



Annotated Bibliography on  
**Ageism and Respect & Inclusion of Older Adults**

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And  
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# Contents

- Journal Articles ..... 3
  - Ageism Defined*..... 3
  - The Origins of Ageism*..... 4
  - Prevalence*..... 6
  - Tools for Measuring Ageism*..... 6
  - Impact*..... 7
  - Ageism in Public Policy*..... 9
  - Ageism in the Workplace* ..... 9
  - Ageism in Healthcare*.....10
  - Interventions* .....13
- Books and Book Chapters .....17
- Reports and Conference Proceedings .....18
- Articles from Other Sources .....22
- Published Community Resources .....23
- Organizations and Websites .....26
- Canadian Action Plans for Seniors.....28

## Journal Articles

### *Ageism Defined*

Bodner, E. (2009). On the origins of ageism among older and younger adults. *International Psychogeriatrics*, 21(6), 1003.

This review discusses the development and consequences of ageism. A systematic search of the literature on the social and psychological origins of ageism in younger and older adults was conducted. The author concludes that 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 programs, and prepare middle-aged adults for living healthy lives as older adults.

Butler, R. N. (1980). Ageism: A foreword. *Journal of Social Issues*, 36(2), 8-11.

An early article from the man who first coined the term “ageism” and defined it as a disease. This article challenges policymakers, practitioners, scientists, members of the medical profession, the public at large to intervene in combatting ageism. He begins with a history of ageism as a disease, specifying many of its manifestations. His position is that knowledge is the most basic intervention, serving as antidote to numerous erroneous but widely held beliefs. I conclude with a brief rehearsal of a few interventions of special interest, including support for older people's sense of mastery, provision of specially designed self-help books, and the recognition of older people both as constituting an important market and as potential contributors to the productive capacity of the society.

Iversen, T. N., Larsen, L., & Solem, P. E. (2009). A conceptual analysis of ageism. *Nordic Psychology*, 61(3), 4.

Many studies investigate both the causes and consequences of ageism without a clear definition of the phenomenon. As a consequence the area is characterized by diverging research results which are hard to re-test and to compare. This article offers a conceptual clarification of ageism, based on a review of the existing literature. This definition is more explicit and complex than previous definitions. Its clarity constitutes the foundation for higher reliability and validity in future research about ageism while its complexity offers a new way of systemizing theories on ageism.

Levy, B. R. (2001). Eradication of ageism requires addressing the enemy within. *The Gerontologist*, 41(5), 578-579.

Argues that Palmore's (2001) Ageism Survey ignores two important dimensions of ageism: 1. the fact that ageism can operated implicitly (that is, without one's awareness); and 2. that

it can exist in the form of aging self-stereotypes (attitudes about aging among older adults). Both of these dimensions must be addressed in order to adequately combat ageism.

North, M. S., & Fiske, S. T. (2013). Subtyping ageism: Policy issues in succession and consumption. *Social Issues and Policy Review*, 7(1), 36-57.

Ageism research tends to lump “older people” together as one group, as do policy matters that conceptualize everyone over 65 as “senior.” This approach is problematic primarily because it often fails to represent accurately a rapidly growing, diverse, and healthy older population. In light of this, we review the ageism literature, emphasizing the importance of distinguishing between the still-active “young-old” and the potentially more impaired “old-old” (Neugarten). We argue that ageism theory has disproportionately focused on the old-old and differentiate the forms of age discrimination that apparently target each elder subgroup. In particular, we highlight the young-old's plights predominantly in the workplace and tensions concerning succession of desirable resources; by contrast, old-old predicaments likely center on consumption of shared resources outside of the workplace. For both social psychological researchers and policymakers, accurately subtyping ageism will help society best accommodate a burgeoning, diverse older population.

Wendt, S., Bagshaw, D., Zannettino, L., & Adams, V. (2013). Financial abuse of older people: A case study. *International Social Work*.

This article presents a case study to illustrate the complexities of financial abuse of older people by their family members. It provides insights into why older people and social care professionals may not detect or define family member's behaviour as abuse or feel discomfort in talking about it. The authors argue case studies can lead to new understandings about financial abuse that move beyond operational definitions to theoretical explanations that consider practices and outcomes of ageism and gender relations.

### *The Origins of Ageism*

Kite, M. E. & Johnson, B. T. (1988). Attitudes toward older and younger adults: A meta-analysis. *Psychology and Aging*, 3(3), 233-244.

Attitudes toward the elderly have been examined in a number of empirical studies, yet the question of whether the elderly are viewed more negatively than younger persons has not been resolved. A meta-analysis of the literature was conducted to examine this question; results demonstrated that attitudes toward the elderly are more negative than attitudes toward younger people. Results support Lutsky's (1981) conclusion that age, in and of itself, seems to be less important in determining attitudes toward the elderly than other types of information such as personality traits, and other specific information about the target person.

Kwong See, S. T., & Nicoladis, E. (2009). Impact of contact on the development of children's positive stereotyping about aging language competence. *Educational Gerontology*, 36(1), 52-66.

This study examined young children's (M = 38 months) beliefs about the aging of language competence using a modified mutual exclusivity paradigm (cf. Markman, 1990). Children

displayed different language characteristics when tested by a younger experimenter as opposed to an older experimenter based on the frequency of their contact with older adults. These results suggest that with infrequent contact with older adults, children rely on common stereotypes linking old age with diminished competence. More frequent contact allows for positive stereotypes associating older age with enhanced language competence.

Mladen, D., Predrag, E., & Nebojsa, D. (2007). Ageism: Does it exist among children? *The Scientific World Journal*, 7, 1134-1139.

Ageism is stereotyping and prejudice against individuals or groups because of their age. Robert Butler first used it in 1969, to express a systematic stereotyping and discrimination against elderly people. Available data appears to confirm that attitudes of children to the old age differ from that of adults. Findings of a survey of 56 school children, 48 nurses and 58 elderly patients indicate that a majority of children have positive perception and attitude about old age as compared to older nurses and the elderly, which leads us to conclusion that ageism is adopted later in life.

Narayan, C. (2008). Is there a double standard of aging? Older men and women and ageism. *Educational Gerontology*, 34(9), 782-787.

This study was designed to determine current young adults' attitudes toward older adults and to explore, more specifically, whether they hold different attitudes towards older men and women. An additional objective was to examine the association between knowledge of aging processes and attitudes towards older adults. Data analyses revealed that the participants showed more positive, rather than negative, attitudes towards older adults, and they rated older women significantly more positively than older men. No relationship was found between knowledge of aging processes and attitudes toward aging.

Nelson, T. D. (2005). Ageism: Prejudice against our feared future self. *Journal of Social Issues*, 61(2), 207-221.

For decades, researchers have discovered much about how humans automatically categorize others in social perception. Some categorizations—race, gender, and age—are so automatic that they are termed “primitive categories.” As we categorize, we often develop stereotypes about the categories. Researchers know much about racism and sexism, but comparatively little about prejudicing and stereotyping based on age. The articles in this issue highlight the current empirical and theoretical work by researchers in gerontology, psychology, communication, and related fields on understanding the origins and consequences of stereotyping and prejudicing against older adults.

North, M. S., & Fiske, S. T. (2012). An inconvenienced youth? Ageism and its potential intergenerational roots. *Psychological bulletin*, 138(5), 982.

This article systematically reviews the literature on ageism, highlighting extant research on its consequences and theoretical perspectives on its causes. The authors identify a crucial gap in the literature, potential intergenerational tensions, speculating how a growing-older population—and society's efforts to accommodate it—might stoke intergenerational fires,

particularly among the younger generation. They conclude by suggesting future avenues for ageism research, emphasizing the importance of understanding forthcoming intergenerational dynamics for the benefit of the field and broader society.

### *Prevalence*

Anderson, L., & Yongjie, Y. M. A. (2010). Ageism in British Columbia: A brief report. *Current Research in Psychology, 1*(1), 67.

Utilized Palmore's (2001) Ageism Survey to investigate the prevalence of ageism in British Columbia.

McGuire, S. L., Klein, D. A., & Chen, S. L. (2008). Ageism revisited: A study measuring ageism in East Tennessee, USA. *Nursing & Health Sciences, 10*(1), 11-16.

This study utilized Palmore's Ageism Survey to measure the frequency of occurrence of ageism and to examine the types of ageism reported by older adults in the East Tennessee region of the USA. Differences in urban/suburban and rural reporting were noted. The findings from this and similar studies might provide guidance for the measurement of ageism and how to combat it.

Palmore, E. B. (2004). Research note: Ageism in Canada and the United States. *Journal of Cross-Cultural Gerontology, 19*(1), 41-46.

To compare the prevalence of ageism in Canada and the United States, in Canada, the *Ageism Survey* was published in the CARPnews Report on Ageism, and in the United States, the Survey was administered to a convenience sample and published in the *Center Report and Fifty Plus*. Most respondents in both countries perceived ageism as frequent, but it was reported more often in Canada than in the United States. If the *Ageism Survey* is used to measure the prevalence of ageism among various groups and countries, we can develop an "epidemiology of ageism" and begin to reduce ageism.

### *Tools for Measuring Ageism*

Baumbusch, J., Dahlke, S., & Phinney, A. (2012). Nursing students' knowledge and beliefs about care of older adults in a shifting context of nursing education. *Journal of Advanced Nursing, 68*(11), 2550-2558.

Utilized the Palmore Facts on Aging Quiz, the Perceptions of Caring for Older People Scale and open ended questions to measure improvements in nursing students' knowledge and beliefs about nursing care of older adults following completion of an introductory course with integrated adult/older adult content.

Branscum, A. Y., & Sciaraffa, M. A. (2013). Changing millennials' attitude toward older adults. *Journal of Family & Consumer Sciences, 105*(1), 18-22.

Utilized the Multidimensional Attitudes Toward Older Adults Scale (MATOAS) (Iwasaki, 2006) to survey the attitudes of the Millennial Generation (born between 1981–1999) toward older adults.

Cherry, K. E., & Palmore, E. (2008). Relating to older people evaluation (ROPE): A measure of self-reported ageism. *Educational Gerontology, 34*(10), 849-861.

The Relating to Older People Evaluation (ROPE) is a 20-item questionnaire that measures positive and negative ageist behaviors that people may engage in during everyday life. In this article, the authors report the first findings from several administrations of the ROPE along with initial psychometric information on the instrument.

Palmore, E. (2005). Three decades of research on ageism. *Generations, 29*(3), 87-90.

The author, professor emeritus in the Department of Sociology at Duke University, discusses his research and perspectives on ageism. Starting with research on ageist stereotypes as embodied in jokes about aging, he went on to develop a quiz about the facts of aging—and found that most people know little about aging and have many negative stereotypes about old people. He also developed an *ageism survey* that asked elders in North America whether and how often they had experienced various forms of ageism.

Rust, T. B., & See, S. K. (2007). Knowledge about aging and Alzheimer disease: A comparison of professional caregivers and noncaregivers. *Educational gerontology, 33*(4), 349-364.

Utilized the Facts on Aging Quiz #1 to assess professional caregivers of persons with Alzheimer disease (AD) and non-caregivers' knowledge about aging and AD.

Fraboni, M., Saltstone, R., & Hughes, S. (1990). The Fraboni Scale of Ageism (FSA): An attempt at a more precise measure of ageism. *Canadian Journal on Aging/La revue canadienne du vieillissement, 9*(01), 56-66.

The Fraboni Scale of Ageism (FSA) is introduced in this study with reports of its factor structure, internal consistency reliability and its relationship to The Acceptance of Others Scale, The Facts on Aging Quiz, and The Marlowe-Crowne Social Desirability Scale. The FSA construct is derived from Butler's (1978) definition of ageism, and is intended to measure the affective component of attitude to supplement the cognitive aspect measured by other instruments

### *Impact*

Coudin, G., & Alexopoulos, T. (2010). 'Help me! I'm old!' How negative aging stereotypes create dependency among older adults. *Aging & Mental Health, 14*(5), 516-523.

This study examined the effects of negative aging stereotypes on self-reported loneliness, risk-taking, subjective health, and help-seeking behavior in a French sample of older adults. The aim of this study was to show the detrimental effects of negative aging stereotypes on older adults' self-evaluations and behaviors, therefore contributing to the explanations of

the iatrogenic effect of social environments that increase dependency (e.g., health care institutions). As predicted, negative stereotypes resulted in lower levels of risk taking, subjective health and extraversion, and in higher feelings of loneliness and a more frequent help-seeking behavior.

Fisher, B. S., & Regan, S. L. (2006). The extent and frequency of abuse in the lives of older women and their relationship with health outcomes. *Gerontologist, 46*(2), 200-209.

This study assessed the extent of different types of abuse, repeated and multiple abuse experiences among women aged 60 and older, and their effects on the women's self-reported health. Nearly half of the women had experienced at least one type of abuse--psychological/emotional, control, threat, physical, or sexual--since turning 55 years old. Abused older women were significantly more likely to report more health conditions than those who were not abused. Women who experienced psychological/emotional abuse--alone, repeatedly, or with other types of abuse--had significantly increased odds of reporting bone or joint problems, digestive problems, depression or anxiety, chronic pain, and high blood pressure or heart problems.

Lagacé, M., Tanguay, A., Lavallée, M. L., Laplante, J., & Robichaud, S. (2012). The silent impact of ageist communication in long term care facilities: Elders' perspectives on quality of life and coping strategies. *Journal of Aging Studies, 26*(3), 335-342.

This study explored the extent to which institutionalized elders perceive daily communication with caregivers as being ageist, as well as the impact of such perceptions on their quality of life in the facility and coping strategies. The study was conducted in Quebec. Results of qualitative and quantitative data analyses suggest that communication with caregivers is indeed perceived as ageist by the majority of elders and that such perceptions diminish the perceived quality of life in the facility; furthermore, most elders seem to cope with ageism by accommodating caregivers, a strategy that may ironically reinforce patterns of ageist communication.

Minichiello, V., Browne, J., & Kendig, H. (2000). Perceptions and consequences of ageism: Views of older people. *Ageing and Society, 20*(03), 253-278.

This qualitative study examines meanings and experiences of ageism for older Australians. The authors' findings lead them to conclude that while few older Australians have experienced overt or brutal ageism, interaction in everyday life involves some negative treatment, occasional positive 'sageism,' and others 'keeping watch' for one's vulnerabilities. Health professionals are a major source of ageist treatment. Some older people limit their lives by accommodating ageism, while others actively negotiate new images of ageing for themselves and those who will be old in the future.

Phelan, A. (2008). Elder abuse, ageism, human rights and citizenship: Implications for nursing discourse. *Nursing Inquiry, 15*(4), 320-329.

Elder abuse is a significant social issue in society. Although this area has generated an increasing research base, there is scant literature on elder abuse viewed through the lens of

ageism and its sway on human rights and citizenship. These three perspectives on the topic allow for a meaningful and equitable benchmark from which elder abuse may be considered. Ageism influences the way human rights and citizenship are articulated for older people and is conceptualised as stereotypical views of older people leading to prejudiced attitudes, actions and societal marginalisation. Such attitudes function to both disadvantage and devalue older people providing a covert basis for societal tolerance of elder abuse. This paper reviews pertinent literature in the area of elder abuse, human rights, citizenship and ageism, and argues that although society aspires to certain ideals in terms of equality and valuing the human individual, these aspirations may often be questionable in terms of older people and abuse.

### *Ageism in Public Policy*

Biggs, S., Phillipson, C., Money, A. M., & Leach, R. (2006). The age-shift: Observations on social policy, ageism and the dynamics of the adult lifecourse. *Journal of Social Work Practice, 20*(3), 239-250.

Through a critical engagement with policy trends, the authors ask how shifts in ideologies of ageing might influence the possibilities available to adults as they grow older. Of particular interest are the implications for how people are being encouraged to think about the adult lifecourse. The authors assess the implications of contemporary policy for the maintenance of a viable identity in later life and for intergenerational relationships.

Kimmel, D. C. (1988). Ageism, psychology, and public policy. *American Psychologist, 43*(3), 175-178.

Chronological age—either young or old—may be the basis for prejudicial attitudes, discriminatory practices, and institutional policies. The importance and role of ageism differs greatly between societies, such as the United States and Japan. Psychological research has documented a variety of examples of negative attitudes toward older people in the United States, but these results may reflect the methods used or may indicate a preference for age similarity rather than prejudice against the aged. Ageism may be reduced by emphasizing diversity among older people, paying attention to compensations for reduced abilities, and developing public policy based on need rather than on age.

Ryan, E. B. & Kwong See, S. (1993). Age-based beliefs about memory change for self and others across adulthood. *Journal of Gerontology: Psychological Sciences, 48*(4), P199-P201.

This study is intended to clarify the nature of beliefs about aging and memory. Earlier experiments (e.g., Ryan, 1992) had demonstrated that more frequent everyday memory problems are expected for typical older adults than for typical young adults. The study supports the potential influence of general age-based beliefs upon individual self-efficacy beliefs and memory performance.

### *Ageism in the Workplace*

Dennis, H., & Thomas, K. (2007). Ageism in the workplace. *Generations, 31*(1), 84-89.

Are older workers still the employer's last choice? The workplace as a microcosm of society reflects the stereotypes and biases that are part of our national social environment. When age biases negatively affect workplace decisions about employment, termination, retirement, benefits, and training and promotion opportunities, age discrimination is in action.

Loretto, W., Duncan, C., & White, P. J. (2000). Ageism and employment: Controversies, ambiguities and younger people's perceptions. *Ageing and Society*, 20(3), 279-302.

This paper challenges some features of the emerging concept of ageism as defective and undermining of efforts to eradicate age discrimination in employment. A study of 460 Business Studies students concerning age and employment found that a significant proportion had experienced ageism directly in employment, and a large majority favoured the introduction of legislative protection against age discrimination, with blanket coverage irrespective of age. Little firm evidence emerged of intergenerational tensions or resentment towards older people. It is argued that initiatives focused on combatting discrimination against older adults are likely to prove divisive and self-defeating as a means of combating ageism.

Posthuma, R. A., Campion, M. A. (2009). Age stereotypes in the workplace: Common stereotypes, moderators, and future research directions. *Journal of Management*, 35(1), 158-188.

The authors identify, analyze, and summarize prior research from 117 research articles and books that deal with age stereotypes in the workplace. They discover and report the most prevalent and well-supported findings that have implications for human resource management. These findings are described in terms of prevalent age stereotypes that occur in work settings, evidence refuting age stereotypes, and moderators of age stereotypes. The authors provide recommendations for practice and future research.

### *Ageism in Healthcare*

Bauer, M., McAuliffe, L., & Nay, R. (2007). Sexuality, health care and the older person: An overview of the literature. *International Journal of Older People Nursing*, 2(1), 63-68.

This paper reviews recent literature around sexuality, health care and the older person. The construction of sexuality and the importance of sexuality to older people are discussed, as is sexual diversity in old age, and sexuality and health. Also discussed are the myths and stereotypes associated with this topic, and the medical, social, healthcare, and institutional barriers to sexuality and sexual health in later life.

Bouman, W. P., Arcelus, J., & Benbow, S. M. (2006). Nottingham Study of Sexuality & Ageing (NoSSA I). Attitudes regarding sexuality and older people: A review of the literature. *Sexual and Relationship Therapy*, 21(2), 149-161.

Attitudes regarding sexuality and older people is a relatively under-researched area, despite its topical relevance as people live longer, remain healthy, and are better educated and well

informed. The first part of the literature review examines the attitudes different age groups have about sexuality and old people. The second part describes the existing literature, which has investigated the attitudes of health professionals, in particular doctors and nurses. The last part discusses current knowledge regarding attitudes of staff from nursing and residential homes regarding sexuality and old age.

Bowling, A. (2007). Honour your father and mother: Ageism in medicine. *The British Journal of General Practice*, 57(538), 347.

The author argues that increases in longevity, the effectiveness of medical interventions for older people which is apparent in clinical practice, and the compression of morbidity into the last years, or even months, of long and active lives make it unacceptable to base decisions regarding medical treatment on age. Bowling asks why 'age 65 and over' is a risk factor for complications of influenza, and why vaccination is offered to this age group. She points to a similar need to explain the rationale of offering screening programmes to different age groups. She urged GPs and practice nurses to be sure that their own judgments are evidence based whenever possible, and that prioritisation decisions are transparent.

Chappell, N. L., & Hollander, M. J. (2011). An evidence-based policy prescription for an aging population. *Healthcare Papers*, 11(1), 8-18.

In this paper, the authors provide a policy prescription for Canada's aging population. They question the appropriateness of predictions about the lack of sustainability of our healthcare system. The authors note that aging per se will only have a modest impact on future healthcare costs, and that other factors such as increased medical interventions, changes in technology and increases in overall service use will be the main cost drivers. They argue for increased emphasis on the creation of integrated systems of care delivery for older adults.

Emler, C. A. (2006). "You're awfully old to have this disease:" Experiences of stigma and ageism in adults 50 years and older living with HIV/AIDS. *The Gerontologist*, 46(6), 781-790.

This study revealed that many adults aged 50 years and older who were living with HIV or AIDS experienced both ageism and HIV-associated stigma. Nine themes emerged from the interviews and all themes fell into four categories: social discrimination, institutional discrimination, anticipatory stigma, and other. The research identified themes that may be sources of felt as well as enacted stigma and discrimination related to both aging and HIV. This concept of double jeopardy has relevance to the creation of appropriate intervention strategies.

Eymard, A. S., & Douglas, D. H. (2012). Ageism among health care providers and interventions to improve their attitudes toward older adults: An integrative review. *Journal of gerontological nursing*, 38(5), 26.

The purpose of this study was to review relevant literature on ageism among health care providers and assess interventions used to improve their attitudes toward older adults. Literature published between 1983 and 2011 was reviewed. Previous relevant research is discussed and includes studies categorized according to health care provider populations:

(a) nurses, (b) nursing students, (c) medical students, and (d) direct care workers. Studies in nursing and medical professions that highlight ageism have been conducted; however, there is a gap in the literature concerning ageism among direct care workers. This often neglected, yet critical population of health care providers is essential to the care of older adults; recommendations regarding their training and mentoring are emphasized.

Hummert, M. L., Shaner, J. L., Garstka, T. A. & Henry, C. (1998). Communication with older adults: The influence of age stereotypes, context and communicator age. *Human Communication Research*, 25(1), 124-151.

This study revealed that adults have a greater tendency to use patronizing talk with elderly targets fitting a negative (Despondent) stereotype than those fitting a positive (Golden Ager) stereotype. In addition, the extent and type of patronizing talk (overly nurturing or directive) to the targets was affected by the context in which the target was presented and the age of the communicator. In particular, the number of directive/patronizing messages to Golden Ager targets increased significantly in the hospital context. Older participants were less likely to give patronizing messages to all targets than were younger participants.

Lagacé, M., Tanguay, A., Lavallée, M. L., Laplante, J., & Robichaud, S. (2012). The silent impact of ageist communication in long term care facilities: Elders' perspectives on quality of life and coping strategies. *Journal of Aging Studies*, 26(3), 335-342.

This study explored the extent to which institutionalized elders perceive daily communication with caregivers as being ageist, as well as the impact of such perceptions on quality of life in the facility and coping strategies used by elders. A total of 33 in depth and semi-structured interviews were conducted with elders living in long-term care facilities in the province of Quebec. Results of qualitative and quantitative data analyses suggest that communication with caregivers is indeed perceived as ageist by the majority of elders and that such perceptions diminish the perceived quality of life in the facility; furthermore, most elders seem to cope with ageism by accommodating caregivers, a strategy that may ironically reinforce patterns of ageist communication.

Pritchard, K. I. (2007). Have we been guilty of ageism in the primary treatment of breast cancer? *British Journal of Cancer*, 96(7), 1011-1012.

The paradigm that women aged 70 and over might receive primary treatment for breast cancer with tamoxifen or other endocrine therapy alone, based on the concept that they are less fit for surgery because of age and co-morbidity, was developed in the 1980s and has been since then considered appropriate to a greater or lesser degree in various countries. This editorial comments on a meta-analysis of six small randomised trials comparing appropriate surgery, with or without tamoxifen to tamoxifen alone as primary treatment for elderly women with operable breast cancer. The meta-analysis showed higher survival rates for those receiving surgery, suggesting that to approach the treatment of women in their 70s is inappropriate, particularly in light of womens' increasing life-spans. Overall health rather than age should be the basis for decision-making.

Robb, C., Hongbin, C., & Haley, W. E. (2002). Ageism in mental health and health care: A critical review. *Journal of Clinical Geropsychology, 8*(1), 1-12.

Discussions of aging and mental health widely assume that ageism among mental health providers is an important factor limiting access to mental health services for older adults. The authors found that there is surprisingly little empirical evidence for age bias among mental health providers. Considerable evidence does suggest differential medical treatment for older adults in such diverse areas as physician–patient interaction, use of screening procedures, and treatment of varied medical problems, although it is unclear whether age bias accounts for these differences. The authors suggest that innovations in delivery of psychological services, such as collaborative medical/psychological care in primary care settings, may ultimately prove more useful in improving access to mental health services than efforts to combat ageism.

Ryan, E. B., Hamilton, J. M., & See, S. K. (1994). Patronizing the old: How do younger and older adults respond to baby talk in the nursing home? *The International Journal of Aging and Human Development, 39*(1), 21-32.

This study was conducted to determine whether the apparent nurturant quality of the baby talk tone of voice and parental style would compensate for the lack of respect associated with this type of patronizing talk to elders. Eighty young adults and seventy-one older adults evaluated speakers in a brief taped conversation. The caregivers who used baby talk were rated as significantly less respectful and competent than their peers in the neutral condition, but no differences were observed for nurturance of the caregiver. The recipients of baby talk were perceived to be less satisfied with the interaction.

### *Interventions*

Ambrosius, G. R., & Foster, H. (2013). Marketing matters: Embracing and serving the new consumer majority. *The Journal on Active Aging* (January/February), 50-59.

Two mature-market experts discuss the International Council on Active Aging's Rebranding Aging Awards and ways to improve marketing communications for the aging marketplace. The Awards honor marketing campaigns that present positive, realistic views of aging in four major categories: websites, direct mail, brochures and advertising.

Burbank, P. M., Dowling-Castronovo, A., R Crowther, M., & A Capezuti, E. (2006). Improving knowledge and attitudes toward older adults through innovative educational strategies. *Journal of Professional Nursing, 22*(2), 91-97.

This article describes innovative educational strategies successfully implemented by three nursing programs—New York University, Tuskegee University, and University of Rhode Island—to increase knowledge and improve attitudes of nursing students in caring for older adults. Successful strategies include a long-term care guide, a senior mentor experience, student assignments addressing diversity issues, student debates, critical reflective journalizing, and an evaluation tool for measuring student attitudes.

Burmeister, O. K. (2012). What seniors value about online community. *The Journal of Community Informatics*, 8(1). Retrieved from <http://ci-journal.net/index.php/ciej/article/view/545>

This study reveals what a particular community run by and expressly for seniors, value about their community. Of the six key social values identified, their single most important value was 'belonging to a community of peers'. These values have implications for the design of online communities involving seniors.

Cottle, N. R., & Glover, R. J. (2007). Combating ageism: Change in student knowledge and attitudes regarding aging. *Educational Gerontology*, 33(6), 501-512.

This study examined the ability of a lifespan course to create positive change in both knowledge of, and attitudes toward, aging of undergraduate students. Additionally, the authors questioned whether students define the point at which one is considered to be old in similar ways. Findings indicated positive change in both knowledge and attitudes, but perceptions of old age were best predicted by attitudes alone. Knowledge and attitudes were not associated at Time 1 or Time 2, implying ageism may continue to exist within student populations.

De La Cruz, K. (2010). *Inclusive housing: An intergenerational approach*. (Masters Thesis). Retrieved from <http://scholarworks.umass.edu/theses/474/>

The longer life expectancy of new generations and the aging of the Baby Boom one, present a new challenge and opportunity to the development of housing options for persons of old age. While many of the current models promote age segregation, this master thesis in Architecture promotes inclusion. The project, which focuses on the design of an urban apartment building in Amherst, Massachusetts, proposes an environment that facilitates interaction between persons in different stages of life with the intention to maximize a mutually rewarding intergenerational interaction.

Gibson, J. W., Jones, J. P., Cella, J., Clark, C., Epstein, A., & Haselberger, J. (2010). Ageism and the Baby Boomers: Issues, challenges and the TEAM approach. *Contemporary Issues in Education Research*, 3(1), 53-60.

This paper considers the issues and challenges associated with ageism relating to the Baby Boomer generation in Corporate America. Stereotypes about older workers are examined along with types of discrimination facing Boomers. The TEAM approach is proposed to combat ageism in the workplace. The strategy includes using intergenerational teams, education and training, awareness, accountability, and accommodation and mentoring as key components.

Moody, E., & Phinney, A. (2012). A community-engaged art program for older people: Fostering social inclusion. *Canadian Journal on Aging*, 31(1), 55-64.

Social inclusion is an important factor in promoting optimum health and wellness for older adults. The objective of this study was to explore the role of a Vancouver-based community-engaged arts (CEA) program in the social inclusion of older, community-dwelling adults.

Results indicated that the program supported seniors' capacity to connect to community in new ways by helping them forge connections beyond the seniors centre. Participants also developed a stronger sense of community through collaboration as a group, working together on the arts project towards a final demonstration to the larger community. The results suggest that CEA programs contribute to social inclusion for older people.

Nerenberg, L. (2006). Communities respond to elder abuse. *Journal of Gerontological Social Work, 46*(3-4), 5-33.

This article traces the development of services to prevent and treat elder abuse over a twenty-year time span. It begins by describing the various forms of elder abuse and the challenges they pose to service providers and program developers. Also described are abuse reporting statutes in the United States, the roles of various agencies involved in abuse investigations and responses, services commonly needed by victims, funding sources, and common impediments to service delivery.

Plouffe, L. A., & Kalache, A. (2011). Making communities age friendly: State and municipal initiatives in Canada and other countries. *Gaceta Sanitaria, 25*(Suppl. 2), 131-137.

To promote healthy, active aging, the age-friendly community initiative has evolved in Canada, Spain, Brazil and Australia, among other countries. Policy actions have included the following: declaring the initiative as an official policy direction; establishing model cities to be emulated by other cities; funding community projects; implementing consistent methodology; evaluating implementation, enhancing public visibility, and aligning age-friendly community policy with other state-level policy directions. Canadian efforts have included the creation of a community of practice and of a research and policy network to encourage the development and translation of scientific evidence on aging-supportive communities.

Powers, M., Gray, M., & Garver, K. (2013). Attitudes toward older adults: Results from a fitness-based intergenerational learning experience. *Journal of Intergenerational Relationships, 11*(1), 50-61.

The aim of the present investigation was to determine changes in attitudes before and after an intergenerational fitness experience. Thirty-two undergraduate kinesiology majors completed the Aging Semantic Differential (ASD) survey to determine their attitudes toward older adults. Students' attitudes were significantly more positive following the experience. The greatest improvement was observed among students without prior work experience with elders.

Reyna, C., Goodwin, E. J., & Ferrari, J. R. (2007). Older adult stereotypes among care providers in residential care facilities: Examining the relationship between contact, education, and ageism. *Journal of Gerontological Nursing, 33*(2), 50.

One barrier to quality elder care is ageism among care providers. In the present study, two models of stereotype reduction were tested with care providers at residential homes for

older adults--the effects of contact and the effects of education on prejudice. Results revealed that contact was not associated with fewer stereotypes but education (both specific and general) was associated with fewer stereotypes. Implications are discussed in terms of possible interventions and increasing optimal contact with older clients.

Varkey, P., Chutka, D. S., & Lesnick, T. G. (2006). The aging game: Improving medical students' attitudes toward caring for the elderly. *Journal of the American Medical Directors Association, 7*(4), 224-229.

The objective of this study was to evaluate the effectiveness of a modified aging game to enhance medical students' attitudes toward caring for elderly patients, enhance empathy for elderly patients, and improve general attitudes toward the elderly. There were statistically significant improvements in attitudes toward caring for elderly and in empathy towards elderly patients following the aging game. A majority stated the aging game added significantly (61.5%) or moderately (37.3%) to their knowledge and skills in patient care for the elderly.

Walker, A. (2002). A strategy for active ageing. *International Social Security Review, 55*(1), 121-139.

This article argues that a strategy of active ageing provides a sound basis for industrialized countries to respond to the challenges presented by population ageing. The article outlines the genesis of the concept of active ageing and the principles that should be embodied in a modernized, comprehensive approach fit for the twenty-first century. The article sets out a strategy on active ageing and illustrates how it might be operationalized at different stages of the life cycle. It concludes that a comprehensive strategy on active ageing represents the unusual combination of a morally correct policy that also makes sound economic sense.

## Books and Book Chapters

Eglet, H. (2004). *Elders on Trial*. Gainesville: University Press of Florida.

In the first part of this book the author discusses ageism and the changing of attitudes toward citizens as they age. The second part explores aging as it relates to the legal system, including issues of particular importance to seniors, increasing litigation involving the elderly, lawyer/elderly client issues, possible discrimination in jury selection, and the issues of competence of elderly judges.

Gullette, M. M. (2011). *Agewise: Fighting the new ageism in America*. Chicago: University of Chicago Press.

In *Agewise*, renowned cultural critic Margaret Morganroth Gullette reveals that much of what we dread about aging is actually the result of *ageism*. Gullette probes the ageism that drives discontent with our bodies, ourselves, and our accomplishments—and makes us easy prey for marketers who want to sell us an illusory vision of youthful perfection. Ageism causes society to discount, and at times completely discard, the wisdom and experience acquired by people over the course of adulthood. She lays out ambitious plans for the whole life course, from teaching children anti-ageism to fortifying the social safety nets, and thus finally making possible the real pleasures and opportunities promised by the new longevity.

Gutman, G., & Spencer, C. (Eds.). (2010). *Aging, ageism and abuse: Moving from awareness to action*. Burlington: Elsevier.

The objectives of this book, which draws upon examples in the United States and Canada, are to address the ageism that underlies abuse, highlight the diversity of victims and perpetrators, and provide examples of promising interventions. One such example is the development of the Design for Social Change Course at Seneca College in Toronto.

Hess, T. M. (2006). Attitudes toward aging and their effects on behavior. In J. E. Birren & K. Warner Schaie (Eds.). *Handbook of the psychology of aging* (370-407). Burlington: Elsevier Academic Press.

This text provides a comprehensive summary and evaluation of recent research on the psychological aspects of aging. The 22 chapters are organized into four divisions: Concepts, Theories, and Methods in the Psychology of Aging; Biological and Social Influences on Aging; Behavioral Processes and Aging; and Complex Behavioral Concepts and Processes in Aging.

Morgan, L. A., Kunkel, S., & Kunkel, S. R. (2007). *Aging, society, and the life course*. New York: Springer Publishing Company.

A comprehensive and valuable resource that applies the emerging life course framework to various aspects of ageing. It discusses three ways of categorizing people by age:

chronological age, life stage and functional age. Other chapters include: a sociological perspective on aging, designs and methods used to research aging, age norms, the role of family in age-integration, work and the life course, the economics of an ageing society and ageing and the health care system. Sub-sections discuss the application of theory to the various issues. Questions for thought and discussion are also included in many of the chapters.

Nelson, T. (Ed.). (2004). *Ageism: Stereotyping and prejudice against older persons*. Cambridge: MIT Press.

This book contains 12 articles on the origins, effects and future directions for reducing ageism.

Palmore, E. B., Branch, L. G., & Harris, D. K. (Eds.). (2005). *Encyclopedia of ageism*. Binghamton: Haworth Pastoral Press.

The Encyclopedia of Ageism is a comprehensive review of over 125 aspects of ageism. Its aim is to increase awareness about the many facets of ageism and provide them with a wealth of concepts, theories, and facts about ageism. It is designed as a guide for anyone working with older people and for older people themselves.

Scharf, T., & Keating, N. C. (Eds.). (2012). *From exclusion to inclusion in old age: A global challenge*. Bristol: The Policy Press.

Evidence of widening inequalities in later life raises concerns about the ways in which older adults might experience forms of social exclusion. Taking a broad international perspective, this highly topical book casts light on patterns and processes that either place groups of older adults at risk of exclusion or are conducive to their inclusion. The book deals with topics such as globalisation, age discrimination and human rights, intergenerational relationships, poverty, and migration.

## Reports and Conference Proceedings

Community Links. (2012). *Age friendly workplaces in the nonprofit sector: Final report March 2012*. Retrieved from <http://www.nscommunitylinks.ca/publications/AFW.pdf>

The mandate of Community Links (a provincial non-profit association of over 280 senior and senior-serving member organizations) is to promote healthy, age friendly communities and quality of life for Nova Scotian seniors through community development and volunteer action. The objectives of this project on age-friendly workplaces in the non-profit sector were to ascertain what nonprofits can do to mitigate the impact of an aging workforce, and to identify what might induce and support older workers to stay employed in the nonprofit sector or to explore a second career in the nonprofit sector. Their findings provide a number of descriptors of what makes a workplace age-friendly, and ways to attract older workers to this sector.

City of Ottawa. (2012). Older adult plan 2012-2014: Action plan summary. Retrieved from: [http://www.baywardlive.ca/wp-content/files\\_mf/oapssummaryreport.pdf](http://www.baywardlive.ca/wp-content/files_mf/oapssummaryreport.pdf)

The Community Voice for Seniors Bulletin. (Spring, 2013). Special Edition: Towards and age-friendly Ottawa: A community framework. Retrieved from: <http://www.coaottawa.ca/publications/bulletins/AFOBULLETIN-EN.pdf>

This edition presents the consultation results, objectives and strategies for action for the Age-Friendly Ottawa community framework.

Edmonton Seniors Coordinating Council. (2011). *Vision for an age-friendly Edmonton: Action plan, Spring 2011*. Edmonton: Edmonton Seniors Coordinating Council.

This document is the result of extensive community consultation with seniors and their care givers and key stakeholder. It is rooted in the principle that seniors take an active role in the implementation of the actions required to meeting the Plan's 18 goals in 9 areas: community support services, health services, communication and information, social and recreational participation, transportation, respect and social inclusion, civic participation, volunteerism and employment, housing and outdoor spaces and buildings.

Finances Québec. (2012). *Québec and its seniors: More support for growing old at home*. Québec City: Gouvernement du Québec. Retrieved from: <http://www.budget.finances.gouv.qc.ca/Budget/2012-2013/en/documents/seniors.pdf>

This document outlines the principles, action plan and budget implications for the *Growing Old at Home* strategy for the province of Quebec. The report accompanied the tabling of the strategy in the Quebec legislature in March 2012. A press release dated March 20, 2012, summarized the details of the government's commitment to investing \$900 over the following five years to help seniors age at home. The policy is in response to Quebec's rapidly aging population. The press release is available at [http://www.budget.finances.gouv.qc.ca/Budget/2012-2013/en/documents/Communique\\_12en.pdf](http://www.budget.finances.gouv.qc.ca/Budget/2012-2013/en/documents/Communique_12en.pdf)

Finkelstein, R., Roher, S., Owusu, S. (2013). *Age smart employer NYC: A compendium of strategies and practices*. New York: The New York Academy of Medicine. Retrieved from: [http://www.nyam.org/age-smart-employer/documents/ASE\\_Compndium.pdf](http://www.nyam.org/age-smart-employer/documents/ASE_Compndium.pdf)

This report looks at the issues surrounding the employment of older New Yorkers. It contains five strategies for increasing the employment of older New Yorkers.

Glover, I., & Branine, M. (Eds.). (2001). *Ageism in work and employment*. Aldershot: Ashgate Publishing.

This collection of papers is derived from an international conference on "Ageism, work and employment," held at Stirling University, Scotland in July 1996. The collection examines the nature and causes of ageism and age discrimination in work and employment in the UK and,

to a lesser extent, in other countries. It also seeks to describe and explore the experience and practice of age discrimination in work and employment, and compare and contrast some of the main solutions proposed within the context of relevant economic, political and social trends.

McCabe, M. P., Mellor, D., McNamara, J., & Hill, B. (2010). *Respect in an ageing society*. Australia: Benetas and Deakin University. Retrieved from [www.benetas.com.au](http://www.benetas.com.au)

For older people, respect from others in the community is a key part of quality of life. This report examines the concept of respect in contemporary Australia, including how respect is expressed in general and to older people, changing attitudes to respecting older people, why respect is important, and how respect is taught and learnt. The report is based on focus groups with 113 Australians, held with older people in residential care, older people living independently, volunteers from care facilities, people from the Baby Boomer generation (born between 1946 and 1961), people from Generation X (born between 1962 to 1980), and people from Generation Y (born between 1981 and 1991). The study reveals differences in expressions of respect across generations, and the growing exclusion of older people from the lives of young people, with its reduced opportunities to learn and model respect.

Revera, & International Federation on Ageing. (2013). *Revera report on ageism*. Retrieved from [http://www.reveraliving.com/About-Us/Media-Centre/Revera-Report-on-Ageism/docs/Report\\_Ageism.aspx](http://www.reveraliving.com/About-Us/Media-Centre/Revera-Report-on-Ageism/docs/Report_Ageism.aspx)

The Revera Report on Ageism surveyed Canadians aged 18-32 (Gen Y), 33-45 (Gen X), 46-65 (Boomers), 66-74 (Seniors) and 75+ (Older Seniors) to find out their attitudes about aging and to gauge their level of awareness of, and experience with, ageism. The report revealed that overall, Canadians have a negative perception of ageing and that discrimination is widespread. Respondents disclosed various forms of perceived discrimination. General recommendations are made to address the issue.

Revera, & International Federation on Ageing. (2013). *Revera report on ageism: A look at gender differences*. Retrieved from [http://www.reveraliving.com/Revera/media/Revera/Content/Revera-Report\\_Gender-Differences.pdf](http://www.reveraliving.com/Revera/media/Revera/Content/Revera-Report_Gender-Differences.pdf)

An adjunct to the broader “Revera report on ageism”, this report looks more critically at why Canadians treat ageing men and women differently and why ageing is a different emotional experience for the two genders.

World Health Organization. (2006). *Integrating poverty and gender into health programmes: A sourcebook for health professionals: Module on ageing*. Geneva: World Health Organization. Retrieved from: [http://www.wpro.who.int/publications/docs/26\\_October\\_2006\\_Module\\_on\\_ageing.pdf](http://www.wpro.who.int/publications/docs/26_October_2006_Module_on_ageing.pdf)

This report describes the chronological, physiological and cultural aspects of aging, and the links between poverty, gender and aging. Its aim is to increase the awareness, knowledge,

and skills of health professionals on poverty and gender concerns. It discusses international and national interventions to address poverty and gender concerns as they relate to aging, and the role of healthcare providers in addressing the problem.

## Articles from Other Sources

Woolf, L. M. (n.d.). *The theoretical basis of ageism*. Retrieved from <http://www2.webster.edu/~woolfm/ageismtheory.html>

A straightforward presentation of four factors contributing to ageism in North American society: fear of death (and the association between death and old age), the emphasis on youth culture, the emphasis on productivity, the tendency in early ageism research to focus on the institutionalized elderly (and thus a misrepresentation of ageism).

Cherry, K. (n.d.). *What is ageism?* Retrieved from <http://psychology.about.com/od/aindex/g/ageism.htm>

This article provides a simple definition of ageism and its manifestations.

Law Commission of Ontario. (n.d.). *Addressing ageism: Developing a principled approach*. Retrieved from <http://www.lco-cdo.org/en/older-adults-interim-report-sectionIII>

Principles can provide a set of norms to counteract tendencies towards ageism in the development, substance and implementation of laws that affect older adults. Principles for the law as it affects older adults should aim to promote the worth, participation, individuality and diversity, and contributions of older adults. From this anti-ageist perspective, the LCO has reviewed and analyzed key international and domestic sources for principles, and has identified six core principles for the law as it affects older adults, with substantive equality as a core value underlying all of the principles.

Nobes, C. (2013, May 15). Alberta org faces ageism fallout. HRM Online. Retrieved from <http://www.hrmonline.ca/hr-news/alberta-org-faces-ageism-fallout-173997.aspx>

Discusses a case brought before the Alberta Human Resources Commission by Joan Cowling, citing that her age (67) was a factor in her being turned down for positions at Alberta Human Services. She won her case and was awarded 5 years backpay and rehired. At the time of publication, the decision was being appealed.

Shupac, J. (2013). Ageism in the nonprofit sector: Confronting the issue of age discrimination. Retrieved from [https://charityvillage.com/Content.aspx?topic=Ageism\\_and\\_the\\_nonprofit\\_sector\\_What\\_it\\_looks\\_like\\_and\\_how\\_it\\_can\\_be\\_defied#.UfqI-jqlaQ4.gmail](https://charityvillage.com/Content.aspx?topic=Ageism_and_the_nonprofit_sector_What_it_looks_like_and_how_it_can_be_defied#.UfqI-jqlaQ4.gmail)

This article describes ageism toward both the young and old in the hiring practices of nonprofit organizations. It describes success stories, citing the Alberta Rural Development Network as one example.

Wikipedia. (n.d.). *Ageism*. Retrieved from <http://en.wikipedia.org/wiki/Ageism>

A comprehensive summary of ageism, its manifestations, effects and campaigns to combat it.

## Published Community Resources

Alberta Elder Abuse Awareness Network. (2005). *Community Resource Kit*. Retrieved from <http://www.albertaelderabuse.ca/>

In 2005, AEAAN developed a community resource kit, containing CD-ROM and VHS videos. The kit includes: two Power Point presentations with comprehensive speaking notes, an elder abuse training video, a listing of Alberta resources in support of the issue of Elder Abuse, several key online links, other national resources. The kit also includes a copy of “Community Awareness and Response: Abuse and Neglect of Older Adults” by Dianne Kinnon and examples of Community Response models from around Alberta. Copies of the kit must be obtained by contacting AEAAN.

BC Care Providers Association. (n.d.). *Creating caring communities: A guide to establishing intergenerational programs*. Retrieved from [http://www.intergenerational.ca/images/stories/pdfs/CPA\\_Toolkit\\_2009-new.pdf](http://www.intergenerational.ca/images/stories/pdfs/CPA_Toolkit_2009-new.pdf)

Guide designed to lead community groups, schools and care facilities in planning and implementing their own intergeneration program. Examples of small and large programs are provided.

Council of Senior Citizens Organizations of BC. (n.d.) *Respect for seniors: Practical steps towards a civil society and age-friendly communities*. Retrieved from [http://coscobc.ca/files/2813/6552/6438/Respect\\_for\\_seniors.pdf](http://coscobc.ca/files/2813/6552/6438/Respect_for_seniors.pdf)

Flier calling on the British Columbia government to work with seniors to recognize and support the contributions of seniors to civil society. It outlines four strategies: fight inequality, help seniors age in place, improve health care, and promote age-friendly communities.

Federal/Provincial/Territorial Ministers Responsible for Seniors. (2007). *Working together for seniors: A toolkit to promote seniors' social integration in community services, programs and policies*. Retrieved from: <http://www.health.alberta.ca/documents/Seniors-Toolkit-WorkingTogether-2007.pdf>

The purpose of this toolkit is to: (1) provide information and data about social isolation amongst seniors, (2) suggest ways that organizations can promote social inclusion, and (3) provide a tool that can be used to screen existing and planned programs and services, for their impact (positive or negative) on social isolation.

Gallagher, E. & Mallhi, A. (2010). *Age-friendly British Columbia: Lessons learned from October 1, 2007 to September 20, 2010*. British Columbia: Senior's Healthy Living Secretariat.

This is an evaluation of the Age-friendly British Columbia (AFBC) initiative whose purpose is to enhance the activity and independence of seniors living throughout BC, thus improving their overall health and quality of life. The purpose of this evaluation is to: identify the factors that led to the successes of the AFBC initiative, and areas that would benefit from improvement; and recommend future actions that will help ensure sustainability of the initiative. Recommendations are given in the areas of enhancing community capacity, facilitating multi-sectoral engagement, and providing education, training, and communication about the initiative and the age-friendly concept.

Government of Manitoba. (n.d.) Age Friendly Manitoba: *Age Friendly Communities (checklist)*. Retrieved from [http://www.gov.mb.ca/shas/agefriendly/af\\_community\\_quiz\\_assessment.pdf](http://www.gov.mb.ca/shas/agefriendly/af_community_quiz_assessment.pdf)

A modified, more user-friendly variation of the *WHO Checklist for Age-Friendly Cities* that is relevant to the Canadian context.

*How to respect older people*. Retrieved from <http://www.wikihow.com/Respect-Older-People>

A WikiHow article describing nine steps that people can take to improve their attitudes toward older adults and practical actions that reflect respect for older adults.

i2i Intergenerational Society. (n.d.). *Across the Generations: Respect all ages*. Retrieved from <http://www.intergenerational.ca/images/stories/pdfs/AcrossGenerationsEnglish.pdf>

*Across the Generations: Respect all Ages* is a kit to encourage children and older adults towards greater awareness and understanding of their differing challenges and attitudes. The kit includes: information guide for educators including health care workers, teachers, community leads, parents; activities for children and older adults; three levels of time/energy commitment to match the situation; hands-on, print and audio-visual materials; quick reference resource list; information to access human resources, print, and audiovisual aids; curriculum connections by subject for teachers

International Network for the Prevention of Elder Abuse. (n.d.). *Elder abuse awareness community toolkit*. Retrieved from <http://www.ifa-fiv.org/wp-content/uploads/2012/11/elder-abuse-awareness-community-tool-kit-english.pdf>

In cooperation with the Canadian Network for the Prevention of Elder Abuse and the International Federation on Ageing, and Department of Human Resources and Skills Development Canada, this toolkit was created to help individuals, organizations and communities throughout the world plan for World Elder Abuse Awareness Day (held annually on June 15<sup>th</sup>). The Toolkit is also designed to help communities plan for further awareness-building activities, as well as to support ongoing projects and events. Includes chapters on how to work with local business, First Nations Elder Abuse and examples on WEEAD activities worldwide.

International Network for the Prevention of Elder Abuse. (nd). *Elder abuse awareness teen kit. Intergenerational trust building: An untapped resource for preventing elder abuse*. Retrieved

from <http://www.ifa-fiv.org/wp-content/uploads/2012/11/Elder-Abuse-Awareness-Teen-Kit-English.pdf>

Purposeful and positive intergenerational activities are a society's greatest opportunity to dispel a lack of trust and respect, and instead build positive and meaningful bridges linking ages and stages. The Elder Abuse Awareness Teen Kit provides seeds to grow secure and valuable inter-personal skills within and between generations. The guide was developed to increase teen awareness about ageing, and to assist and empower youth in finding sustainable ways to exchange ageist attitudes in our communities for informed and productive intergenerational relationships. The kit is divided into four parts designed to lead teens through the project planning and implementation process.

Nova Scotia Department of Seniors. (2012). *Understanding senior abuse: A toolkit for community champions*. Halifax: Communications Nova Scotia.

A toolkit developed to help communities understand and prevent senior abuse. The aim is to encourage people to talk about senior abuse and organize learning events for the people in their community. The hardcopy toolkit includes tips for organizing an event, speakers' notes and slides, case studies for discussion, and facts about senior abuse. All items in the kit can also be accessed online at [www.gov.ns.ca/seniors/stopabuse](http://www.gov.ns.ca/seniors/stopabuse)

Ontario Network for the Prevention of Elder Abuse. (n.d.). *ONPEA core curriculum and resource guide*. Retrieved from <http://www.onpea.org/>

A 147 page Core Curriculum & Resource Guide. This Interactive PDF eBook educates homecare workers about the topic of elder abuse and how to effectively take action.

World Health Organization. (2007). *Global age-friendly cities: A guide*. Geneva: World Health Organization. Retrieved from [http://www.who.int/ageing/publications/Global age friendly cities Guide English.pdf](http://www.who.int/ageing/publications/Global_age_friendly_cities_Guide_English.pdf)

Informed by WHO's approach to active ageing, the purpose of this Guide is to engage cities to become more age-friendly so as to tap the potential that older people represent for humanity. It includes a section describing how the Guide can be used by individuals and groups to stimulate action in their own cities.

World Health Organization. (n.d.). *Checklist of essential features of age-friendly cities*. Retrieved from [http://www.who.int/ageing/publications/Age friendly cities checklist.pdf](http://www.who.int/ageing/publications/Age_friendly_cities_checklist.pdf)

This checklist is intended to be used by individuals and groups interested in making their city more age-friendly and potentially achieve designation as a WHO designated Age-Friendly City. The checklist is a tool for a city's self-assessment and a map for charting progress. More detailed checklists can be found in the *WHO Global Age-Friendly Cities Guide*.

YWCA Metro Vancouver. (n.d.). *Taking action against abuse of older adults: A YWCA awareness workshop. Facilitator's guidebook*. Retrieved from

[http://www.ywcavan.org/sandbox/UserFiles/files/Social%20Change/YWCA%20CAEA/YWCA-CAEA\\_FacilitatorsGuidebook-26Jul2013.pdf](http://www.ywcavan.org/sandbox/UserFiles/files/Social%20Change/YWCA%20CAEA/YWCA-CAEA_FacilitatorsGuidebook-26Jul2013.pdf)

This guidebook is designed to provide individuals with the materials and resources they need to deliver a four-hour workshop on taking action against abuse of older adults to front-line staff/volunteers in your organization. The workshop is designed to raise awareness rather than deal with specific intervention strategies. The document contains a link to additional resources at [www.ywcavan.org/seniors](http://www.ywcavan.org/seniors).

## Organizations and Websites

Ageism Hurts <http://ageismhurts.org/>

A website begun in 2011 as a forum to stimulate awareness, thought and discussion about ageism. Contains a helpful summary of the various dimensions of ageism based on current literature and research.

Active Living Coalition for Older Adults <http://www.hrmonline.ca/hr-news/alberta-org-faces-ageism-fallout-173997.aspx>

Contains link to report on overcoming ageism in active living.

Age-friendly Alberta, Alberta Health <http://www.health.alberta.ca/seniors/age-friendly-alberta.html>

Provides information and tools for individuals, community leaders or organizations interested in helping their community to become more age-friendly. Links to the Age-Friendly Alberta recognition program and funding opportunities are among the resources provided.

Alberta Council on Aging <http://www.acaqing.ca/>

Contains links to variety of resources including those from WHO and others for age-friendly businesses and hospitals.

Alberta Elder Abuse Awareness Network <http://www.albertaelderabuse.ca/>

Canadian Network for the Prevention of Elder Abuse <http://www.cnpea.ca/>

Website not maintained, however contains links to provincial organizations and a small number of print resources on elder abuse prevention strategies.

CARP <http://www.carp.ca/>

The website of the Canadian Association of Retired Persons

i2i Intergenerational Society <http://www.intergenerational.ca/>

An organization dedicated to building bridges between the generations. Based on British Columbia but serving all of Canada. Numerous resources provided.

International Federation on Ageing <http://www.ifa-fiv.org/>

The IFA is an international non-governmental organization with a membership base of NGOs, the corporate sector, academia, government, and individuals. Their mandate is to disseminate information on rights, policies, and practices that improve the quality of life of people as they age. The IFA publishes information on elder abuse and ageing and hosts a biannual global conference on ageing. The theme for the 2014 event is Health, Security and Community.

International Network for the Prevention of Elder Abuse <http://www.inpea.net/>

Kerby Centre for the 55 Plus (Calgary) <http://kerbycentre.com/>

Newfoundland and Labrador Department of Health and Community Services  
<http://www.health.gov.nl.ca/health/seniors/ageless.html>

*Ageless*, a campaign launched by the NL/Lab Government, promotes positive images of aging and recognizes the contribution of seniors in Newfoundland and Labrador. The *Ageless* campaign is based on the fact that ambition, involvement and participation in society can be lifelong activities. Using a series of posters, and print and radio ads, the campaign features local seniors actively engaged in their communities. Links to pdf versions of these resources are provided and include posters, bus materials, and ads.

Nova Scotia Department of Seniors <http://novascotia.ca/seniors/>

This site includes links to initiatives on positive aging, elder abuse and active living. Descriptions of current programs are provided.

Public Health Agency of Canada Division of Aging and Seniors <http://www.phac-aspc.gc.ca/seniors-aines/afc-caa-eng.php>

This web page, dedicated to promoting age-friendly communities, describes and documents the Canadian Federal, Provincial, Territorial Age-Friendly Rural and Remote Communities Initiative. This initiative used the same method as the WHO Global Age-Friendly Cities Project but focused on Canadian communities with populations under 5,000. In total, ten communities across eight provinces participated. This website provides links to information and resources to assist communities in becoming more age friendly. Links to communities involved in the federal initiative, as well as those engaged in age-friendly initiatives more generally are provided.

Revera <http://www.ageismore.com/Ageismore/Home.aspx>

This is the website of Revera, a private company that provides accommodation and care to the elderly. The site describes their *Age is More* campaign which is designed to challenge negative attitudes towards, and stereotypes of, older adults. The site contains several stories of older adults which challenge misconceptions about aging and the aged.

Seniors Association of Greater Edmonton (SAGE) <http://www.mysage.ca/>

World Health Organization Ageing and Life Course <http://www.who.int/ageing/en/>

World Elder Abuse Awareness Day Manitoba <http://www.weaadmanitoba.ca/>

World Elder Abuse Awareness Day (WEAAD) was developed & launched on June 15, 2006 by the International Network for the Prevention of Elder Abuse (INPEA). WEAAD involves activities to bring greater recognition of mistreatment of older adults wherever they live throughout the world, and to highlight the need for appropriate action. The Manitoba site includes a link to resources and ideas for holding a WEAAD event as well as links to descriptions of successful events in Manitoba. For more information about the history of WEAAD visit [www.inpea.net/weaad.html](http://www.inpea.net/weaad.html) or the Canadian Network on the Prevention of Elder Abuse at <http://www.cnpea.ca/WEAAD.htm>

## Canadian Action Plans for Seniors

Healthy aging in Canada: A new vision, a vital investment. From evidence to action. (2006).

<http://www.phac-aspc.gc.ca/seniors-aines/publications/public/healthy-sante/vision/vision-bref/index-eng.php>

Healthy aging through healthy living: Towards a comprehensive policy and planning framework for seniors in B.C. (2005).

[http://www.health.gov.bc.ca/library/publications/year/2005/healthy\\_aging.pdf](http://www.health.gov.bc.ca/library/publications/year/2005/healthy_aging.pdf)

Aging Population Policy Framework. (2010). [Alberta]

<http://www.health.alberta.ca/seniors/aging-population-policy.html>

Age-friendly Manitoba: Creating communities committed to healthy, active aging. (2012).

[http://www.agefriendlymanitoba.ca/files/extra\\_resources/66/Age\\_Friendly\\_2012\\_Booklet\\_Final.pdf](http://www.agefriendlymanitoba.ca/files/extra_resources/66/Age_Friendly_2012_Booklet_Final.pdf)

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