social factors enumerated above. Importantly, this generalised model attempts to describe the interrelations of these factors effectively for various age groups, gender and socio-economic position. The study identifies age, gender and socio-economic differences in the strength and relative importance of these relationships. A further validation study with an independent sample will be required to verify the model proposed in this article. The implications for the design of workplace interventions concerned with age discrimination are discussed. (JL)

ISSN: 0144686X

From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)

Not in Australia: migration, work and age discrimination; by Simon Biggs, Marthe Fredvang, Irja Haapala.: Wiley Blackwell, June 2013, pp 125-129.

*Australasian Journal on Ageing*, vol 32, no 2, June 2013, pp 125-129.

Perceptions of older people are changing both nationally and internationally, with policy developments that emphasise the value of older workers and the extension of working life to accommodate a longer life-course. For national economies older workers produce benefits of increasing tax dollars and personal savings and reduce claims on the state through pensions. In terms of migration, older adults bring assets and other benefits generated elsewhere into the host economy, as skilled workers or as active retirees. It has also been argued that older societies may be more productive as a consequence of the contribution of older citizens. Nations that create barriers to older migration, such as is currently the case for Australia, run the risk not only of perpetuating age discrimination, but also of failing to take advantage of population change in a global context. The authors critically examine this area and raise a series of questions for future policy. (JL)

ISSN: 14406381

From : [wileyonlinelibrary.com/journal/ajag](http://wileyonlinelibrary.com/journal/ajag)

A prescriptive intergenerational tension ageism scale: succession, identity, and consumption (SIC); by Michael S North, Susan T Fiske.

*Psychological Assessment*, vol 25, no 3, September 2013, pp 706-713.

The authors introduce a novel ageism scale, focusing on prescriptive beliefs concerning potential intergenerational tensions: active, envied resource succession, symbolic identity avoidance, and passive, shared-resource consumption (SIC). Four studies (2,010 total participants) were used to develop the scale. Exploratory factor analysis formed an initial 20-item, 3-factor solution (Study 1). The scale converges appropriately with other prejudice measures and diverges from other social control measures (Study 2). It diverges from anti-youth ageism (Study 3). The Study 4 experiment yielded both predictive and divergent validity apropos another ageism measure. Structural equation modelling confirmed model fit across all studies. In respect of an intergenerational-tension focus,, younger people consistently scored the highest. As generational equity issues intensify, the scale provides a contemporary tool for current and future ageism research. (OFFPRINT). (RH)

To regulate and confirm inequality?: a regional history of geriatric hospitals under the English National Health Service, c.1948-c.1975; by Martin Gorsky. Cambridge: Cambridge University Press, May 2013, pp 598-625. *Ageing and Society*, vol 33, no 4, May 2013, pp 598-625.

The post-war history of hospital care for older people in Britain in the first phase of its National Health Service (NHS) emphasises a detrimental Poor Law legacy. This article presents a regional study, based on the South West of England, of the processes by which Victorian workhouses became the basis of geriatric hospital provision under the NHS. Its premise is that legislative and medical developments provided opportunities for local actors to discard the "legacy", and their limited success in doing so requires explanation. Theoretical perspectives from the literature are introduced, including political economy approaches; historical sociology of the medical profession; and path dependence. Analysis of resource allocation decisions shows a persistent tendency to disadvantage these institutions by comparison with acute care hospitals and services for mothers and children, although new ideas about geriatric medicine had some impact locally. Quantitative and qualitative data are used to examine policies towards organisation, staffing and infrastructural improvements, suggesting early momentum was not maintained. Explanations lie partly with national financial constraints and partly with the regional administrative arrangements following the NHS settlement which perpetuated existing divisions between agencies. (RH)

ISSN: 0144686X

From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)

## 2012

Access all ages: assessing the impact of age on access to surgical treatment; by Age UK; MHP Communications; Royal College of Surgeons of England (RCS). London: Royal College of Surgeons of England, 2012, 52 pp.

The NHS ban on age discrimination came into force in October 2012. The need for such a policy intervention has been highlighted by studies on cancer, which concluded that chronological age as opposed to physiological health has been a barrier to treatment for older people. In response to issues such as this, the Royal College of Surgeons (RCS), Age UK and MHP Health Mandate have undertaken a study to: assess how treatment rates for common surgical interventions vary according to age; explore potential reasons for this variation; and make recommendations about how the profession and other stakeholders can best respond. The 25 recommendations focus on six key areas. First, informing and communicating with patients to encourage them to seek help and take part in decisions about their treatment and care. Second, improving the evidence base to further our understanding of the impact of age on surgical decision-making. Third, developing guidance to promote age equality in surgical care. Fourth, delivering the most appropriate care, by improving models of working and developing guidance for clinicians. Fifth, measuring progress and tackling under-performance. Sixth, delivering high-quality commissioning for older people. (RH)

From : The Royal College of Surgeons of England, 35-43 Lincoln's Inn Fields, London WC2A 3PE.

The dark side: stigma in purpose-built senior environments; by Regina Hrybyk, Robert L Rubinstein, J Kevin Eckert ... (et al).

*Journal of Housing for the Elderly*, vol 26, nos 1-3, January-September 2012, pp 275-289.

This paper focuses on stigma in collective living environments for older adults. Two design profiles are compared and contrasted - a purpose-built campus which opened in 1997, and an older setting that grew by accretion over decades. The separation by care levels in both sites is reflected in their cultures as residents and staff relate to levels of care through a vocabulary of fear. Residents of the independent living building on the purpose-built campus refer to the assisted living building as 'the dark side.' In this setting stigma is assigned to a place in the built environment. By contrast, the older setting features a less structured clustering of independent living and assisted living. Less stigma associated with levels of care can be observed in this older building. Grounding their analysis in data drawn from ongoing ethnographic research, the authors focus on the built environment as it relates to stigma in the social environment. (JL)

ISSN: 02763893

From : <http://www.tandfonline.com>

Equality Act 2010: banning age discrimination in services, public functions and associations: Government response to the consultation on exceptions; by Government Equalities Office - GEO. London: Government Equalities Office, 2012, 55 pp.

The Government Equalities Office (GEO) claim to have taken a proportionate approach, ensuring that the Equality Act 2010 prohibits only harmful or unjustifiable treatment that results in genuinely unfair discrimination and harassment because of or related to age. The GEO has sought no exceptions in health and social care, so all medical decisions based on age must be objectively justifiable. Financial services, on the other

hand, have a blanket exception from the Act, although when age is used in decision making this must be made clear and, if cover is refused, signposts to alternative providers must be given. The intention is to bring into force the ban on age discrimination in the provision of services and exercise of public functions, and by private clubs and other associations in October 2012, along with related exceptions. Such exceptions include age based concessions, group holidays, immigration, sport, residential park homes, and age verification schemes to control the purchase of age restricted products. This report includes both the new and consultation versions of the Equality Act 2010 (Age Exceptions) Order 2012. (RH)

From : Government Equalities Office, Home Office, 3rd Floor Fry Building, 2 Marsham Street, London SW1P 4DF. Download at: <http://www.cpa.org.uk/cpa/docs/GEO-Equality-Act-2010-exceptions-consultation-response.pdf>

Getting to know you: using documentary video-making to challenge ageist stereotypes; by Terry Lee.

Gerontology & Geriatrics Education, vol 33, no 3, July-September 2012, pp 272-286.

The article theorises that augmenting traditional humanities course work with documentary video-making can enhance and motivate learning. The author begins by reviewing scholarly research on using digital video in classrooms, from primary school level to college. The author then describes his own documentary video project which focused on ageing and the lives of older people in an adult daycare centre and a retirement community. Students documented older people's stories in video over 15 weeks. The instructor's goal was to use the immediacy of video to challenge and dismantle ageist stereotypes. The writer concludes that documentary video-making is a simple and enticing technology that gives students a powerful tool for getting to know older people. Scholarship on classroom uses of digital video-making is discussed and critical comments from the five reflective essays students wrote during the semester are used to track changes in student perceptions of older people. (JL)

ISSN: 02701960

From : <http://www.tandfonline.com>

Implementing a ban on age discrimination in the NHS: making effective, appropriate decisions; by Social Care, Local Government and Care Partnerships, Department of Health - DH. Leeds: Department of Health, 28 September 2012, 19 pp (Gateway ref: 18154).

From 1 October 2012, the Government has fully implement the ban on age discrimination enshrined in the Equality Act 2010, giving protection against age discrimination in services, clubs and associations and in the exercise of public functions. The Act makes it unlawful for service providers and commissioners to discriminate, victimise, or harass a person because of age. There will be no exceptions in health and social care. However, positive use of age in providing, commissioning and planning services will be able to continue: the Act does not prevent differential treatment where this is objectively justified. This briefing gives a short overview of the ban on age discrimination, and includes a list of online resources on the Act and the Public Sector Equality Duty. It is specifically aimed at those who plan, commission or provide NHS services, whether in the NHS, voluntary or private sectors. It has been developed by NHS Employers with the support of the Department of Health (DH), the NHS Commissioning Board Authority, the Equality and Human Rights Commission (EHRC), the Local Government Association (LGA), Age UK, the Care Quality Commission (CQC), the National Institute for Health and Clinical Excellence (NICE), both the Welsh and Scottish Governments, and the NHS Confederation. (RH)

From : Available only as PDF: <https://www.wp.dh.gov.uk/publications/files/2012/09/ban-on-age-discrimination.pdf> Contact: Catherine Davies, E&I, HI&P - SCLGCP, Quarry House, Quarry Hill, Leeds LS2 7UE.

Positive ageing: from the political to the personal; by Guy Robertson.: Emerald, 2012, pp 149-153.

Working with Older People, vol 16, no 4, 2012, pp 149-153.

The aim of this paper was to highlight the corrosive impact of ageism on the health and wellbeing of older people and to propose a practical methodology for addressing the psychological and emotional damage. The paper examines published research from social gerontology on the impact of negative attitudes on longevity and health and incorporates research from the realm of positive psychology to produce some practical personal development approaches based on a synthesis of the two. Study findings showed that negative attitudes, largely fed by societal ageism, can significantly reduce longevity. Altering a person's 'explanatory style' can produce significant health and wellbeing benefits. The latter is then proposed as a means of countering the former. Whilst each element is grounded in robust research evidence, there is as yet no dedicated research to show that the proposed 'combined intervention' will have the intended impact. A methodology is proposed for enabling individuals to examine their negative attitudes towards their own ageing and then use a variety of psychological techniques to ameliorate or replace them with more positive ones, which it is argued, will lead to greater health and wellbeing. (JL)

ISSN: 13663666

From : <http://www.emeraldinsight.com/products/journals/journals.htm?id=wwop>

Systematic practice with older people: collaboration, community and social movement; by Mandy Clayton, Glenda Fredman, Eleanor Martin (et al).

PSIGE Newsletter, no 121, October 2012, pp 20-26.

The authors outline the practices they have been developing with their Older People's Project in Camden and Islington to counteract the effects of discrimination and isolation. This article is based on a presentation at the National PSIGE Conference 2012 that is informed by Glenda Fredman's 'Systemic Cs' idea, in which Collaboration is central. The aim is for older people to have a voice and Choice, and focus on how people are Connected in Relationship. Also key to the approach are Communication, Conversation and Co-ordination. Attention to Context is essential, since that gives meaning to actions and beliefs. Circularity, Curiosity and Competence are seen as important in identifying problems and avoiding judgements. (RH)

ISSN: 13603671

From : [www.bps.org.uk](http://www.bps.org.uk)

Why and how should we teach geriatric medicine?; by R Parikh, K Wardle, R Westwood ... (et al).

Continuing Medical Education Journal, vol 14, no 1, 2012, pp 16-24.

Currently a gulf exists in the U.S. between the care frail older people receive and that which they need. In order to create services that can meet complex needs doctors are needed who appreciate the specific challenges that older people face. There is a need to develop undergraduate and post-graduate programmes that focus on the complexities of real life practice and the commonly encountered challenges faced when caring for older adults. Early exposure to complex frail older people and experiences that challenge negative attitudes are important. Most care delivered to older people is delivered by non-geriatricians, and thus geriatricians have an important role in training. Training should be available for trainers as well as trainees. (JL)

ISSN: 14751453

From : <http://www.rila.co.uk/site/modules.php?name=Journals&func=journal&jid=005>

## 2011

Age discrimination in mental health services needs to be understood; by Dave Anderson.

The Psychiatrist, vol 25, issue 1, January 2011, pp 1-4.

The ageing population presents a major challenge to health and social care services now and for decades to come. Age discrimination in mental health services is more pronounced than in other areas of health care. Legislation, currently being reviewed, which will make unjustified age discrimination unlawful from 2012, has implications for the organisation and delivery of mental health care that need to be understood. (JL)

ISSN: 17583209

From : <http://pb.rcpsych.org>

Age discrimination in the labour market from the perspectives of employers and older workers; by Chau-kiu Cheung, Ping Kwong Kam, Raymond Man-hung Ngan.

International Social Work, vol 54, no 1, January 2011, pp 118-136.

This article presents the findings of a study on age discrimination against older workers in Hong Kong. The study collected survey data from 787 older workers aged 45 or above and 283 employers who were managers responsible for human resources management or for hiring people for organisations. The focus was on revealing the influences of the organisational goals of profit making and social responsibility on age discrimination, along with influences from negative stereotyping and other factors. Study findings showed that the social responsibility goal tended to be more influential than negative stereotyping on age discrimination. In contrast the profit-making goal did not display a significant effect on age discrimination. The authors offer implications for policy and practice for managing the ageing workforce in the labour market. (JL)

ISSN: 00208728

From : <http://isw.sagepub.com>

'If I look old, I will be treated old': hair and later-life image dilemmas; by Richard Ward, Caroline Holland.

Ageing and Society, vol 31, part 2, February 2011, pp 288-307.

This paper considers the social symbolism of hair, how it is managed and styled in later life, and what attitudes to appearance in general and hairstyling in particular reveal about ageism in contemporary culture. The study draws on findings from a two-year participative study of age discrimination in the United Kingdom, the Research on Age Discrimination (RoAD) project. Using data collected by qualitative methods it explores narratives of image and appearance related to hair and associated social responses. In particular it focuses on

older people's accounts of the dual processes of the production of an image and consumption of a service with reference to hairdressing - and the dilemmas these pose in later life. The findings are considered in the context of the emerging debate on the ageing body. The discussion underlines how the bodies of older people are central to their experience of discrimination and social marginalisation, and examines the relevance of the body and embodiment to the debate on discrimination. A case is made for further scrutiny of the significance of hairdressing to the lives of older people and for the need to challenge the assumption that everyday aspects of daily life are irrelevant to the policies and interventions that counter age discrimination and promote equality. (JL)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/aso>

Improving the lives of transgender older adults; by Harper Jean Tobin.

Public Policy & Aging Report, vol 21, no 3, Summer 2011, pp 12-13.

Like all older adults, older transgender people face many challenges as they age. Transgender people in general experience high levels of discrimination, poverty and victimisation but little is known about this group as they grow older. Some older transgender women and men transitioned from one gender to another at a time when trans people were largely invisible and legal rights were nonexistent. Even today transgender older adults face numerous obstacles to accessing adequate health care. There is much to be done if the lives of trans older adults are to be improved. (JL)

ISSN: 10553037

From : [www.agingsociety.org](http://www.agingsociety.org)

Prevalence and correlates of perceived workplace discrimination among older workers in the United States of America; by Rita Jing-Ann Chou, Namkee G Choi.

Ageing and Society, vol 31, part 6, August 2011, pp 1051-1070.

The study looked at the prevalence of perceived workplace discrimination in the US, based on a national survey of 420 older workers aged 50 and above. Results indicated that more than 81% of older workers encountered at least one workplace discriminatory treatment within a year. Prevalence of perceived workplace discrimination differed with age, gender, education, occupation and wage. The study further tested two competing hypotheses on the level of perceived workplace discrimination and found mixed support for both. As hypothesised, lower education and ethnic minority status were positively associated with perceived workplace discrimination. As counter-hypothesised, being younger and male were positively associated with perceived workplace discrimination. In examining the roles of supervisor and co-worker support, the study discovered that supervisor support was negatively associated with workplace discrimination. Finally the study revealed a non-linear relationship between wages and perceived workplace discrimination, with the mid-range wage group experiencing the highest level of workplace discrimination. (JL)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/aso>

The recruitment of early retirees: a vignette study of the factors that affect managers' decisions; by Kasia Karpinska, Kene Henkens, Joop Schippers.

Ageing and Society, vol 31, part 4, May 2011, pp 570-589.

Retirement is characterised as a dynamic process that has several different outcomes, from early retirement to re-entry to the labour force. Recent studies of the Dutch population show that a substantial number of early retirees re-enter the workforce after early retirement, but others do not succeed even though they want to return to paid work. A commonly named reason for their failures is bias in the selection process. This raises the questions as to what restrictions do early retirees face in the labour market and what are the characteristics that enhance or limit their hiring chances? The aim of this study was to identify the individual and organisational characteristics that influence managers' hiring decisions, and for the purpose a vignette study among Dutch managers and business students was conducted. Profiles of results show that hiring early retirees is of low priority to both managers and students, and depends to a large extent on organisational factors (such as staff shortages) and the age of the retiree. The findings suggest that despite equal opportunities policies, age discrimination is still present in the Dutch labour market and that managers generally hinder the re-employment of workers approaching the retirement age. (JL)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/aso>

A snapshot of ageism in the UK and across Europe; by Age UK.: Age UK, 2011, 12 pp.

Presents findings from the European Social Survey (ESS) which compared data from nearly 55,000 individuals from 28 European countries exploring different aspects of ageism and age discrimination. The purpose of the

study was to support policy work which is pressing for age discrimination measures in the UK and the European Union, including the Equality Act 2010. In particular the survey asked the following questions: At what age are people seen as young or old? What are respondents' experiences of age discrimination? Do people accord different levels of social status to different age groups? Are young or old people seen as threats to society? What is the quality and quantity of intergenerational contact? (JL)

From : Download report: [http://www.ageuk.org.uk/Documents/EN-GB/For-professionals/Equality-and-human-rights/Snapshot%20of%20Ageism%20in%20Europe\\_pro.pdf?dtrk=true](http://www.ageuk.org.uk/Documents/EN-GB/For-professionals/Equality-and-human-rights/Snapshot%20of%20Ageism%20in%20Europe_pro.pdf?dtrk=true)

## 2010

Age discrimination and education: a legal briefing paper; by Helen Mountfield, Inquiry into the Future for Lifelong Learning - IFLL, NIACE - National Institute of Adult Continuing Education; Matrix Chambers. Leicester: NIACE, 2010, 24 pp [IFLL context paper].

This briefing paper is intended to outline the historical, existing and potential future law on age discrimination. It is concerned with adult education, defined here as anyone over compulsory school age (aged 16+). It considers the limited effects of discrimination and equality law in the late 20th and early 21st century. The Human Rights Act 1998 (which came into effect on 2 October 2002) has given little protection for people discriminated against on grounds of age in relation to adult education. The Employment Equality (Age) Regulations 2006 (referred to as the 'Age Discrimination Regulations') cover all vocational training and all training in institutions of higher or further education. The author (a barrister at Matrix Chambers) comments that these Regulations appear not to have to any real shift in thinking about age equality in distribution of educational resources. The last part of this paper looks at the Equality Bill 2009 as it relates to intergenerational equity in relation to education opportunities: Part 6 of the Bill specifically outlaws discrimination on grounds of age in relation to further and higher education and by qualification bodies; and Part 11 proposes a "public sector equality duty". If enacted, this Bill offers the hope of a joined up legal framework for supporting development of educational opportunities across age groups. (RH)

From : Download (4/3/10): <http://www.niace.org.uk/lifelonglearninginquiry/docs/age-discrimination-and-education.pdf>

Age equality in health and social care: a report on the consultation; by Department of Health - DH. London: Department of Health - DH (electronic format only), 9 March 2010, 75 pp (Gateway ref: 13848).

In April 2009, the then Secretary of State for Health asked Sir Ian Carruthers and Jan Ormondroyd to consider what the new measures on age in the Equality Bill would mean for health and social care. Their report, 'Achieving age equality in health and social care' (DH, October 2009) makes a number of recommendations, some of which deal with the form that secondary legislation under the Bill should take. Most of the recommendations focus on non-legislative action that the Department of Health (DH), and the National Health Service (NHS) and social care more generally, should take to prepare for the introduction of the new public sector equality duty and of the ban on age discrimination. This report considers responses to the resulting consultation, 'Age equality in health and social care' (DH, November 2009) which sought comments on the review's non-legislative recommendations, to feed into DH's response to the review, particularly how the DH can support health and social care in England to meet the requirements of the Equality Bill (which applies throughout Britain). Among proposal subjects commented on were: timing of the age discrimination ban; quality-adjusted life years (QALYs); reviewing age criteria in national policies; joint working; local authority assessment procedures; mental health; prevention programmes; training; and complaints. (RH)

From : Policy Support Unit, Department of Health, 79 Whitehall, London SW1A 2NS.  
[http://www.dh.gov.uk/en/Consultations/Responsestoconsultations/DH\\_113733](http://www.dh.gov.uk/en/Consultations/Responsestoconsultations/DH_113733)

Ageism and abuse in the workplace : a new frontier; by Mebane Powell.: Routledge, 2010, pp 654-658. Journal of Gerontological Social Work, vol 53, issue 7, 2010, pp 654-658.

The economic crisis in the United States has led to increased media coverage of older workers being laid off, forced to retire, or working longer than planned. Embedded in these reports are the intimations of workplace abuse. Social workers need to start taking into account ageism and abuse in the workplace as possible co-occurring issues to effectively implement policy, and organizational change that will address both issues. This brief article discusses ageism and abuse in the workplace using a human rights framework, the current state of the literature, and directions for future research. (KJ/RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

Ageism in first episode psychosis; by Emma Mitford, Robert Reay, Kate McCabe (et al).  
International Journal of Geriatric Psychiatry, vol 25, no 11, November 2010, pp 1112-1118.

The characteristics of first episode psychosis in older adults in a county in North East England were considered. The present study used a naturalistic design to compare individuals aged 65 years and over with those under 65, with a first episode psychosis. Data were collected on demographics, diagnosis at presentation and hospital admissions in the first year. Almost a quarter of all patients were aged 65 years or older. The older group were admitted later on after presentation, but with longer average hospital stays ( $p < 0.01$ ), compared to the younger group, with no difference in the use of the Mental Health Act. Late onset schizophrenia (40-59 years) and very late onset schizophrenia-like psychosis (60 + years) formed a considerable proportion of patients. There is a substantial proportion of older people with first episode psychosis, with a significant use of hospital bed days. There are large gaps in services for this group who often do not have the same access to those offered to younger people, e.g. Assertive Outreach or crisis teams, access to Clozapine and CBT. Ageism exists in all forms; older people are doubly disadvantaged in view of their age and mental illness. There is a substantial proportion of older people with first episode psychosis, with a significant use of hospital bed days. There are large gaps in services for this group who often do not have the same access to those offered to younger people, e.g. Assertive Outreach or crisis teams, access to Clozapine and CBT. Ageism exists in all forms; the elderly are doubly disadvantaged in view of their age and mental illness. In view of the Age Discrimination Act (2006) the older functionally ill group of patients should be entitled to the same level of care and equal access to services as younger people. More attention and interventions need to be focused on this overlooked group. (KJ/RH)

ISSN: 08856230

From : <http://www.interscience.wiley.com/journal/gps> DOI: 10.1002/gps.2437

The double face of discrimination; by Iona Heath.

British Medical Journal, no 7741, 6 February 2010, p 296.

There are both scientific and moral arguments against the complete abolition of age discrimination. A London general practitioner (GP) writes in the context of consultation by the Government regarding the age requirements in the Equality Bill. She refers to the moral case of the "fair innings" made by Alan Williams in the BMJ in 1997, and to two books by Amartya Sen, 'Inequality reexamined' (1992), and recently 'The idea of justice'. (RH)

ISSN: 09598138

From : [www.bmj.com](http://www.bmj.com) BMJ 2010;340:c578

Equality Act 2010: Chapter 15; by Government Equalities Office - GEO. London: TSO, 2010, 239 pp.

The Equality Act makes provision to require Ministers of the Crown and others, when making strategic decisions about the exercise of their functions, to have regard to the desirability of reducing socio-economic inequalities. The Act reforms and harmonises equality law and restates the greater part of the enactments relating to discrimination and harassment related to certain personal characteristics. The Act thus prohibits direct or indirect discrimination in respect of age, disability, gender reassignment, marriage and civil partnership, race, religion or belief, sex or sexual orientation. The Act enables certain employers to be required to publish information about differences in pay between male and female employees; prohibits victimisation in certain circumstances. The Act requires the exercise of certain functions to be with regard to the need to eliminate discrimination and other prohibited conduct - as is the case with the public sector equality duty (Part 11) and disabled people and transport (Part 12). The Act also enables duties to be imposed in relation to the exercise of public procurement functions; increases equality of opportunity; and amends the law relating to rights and responsibilities in family relationships. Explanatory Notes have been produced to assist in the understanding of this Act and are available separately. (RH)

Price: £28.75

From : TSO, PO Box 29, Norwich NR3 1GN. <http://www.tsoshop.co.uk>

Inequalities in disability-free life expectancy by social class and area type: England, 2001-03; by Chris White, Grace Edgar.

Health Statistics Quarterly, no 45, Spring 2010, pp 57-80.

Disability-free life expectancy (DFLE) is an important indicator which combines longevity with functional health status. This article examines inequalities in DFLE by socio-economic position in England, and between Local Authorities (LAs) in the deprived 'Spearhead group' and other LAs. Census and vital event data available from the ONS Longitudinal Study were used to calculate estimates of DFLE based on limiting long-term illness or disability status for each Registrar General's Social Class (RGSC) in 2001-03, in England as a whole and within the 'Spearhead group' and non-Spearhead LAs. A predominantly linear relationship was present, with DFLE increasing with rising social class, and the differences observed between people assigned to the professional and unskilled manual social classes were statistically significant and substantial, showing clear



social inequality in amount of life, functional health status during those years lived, absolute number, and relative proportion of life spent free from limiting long-term illness or disability. (KJ/RH)

ISSN: 14651645

From : <http://www.statistics.gov.uk>

Inequalities in healthy life expectancy by social class and area type: England, 2001-03; by Chris White, Grace Edgar.

Health Statistics Quarterly, no 45, Spring 2010, pp 28-56.

Healthy life expectancy (HLE) is an important indicator which combines longevity with health status. This article examines inequalities in HLE by socio-economic position in England, and between Local Authorities (LAs) in the deprived 'Spearhead group' and other LAs. (Department of Health's Spearhead Group of local authorities consists of those identified as the most deprived in England). Census and vital event data available from the ONS Longitudinal Study were used to calculate estimates of HLE based on general health status for each Registrar General's Social Class (RGSC) in 2001-03, in England as a whole and within the 'Spearhead group' and non-Spearhead LAs. The differences observed in HLE at birth and at age 65 between people assigned to the professional and unskilled manual social classes were statistically significant and substantial, demonstrating a clear social inequality in the amount of life, the quality of those years lived, the absolute number of healthy life years, and thus the relative proportion of life spent in 'Good' or 'Fairly Good' health. (KJ/RH)

ISSN: 14651645

From : <http://www.statistics.gov.uk/doi:10.1057/hsq.2010.3>

International comparison of age discrimination laws; by Joanna N Lahey.

Research on Aging, vol 32, no 6, November 2010, pp 679-697.

European age discrimination legislation is discussed in the context of the U.S. Age Discrimination in Employment Act (ADEA) and related state laws. U.S. law was originally introduced to protect productive older workers from age stereotypes, but more recently preventing age discrimination has become important as a means of keeping costs down on entitlement programs as the population ages. Changes in enforcement, penalties, exemptions, length of time to file, and burden of proof have changed the effects of the laws over time. The ADEA has had both positive effects on currently employed older workers and negative effects on the hiring of older workers. Enforcement and publicity are offered as possible explanations for the strength of these positive and negative effects. Age discrimination legislation in Europe, indicated in the Framework Directive 2000/78, is driven by economic and political considerations. European legislation calls for less enforcement and more exemptions than the corresponding U.S. cases that could lead to smaller effects on employment. However, pensions, disability, unemployment, and social security potentially have a stronger effect on social norms for retirement age than does anti-discrimination legislation. (KJ)

ISSN: 01640275

From : <http://roa.sagepub.com/doi:10.1177/0164027510379348>

Is ageism in university students associated with elder abuse?; by Yongjie Yon, Larry Anderson, Jocelyn Lymburner ... (et al).

Journal of Intergenerational Relationships, vol 8, no 4, 2010, pp 386-402.

Research indicates that in comparison to middle aged adults, young adults exhibit higher levels of ageist attitudes toward older persons and that elder abuse is increasing. This study examines proclivity of elder abuse by young adults enrolled in a postsecondary institution. A total of 206 university students completed questionnaires on attitudes toward older persons and their proclivity to elder abuse. Results indicate that student attitudes are correlated with elder abuse. In addition, proclivity to psychological abuse is found to be significantly higher than physical abuse. (JL)

ISSN: 15350770

From : <http://www.tandfonline.com>

Referral from primary to secondary care: older and more deprived patients remain at a disadvantage; by Moyez Jiwa.

British Medical Journal, vol 341, no 7784, 4 December 2010, pp 1172-1173.

Older patients from socially deprived areas who consult their GP are less likely to be referred from primary to secondary health care, compared with their younger or more affluent counterparts. (JL)

ISSN: 09598138

From : [www.bmj.com](http://www.bmj.com)

Shaping equality and fairness after the recession: a report of the Equality and Diversity Forum Seminar Series; by Equality and Diversity Forum; ORC Worldwide; Equality and Human Rights Commission - EHRC. London: Equality and Diversity Forum (electronic format), March 2010, 36 pp.

The Equality and Diversity Forum (EDF) held two seminars in late 2008 looking at how we deal with the current financial crisis; this report outlines the proceedings. The first seminar, 'Redefining equality and fairness', introduced a Joseph Rowntree Trust (JRF) report, 'Understanding attitudes to tackling economic inequality' by Tim Horton and Louise Bamfield. The report examined attitudes to welfare in the UK and the effect of inequality on society. The second seminar, 'Vision of the future: polity, economy and inequality', bears in mind that a General Election will take place within 6 months. Three speakers from groups aligned respectively with a Labour, Liberal Democrat and Conservative outlook - Compass, Centre Forum, and Demos - each took a distinctive political perspective. Debate at the seminars identified seven key issues: importance of awareness of the facts about inequality and poverty; whether equality, fairness, social mobility and diversity are the same or different; the lack of transparency and consensus on fairness; whether there is a long term global trend to increasing economic inequality; whether or not social hierarchies and segregation are growing; that it is vital to make equality legislation work effectively; and the relationship between the benefits system and inequality. (RH)

From : Equality and Diversity Forum, 207-221 Pentonville Road, London N1 9UZ.

Social variations in access to hospital care for patients with colorectal, breast and lung cancer between 1999 and 2006: retrospective analysis of hospital episode statistics; by Rosalind Raine, Wun Wong, Shaun Scholes (et al). British Medical Journal, no 7741, 6 February 2010, p 302.

Does type of hospital admission (emergency compared with elective) and surgical procedure for colorectal, breast and lung cancer vary by socioeconomic circumstances, age, sex and year of admission? Despite the implementation of the NHS Cancer Plan, social factors still strongly influence access to and the provision of care in England. The Plan aimed to improve outcomes overall to reduce health inequalities. In this study, living in deprived areas and being male were associated with lower likelihood of receiving preferred surgical procedures for cancers with in the National Health Service (NHS). Older people were more likely to receive the preferred surgical procedure for rectal cancer, but less likely to receive breast conserving surgery and lung cancer resection. This a summary of a cross-sectional study of 564,821 patients aged 50+ admitted to hospitals in England between 1 April 1999 and 31 March 2009 with these cancers (and published on bmj.com). (RH)

ISSN: 09598138

From : www.bmj.comBMJ 2010;340:b5479

Unequal Britain: equalities in Britain since 1945; by Pat Thane (ed), Centre for Contemporary British History, Institute of Historical Research, University of London. London: Continuum, 2010, 228 pp.

Since 1945, there have been attempts in most of the areas considered in this volume to devise government policies and institutions to diminish inequalities. Contributors consider equality and inequality in Britain in respect of older people, race, religion and belief, gypsies and travellers, gender, sexual orientation and gender identity, and disability. For each theme, a timeline lists major reports and events, followed by more detailed historical consideration of developments by decade. In all the cases considered, the introduction of policies and institutions was driven by organised activism by people who experienced inequality. While improvement has been made on most dimensions of inequality since the end of World War II, there are serious inequalities which have yet to be eradicated. (RH)

From : Continuum UK, The Tower Building, 11 York Road, London SE1 7NX. www.continuumbooks.com

## **2009**

Achieving age equality in health and social care: a report to the Secretary of State for Health by Sir Ian Carruthers OBE and Jan Ormondroyd; by Ian Carruthers, Jan Ormondroyd, Department of Health - DH. London: Department of Health, October 2009, 63 pp (Gateway ref: 12804) + 31 pp Annex.

In April 2009, the Secretary of State for Health asked the authors to conduct a review of age discrimination in the health and social care sectors, to inform Ministerial decisions related to implementing the Equality Bill currently going through Parliament. This report is based on evidence, discussion and meetings with stakeholder organisations, which found that while many people of all ages received a good service, there were many examples of experiences of direct and indirect age discrimination. Particular recommendations are made on mental health, cancer and prevention programmes. On timing of implementation, the ban on age discrimination for health and social care services should come into force at the same time as for other sectors; the review has not identified any "specific exceptions" for removing parts of the service from the scope of the ban. Resource allocation issues are considered in terms of cost-effectiveness and QALYs (quality adjusted life years); little comment was received on charging in social care. As for shaping attitudes, behaviour, and organisational

culture, and "seeing the person, not the age", training and professional standards are seen as critical in rooting out negative attitudes and narrow assumptions about age, but particularly about older people. The authors recommend that following publication of their review, the Government develops and consults on its response to the recommendations. Also available at the weblink ([http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_107278](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_107278)) is an annex to this report, and links to four literature reviews on ageism and age discrimination in primary and community health, secondary health, mental health and social care services conducted by the Centre for Policy on Ageing (CPA). (RH)

From : Download from website:

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_107278](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_107278)

Achieving age equality in health and social care: Annex to a report to the Secretary of State for Health by Sir Ian Carruthers and Jan Ormondroyd; by Ian Carruthers, Jan Ormondroyd, Department of Health - DH. London: Department of Health, October 2009, 31 pp.

These working papers provide some background and additional information about the work of the review, especially the work in the South West that has focused on the practical implementation of the legislation. There has been a close collaboration between the analysis of the broad themes at a national level and the work in the South West focusing on specific issues that are of direct relevance to statutory organisations, their partners and service users and carers. This has led the review to both build on existing pieces of work commissioned by the Department of Health (DH) and to commission further work that will comprise a resource pack to support local implementation of the relevant sections of the Equality Bill. The annex contains the following sections: 1. Local Engagement Events: a summary of the key themes from the twelve engagement events held in September and October 2009; 2. The Resource Pack: details of the work commissioned from the National Development Team for Inclusion, the Social Care Institute for Excellence and Ros Levenson and colleagues to support local implementation; 3. Indicators: initial ideas on developing a set of indicators in collaboration with the University of West of England; 4. Age Explicit Criteria: a summary of initial review of national age explicit criteria within the Department of Health and its Arms Length Bodies; 5. Joint Strategic Needs Assessment: summary of a review of local JSNAs by the University of West of England; 6. Literature Reviews: key themes from the reviews undertaken by the Centre for Policy on Ageing (CPA); and 7. Cost effectiveness and Quality Adjusted Life Years (QALYs): Discussion of the work with the University of Leeds. The literature reviews undertaken by the CPA are also available to download from the organisation's website ([www.cpa.org.uk](http://www.cpa.org.uk)). (KJ/RH)

From : Download from website:

[http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_107397.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_107397.pdf)

Addressing undue discrimination - final proposals: consultation response; by Gretel Jones, Age Concern and Help the Aged. London: Age Concern and Help the Aged, May 2009, 2 pp (Consultation response, Ref: 2709). Age Concern and Help the Aged comment on Ofgem's consultation investigating the pricing mechanisms of different payment method options offered by energy companies and how these are affecting older customers. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. [www.ageconcern.org.uk](http://www.ageconcern.org.uk)  
Help the Aged, 207-221 Pentonville Road, London N1 9UZ. [www.helptheaged.org.uk](http://www.helptheaged.org.uk)

Age based discrimination in health and social care services; by David Oliver.

British Medical Journal, vol 339, no 7722, 19 September 2009, pp 643-644.

Age based discrimination in health and social care services will be against the law if the 2009 Equality Bill is enacted. The Secretary of the British Geriatrics Society (BGS) presents a few facts and figures on service usage by people aged 65+. He reaches the conclusion that health services are not uniformly "age proof and fit for purpose"; for example, conditions affecting all ages are often comparatively less well managed in older people. Age based discrimination may sometimes be justified, and the Bill does allow for this. However, the attitudes, priorities, education and training of staff must reflect older people's need to be given "respect and dignity" in treatment. (RH)

ISSN: 09598138

From : [www.bmj.com](http://www.bmj.com)

The Age Discrimination in Employment Act and the challenge of population aging; by David Neumark.

Research on Aging, vol 31, no 1, January 2009, pp 41-68.

Evidence on age discrimination in the US labour market and the effects of the 1967 Age Discrimination in Employment Act (ADEA) in combating this discrimination is reviewed. The focus is on the challenge of population ageing facing the US economy in coming decades. Combating age discrimination is likely to help in meeting the challenge by encouraging the employment of older individuals. The author also explores how the

rapid ageing of the population protected by the ADEA might inhibit ADEA's effectiveness, and raises questions about possible changes in age discrimination policies and enforcement that could enhance the ability of the ADEA to mitigate some of the adverse consequences of population ageing. (RH)

ISSN: 01640275

From : <http://www.sagepub.com>

Age equality in health and social care: a consultation on preparing the NHS and social care in England for the age requirements in the Equality Bill that affect the provision of services and exercise of public functions; by Department of Health - DH. London: Department of Health, 23 November 2009, 40 pp (Gateway ref: 12985).

The Equality Bill currently before Parliament streamlines and strengthens existing legislation on discrimination. The Bill creates a new equality duty on public bodies and others carrying out public functions, and bans age discrimination in the provision of services and exercise of public functions. In April 2009, the then Secretary of State for Health asked Sir Ian Carruthers and Jan Ormondroyd to consider what the new measures on age would mean for health and social care. The review's report 'Achieving age equality in health and social care' was published on 22 October 2009. It makes a number of recommendations, some of which deal with the form that secondary legislation under the Bill should take. Most of the recommendations focus on non-legislative action that the Department of Health (DH), and the National Health Service (NHS) and social care more generally, should take to prepare for the introduction of the new public sector equality duty and of the ban on age discrimination. This consultation seeks comments (by 15 February 2010 and applies only to England) on the review's non-legislative recommendations, to feed into DH's response to the review, particularly how the DH can support health and social care to meet the requirements of the Bill. In addition to this consultation paper, DH is publishing (on the same web page as this consultation) a partial impact assessment and equality impact assessment which consider the review's recommendations. DH's response to the review is expected to be published in spring 2010. (RH)

Price: PDF format only

From : Age Equality Team, Room 602, Department of Health, 79 Whitehall, London SW1A 2NS. Download from website: [http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH\\_108887](http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH_108887)

Ageism and age discrimination in mental health care in the United Kingdom: a review from the literature; commissioned by the Department of Health; by Centre for Policy on Ageing - CPA. London: Centre for Policy on Ageing, December 2009, 60 pp (+ 40 pp appendices).

The Department of Health (DH) commissioned the Centre for Policy on Ageing (CPA) to undertake four separate reviews from the literature to provide evidence of ageism and age discrimination in the UK in social care, secondary health care, mental health services, and primary health care. This semi-systematic literature based review looks at possible evidence of age discrimination in mental health service provision for older people in the UK in the context of policy since 1999. The report considers stigma stereotypes and ageist attitudes; evidence of under-provision, variation in provision, and under-use of mental health services by older people. It presents study data on age discrimination in the treatment of particular conditions including depression and dementia; on prevention and public health interventions; and on education and training. It suggests that there appears to be no ethical problems in use of quality adjusted life years (QALYs) by the National Institute for Health and Clinical Excellence (NICE) to compare relative cost-effectiveness of treatments applicable to all ages. However, age discrimination in using QALYs may arise when comparing cost of effective treatment for conditions such as Alzheimer's disease (AD). The review concludes that there is evidence of continued explicit institutional "direct" age discrimination in some localities, but that mental health service provision should reflect local variations in need. Appendix 1 (7 pp), on methodology, notes search strategies and processes, and the search results for the databases searched. Appendix 2 (33 pp), a bibliography, lists all items found; key items cited are also listed at the end of the main report. This review has been conducted in the context of the European Commission Draft Directive COM (2008) 425 (July 2008) and the introduction of the Equality Bill to Parliament (April 2009). It has also informed 'Achieving age equality in health and social care' (2009), the review led from the South West region by Sir Ian Carruthers and Jan Ormondroyd. (RH)

From : Centre for Policy on Ageing, 25-31 Ironmonger Row, London EC1V 3QP. Available at: <http://www.cpa.org.uk/information/reviews/reviews.html>

Ageism and age discrimination in primary and community health care in the United Kingdom: a review from the literature; commissioned by the Department of Health; by Centre for Policy on Ageing - CPA. London: Centre for Policy on Ageing, December 2009, 90 pp (+ 54 pp appendices).

The Department of Health (DH) commissioned the Centre for Policy on Ageing (CPA) to undertake four separate reviews from the literature to provide evidence of ageism and age discrimination in the UK in social care, secondary health care, mental health services, and primary health care. The remit for this review of primary care services was to signpost areas where negative discrimination may be occurring. The focus is

primarily on the experiences of older people in their access to general practitioner (GP) services, treatment, quality of care, referrals, preventative strategies and prescribing, as well as access to rehabilitation services, palliative care, dental care, eye care, foot care and hearing services. Discussion on use of quality adjusted life years (QALYs) by the National Institute for Health and Clinical excellence (NICE) notes that expert opinion is divided. The review concludes that discrimination in health care may occur in policies and practices, systems and structures, resources and staffing, and health promotion and ageing well. Appendix 1 (6 pp), on methodology, notes search strategies and processes, and the search results for the databases searched. Appendix 2 (48 pp), a bibliography, lists all items found; key items cited are also listed at the end of the main report. Evidence from this review will support DH activities to root out age discrimination in the context of the European Commission Draft Directive COM (2008) 425 (July 2008) and the introduction of the Equality Bill to Parliament (April 2009). This review has informed 'Achieving age equality in health and social care', the review from the South West region by Sir Ian Carruthers and Jan Ormondroyd. (RH)

From : Centre for Policy on Ageing, 25-31 Ironmonger Row, London EC1V 3QP. Available at: <http://www.cpa.org.uk/information/reviews/reviews.html>

Ageism and age discrimination in secondary health care in the United Kingdom: a review from the literature; commissioned by the Department of Health; by Centre for Policy on Ageing - CPA. London: Centre for Policy on Ageing, December 2009, 73 pp (+ 56 pp appendices).

The Department of Health (DH) commissioned the Centre for Policy on Ageing (CPA) to undertake four separate reviews from the literature to provide evidence of ageism and age discrimination in the UK in social care, secondary health care, mental health services, and primary health care. This review of secondary health care is a rapid semi-systematic literature based review, which considers ageist attitudes in healthcare and older patients' experiences of hospital care. It reviews areas of discrimination in the treatment of particular conditions, and comments that it is common for older people to be excluded from clinical trials. Discussion on use of quality adjusted life years (QALYs) by the National Institute for Health and Clinical Excellence (NICE) concludes that expert opinion is divided. However, there is general consensus that appropriate education and training would root out ageism in the NHS. The review concludes that there is evidence of under-investigation and under-treatment, and indications of indirect discrimination against older people through inadequate provision of necessary hospital services. However, cases of explicit, direct discrimination in secondary health care policy have been rare since publication of the National Service Framework for Older People (NSF) in 2001. Appendix 1 (6 pp), on methodology, notes search strategies and processes, and the search results for the databases searched. Appendix 2 (50 pp), a bibliography, lists all items found; key items cited are also listed at the end of the main report. This review has been conducted in the context of the European Commission Draft Directive COM (2008) 425 (July 2008) and the introduction of the Equality Bill to Parliament (April 2009); and it has also informed 'Achieving age equality in health and social care' (2009), the review led from the South West region by Sir Ian Carruthers and Jan Ormondroyd. (RH)

From : Centre for Policy on Ageing, 25-31 Ironmonger Row, London EC1V 3QP. Available at: <http://www.cpa.org.uk/information/reviews/reviews.html>

Ageism and age discrimination in social care in the United Kingdom: a review from the literature; commissioned by the Department of Health; by Centre for Policy on Ageing - CPA. London: Centre for Policy on Ageing, December 2009, 61 pp (+ 30 pp appendices).

The Department of Health (DH) commissioned the Centre for Policy on Ageing (CPA) to undertake four separate reviews from the literature to provide evidence of ageism and age discrimination in the UK in social care, secondary health care, mental health services, and primary health care. This review of adult social care services aimed to determine whether older people (aged 65+) in the UK are treated less favourably than younger users in the way resources are allocated, needs are assessed, care is planned and services are delivered. The study looks at all aspects of the potential for ageism and age discrimination in adult social care, including institutional and individual ageism and age discrimination; quality and level of services; direct and indirect discrimination; differential levels of funding, allocation of resources, and policies on charging for services; attitudes of professional staff; and evidence reflected in service users' attitudes and views. Also considered are residential care, extra-care housing, end of life care, older people with learning disabilities, and older prisoners. Concluding comments consider the extent of age discrimination in relation to systems and structures, policy and practice, and resources and funding. The evidence from this review will support DH activities to root out age discrimination in the context of the European Commission Draft Directive COM (2008) 425 (July 2008) and the introduction of the Equality Bill to Parliament (April 2009). The review has also informed 'Achieving age equality in health and social care' (2009), the review led from the South West region by Sir Ian Carruthers and Jan Ormondroyd. Appendix 1 (7 pp), on methodology, notes search strategies and processes, and the search results for the databases searched. Appendix 2 (23 pp), a bibliography, lists all items found; key items cited are also listed at the end of the main report. (RH)

From : Centre for Policy on Ageing, 25-31 Ironmonger Row, London EC1V 3QP. Available at:  
<http://www.cpa.org.uk/information/reviews/reviews.html>

Ageism set to be outlawed: [the Age Discrimination Review]; by John Dixon.  
Community Care, issue 1799, 10 December 2009, p 26.

The immediate Past President of the Association of Directors of Adult Social Services (ADASS) sets out what social care services must do to end age discrimination by 2012, in line with the Equality Bill (2009/10 Parliamentary session). He writes from his perspective as chair of the advisory group working in the South West with Ian Carruthers and Jan Ormondroyd on the Age Discrimination Review, which recommends implementing the ban on age discrimination by 2012. People working in both sectors (health and social care) are keen to see an end to age discrimination in their work on personalising services. (RH)

ISSN: 03075508

From : [www.communitycare.co.uk](http://www.communitycare.co.uk)

Bipolar disorder: overcoming ageism; by Mark Salter.  
GM (Geriatric Medicine), vol 39, no 2, February 2009, pp 86-88.

Ageism within the National Health Service (NHS) and society as a whole has meant that some older people with bipolar disorder do not get access to the services they need. Dawn Powell talks to Dr Mark Salter about the need to see the patient not their birth certificate. Dr Salter is a Consultant Psychiatrist at City and Hackney Centre for Mental Health, Homerton University Hospital, London. (KJ/RH)

ISSN: 0268201X

From : <http://www.gerimed.co.uk>

A comparison of psychiatric consultation between geriatric and non-geriatric medical inpatients; by Sarah E Schellhorn, John W Barnhill, Valentine Raiteri (et al).

International Journal of Geriatric Psychiatry, vol 24, no 10, October 2009, pp 1054-1061.

The authors examine changes in psychiatric referral patterns for geriatric inpatients since last reported in the United States, more than 20 years ago, and compare geriatric psychiatric referrals to those of a non-geriatric cohort. Their retrospective study compared psychiatric diagnosis, treatment and aftercare of 474 younger (ages 18-60 years) and 487 older (aged 60+) patients seen in psychiatric consultation in a large, urban, university-based tertiary care hospital setting. Compared to previous reports in the literature, this cohort contains a notably higher percentage of the old-old (>80 years), reflecting the general ageing of those who are hospitalised. Compared to younger patients, geriatric inpatients were more commonly referred for psychiatric consultation, but overall rates of referral remain low (<4%). Geriatric patients were diagnosed with dementia and delirium more frequently; with substance dependence less frequently; and were just as likely to be diagnosed with depression. Geriatric patients were also more likely to receive atypical antipsychotic medications and less likely to receive benzodiazepines than younger patients. In patients diagnosed with depression, psychiatric follow-up is more likely relegated to outpatient geriatricians and nursing homes. Consulting psychiatrists frequently encounter geriatric patients and, given patterns of diagnosis and aftercare, should play a major role in medical staff education and in development of enhanced in-hospital and aftercare services, including psychiatric liaison. (KJ/RH)

ISSN: 08856230

From : <http://www.interscience.wiley.com/journal/gps>

Directive 2000/78 - Equal treatment in employment and occupation - Age discrimination - Dismissal by reason of retirement - Justification: Judgement of the Court (Third Chamber) in Case C-388/07; by European Court of Justice - ECJ; Age Concern England - ACE.: Electronic format, 5 March 2009, 9 pp.

The European Court of Justice ruling on the High Court's request for a preliminary determination on whether or not the Employment Equality (Age) Regulations 2006 correctly transpose the Equal Treatment Directive in UK law. The reference was made in the course of proceedings between The Incorporated Trustees of the National Council on Ageing (Age Concern England) and the Secretary of State for Business, Enterprise and Regulatory Reform (BERR). The European Court of Justice made the ruling on 5 March 2009, that national rules such as those set out in the Employment Equality (Age) Regulations 2006 fall within the scope of Council Directive 2000/78/EC of 27 November 2000 establishing a general framework for equal treatment in employment and occupation. The ruling can be downloaded from the website, but the information on this website is subject to a disclaimer and a copyright notice. (KJ/RH)

From : Download from website (13/3/09): <http://curia.europa.eu/juris/cgi-bin/form.pl?lang=EN&Submit=rechercher&numaff=C-388/07>

Equality Bill: extending new protections to carers; by Carers UK. London: Carers UK, May 2009, 3 pp (Policy briefing).

The Equality Bill was debated in the House of Commons on 11 May 2009, and this briefing outlines the measures contained in the Bill. At present, discrimination against carers takes many forms. While protection against direct discrimination in employment is included in the Bill, carers will still have to request flexible working from their employers. Carers UK and the House of Commons' Work and Pensions Committee disagree, and believe that the Bill should make provision for reasonable adjustment to ensure carers' participation in the workplace. Carers UK draws attention to its dossier on discrimination (<http://www.carersuk.org/Newsandcampaigns/News/1239268359>), where carers can provide their own evidence. (RH)

From : Carers UK, 20 Great Dover Street, London SE1 4LX.<http://www.carersuk.org>

Equality Bill - equality impact assessment; by Government Equalities Office - GEO. London: TSO, April 2009, 89 pp.

This equality impact assessment looks at the impact of particular measures of the Equality Bill, the aim of which is to tackle discrimination and promote equality of opportunity. It broadly follows the structure of the Bill itself. Of particular interest will be Chapter 3, on protecting against age discrimination outside the workplace, and Chapter 4, on disability-specific changes; and establishing a single equality Duty on public authorities. (RH)

From : Download: <http://www.equalities.gov.uk/PDF/Equality%20Bill%20Eq%20Impact%20As.pdf>

Equality Bill: assessing the impact of a multiple discrimination provision: consultation response; by Robert Brown, Age Concern and Help the Aged. London: Age Concern and Help the Aged, June 2009, 6 pp (Consultation response, Ref: 3409).

Age Concern and Help the Aged welcome proposals to include protection from discrimination on multiple grounds in the Equality Bill. This consultation response to the Government Equalities Office updates evidence provided by the Age Reference Group on Equality and Human Rights in 2005 in 'Age and ... multiple discrimination and older people: a discussion paper'. It identifies examples of multiple disadvantage and discrimination as the affect older women; gay, lesbian, bi-sexual and transgender older people; older people with disabilities; and black and minority ethnic (BME) older people. It also answers some of the specific questions posed in the GEO's document. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. [www.ageconcern.org.uk](http://www.ageconcern.org.uk)  
Help the Aged, 207-221 Pentonville Road, London N1 9UZ. [www.helptheaged.org.uk](http://www.helptheaged.org.uk) Email:  
[robert.brown@helptheaged.org.uk](mailto:robert.brown@helptheaged.org.uk)

Equality Bill: making it work - ending age discrimination in services and public functions: a consultation; by Government Equalities Office - GEO. London: Government Equalities Office - GEO, June 2009, 74 pp (Ref: 296753C).

The Government Equalities Office (GEO) outlines further proposals for a new legal ban on harmful age discrimination, which will make sure older people do not face unfair or substandard treatment when buying goods or using services, such as in shops, hospitals, or when accessing car and holiday insurance. The consultation published on 29 June 2009 covers three main areas: health and social care; financial services; and other services, including commercial services such as group holidays and concessions for particular age groups (including discounts). The annexes include definitions of direct and indirect discrimination; areas not covered in the consultation (for example, volunteering); and a section on objective justification (that is, where different treatment because of age can be justified). The link [http://www.equalities.gov.uk/news/age\\_consultation.aspx](http://www.equalities.gov.uk/news/age_consultation.aspx) includes response forms as well as the consultation document. The closing date for comments is 30 September 2009. (KJ/RH)

From : Government Equalities Office, 9th Floor, Eland House, Bressenden Place, London SW1E 5DU.

Download from website

(30/6/09):<http://www.equalities.gov.uk/pdf/13511%20GEO%20Consultation%206th.pdf>

Equivalence or difference? Revisiting the concept of age equality: report of an Age Concern seminar [held in January 2009]; by Age Concern and Help the Aged. London: Age Concern and Help the Aged, June 2009, 18 pp.

In June 2008, the Government had announced its intention to introduce legislation to outlaw age discrimination in goods, facilities and services (GFS) as part of the equality Bill. In January 2009, Age Concern held a seminar chaired by Andrew Harrop to explore the concept of age equality, with particular reference to older people. This report outlines speakers' presentations and the discussions that followed. Among concepts discussed were "agelessness" and issues around dignity. The seminar posed a series of linked questions, for example, should the focus be on old-age prejudice; to what extent should we promote age-based interventions that favour older

people; and would human rights - or "equal human dignity" - provide a better framework for tackling old-age prejudice? (RH)

From : Download: <http://www.ageconcern.org.uk/AgeConcern/Documents/Equivalenceordifference.pdf>

Eurobarometer surveys effectiveness of EU anti-discrimination efforts; by Tom Osborne. New York: AARP, Winter 2009, pp 98-103.

AARP International : The Journal, Winter 2009, pp 98-103.

In 2006 and again in 2008, the European Union surveyed large numbers of people in each of the EU Member States regarding discrimination and inequality in Europe. The findings from the initial Eurobarometer survey in 2006 provided insight into the perceptions, attitudes, knowledge and awareness of discrimination and inequality in the EU. The most recent findings track how these perceptions and opinions have changed in the intervening year, which this article outlines. While the survey notes evidence of efforts to combat discrimination, it is too soon for the effects of implementing two anti-discrimination EU Council Directives to be discerned. Meanwhile, AGE - the European Older People's Platform has been working with AARP through the Anti-Discrimination Expert Group. (RH)

From : <http://www.aarpinternational.org/thejournal>

Evaluation of 'see me' - the national Scottish campaign against stigma and discrimination associated with mental ill-health; by Fiona Myers, Amy Woodhouse, Indiya Whitehead (et al), Social Research, Scottish Executive; Rethink; Institute of Psychiatry, King's College London. Edinburgh: Scottish Executive Social Research, 2009, 4 pp.

Health and Community Care Research Findings, no 73, 2009, 4 pp.

The national Scottish campaign against stigma and discrimination associated with mental ill-health - called 'see me' - was launched in October 2002. Funded as part of the Scottish Executive National Programme for Improving Mental Health and Wellbeing, but managed by an alliance of five mental health organisations, the campaign's activities have included national-level publicity campaigns targeted at the general population, targeted publicity campaigns aimed at specific groups or environments, work with the media, and support for local activities. These research findings outline the results of an independent evaluation of the inception and first four years of 'see me' which was commissioned by the then Scottish Executive in 2006. The aims of the evaluation were to: co-ordinate a detailed account of the development and activities of 'see me'; determine the extent to which the campaign had met its own strategic objectives; and make recommendations for future work in Scotland to address stigma and discrimination experienced by people with mental health problems. The full research report on the project can be viewed on the Social Research website ([www.scotland.gov.uk/socialresearch](http://www.scotland.gov.uk/socialresearch)). (RH)

Price: FOC

From : Scottish Executive Social Research website: <http://www.scotland.gov.uk/socialresearch> Queries about the research to: [socialresearch@scotland.gsi.gov.uk](mailto:socialresearch@scotland.gsi.gov.uk)

A fairer future: the Equality Bill and other action to make equality a reality; by Government Equalities Office - GEO. London: Government Equalities Office, April 2009, 37 pp (Ref: JN295326).

An overview of the Equality Bill notes how the Bill, when enacted, will strengthen equality law on matters that include: reducing socio-economic inequalities; putting a new Equality Duty on public bodies; banning age discrimination outside the workplace; protecting carers from discrimination; and strengthening protection from discrimination for disabled people. Part 2 of this document outlines what the Bill means for people including those from ethnic minorities, disabled people, older people, and lesbian, gay, bisexual and transsexual people. (RH)

From : Government Equalities Office, 9th Floor, Eland House, Bressenden Place, London SW1E 5DU.

Download: [http://www.equalities.gov.uk/equality\\_bill.aspx](http://www.equalities.gov.uk/equality_bill.aspx)

Just ageing? Fairness, equality and the life course: final report; by Michele Lee, Equality and Human Rights Commission - EHRC; Age Concern and Help the Aged. London: Equality and Human Rights Commission - EHRC; Age Concern and Help the Aged, December 2009, 32 pp (Just Ageing?: fairness, equality and the life course).

In 2009, the Equality and Human Rights Commission (EHRC), and the newly merged charity Age Concern and Help the Aged (Age UK from Spring 2010) jointly established a programme of research and policy seminars called 'Just Ageing?: Fairness, equality and the life course'. The aim was to create a deeper understanding of equality over the life course, and to build momentum for action on the disadvantage that accumulates at different stages of the life and results in inequality in old age. This report builds on the Equality Bill published in 2009. It presents key findings, drawing on new research commissioned by the programme and five seminars held in 2009. It provides background on why questions about ageing, equality and the life course are important



and outlines different ways of thinking about these issues. It presents new findings relating to early, mid and late life course factors that affect equality in later life. It offers eight key insights from the research and the seminars, for example the need to increase the voices of older and younger people, and to pay more attention to unpaid carers. The weblink [www.equalityhumanrights.com/justageing](http://www.equalityhumanrights.com/justageing) provides further information. (RH)

From : Age Concern and Help the Aged, 207-221 Pentonville Road, London N1 9UZ. Equality and Human Rights Commission, Arndale House, The Arndale Centre, Manchester M4 3AQ. Weblink: [www.equalityhumanrights.com/justageing](http://www.equalityhumanrights.com/justageing)

Making older people equal: reforming the law on access to services in Northern Ireland: report for the Changing Ageing Partnership (Cap); by Lisa Glennon, Brice Dickson, Institute of Governance, School of Law, Queen's University Belfast. Belfast: Changing Ageing Partnership, February 2009, 93 pp.

The Changing Ageing Partnership (Cap) commissioned this research which was conducted between February 2008 and February 2009. The aim was to examine the laws in other countries to see how they protect people against discrimination on the grounds of age when accessing goods, facilities or services. The aim was to see if such laws could be implemented in Northern Ireland. The four jurisdictions examined - the Republic of Ireland, Canada, the United States, and Australia - have similar legal systems to that of Northern Ireland; and in each, the law was found to protect older people against this form of discrimination very effectively. The report notes widespread support throughout Northern Ireland for the need to do more to ensure older people's rights are protected and promoted and to reform the law accordingly. (RH)

From : Download:

<http://www.changingageing.org/Research/ResearchLaunchReports/Filetoupload,139662,en.pdf>

Making the case: why children should be protected from age discrimination and how it should be done: proposals for the Equality Bill; by Young Equals; Children's Rights Alliance for England.: Children's Rights Alliance for England, 2009, 23 pp.

Young Equals is a group of charities and children who are campaigning to stop age discrimination. The group is coordinated by the Children's Rights Alliance for England, while 11 Million, the Children's Commissioner for England, and the Equality and Human Rights Commission have observer status. The Equality Bill going through Parliament proposes to extend age discrimination protection to cover the provision of goods, facilities and services. However, protection for children is currently excluded from the proposed legislation. This publication brings together evidence showing why children need protection against age discrimination. The evidence cited relates to lack of: equal access to: public buildings and public transport for babies and young children; healthcare; child protection; justice; public leisure facilities; shops and restaurants; and public transport for older children. The publication was coordinated and written by the Children's Rights Alliance for England, and funded by Save the Children UK. (RH)

From : Children's Rights Alliance for England, 94 White Lion Street, London N1 9PF. Website:

[www.crae.org.uk](http://www.crae.org.uk)

Marmot review - Health inequalities strategy in England post 2010: consultation response; by Margit Physant, Age Concern and Help the Aged. London: Age Concern and Help the Aged, August 2009, 5 pp (Consultation response, Ref: 4509).

Professor Sir Michael Marmot has been asked to advise the Secretary of State for Health on the future development of a health inequalities strategy in England post 2010. Age Concern and Help the Aged comment on issues raised in the consultation document on the first phase of the Strategic Review. First, it is suggested that the Review should consider 'financial capability' in order to reduce 'material inequalities. Second, implementing the Lifetime Neighbourhood strategy will contribute to reducing health inequalities. Third, older people should be considered as a vulnerable group. Fourth, equality legislation is essential to reduce health inequalities. Fifth, an ageing society should be considered as one of the cross-cutting challenges. The organisation has considered age discrimination in health and social care in more detail in its Response to the National Review of Age Discrimination in Health and Social Care call for evidence. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. [www.ageconcern.org.uk](http://www.ageconcern.org.uk) Help the Aged, 207-221 Pentonville Road, London N1 9UZ. [www.helptheaged.org.uk](http://www.helptheaged.org.uk)

On the origins of ageism among older and younger adults; by Ehud Bodner.

International Psychogeriatrics, vol 21, no 6, December 2009, pp 1003-1014.

Ageism is apparent in many social structures and contexts and in diverse forms over the life cycle. This review discusses the development and consequences of ageism toward older people by others of any age, according to the Terror Management Theory (TMT) and the Social Identity Theory (SIT). A systematic search of the literature was carried out on the social and psychological origins of ageism in younger and older adults. Studies on the reasons for ageism among older adults point to attitudes that older adults have toward their own age

group, while studies on ageism in young adults explain it as an unconscious defensive strategy which younger adults use against death anxiety. In other words, TMT can serve as a suitable framework for ageism in younger adults, and SIT appears to explain ageism in older adults. A dissociation of the linkage between death and old age in younger adults can be achieved by changing the concepts of death and old age. For older adults, it is recommended to improve self-worth by encouraging social contacts in which older adults contribute to younger adults, weaken the effects of age stereotypes in TV programmes, and prepare middle-aged adults for living healthy lives as older adults. However, these conclusions should be regarded with caution, because several key areas (age related cues, activated cognitive processes, impact of death awareness on ageism) need to be investigated in order to validate this understanding of the origins of ageism among younger and older adults. (KJ/RH)

ISSN: 10416102

From : <http://www.journals.cambridge.org/ipg>

Reflections on the Heyday challenge; by Chris Ball. New York: AARP, Winter 2009, pp 104-107.

AARP International : The Journal, Winter 2009, pp 104-107.

The author reflects on the operation of the European Directive 2000/78 (Equal treatment in employment and occupation - Age discrimination - Dismissal by reason of retirement - Justification) and the UK's Age Discrimination Regulations, in the light of legal action taken by Age Concern England (ACE) to challenge the operational interpretation of several aspects of the EU Directive. The case came before the English High Court in 2007, and in July of that year was sent to the European Court of Justice (ECJ) which has now made its judgment. The author reflects upon this judgment which he opines does not fully support the Regulations to regulate robustly against age discrimination. The author is Chief Executive Officer of TAEN - The Age and Employment Network. The judgment can be viewed at the website link: <http://curia.europa.eu/jurisp/cgi-bin/form.pl?lang=EN&Submit=rechercher&numaff=C-388/07> (KJ/RH)

From : <http://www.aarpinternational.org/thejournal>

Response to the National Review of Age Discrimination in Health and Social Care call for evidence; by Robert Brown, Age Concern and Help the Aged. London: Age Concern and Help the Aged, July 2009, 15 pp (Evidence, Ref: 3709).

The ban on unjustifiable age discrimination in health and social care should be brought into force in 2012, along with other sectors covered by goods, facilities and services provisions. This document draws together examples of evidence that Age Concern and Help the Aged found regarding the pernicious effects of age discrimination against older people in health and social care. At worst, age discrimination can be a matter of life and death. Age discrimination in health and social care are best understood as three different but connected mechanisms: explicit age-based policies; frontline decisions and behaviours; and organisational level decisions. Evidence from examples of age discrimination are outlined in respect of cancer, stroke, cardiology, depression, footcare, continence, palliative care and social care. The organisation's survey of members of the British Geriatric Society (BGS) found that 47% think that the NHS is institutionally ageist, and 77% would support the introduction of legislation against age discrimination in the NHS. This document identifies eight key themes for action: national leadership; transparency and accountability; workforce; incentives; innovation; regulation; personalisation and choice; and information technology. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. [www.ageconcern.org.uk](http://www.ageconcern.org.uk)  
Help the Aged, 207-221 Pentonville Road, London N1 9UZ. [www.helptheaged.org.uk](http://www.helptheaged.org.uk) Email: [robert.brown@helptheaged.org.uk](mailto:robert.brown@helptheaged.org.uk)

Self-reported ageism in social work practitioners and students; by Priscilla D Allen, Katie E Cherry, Erdman Palmore.: The Haworth Press, Inc., 2009, pp 124-134.

Journal of Gerontological Social Work, vol 52, issue 2, 2009, pp 124-134.

The focus is on self-reported ageism in college students and social service providers; and this Louisiana-based study uses the Relating to Older People Evaluation (ROPE), Cherry and Palmore, 2008). The ROPE is a 20-item questionnaire that measures positive and negative ageist behaviours that people engage in during everyday life. Participants included 63 undergraduate and 27 graduate social work students and 41 practising social service providers in nursing home and mental health settings. Findings indicate that people of varying educational backgrounds and occupational experience in social services readily admit to positive ageist behaviours. Item analyses revealed similarities and differences between groups in the most and least frequent forms of ageism endorsed. Ageism as a social phenomenon with implications related to social work policy and practice is discussed. (RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

'So forget how old I am!': examining age identities in the face of chronic conditions; by Philip A Rozario, Daniel Derienzis.

Sociology of Health & Illness, vol 31, no 4, May 2009, pp 540-553.

The construction of age identity in older people with chronic conditions is examined using semi-structured interviews with 45 participants from two senior centres in Long Island townships in New York State. The authors applied symbolic interactionism and the concept of stigma in participants' narratives to identify three categories of age identities: definitely old; definitely not old; and ambivalent about their age identity. Further, they examined the metaphors of agelessness and the mask of ageing, relationship between chronological age and age identity, as well as the age-related stereotypes that older people offered in their narratives of their experiences of old age. Ideas about the meaning of old age itself varied, with some focusing on predominantly negative descriptors, while others saw it positively, i.e. as a time allowing for more freedom and self-exploration. The influence of chronic conditions on older people's age identities is more complex and nuanced than the characterisations promoted by ageist stereotypes. (RH)

ISSN: 01419889

From : <http://www.blackwellpublishing.com>

Submission to Joint Committee on Human Rights on the human rights compatibility of the Equality Bill; by Robert Brown, Age Concern and Help the Aged. London: Age Concern and Help the Aged, June 2009, 7 pp (Submission, Ref: 3509).

Age Concern and Help the Aged have collected much evidence on the pernicious effects of age discrimination on older people's human rights. This response notes Help the Aged's previous response in 2008 to the Joint Committee on Human Rights's call for evidence regarding the then unpublished Bill. Now that the Bill has been published, this submission comments on: goods facilities and services; disability related discrimination; discrimination against carers; multiple discrimination; premises access; volunteers; forced retirement; and the public sector equality duty. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. [www.ageconcern.org.uk](http://www.ageconcern.org.uk)  
Help the Aged, 207-221 Pentonville Road, London N1 9UZ. [www.helptheaged.org.uk](http://www.helptheaged.org.uk) Email:  
[robert.brown@helptheaged.org.uk](mailto:robert.brown@helptheaged.org.uk)

Submission to the Department of Health: National review of age discrimination in health and social care; by Citizens Advice Bureau. London: Citizens Advice Bureau, 2009, 6 pp (Evidence).

In 2007/08, citizens' advice bureaux (CABs) dealt with 73,890 health and social care issues, of which a large proportion involved older people. This submission comments that most examples of discrimination seen by CABs are indirect: the design of a service means that some older people find it difficult to access a service because of their age. Three areas where service delivery is not sufficiently designed around the needs of older people are hospital transport, help with hospital travel costs, and discharge from hospital. This submission highlights some of the many cases seen by bureaux where it is the combination of a person's age and disability that creates additional needs or vulnerability that are not recognised or provided for. This amounts to multiple discrimination, and often also a failure to make reasonable adjustments relating to the disability. Citizens Advice calls for a provision to outlaw direct and indirect multiple discrimination to be included in the Equality Bill. Such a provision could lead to health and social care providers taking greater account of the combined impact of their users' age and disability. It would provide an additional lever for users, their families and advisers to challenge poor services. (KJ/RH)

From : Download:

[http://www.citizensadvice.org.uk/index/cr\\_equalitydiversitydiscrimination/national\\_review\\_of\\_age\\_discrimination\\_in\\_health\\_and\\_social\\_care](http://www.citizensadvice.org.uk/index/cr_equalitydiversitydiscrimination/national_review_of_age_discrimination_in_health_and_social_care)

Tomorrow's doctors: a draft for consultation: summary [of] consultation response; by Andrew Harrop, David Sinclair, Charlotte Potter (et al), Age Concern England - ACE; Help the Aged. London: Age Concern England; Help the Aged, March 2009, 3 pp (Consultation response Ref: 1909(S)).

'Tomorrow's doctors' is a draft for consultation from the General Medical Council (GMC) on standards for undergraduate medical education. Age Concern England (ACE) and Help the Aged outline concerns around the quality of care received by older patients and on making clinical judgements on the basis of age, particularly in respect of mental health. Also sought is better training for conditions such as dementia and incontinence. Doctors should be trained so that they can work with patients as active participants. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. [www.ageconcern.org.uk](http://www.ageconcern.org.uk)  
Help the Aged, 207-221 Pentonville Road, London N1 9UZ. [www.helptheaged.org.uk](http://www.helptheaged.org.uk)

UK consultation on the European Commission proposal for an Equal Treatment Directive: consultation response; by Robert Brown, Ken Bluestone, Age Concern and Help the Aged. London: Age Concern and Help the Aged, July 2009, 8 pp (Consultation response, Ref: 4409).

Age Concern and Help the Aged respond to the consultation by the Government Equalities Office (GEO) consultation on the proposed Equal Treatment Directive, by focusing on the "strong and compelling evidence of age discrimination in healthcare". While the National Service Framework for Older People (NSF) has resulted in removing the most explicit barriers affecting older people, two key barriers remain at age 65+: mental health services and the funding and assessment processes for social care. This response also comments on age-related practices in financial services; the scope of the Directive, for example, on the inclusion of housing; the positive action provisions of Article 5; and the length of time for implementing the Directive. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. [www.ageconcern.org.uk](http://www.ageconcern.org.uk)  
Help the Aged, 207-221 Pentonville Road, London N1 9UZ. [www.helptheaged.org.uk](http://www.helptheaged.org.uk) Email:  
[robert.brown@helptheaged.org.uk](mailto:robert.brown@helptheaged.org.uk)

Unequal ageing: Briefing 4: Quality of life; by Help the Aged. London: Help the Aged, 2009, 13 pp.

The third wave of the English Longitudinal Study of Ageing (ELSA) considered the concept of "social detachment" as a measurement of exclusion in older age. This Help the Aged briefing considers various aspects of older people's social, civic and cultural engagement, and its impact on quality of life. It considers both inequalities within the older population and ways in which older people may be disadvantaged in general. Although a considerable body of evidence may be available to researchers, this may not necessarily be available to the general public. Even where such knowledge exists, there remain elements which are not "age-proofed" or where assumptions have been made about older people which may no longer be correct. Ways of rectifying such errors or gaps in our knowledge are suggested. (RH)

From : Help the Aged, 207-221 Pentonville Road, London N1 9UZ. [www.helptheaged.org.uk](http://www.helptheaged.org.uk) Email:  
[info@helptheaged.org.uk](mailto:info@helptheaged.org.uk)

Using the evidence to end age discrimination in health and social care: a symposium to discuss issues highlighted by reviews of ageism and discrimination and social care, 2 October 2009; by Department of Health - DH; Centre for Policy on Ageing - CPA; NHS South West (et al). London: Centre for Policy on Ageing, 2009, folder with inserts.

The Centre for Policy on Ageing (CPA) was commissioned by the Department of Health (DH) to undertake four reviews from the literature to identify possible evidence of age discrimination in policy and practice in secondary health care, primary health care, mental health services and social care in the UK. This pack includes the briefing for the symposium, and Nat Lievesley's Powerpoint presentation which concludes with an outline of the four main themes discussed: organisational structures; age discrimination or age differentiation; fair processes for service delivery; and cultures and attitudes. (RH)

What happens along the diagnostic pathway to CHD treatment? Qualitative results concerning cognitive processes: qualitative results concerning cognitive processes; by Karen E Lutfey, John B McKinlay.

*Sociology of Health & Illness*, vol 31, no 7, November 2009, pp 1077-1092.

Extensive research on health disparities documents persistent differential diagnosis and treatment of many conditions according to patient characteristics, physician attributes, and healthcare systems. Less is known about how physicians arrive at their decisions. The authors use qualitative data from a vignette-based factorial experiment to examine how physicians reason through and account for their clinical decisions, and how variations arise despite the presentation of identical symptoms of coronary heart disease (CHD). It was found that physicians show evidence of cognitive biases but also actively interpret social characteristics they deem relevant to medical treatment. In an uncertain clinical context, these diagnostic pathways expose key junctures wherein physicians are detoured to alternative diagnoses, their certainty of CHD lowered, and scientific logic makes it difficult to return to a CHD diagnosis - thereby providing a fuller picture of why some cases are counted as CHD while others are not. These results have important implications insofar as diagnostic decisions like these contribute to the compilation of epidemiological base rates, and are therefore used as part of Bayesian decision making to determine the probability of CHD in subsequent patients. This work resonates with social constructivist concerns regarding the ways disease categories are established and maintained, and potential sources of bias in official rates detected. (KJ/RH)

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2008

Age and performance: [review of evidence on performance and age of medical practitioners]; by Duncan Empey, Sheila Peskett.

British Medical Journal, vol 337, no 7679, 15 November 2008, pp 140-141 (BMJ Careers).

Does ageing affect the performance of doctors? If so, can experience compensate? These are the questions that this short article seeks to address. Age discrimination legislation has meant later retirement for many, with some exemptions. Several studies of performance in physicians and surgeons have suggested that increasing age is related to inferior patient outcomes, especially when combined with decreased patient volume. In a recent systematic review of 62 published studies that measured physicians' knowledge or quality of care and described time since graduation from medical school or age, more than half suggested that physicians' performance declined over time for all the outcomes measured. Only one study showed improved performance with age for all outcomes. The General Medical Council (GMC) has no age limit for registration and has recently decided to withdraw the age exemption for payment of the annual retention fee for doctors who are 65 or over. This is currently under judicial review. No specific limits on practice age can be determined from the literature but there are now assessment tests of performance, in particular cognitive ability, that can be carried out as part of a structured review of competence. However, until such assessments are validated and widely accepted, some organisations may determine age (it is suggested 70 years) beyond which they would not allow continued clinical practice. Other circumstances could be identified where precautions might be taken in the later years of a doctor's career to ensure continuing competence and adequate caseload for patient safety. However, solutions should be sought that entail both research and education to ensure that the skills of experienced doctors can be used towards the end of their careers. (KJ/RH)

ISSN: 09598138

From : [www.bmj.com](http://www.bmj.com)

Age discrimination in financial services: final report of the Experts' Working Group; by Financial Services Experts' Working Group.: HM Treasury, October 2008, 180 pp (PU 532).

The Financial Services Experts' Working Group on age discrimination was formed in April 2008 following a Government paper on the Discrimination Law Review's proposals for a Single Equality Bill. The Government invited experts from financial services and age representatives to form a working group to discuss age legislation in financial services and to present evidence. This report by the Working Group discusses and estimates the costs of these options: do nothing; introduce a system to signpost customers to firms who can meet their needs; or make unjustified age discrimination unlawful, given certain assumptions. Annexes include: a map of financial services and who regulates them; an inventory of age related products and services; relevant information relating to the European Employment Directive and legislation passed in Australia, Ireland, New Zealand and the US; and analysis of provision for older people by general and long-term insurance, banking and credit. (KJ/RH)

From : Correspondence and Enquiry Unit, HM Treasury, 1 Horse Guards Road, London SW1A 2HQ.

Download from website: [http://www.hm-treasury.gov.uk/fin\\_rsf\\_age\\_discrimination.htm](http://www.hm-treasury.gov.uk/fin_rsf_age_discrimination.htm)

Age discrimination in mental health services; by Jennifer Beecham, Martin Knapp, José-Luis Fernández (et al), Personal Social Services Research Unit - PSSRU, London School of Economics and Political Science - LSE; Centre for Social Carework Research, University of Wales, Swansea; Centre for the Economics of Mental Health, Institute of Psychiatry, King's College London. Canterbury: PSSRU, University of Kent, May 2008, 67 pp (PSSRU Discussion paper, 2336).

The UK is considering the introduction of legislation to outlaw age discrimination in the provision of public services. This is one of four reviews commissioned by the Department of Health (DH) on eliminating age discrimination in social services and mental health services ([http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_085763](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_085763)).

This report by PSSRU staff explores the extent of age discrimination in mental health services. Three broad issues are considered: inequalities between adult and older people's mental health services; inequalities between adults and older people with mental health problems in their use of health and social care services; and knowledge about the likely single equalities legislation in current services and the possible cost implications. The report does not examine differences in outcomes. Information is based on findings from interviews with mental health organisations, reviews of previous cost studies and models, and new statistical analyses. (RH)

From : Download (16/9/08): <http://www.pssru.ac.uk/pdf/dp2536.pdf>PSSRU, Cornwallis Building, University of Kent, Canterbury, Kent CT2 7NF. E-mail: [pssru\\_library@kent.ac.uk](mailto:pssru_library@kent.ac.uk)

An age-old problem: new anti-ageism proposals are themselves unfair; by Peter Wilby.  
New Statesman, 7 July 2008, p 16.

A brief article that considers whether age discrimination legislation itself is discriminatory, as it is of more benefit to those in less need, rather than those who are more needy, due to the government's own social policies which fail to redress health and social inequalities. The context is the White Paper, 'Framework for a fairer future - the Equality Bill', given the inadequacies of the age discrimination regulations passed in October 2006. (KJ/RH)

ISSN: 13647431

From : [www.newstatesman.com](http://www.newstatesman.com)

Ageism in Britain 2006: an Age Concern research briefing; by Katerina Tasiopoulou, Dominic Abrams, Policy Unit, Age Concern England - ACE; Centre for the Study of Group Processes - CSGP, University of Kent. London: Age Concern Reports, May 2008, 12 pp.

In 2004, Age Concern England (ACE) worked with social psychologists at the Centre for the Study of Group Processes (CSGP), University of Kent, to develop research into age-related prejudice and discrimination in Great Britain. The partnership resulted in a questionnaire which was grounded in current social psychological theory on prejudice. This 2006 survey repeats the 2004 survey, and was conducted with a sample of more than 2000 people, to test whether and how public attitudes were changing. This briefing on the findings notes early indicators of change, continuing trends, and new findings. While there are positive attitudes to older people (e.g. being warm and friendly), negative views such as being incompetent and incapable abound. Detailed findings are presented on: categorising age (how young is "young" and how old is "old"); identifying with own age group; stereotypes; attitudes towards equal opportunities for older people; perceived impact on society; experiences of discrimination; perceived seriousness of age discrimination; and intergenerational contact. While people are becoming more aware of the importance of tackling ageism, this form of discrimination continues to be experienced widely. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER.  
<http://www.ageconcern.org.uk>

Consultation on the National Institute for Health and Clinical Excellence's social values judgements: summary; by Age Concern England - ACE. London: Age Concern England - ACE, March 2008, 2 pp (Policy response - ref: 0608(S)).

The National Institute for Health and Clinical Excellence (NICE) has developed a draft second edition of its social values judgements for public consultation. These describe the principles NICE should follow in developing guidelines, for example on drugs, the safety of procedures, and treatment of care of people with specific conditions (e.g. dementia). Age Concern England (ACE) believes that the proposed social values judgements do not fulfil NICE's legal obligations, do not promote age equality, and confuse scientific and social values. Among ACE's other recommendations is that the document should be amended to ensure that NICE's responsibility to consider both health and social care costs when deciding on cost-effectiveness. (RH)

Price: FOC

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. Download document at <http://www.ageconcern.org.uk>

Cost-effectiveness analysis and ageism: a review of the theoretical literature; prepared for the Department of Health; by Richard Edlin, Jeff Round, Christopher McCabe (et al), Leeds Institute of Health Sciences, Faculty of Medicine and Health, University of Leeds. Leeds: Leeds Institute of Health Sciences, June 2008, 90 pp.

Cost-effectiveness analysis (CEA) is a form of economic evaluation in which outcomes are normally measured using the quality-adjusted life-year (QALY), which combines information about the length and health-related quality of life. Researchers at Leeds Institute of Health Sciences, the Centre for Health Economics, University of York, and the Department of Economics and Related Studies, University of York used Econlit, EMBASE, HMIC and Medline to search for terms relating to ageism, discrimination, cost-effectiveness and quality of life. Their review summarises the theoretical literature to answer four main questions. First, what are the specific age-based criticisms and defences of CEA (and the QALY) within the literature? Second, to what degree could alternative methods address different equity concerns raised within the general debate? Third, are alternatives presented to standard CEA within the theoretical literature incorporating equity arguments? Lastly, to what degree could alternative methods (including CEA variations) address specific proposals in the DCLG Green Paper, 'Discrimination Law Review: a framework for fairness: proposals for a Single Equality Bill for Great Britain'? (RH)

From : Download (16/9/08): [http://www.leeds.ac.uk/lihs/auhe/papers/cea\\_ageism.pdf](http://www.leeds.ac.uk/lihs/auhe/papers/cea_ageism.pdf)

The costs of addressing age discrimination in social care; by Julien Forder, Personal Social Services Research Unit - PSSRU, London School of Economics and Political Science - LSE.: Personal Social Services Research Unit - PSSRU, April 2008, 36 pp (PSSRU Discussion Paper 2538).

Equality of resources, equality of outcome, and most importantly equality of opportunity are considered as relevant to this discussion on age discrimination in service provision. This report is concerned with equality between age groups in relation to the use of public care services. It uses two survey-based datasets are used to examine differences in levels of support between age groups: the British Household Panel Survey (BHPS), and the national evaluation of Individual Budgets survey (IBSEN). Both datasets gave indications of differences in levels of support between age groups after accounting for differences required to compensate people with varying levels of need. The IBSEN data suggest that service users aged 65+ would require a 25% increase in support for these age differences compared to those aged 18-64 to be removed. The BHPS data more tentatively suggest that older people's access to services is slightly more limited than for younger people. (RH)

From : The Administrator, Personal Social Services Research Unit, London School of Economics and Political Science, Houghton Street, London WC2A 2AE. Free download available from DPS web pages:

<http://www.pssru.ac.uk/pdf/dp2538.pdf>

The dangers and limitations of equality agendas as means for tackling old-age prejudice; by Colin Duncan. *Ageing and Society*, vol 28, part 8, November 2008, pp 1133-1158.

This paper presents a critique of both the concept of age equality and of the limited scope it offers as a means for challenging old-age prejudice. The equality constructs that feature in anti-ageism initiatives and in current discourses on intergenerational equity have proved susceptible to political and ideological manipulation, which has led to the illegitimate dissociation of ageism from older age and promoted damaging notions of age equivalence. The consequence has been that old-age prejudice has been de-prioritised, and older people have been de-legitimised socially and as welfare constituency. The corrective is best sought outside the confines of age equality frameworks, although legal remedies may play a useful role if human dignity is incorporated as an equality criterion. This paper also assesses other approaches to tackling old-age prejudice that avoid the constraints of equality constructs and engage more firmly with its roots. The notion of the 'third age' with new social roles merits reconsideration as an affordable alternative to current policies of work obligation and pension retrenchment. Radical interventions in the labour market in favour of older people may also be needed. Age activism and advocacy will increasingly influence policy on prejudice and well-being in older age, but changed emphases are needed, as from defensive strategies and the ideologies of generational interdependence and solidarity, towards the promotion of organisational, financial and social autonomy in older age. (KJ/RH)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/ASO>

Department for Innovation, Universities and Skills consultation: Towards a DIUS single equality scheme: summary [of Age Concern's response]; by Age Concern England - ACE. London: Age Concern England, August 2008, 3 pp (Policy response - ref: 1808(S)).

The Department for Innovation, Universities and Skills (DIUS) consultation document, 'Towards a DIUS single equality scheme' sets out how DIUS intends to deliver on its commitments to equality and diversity through three main levels of activity: as an employer, as a policy-making department, and as a sponsor of the further and higher education sectors and science and innovation activities. While Age Concern England (ACE) welcomes the consultation on its proposed equality scheme, disappointment is expressed that age is not included on the same basis as gender, disability and race. This summary notes key points and ACE's recommendations on: the importance of "age-proofing" departmental policy; age inequality; and DIUS's main areas of activity. ACE strongly urges DIUS to incorporate age in the forthcoming Single Equality Bill. (RH)

Price: FOC

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. Download document at <http://www.ageconcern.org.uk>

Discriminatory behavior towards a person with Alzheimer's disease: examining the effects of being in a nursing home; by Perla Werner.: Taylor & Francis, November 2008, pp 786-794.

*Ageing & Mental Health*, vol 12, no 6, November 2008, pp 786-794.

A telephone survey was conducted with a representative sample of 501 lay persons (mean age 49) in Israel in summer 2007, and information regarding their discriminatory behaviour towards a male person with Alzheimer's disease (AD) was elicited using a vignette methodology. The effect of emotional reactions, perceptions of dangerousness and responsibility of the person depicted in the vignette as well as perceptions about the susceptibility of developing AD were examined, also the effects of place of residence. Four forms of discriminatory behaviour were found: coercion to restraint physically, coercion to restraint medically, segregation, and avoidance. Results provide partial support for an extended version of an attribution model, in

that negative emotions were found to increase discrimination, whereas pity decreased avoidance. Perceptions of dangerousness were one of the main variables predicting discrimination. Contrary to the hypothesised relationships, being in a nursing home did not increase discrimination. The study adds new information about factors associated to the stigma of AD. (RH)

ISSN: 13607863

From : <http://www.tandfonline.com>

Down but not out: older people with depression; by Martin Curtice.: British Geriatrics Society - BGS, October 2008, pp 14-17.

BGS Newsletter, issue 18, October 2008, pp 14-17.

The recent report by Age Concern England, 'Undiagnosed, untreated, at risk: the experiences of older people with depression' (ACE, 2008), highlights the "scandalous treatment" of older people suffering from depression. This article outlines the report's findings, which point to ageism in the treatment of depression in older people, but notes the Government's intentions towards age equality in health and social care. It discusses three obstacles to recovery: lack of awareness and negative attitudes; ageist attitudes among health professionals; and a system that discriminates against older people. It notes Age Concern's three-point plan to improve the lives of older people with depression: encourage them to seek help; ensure they are correctly diagnosed; and ensure they get the treatment they need. (RH)

ISSN: 17486343

From : <http://www.bgsnet.org.uk>

Ethnic aged discrimination and disparities in health and social care: a question of social justice; by Megan-Jane Johnstone, Olga Kanitsaki.: Blackwell Publishing, September 2008, pp 110-115.

Australasian Journal on Ageing, vol 27, no 3, September 2008, pp 110-115.

Older overseas-born Australians of diverse cultural and language backgrounds experience significant disparities in their health and social care needs and support systems. Despite being identified as a 'special needs' group, the ethnic aged in Australia are generally underserved by local health and social care services, experience unequal burdens of disease, and encounter cultural and language barriers to accessing appropriate health and social care compared to the average Australian-born population. While a range of causes have been suggested to explain these disparities, rarely has the possibility of cultural racism been considered. In this article, it is suggested that cultural racism be named as a possible cause of ethnic aged disparities and disadvantage in health and social care. It is further suggested that unless cultural racism is named as a structural mechanism by which ethnic aged disparities in health and social care have been created and maintained, redressing them will remain difficult. (KJ/RH)

ISSN: 14406381

From : <http://www.cota.org.au> / <http://www.blackwellpublishingasia.com>

An ethnographic study of stigma and ageism in residential care or assisted living; by Debra Dobbs, J Kevin Eckert, Bob Rubinstein (et al).

The Gerontologist, vol 48, no 4, August 2008, pp 517-526.

Ethnography and other qualitative data-gathering and analytical techniques were used to gather data from 309 participants (residents, family and staff) from 6 residential care or assisted living (RC-AL) settings in Maryland. Data were analysed using grounded theory techniques for emergent themes. Four themes emerged that related to stigma in RC-AL: ageism in long-term care; stigma as related to disease and illness; sociocultural aspects of stigma; and RC-AL as a stigmatising setting. Some strategies used in RC-AL settings to combat stigma include family member advocacy on behalf of stigmatised residents, assertion of resident autonomy, and administrator awareness of potential stigmatisation. Findings suggest that changes could be made to the structure as well as the process of care delivery to minimise the occurrence of stigma in RC-AL settings. Structural changes include an examination of how best, given the resident case mix, to accommodate care for people with dementia (e.g. separate units or integrated care). Processes of care include staff recognition of resident preferences and strengths, rather than their limitations. (RH)

ISSN: 00169013

From : <http://www.geron.org>

The fight against discrimination and the promotion of equality: how to measure progress done; by Unit G4, Directorate-General for Employment, Social Affairs and Equal Opportunities, European Commission. Luxembourg: Office for Official Publications of the European Communities, 2008, 113 pp (ref: DOI 10.2767/27687).

Just before the launch in 2000 of the Community action programme to combat discrimination, the European Commission noted the need for "data to measure the extent and impact of discrimination". This analytical study



targets a twofold objective The first is to develop a conceptual framework for evaluating progress in equality and anti-discriminatory efforts, and to formulate suggestions for indicators. The second is to start examining statistical data available and international, European and national levels that might contribute to evaluating progress made. The discrimination fields discussed are race and ethnic origin; age; disability; sexual orientation; and religion and convictions. Included as an annex is the text of the questionnaire sent to each member State. (RH)

Price: FOC

From : Order via website: <http://bookshop.europa.eu>

Framework for a fairer future - the Equality Bill: presented to Parliament by the Lord Privy Seal, Leader of the House of Commons and Minister for Women and Equality; by Government Equalities Office - GEO. London: TSO, June 2008, 35 pp (Cm 7431).

Following the Discrimination Law Review, this White Paper sets out the purpose and aims of the proposed Equality Bill, which will introduce a new Equality Duty on public bodies. The Bill will also de-clutter and strengthen the equality legislation, which has become complex and hard to understand. A short chapter on ending age discrimination states that the Bill will make it unlawful to discriminate against someone because of age when providing goods, facilities and services, or carrying out public functions. Other provisions proposed include: the requirement for transparency in tackling discrimination; extending positive action in employment; and strengthening enforcement in dealing with discrimination cases. A more comprehensive paper on the Bill's content is due to be published that will include the Government's response to the consultation, 'Discrimination Law Review: a framework for fairness: proposals for a Single Equality Bill for Great Britain' carried out in 2007 (Department for Communities and Local Government). (RH)

Price: £13.90

From : TSO, PO Box 28, Norwich NR31GN. [www.tsoshop.co.uk](http://www.tsoshop.co.uk)

Johnson keeps the faith on inequalities: [life expectancy]; by Rebecca Evans.

Health Service Journal, vol 118, no 6130, 30 October 2008, pp 12-13 (Health Inequalities).

Alan Johnson has made tackling health inequalities one of his priorities. Rebecca Evans reports on an interview with the Secretary of State for Health, in which he comments on the target to improve life expectancy at birth by 10% by 2010. He is also of the opinion that age discrimination in health care should not be tolerated: everyone should be entitled to the same treatment. The value of joint working involving primary care trusts (PCTs) is emphasised. As for any future focus, Sir Michael Marmot has been commissioned to consider what the focus should be after 2010. (RH)

ISSN: 09522271

From : <http://www.hsj.co.uk>

Knowledge of memory aging and Alzheimer's disease in college students and mental health professionals; by Erin M Jackson, Kate E Cherry, Emily A Smitherman (et al.): Taylor & Francis, March 2008, pp 258-266.

Aging & Mental Health, vol 12, no 2, March 2008, pp 258-266.

In this study, 70 psychology students in Louisiana and 30 mental health professionals completed the Knowledge of Memory Aging Questionnaire, Alzheimer's Disease Knowledge test and the Fraboni Scale of Ageism before and after a lecture on normal and pathological memory issues in adulthood. Results confirmed that professionals were more knowledgeable about memory ageing and Alzheimer's disease (AD) and less ageist than college students/ Analyses of pre- and post-lecture response accuracy yielded comparable benefits in memory ageing and AD knowledge for both groups. Correlations analyses provided modest evidence for the influence of ageist attitudes on the knowledge measures. Implications for memory education courses and psychology curriculum are considered. (RH)

ISSN: 13607863

From : <http://www.tandfonline.com>

Opportunity and aspiration: two side of the same coin?; by Chris Creegan, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, December 2008, 12 pp (Social evils series).

Viewpoint, 2285, December 2008, 12 pp (Social evils series).

Participants in the recent Joseph Rowntree Foundation (JRF) consultation 'What are today's social evils?' revealed a strong sense of unease about some of the changes shaping British society. This Viewpoint continues the discussion about modern "social evils" on the theme of "inequality". Chris Creegan is Deputy Director of the Qualitative Research Unit at the National Centre for Social Research (NatCen). He argues that until we can reconcile the problems of excessive individualism, consumerism and greed at the heart of contemporary society, life opportunities will continue to be lost, limited and wasted. Examples discussed include opportunities lost for

older people, whose needs have become invisible compared to those at other stages of life; and the limited opportunities afforded to carers. (RH)

ISSN: 09583084

Price: download

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. <http://www.jrf.org.uk>  
(Also available at <http://www.sociale evils.org.uk>)

Pain in older people: reflections and experiences from an older person's perspective; by Arun Kumar, Nick Allcock, Help the Aged; University of Nottingham; British Pain Society. London: Help the Aged, 2008, 41 pp. Help the Aged found in a previous literature review that pain was one of nine issues to be dealt with, if older people using health and social care services are to be treated with dignity. In Part I of this publication, articles by six older people describe their thoughts and experiences of suffering pain regularly in older age. Part II is a summary of key literature and policy, highlighting the fundamental messages from research, and the lessons learned for assessing and managing pain. The authors wish to see four main points established. First, pain is not a normal part of ageing. Second, ageist and discriminatory attitudes toward older people in pain must be challenged and ended. Third, attention should be focused on identifying the physical, psychological and social risk factors relating to persistent pain in old age. Lastly, the impact that pain has on older people's quality of life and dignity must be recognised. Accordingly, recommendations are made for government and policy-makers, regulatory and professional bodies, and the NHS and social care agencies. It suggests areas where further research is required. (RH)

From : Help the Aged, 207-221 Pentonville Road, London N1 9UZ. E-mail: [info@helptheaged.org.uk](mailto:info@helptheaged.org.uk)  
Website: [www.helptheaged.org.uk](http://www.helptheaged.org.uk)

The parameters of prejudice: knowledge of ethics and age bias; by Jane M Roberts.

Journal of Gerontological Social Work, vol 50, no 3/4, 2008, pp 37-50.

This study examined two matters pertinent to social work practice: professional ethics and age bias among practising social workers. Because social work ethics demand competent practice within one's area of proficiency, and because bias toward any segment of social work clientele impedes competent practice, prejudicial attitudes toward older people are problematic. This study found that age bias exists among practising social workers (n=367), with no discernible association between knowledge of professional ethical standards and age bias. The findings suggest a subtle and pervasive bias associated with work with older people. Positive bias was more prevalent than negative bias. (KJ/RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

Research on eliminating age discrimination in health, social care and mental health services; by Centre for Policy on Ageing - CPA. London: Centre for Policy on Ageing, August 2008, 2 pp (CPA briefings 2008).

The Centre for Policy on Ageing (CPA) has undertaken a literature review of the likely costs and benefits of legislation to outlaw age discrimination in health and social care on behalf of the Department of Health (DH). The review distinguishes "ageism", an attitude of mind, from "age discrimination", an unjustifiable difference in treatment based solely on age. The review and three reports commissioned by the DH were published to coincide with the launch of the first draft of the Equalities Bill, and can be accessed via the CPA website (at [http://www.cpa.org.uk/cpa/cpa\\_news.html](http://www.cpa.org.uk/cpa/cpa_news.html)). This briefing outlines the literature review's coverage and recommendations. (RH)

From : CPA, 25-31 Ironmonger Row, London EC1V 3QP. <http://www.cpa.org.uk/policy>

Researching age and multiple discrimination; by Richard Ward, Bill Bytheway (eds), Centre for Policy on Ageing - CPA; Centre for Ageing and Biographical Studies (CABS), Open University. London: Centre for Policy on Ageing, 2008, 100 pp (The representation of older people in ageing research series, no 8).

These papers originate from a seminar in March 2006 with the title 'Age-old prejudices: research with older people in a discriminatory world', held at the Centre for Policy on Ageing (CPA), and organised jointly by CPA and the Open University's Centre for Ageing and Biographical Studies (CABS). The seminar's aim was to explore how older people encounter discrimination, and the processes involved in researching such experiences. Three of the four papers report on research undertaken in association with the OU's RoAD (Research on Age Discrimination) project. First, RoAD researchers examine the experiences of older members of three ethnic minority communities in Leeds and Bradford. In "The same hairdo", Anthea Symonds and Caroline Holland of the OU report on older women's experiences of hairdressers, and the sorts of salon where they "belong" or "fit in". Next, more RoAD project contributors present findings of a small-scale study on how age discrimination relates to and constrains sexuality in later life. Chi Hoon Sin, formerly of the Disability Rights Commission, anticipates the establishment of the Commission for Equality and Human Rights (CEHR), by looking at

constructions of age or ageing and disability or "disablism". In their conclusion, the editors comment that while the forms of discrimination that have been discussed are unlikely to be resolved by policy and legislation such as the Equality Act 2006, the four papers support the value of involving older people in research on discrimination and ageing. (RH)

Price: £10.00

From : Central Books, 50 Freshwater Road, Chadwell Heath, Dagenham, RM8 1RX.

Seventy is the age at which "old" starts; by Joan Bakewell.

New Statesman, 17 November 2008, p 9.

Dame Joan Bakewell, newly appointed Voice of Older People by the Government Equalities Office, offers a brief assortment of comment and opinion on personal freedom and attitudes to war. Dame Joan will help raise the profile of age equality issues and encourage public debate, particularly as the Equality Bill progresses through Parliament, and as work towards implementing the ban on harmful age discrimination is taken forward. (KJ/RH)

ISSN: 13647431

From : [www.newstatesman.com](http://www.newstatesman.com)

Should geriatric medicine remain a specialty?; by Leon Flicker, C P Denaro, A Mudge.

British Medical Journal, vol 337, no 7661, 12 July 2008, pp 78-79.

The development of geriatrics has greatly improved care for older people. Three practitioners in Australia discuss the pros and cons. While Leon Flicker believes that specialist care remains important for this vulnerable group, the other two writers argue that age divisions are no longer relevant. (RH)

ISSN: 09598138

From : <http://www.bmj.com>

The time of their lives: [rationing]; by Alison Moore.

Health Service Journal, vol 118, no 6130, 30 October 2008, pp 20-22 (Health Inequalities).

An ageing population means the question of whether some patients have more right to treatment than others will increasingly cause financial and moral conflicts. This article reviews the usefulness and usage of the quality-adjusted life year (QALY) in furthering debates around rationing of healthcare in the NHS. (RH)

ISSN: 09522271

From : <http://www.hsj.co.uk>

Undiagnosed, untreated, at risk: the experiences of older people with depression; by Age Concern England - ACE. London: Age Concern England, 2008, 22 pp.

Depression is an illness that can be treated if older people seek help, are diagnosed and receive appropriate treatment. This report identifies three obstacles to recovery: lack of awareness and negative attitudes; ageist attitudes among health professionals; and a system that discriminates against older people. The report introduces Age Concern's three-point plan to improve the lives of older people with depression: encourage them to seek help; ensure they are correctly diagnosed; and ensure they get the treatment they need. Case studies point to the effectiveness of treatments such as talking therapies and older people supporting older people. (RH)

Valuing "lives saved" vs "life-years saved"; by James K Hammitt, Harvard Center for Risk Analysis.: European Observatory on Health Systems and Policies, 2008, pp 34-37.

Eurohealth, vol 14, no 1, 2008, pp 34-37.

Theory and empirical evidence suggest that neither "value per statistical life" (VSL) nor "value per statistical life years" (VSLY) is constant over an individual's life. Accurate valuation requires using values that depend on characteristics of the affected individual. This article was first published in Risk in Perspective, vol 16, no 1, March 2008, by the Harvard Center for Risk Analysis. It describes how the value of any intervention that alters mortality risk can be expressed using either lives saved or life years saved and the appropriate VSL or VSLY. (RH)

ISSN: 13561030

From : <http://www.lse.ac.uk/LSEHealtheurohealth@lse.ac.uk>

Worth fighting for: ten stories of ageism; by Help the Aged. London: Help the Aged, 2008, 12 pp (Just Equal Treatment campaign).

Help the Aged believes that only through anti-discrimination legislation can we bring an end to ageism. This booklet is part of Help the Aged's campaign, Just Equal Treatment. Ten older people describe how the health service, social care system and financial sector have failed them because of their age. (RH)

From : Help the Aged, 207-221 Pentonville Road, London N1 9UZ.  
www.helptheaged.org.uk/justequaltreatment Email: info@helptheaged.org.uk

## 2007

Age Concern's comments on HM Treasury's consultation: 'The publication of data associated with the use of gender in the assessment of insurance risks': summary; by Age Concern England - ACE. London: Age Concern England - ACE, September 2007, 2 pp (Policy response - ref: 2707(S)).

In order to implement the EU Gender Directive, the Government proposes, among other things, to amend the Sex Discrimination Act relating to insurance, to specify the circumstances under which insurance companies may charge different premiums or offer different benefits to men and women. One proposed condition is that data relevant to such differential treatment must be published and regularly updated. This response from Age Concern England (ACE) focuses on the proposal that data should be broken down by age as well as by sex. (RH)

Price: FOC

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. Download document at <http://www.ageconcern.org.uk>

Age Concern's response to A framework for fairness: proposals for a Single Equality Bill for Great Britain: summary; by Age Concern England - ACE. London: Age Concern England - ACE, September 2007, 8 pp (Policy response - ref: 2807(S)).

Age Concern England (ACE) responds to the Discrimination Law Review (DLR) Green Paper, 'A framework for fairness: proposals for a Single Equality Bill for Great Britain' (June 2007) which set out options for a clearer and more streamlined legislative framework for tackling discrimination. This summary comments on a wide range of matters around age discrimination and age equality covered in the Green Paper. ACE comments on its opposition to mandatory retirement ages and its disagreement with the limited nature of priority equality objectives required of public authorities. It comments in detail on: extending a single duty to cover age; dispute resolution; evidence of age discrimination; the case for legislation to tackle age discrimination; and justifying age discrimination in goods and services. Also noted is that the DLR does not refer to legal protection for volunteers, where evidence of age discrimination is still a problem. (RH)

Price: FOC

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. Download document at <http://www.ageconcern.org.uk>

Age Concern's response to A framework for fairness: proposals for a Single Equality Bill for Great Britain; by Age Concern England - ACE. London: Age Concern England - ACE, September 2007, 54 pp (Policy response - ref: 2807).

Age Concern England (ACE) responds to the Discrimination Law Review (DLR) Green Paper, 'A framework for fairness: proposals for a Single Equality Bill for Great Britain' (June 2007) which set out options for a clearer and more streamlined legislative framework for tackling discrimination. This policy response comments in detail on the questions raised in each of the Green Paper chapters. ACE comments on its opposition to mandatory retirement ages and its disagreement with the limited nature of priority equality objectives required of public authorities. It comments in detail on: extending a single duty to cover age; dispute resolution; evidence of age discrimination; the case for legislation to tackle age discrimination; and justifying age discrimination in goods and services. Also noted is that the DLR does not refer to legal protection for volunteers, where evidence of age discrimination is still a problem. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. Download document at <http://www.ageconcern.org.uk>

Age of equality?: outlawing age discrimination beyond the workplace; by Age Concern England - ACE. London: Age Concern England, 2007, 43 pp.

Although the Employment Equality (Age) Regulations 2006 are now in force, age discrimination outside the workplace remains lawful. This report presents evidence to support Age Concern England's (ACE) call for legislation against age discrimination in the provision of goods and services. It covers the following areas of concern: health and social care; volunteering and public life; and insurance and other financial services. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. [www.ageconcern.org.uk](http://www.ageconcern.org.uk)

Ageism still the real enemy of better care; by Yvonne Roberts.

Community Care, no 1663, 8 March 2007, p 16.

This commentary focuses on the recent publication, Dementia UK, a study published by the Alzheimer's Society, which for the first time estimates the true cost of dementia in the coming years. The author opines that, despite much progress being made in recent years to provide a responsive service to older people to meet their needs for support to retain independence, councils will still "savagely cut" services such as meals on wheels, often as a first step to balance local budgets. These cuts, it is felt, do reflect the value that society places on older people. (KJ/RH)

ISSN: 03075508

From : <http://www.communitycare.co.uk>

Definition of equality and framework for measurement: final recommendations of the Equalities Review Steering Group on Measurement; by Tania Burchardt, Polly Vizard, ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, 2007, 42 pp (CASEpaper 120).

In October 2007, a unified Commission on Equality and Human Rights ((CEHR) begins operation in Britain. As a precursor to the Commission, the Prime Minister established the Equalities Review, an independent, high-level investigation of the causes of persistent inequality and disadvantage in British society. This paper and its companion, 'Developing a capability list : final recommendations of the Equalities Review Steering Group on Measurement', were prepared as background papers to assist the development of the measurement framework for the Equalities Review. It discusses the challenges in translating capability theory into a practical measurement tool in the context of measuring inequality in Britain in the 21st century. This includes the definition of equality, a procedure for generating and revising a list of central and valuable capabilities, a measurement framework for monitoring trends in inequality, exploring the causes of inequality, and identifying possible policy interventions, and the types of information and analysis which are required. (RH)

Price: FOC

From : Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street, London WC2A 2AE. <http://sticerd.lse.ac.uk/case>

Developing a capability list: final recommendations of the Equalities Review Steering Group on Measurement; by Tania Burchardt, Polly Vizard, ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, 2007, 84 pp (CASEpaper 121).

In October 2007, a unified Commission on Equality and Human Rights ((CEHR) begins operation in Britain. As a precursor to the Commission, the Prime Minister established the Equalities Review, an independent, high-level investigation of the causes of persistent inequality and disadvantage in British society. This paper and its companion, 'Definition of equality and framework for measurement: final recommendations of the Equalities Review Steering Group on Measurement', were prepared as background papers to assist the development of the measurement framework for the Equalities Review. The current paper focuses in more detail on the need for a list of central and valuable capabilities in terms of which inequality in Britain can be conceptualised and appraised (a 'capability list'). The paper sets out a methodological framework, which included a deliberative consultation with the general public and individuals and groups at risk of discrimination and disadvantage undertaken by Ipsos-MORI. The resulting list comprises ten domains of capability, to: be alive; live in physical security; be knowledgeable, understand and reason, and have the skills to participate in society; enjoy a comfortable standard of living with independence and security; engage in productive and valued activities; enjoy individual, family and social life; participate in decision-making, have a voice and influence; being and expressing yourself and having self-respect; and knowing you will be protected and treated fairly by the law. (RH)

Price: FOC

From : Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street, London WC2A 2AE. <http://sticerd.lse.ac.uk/case>

Developing anti-discrimination law in Europe : the 25 EU Member States compared: prepared by Mark Bell, Isabelle Chopin and Fiona Palmer for the European Network of Independent Experts in the non-discrimination field; by Mark Bell, Isabelle Chopin, Fiona Palmer, Unit G2, Directorate-General for Employment, Social Affairs and Equal Opportunities, European Commission; European Network of Independent Experts in the non-discrimination field. Luxembourg: Office for Official Publications of the EU, July 2007, 113 pp.

While anti-discrimination law in most EU Member States goes beyond the requirements of European law in some way, many of them still have considerable gaps. This report considers the different grounds of discrimination; the definition of discrimination (e.g. direct or indirect); the reasonable accommodation duty;

exceptions to the principle of equal treatment and positive action; remedies and enforcement; equal treatment organisations; and implementation and compliance. Tables set out the general scope of the main relevant legislation in 25 EU Member States which transpose Directives 2004/43 and 2000/78. (RH)

From : Download from website :

[http://ec.europa.eu/employment\\_social/fundamental\\_rights/legis/legln\\_en.htm](http://ec.europa.eu/employment_social/fundamental_rights/legis/legln_en.htm)

<http://bookshop.europa.eu>

Discrimination - does it matter? European Commission consultation on equality and discrimination: summary; by Age Concern England - ACE. London: Age Concern England, September 2007, 2 pp (Policy response - ref: 3007(S)).

In the report, 'Age of equality? Outlawing age discrimination beyond the workplace', Age Concern England (ACE) has gathered evidence of continuing age discrimination against older people in all sectors of goods, facilities and services. ACE refers to that report by way of response to a general on-line consultation by the European Commission and its Policy Strategy for 2008, which signals commitment to further prevention and combating of discrimination outside the labour market. This policy response comments on the need and nature of any initiative; the nature and effectiveness of non-legislative measures; advantages and disadvantages of a single initiative; that there should be no exceptions to the principle of equal treatment; and the role of equality bodies. (RH)

Price: FOC

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. Download document at <http://www.ageconcern.org.uk>

Discrimination Law Review: a framework for fairness: proposals for a Single Equality Bill for Great Britain: a consultation paper; by Department for Communities and Local Government - DCLG; Department for Education and Skills - DfES; Department of Trade and Industry - DTI; Department for Work and Pensions - DWP; Ministry of Justice. London: Department for Communities and Local Government - DCLG, 12 June 2007, 189 pp (Code: 07EL04410/a).

The Government's proposals for a Single Equality Bill for Great Britain have been developed as a result of the Discrimination Law Review, launched in February 2005. This consultation paper seeks views and responses on the various specific proposals by 4 September 2007. It comprises 3 parts with 3 annexes. Part 1, on harmonising and simplifying the law, includes fair treatment in the provision of goods, facilities and services, of particular importance to older people. Part 2, on more effective law, considers equality duties for public and private sectors. Part 3, modernising the law, asks for views, among other things on whether changes should be made to the statutory protected grounds, the case for prohibiting age discrimination in areas outside employment, and on improving access to and use of premises for disabled people. Annexes include detailed tables on specific exceptions to discrimination law to be kept or removed. (RH)

From : Communities and Local Government Publications, PO Box 236, Wetherby, West Yorkshire LS23 7NB.

email: [communities@twoten.com](mailto:communities@twoten.com) Website:

<http://www.communities.gov.uk/documents/corporate/pdf/325332.pdf> Other formats:

[alternativeformats@communities.gov.uk](mailto:alternativeformats@communities.gov.uk)

Discrimination Law Review: a framework for fairness: proposals for a Single Equality Bill for Great Britain: overall summary of: Consultation document; Initial regulatory impact assessment; Equality impact assessment; by Department for Communities and Local Government - DCLG; Department for Education and Skills - DfES; Department of Trade and Industry - DTI; Department for Work and Pensions - DWP; Ministry of Justice. London: Department for Communities and Local Government - DCLG, 12 June 2007, 19 pp (Code: 07EL04410/b).

The Government's proposals for a Single Equality Bill for Great Britain have been developed as a result of the Discrimination Law Review, launched in February 2005. This summary outlines the main issues covered by each of the main Discrimination Law Review documents. First, the three parts of the consultation document: harmonising and simplifying the law; making the law more effective; and modernising the law. Next, a section on the regulatory impact assessment (RIA) gives an overall summary of estimated quantifiable costs and benefits. Lastly, the equality impact assessment considers the impact of the proposals in terms of race, age, disability, gender, sexual orientation, and religion or belief. (RH)

From : Weblink: <http://www.communities.gov.uk/publications/communities/frameworkforfairnesssummary>

Other formats: [alternativeformats@communities.gov.uk](mailto:alternativeformats@communities.gov.uk)

Do the ABCS 135 short cognitive screen and its subtests discriminate between normal cognition, mild cognitive impairment and dementia?; by Timothy I M Standish, D William Molloy, Alwin Cunje (et al).

International Journal of Geriatric Psychiatry, vol 22, no 3, March 2007, pp 189-194.

The AB Cognitive Screen (ABCS) is an easily administered 3-5 minute cognitive screen. The mean ABCS score is significantly different between normal cognition (NC) and mild cognitive impairment (MCI) and also between MCI and dementia. Verbal fluency and delayed recall sub-tests account for most of the instrument's sensitivity between NC and MCI. Verbal fluency was the most sensitive and specific of the sub-tests, especially in those aged 75+ with less than 12 years of education. These findings relate to a cross-sectional study of 302 participants with dementia and MCI at 4 geriatric clinics in southern Ontario, Canada. (RH)

ISSN: 08856230

From : <http://www.interscience.wiley.com>

Does disparity in the way disabled older adults are treated imply ageism?; by Robert L Kane, Reinhard Priester, Dean Neumann.

The Gerontologist, vol 47, no 3, June 2007, pp 271-279.

Although the nearly one in seven Americans who have disabilities share many characteristics, the attitudes toward and the programmes, care models, expenditures, and goals for people with disabilities differ substantially across age groups in ways that suggest ageism. Expenditures per recipient are substantially higher for younger individuals with disabilities, largely as a result of more effective advocacy. Programmes that are rejected by younger people with disabilities are considered mainstream for older people. As demographic, social and economic circumstances change, preserving the programmatic separation will become more problematic. Increased competition for finite resources may motivate a closer examination of commonalities across disabilities in an effort to achieve greater equity. (RH)

ISSN: 00169013

From : <http://www.geron.org>

Employers projects: lessons learned; by Alan Denbigh, Hilary Stevens, South West Opportunities for Older People (SWOOP), Marchmont Observatory, University of Exeter. Exeter: SWOOP Project, Marchmont Observatory, University of Exeter, 2007, 6 pp.

SWOOP is a regional partnership of agencies and organisations based at the University of Exeter that provides guidance, support and programmes to employers and individuals regarding older people's employability. SWOOP is part-funded by the European Social Fund (ESF) under the EQUAL Community Initiative Programme and by the South West of England Regional Development Agency. The overall objective of the SWOOP employers' projects was to challenge and inform employers' attitudes to age discrimination. This paper outlines the three programmes working with different groups: Employer Action Working Sets (managers and personnel officers); Broker-Age (intermediaries); and Experience Matters" (older employees). (RH)

From : Marchmont Observatory, University of Exeter, St Luke's Campus, Heavitree Road, Exeter EX1 2LU.

Website: [www.marchmont.ac.uk](http://www.marchmont.ac.uk) SWOOP website: [www.swoop-project.org.uk](http://www.swoop-project.org.uk)

Equality impact assessment: Discrimination Law Review: consultation for a Single Equality Bill; by Department for Communities and Local Government - DCLG. London: Department for Communities and Local Government - DCLG, June 2007, 49 pp (Code: 07EL04410/d).

This equality impact assessment considers the proposals emerging from the Discrimination Law Review which are contained in the consultation document, "Discrimination Law Review: a framework for fairness: proposals for a Single Equality Bill for Great Britain". It considers the impact of the proposals in terms of race, age, disability, gender, sexual orientation, and religion or belief. (RH)

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email: [communities@twoten.com](mailto:communities@twoten.com) Weblink:

<http://www.communities.gov.uk/publications/communities/frameworkforfairnessea> Other formats:

[alternativeformats@communities.gov.uk](mailto:alternativeformats@communities.gov.uk)

Equality, human rights and good relations - the age dimension: an Age Concern briefing; by Age Concern England - ACE. London: Age Concern England - ACE, September 2007, 29 pp.

Age Concern England (ACE) aims to be a key partner to the new Commission for Equality and Human Rights (CEHR), and to support or challenge the Commission's work. This briefing sets out the areas ACE believes should be the priorities for such a partnership, by looking at each of CEHR's core areas, summarising the available evidence on ageing issues, and suggesting five potential objectives for each. Four core areas are examined: eliminating discrimination with fairer access to goods and services; reducing inequality, with skills and employment opportunities throughout the life course; promoting and protecting human rights through

dignity, independence and control for older people; and securing good relations, by promoting understanding and inclusion across the generations. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. Download document at <http://www.ageconcern.org.uk>

A framework for fairness: proposals for a Single Equality Bill for Great Britain:: response from Carers UK; by Carers UK; ACE National (Action for Carers and Employment). London: Carers UK, September 2007, unnumbered.

While supporting the aims of the Discrimination Law Review Green Paper to review and not just consolidate current legislation, Carers UK has particular concerns that discrimination against carers has not been dealt with. Its response presents evidence of discrimination against carers, and puts the case for extending protection to carers in three main areas: the proposed new public sector equality duties; discrimination in employment; and discrimination in the provision of goods, facilities and services. A summary (4 pp) is also available. (RH)

From : Downloads from: <http://www.carersuk.org/Policyandpractice/PolicyResources/Responsestogovernment>

Government plans on age discrimination: a short guide; by Help the Aged. London: Help the Aged, 2007, 8 pp (Just Equal Treatment campaign).

In June 2007, the Government published the consultation document, 'A framework for fairness: proposals for a Single Equality Bill for Great Britain'. Help the Aged seeks to make age discrimination illegal for healthcare, social care, insurance and financial services, and for a duty to be placed on public bodies - for example transport providers - to eliminate unlawful discrimination. This guide and questionnaire relate to these proposals. (RH)

From : Help the Aged, 207-221 Pentonville Road, London N1 9UZ. [www.helptheaged.org.uk](http://www.helptheaged.org.uk) Email: [info@helptheaged.org.uk](mailto:info@helptheaged.org.uk)

How bias starts at 65: [age discrimination in mental health services for older people]; by Gordon Lishman. Community Care, issue 1688, 30 August 2007, pp 30-31.

The Director General of Age Concern England (ACE) examines findings on older people's experience of mental health services, that much must be done if age discrimination is to be eradicated. The final report of the UK inquiry into mental health and well-being in later life (ACE; Mental Health Foundation, 2007) has ending discrimination as one of five main areas for action, and this article also considers indirect forms of discrimination. (RH)

ISSN: 03075508

From : <http://www.communitycare.co.uk>

"How do you stand working with all these old people?": [NHS staff and ageism]; by David Oliver.

Health Service Journal, vol 117, no 6083, 22 November 2007, pp 20-21.

Too many staff working in the National Health Service (NHS) are prone to ageism and reluctant to work with older people. The secretary of the British Geriatrics Society (BGS) calls for a change in attitudes, given an ageing population. (RH)

ISSN: 09522271

From : <http://www.hsj.co.uk>

The human rights of older persons in healthcare: response [to the Joint Committee on Human Rights inquiry] from the Faculty of Old Age Psychiatry of the Royal College of Psychiatrists; by David Anderson (chair), Faculty of Old Age Psychiatry, Royal College of Psychiatrists.: unpublished, 13 February 2007, unnumbered.

The Faculty of Old Age Psychiatry provides evidence of discrimination against older people to the House of Commons /House of Lords Joint Committee on Human Rights. Referred to are: inequalities in community services; concerns about older people's privacy and dignity in their treatment in care homes and hospitals; discrimination in access to healthcare, also issues of abuse or neglect; and attitudes of the National Institute for Health and Clinical Excellence (NICE) and the Healthcare Commission. While it cites a few positive examples of treatment for physical or mental illness, the Faculty also gives examples illustrating poor training and knowledge about human rights. The Faculty concludes that the new Commission for Equality and Human Rights (CEHR) should give priority to a formal inquiry on the discrimination and infringement of older people's human rights. (RH)

From : <http://www.rcpsych.ac.uk/default.aspx?page=0>



The impact of age discrimination legislation on the higher education sector: a literature review; by Emma Parry, Shaun Tyson, Cranfield University; Equality Challenge Unit (ECU).: Electronic format only, January 2007, unnumbered.

This literature review was commissioned by Equality Challenge Unit (ECU) in response to the UK legislation regarding age discrimination. The purpose of the review is to examine the impact of age discrimination legislation within the Higher Education (HE) sector in a range of specific countries where such legislation has existed for some time: the UK, the Republic of Ireland, Australia, New Zealand, Canada and Finland. The specific question that the review aims to answer is: What lessons can be learned from the experience of other countries with regard to the implementation of age legislation in the UK HE sector? (KJ/RH)

From : Download : [http://www.ecu.ac.uk/publications/pubs\\_guidance.html#200701ImpactofAgeDiscrimination](http://www.ecu.ac.uk/publications/pubs_guidance.html#200701ImpactofAgeDiscrimination)

Insurance and age: exploring behaviour, attitudes and discrimination: a summary report from Age Concern and Help the Aged; research undertaken by CM Insight and Andrew Smith Research; by Age Concern England - ACE; Help the Aged. London: Age Concern Reports, in conjunction with Help the Aged, 2007, 34 pp.

Older people complain that insurance discriminates on the basis of age in two main ways: cost and access. In April 2006, Help the Aged and Age Concern England (ACE) commissioned consumer research to measure the extent and nature of age discrimination experienced by older people. Quantitative and qualitative research aimed to identify barriers to older people's access to insurance products. Andrew Smith Research conducted a quantitative phase, which recruited 229 people aged 65+ and 115 people aged 30-49. Participants took part in an initial interview to collect detailed data on attitudes, experiences and behaviour, and an insurance quotation exercise. Follow-up interviews analysed respondents' experiences in obtaining two quotations for one of three products (motor insurance, travel insurance, care hire), using two of three channels (face-to-face, telephone, internet). CM Insight conducted a qualitative phase with six focus groups (six or seven men/women aged 65-80 in each), and eight in-depth interviews (4 with respondents aged 80+, four with respondents aged 65-79 from social group DE). Participants were asked to complete a short insurance purchasing task before the group sessions. This report presents the findings, which suggest some challenges for government and insurance providers in their dealing with older people as consumers. (RH)

Price: £10.00

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER.

<http://www.ageconcern.org.uk>

Insurance and age: exploring behaviour, attitudes and discrimination: a report from Age Concern and Help the Aged; research undertaken by CM Insight and Andrew Smith Research; by Age Concern England - ACE; Help the Aged; CM Insight; Andrew Smith Research. London: Age Concern England; Help the Aged, March 2007, 107 pp.

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Less equal than others: public responses to government proposals on age discrimination: executive summary; by Help the Aged. London: Help the Aged, 2007, 14 pp.

'Less equal than others' is informed by more than 450 submissions made by older people and their family members, and the resulting dossier was presented to Government in September 2007 to convince them of the urgent need for legislation to end age discrimination. In this executive summary, Help the Aged concludes that more than four out of five older people in the UK want age discrimination to be made illegal; and more than nine in ten say that a single public sector equality duty should be extended to cover age. It outlines findings on six themes: healthcare, public life, insurance, social care, the marketplace, and information. (RH)

From : Download: [http://www.helptheaged.org.uk/NR/rdonlyres/683088FC-8064-4BEA-BBA2-4324DB1CC4F6/0/less\\_equal\\_than\\_others\\_030907.pdf](http://www.helptheaged.org.uk/NR/rdonlyres/683088FC-8064-4BEA-BBA2-4324DB1CC4F6/0/less_equal_than_others_030907.pdf)

A literature review of the likely costs and benefits of legislation to prohibit age discrimination in health, social care and mental health services and definitions of age discrimination that might be operationalised for measurement: carried out by the Centre for Policy on Ageing on behalf of the Department of Health; by Centre for Policy on Ageing - CPA. London: Centre for Policy on Ageing, December 2007, 31 pp (+ 39 pp appendices).

Older people are disproportionately high users of health care facilities, but closer examination reveals that proximity to death rather than age may be the principal factor in health care costs. This review distinguishes ageism, an attitude of mind, from age discrimination, an unjustifiable difference in treatment based solely on age. Age discrimination is inherently measurable, and this review looks for ways in which age discrimination has been or might be measured. Legislation outside the UK outlawing age discrimination in goods and services (including health services) is also discussed. Although this review provides a useful analysis, from literature written internationally, of age discrimination in health, social care and mental health services, and the costs of providing these services for an ageing population, no studies were found which directly address the key focus, namely a post hoc analysis of the costs and benefits to social care, health and mental health services of introducing legislation prohibiting age discrimination. Appendix 1 (7 pp), on methodology, notes search strategies and processes, and the search results for the databases searched. Appendix 2 (32 pp), a bibliography, lists all items found; key items cited are also listed at the end of the main report. (RH)

From : Centre for Policy on Ageing, 25-31 Ironmonger Row, London EC1V 3QP. Available at: <http://www.cpa.org.uk/information/reviews/reviews.html>

A lot done, a lot to do: our vision for an integrated Britain; by Commission for Racial Equality - CRE. London: Electronic format only, September 2007, 66 pp.

The Commission for Racial Equality (CRE) takes stock of its work in the past 30 years in policy areas including education, employment, health and social care, criminal justice, migration, and democracy. For each, it notes the challenges ahead and makes recommendations for the new organisation, the Commission for Equality and Human Rights (CEHR). On health and social care, it highlights the need for CEHR to work together with the Department of Health (DH) on monitoring underlying inequalities in access to healthcare services. (RH)

Price: -

From : Download report from CEHR website: [www.cehr.org.uk](http://www.cehr.org.uk)

Making a case against age discrimination: a practical guide for advisers; by Age Concern England - ACE. London: Age Concern England, January 2007, 71 pp.

The Employment Equality (Age) Regulations 2006 came into force on 1 October 2006, since when it has been unlawful to discriminate in a work or training context on grounds of age. This guide is aimed at advisers who may need to identify or advise on a case where someone could have been discriminated against because of age in England, Scotland or Wales. It identifies what is and is not covered: there continue to be exemptions on grounds of "lawful discrimination". Discrimination issues around recruitment, retirement, redundancy and other dismissals are outlined; and case studies provide examples these different scenarios. The link [www.ageconcern.org.uk/agediscriminationlaw](http://www.ageconcern.org.uk/agediscriminationlaw) provides further case studies. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. <http://www.ageconcern.org.uk>

Meeting the other: a way of fighting age discrimination?: A discussion circle with young and old participants in Sweden; by Britt-Marie Öberg. Philadelphia, PA: Taylor & Francis, 2007, pp 27-44.

Journal of Intergenerational Relationships, 2007, vol 5, no 2, 2007, pp 27-44.

The idea that we are living in a society which is more and more segregated according to age is often voiced today. A feeling of facing a widening generation gap is mirrored in writings from governmental offices and non-governmental organizations in Sweden and in other parts of the world. The UNESCO Institute of Education's (UIE) conference in 1999 about Intergenerational Practice and Programmes (IP) is one example of the efforts made to analyse the gap between generations. In the declaration from the conference a definition of intergenerational programmes: "Intergenerational programmes are vehicles for purposeful and ongoing exchange of resources and learning among older and younger generations for individual and social benefits and is given as well as guiding principles for future intergenerational projects." An account of ongoing intergenerational projects in different countries is also included (Hutton-Yeo & Ohsako, 2000:3). The authors point out that there is a need to move from the traditional one-way IP (the young learning from the old) to IP based upon reciprocal relationships between different generations. They also underline the need to further develop non-familial IPs where biologically unrelated members of different ages interact (Hutton-Yeo &

Ohsako, 2000:4-6). The Swedish drafting committee about issues of ageing and life in later years, "Senior 2005," points out that research and exchange of the experience regarding the potentialities of intergenerational encounters should be encouraged and reinforced. Only few such projects in Sweden have been accounted for. Bostroumlm states in her dissertation that in spite of the fact that many minor projects are carried out by voluntary organisations, interest groups, and enthusiastic individuals, most of these are not analysed and remain undocumented (Bostroumlm, 2003). The present article reports about a Swedish project aiming at a rapprochement between the generations. After a short presentation of the organisation in charge of the project, the different parts of the project are described. A discussion of the observations made in the course of the project is followed by an introduction of some theoretical concepts and ideas and the observations that are analysed and explained. (KJ)

ISSN: 15350770

From : <http://www.tandfonline.com>

A new age: age equality and human rights for older people in Wales; by Age Concern Cymru.

EnvisAGE, no 6, Summer 2007, 24 pp (whole issue).

This edition of Envisage focuses on age discrimination and the pursuit of A New Age for older people in Wales. Short articles draw on insights from older people and information gathered at ACC's Equality and Human Rights conference, and the opportunities to seize to make age discrimination a thing of the past in Wales. In 'Dignity matters: a focus on treatment of older people', Dr Win Tad uses data from a European funded study on older people's health and social care experiences. Other articles include Professor Teresa Rees on the new Commission for Equality and Human Rights (CEHR); Alison Parken on European Union (EU) approaches to equality; Katie Ghose on older people and human rights; and Professor Dame June Clark on attitudes to ageing. In English and Welsh. (KJ/RH)

From : EnvisAGE, Age Concern Cymru, Ty John Pathy, 13/14 Neptune Court, Vanguard Way, Cardiff, CF24 5PJ. <http://www.accymru.org.uk>

The power of personality in discriminating between healthy aging and early-stage Alzheimer's disease; by Janet M Duchek, David A Balota, Martha Storandt (et al).

Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 62B, no 6, November 2007, pp P353-361.

Differences in personality in the earliest stages of dementia of the Alzheimer's type (DAT) relative to healthy ageing were examined, as was the power of personality in discriminating healthy ageing from early-stage DAT. Four groups of participants (middle-aged controls, older controls, people with very mild DAT, and people with mild DAT) and their families were administered Costa and McCrae's NEO Five Factor Inventory. On the basis of both self-report and informant report, there was an increase in neuroticism and a decrease in conscientiousness in those with very mild DAT relative to healthy individuals without it, and in people with mild DAT relative to those with very mild DAT. Moreover, informant reports of neuroticism and conscientiousness capture substantial unique variance in discriminating healthy ageing and very mild DAT, above and beyond standard neuropsychological tests. Discussion focuses on the importance of personality traits as a non-cognitive indicator of early-stage DAT. (RH)

ISSN: 10795014

From : <http://www.geron.org>

Proposals to simplify and modernise discrimination law: initial regulatory impact assessment; by Department for Communities and Local Government - DCLG. London: Department for Communities and Local Government - DCLG, June 2007, 113 pp (Code: 07EL04410/c).

This regulatory impact assessment estimates the costs and benefits of various proposals and options that may form part of a Single Equality Bill. (RH)

From : Communities and Local Government Publications, PO Box 236, Wetherby, West Yorkshire LS23 7NB. email: [communities@twoten.com](mailto:communities@twoten.com) Web link: <http://www.communities.gov.uk/index.asp?id=1511255> Other formats: [alternativeformats@communities.gov.uk](mailto:alternativeformats@communities.gov.uk)

Symbolic interactionism; by Stéphane Duckett.: Psychologists' Special Interest Group in Elderly People - PSIGE, British Psychological Society, October 2007, pp 24-26.

PSIGE Newsletter, no 101, October 2007, pp 24-26.

This brief article advocates that psychologists need to consider "how ageism can creep into our work as therapists". The fundamental principles of symbolic interactionism need to be borne in mind when working with older people, to help place their personal circumstances within the wider social context that they find themselves. Two principles apply: the first is that humans are symbolising creatures who need to impute meaning into life; and the second is that humans are reflexive, that is, we see ourselves as others see us. These

principles need to be embedded in a social ecological context which Bronfenbrenner (1979) dissected into four components: micro-systemic, meso-systemic, exo-systemic and macro-systemic, and these are explained. This approach should enhance work with older clients and help therapists deal with "the built in obsolescence of humanity". (KJ/RH)

ISSN: 13603671

From : <http://www.psige.org.uk>

Too old: older people's accounts of discrimination, exclusion and rejection: a report from the Research on Age Discrimination Project (RoAD) to Help the Aged; by Bill Bytheway, Richard Ward, Caroline Holland (et al), Research on Age Discrimination Project (RoAD); Faculty of Health and Social Care, Open University; Help the Aged. London: Help the Aged, 2007, 94 pp.

Research on Age Discrimination (RoAD) is a 2-year participatory research study funded by the Big Lottery Fund, and undertaken by the Open University (OU) and Help the Aged. More than 300 older people from across the UK were involved in the project, which is based on a definition of age discrimination as exclusion, either threatened or actual. This report notes participants' use of diaries to provide systematic evidence of how age discrimination features in everyday life. Four chapters relate to issues experienced by all older people: the use of public places; being consumers; managing one's appearance (focusing on hairdressing and fashion); and health. Five further chapters relate to experiences of some older people but not all: culture and ethnicity; sexuality and sexual orientation; family life and families' attitudes towards age and care issues; vulnerability (particularly in residential care); and fear and isolation. The conclusion remarks on the distinctiveness of the RoAD approach and the defining of age discrimination in terms of how it is experienced. (RH)

ISBN: 1845980204

Price: £15.00

From : Help the Aged, 207-221 Pentonville Road, London N1 9UZ. E-mail: [info@helptheaged.org.uk](mailto:info@helptheaged.org.uk)

Website: [www.helptheaged.org.uk](http://www.helptheaged.org.uk)

Understanding the Disability Discrimination Act: a guide for colleges, universities and adult community learning providers in Great Britain; by Disability Rights Commission - DRC; Skill; Learning and Skills Network (LSN). London: Disability Rights Commission - DRC, 2007, 183 pp (Ref: EDU23).

The intention of the Disability Discrimination Act 2005 (DDA) is to protect disabled people, including those with a long-term health condition, against discrimination and unfair treatment, and to ensure full and equal participation in learning and public life. This guidance covers all aspects of the DDA relevant to colleges, universities and adult education providers in England, Scotland and Wales. It covers an institution's duties as an employer of disabled people, as a provider of services to the public, and as a provider of educational services to students. It also covers an institution's responsibility to promote disability equality across the whole range of its functions, and to produce a Disability Equality Scheme, including good practice information. (RH)

Price: FOC

From : Unit end September 2007: DRC, Freepost, MID 02164, Stratford upon Avon, CV37 9BR. Website:

[www.drc-gb.org](http://www.drc-gb.org) From October 2007, covered by the Commission for Equality and Human Rights

[www.cehr.org.uk](http://www.cehr.org.uk)

Unfair care: [older women and management of breast cancer]; by Carol Davis.

Nursing Older People, vol 19, no 8, October 2007, pp 12-13.

A study reveals that older women are less likely to receive standard management for breast cancer, as a report reveals age-related therapy discrimination. The research report is from the University of Manchester, "Non-standard management of breast cancer increases with age in the UK : a population based cohort of women >or=65 years" by Lavelle (et al) published in the British Journal of Cancer (2007). The study revealed significant disparities in treatment between women aged over 70 and younger women. (KJ/RH)

ISSN: 14720795

From : <http://www.nursingolderpeople.co.uk>

User involvement, research and health inequalities: developing new directions; by Peter Beresford.

Health and Social Care in the Community, vol 15, no 4, July 2007, pp 306-312.

Placed in the context of broader discussions and developments about service user involvement in research and evaluation, this paper looks at the role that user involvement research may play in health inequalities research. It examines the pressures for and against such user involvement research its different expressions and ideological relations, and what particular contribution it may have to offer in researching health inequalities. In considering how it may help in developing substantive understanding of these issues and the role it may play in the future, particular attention is paid to the issue of enabling the diverse involvement of service users in order not to reinforce existing exclusions and barriers in research, policy and practice. (RH)

ISSN: 09660410

From : <http://www.blackwellpublishing.com/hsc>

Women's experiences and perceptions of age discrimination in employment: implications for research and policy; by Helen Walker, Diane Grant, Mark Meadows (et al).

Social Policy & Society, vol 6, pt 1, January 2007, pp 37-48.

The experiences and perceptions of 12 women aged 50-65 in relation to the concept of ageism in paid employment were examined in a pilot study for a European Social Fund (ESF) funded project. The women were interviewed over the period March May 2004. The results show that whilst most of the women had faced (to differing degrees) or observed gender and age based discrimination, the experiences and interpretations revealed were not static, nor isolated from the wider historical, cultural and social contexts in which these women had grown up and grown older. It is therefore argued that policy attempts to combat age discrimination will need to take account of the gender dimension of ageism as well as the different ways in which it impacts on older women. For this to occur, more research and debate are needed on the issues raised in this paper. (RH)

ISSN: 14747464

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