



INTEGRATED CARE FOR OLDER PEOPLE

Ageism



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Introduction to the guide

This Facilitator Guide is part of the material developed to support training programmes on the WHO's Integrated Care for Older People (ICOPE) approach. This guide serves as a roadmap for trainers and facilitators, helping them navigate through the session on Ageism, while ensuring that key topics are covered and participants are engaged. It includes tips, potential challenges, and suggested ways to handle different situations that may arise during the session.

Session structure

This Facilitator Guide is organized around four core facilitation actions that you will use throughout the session. These actions are represented by icons and indicate how you should guide participants through the content.

You will see these actions repeated across all slides and modules, providing a consistent structure for facilitation.



Show: The slides

This indicates the slide you should present from the slide deck. When you see the Show, display the corresponding slide to participants.



Say: What you explain

This provides a suggested narrative outline for you to explain the slide content. The text is intended as guidance rather than a fixed script. You may adapt the wording to suit your facilitation style, experience and the needs of your participants, while keeping the key messages intact.



Ask: Questions to prompt dialogue

This prompts you to ask questions and encourage dialogue with and among participants.

The discussion associated with these questions should generally take 2 to 5 minutes. However, you should use your best judgment to decide how much time to dedicate to such interactions, considering factors such as participant engagement, availability of time, and/or relevance of the topic.



Do: Actions to facilitate learning

This prompts you to carry out an action, such as guiding an activity, managing group interaction or providing instructions to participants.

Keep in mind that this Facilitator Guide is only a roadmap. You are expected to apply your voice and experience to make this tool work for you. As explained, the 'Say' sections are simply indications; you can use them as a script when you feel the need to, but you can and

should adapt them to suit your natural training style. Add your personal touch and personality to every training, while being careful to stick to the session objectives.

A key component of successful face-to-face training is establishing trust and rapport with your learners. Use your good judgement to assess the attitude and cultural sensitivities of the people in your workshop. Adapt your training techniques and approach accordingly.

You are going to be great at conducting this training.

Ageism



Do:

- *Formal welcome*
- *Introduction of the facilitator*



Show: Slide 1



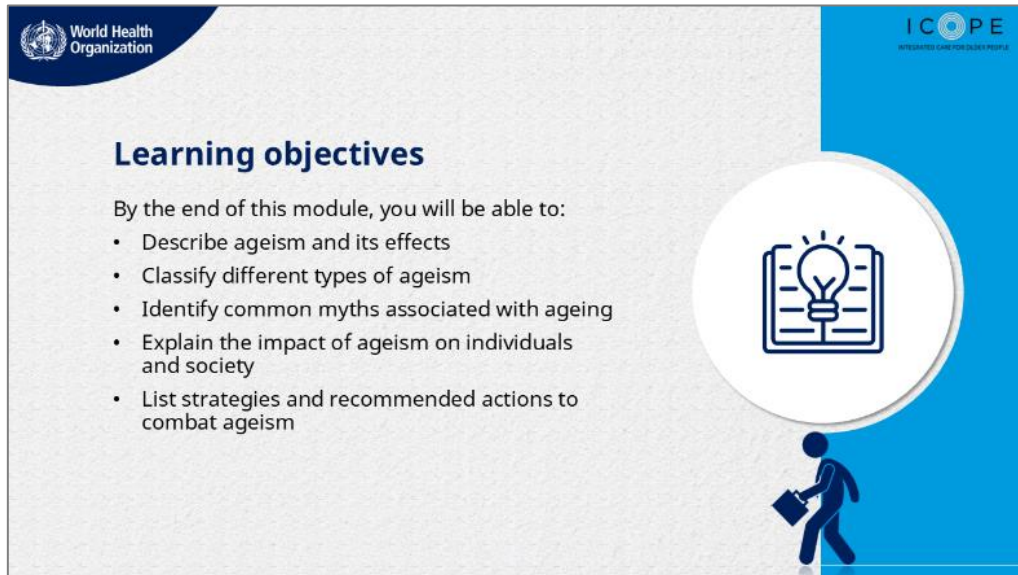
Say:

Welcome to the module on Ageism. In this session, we will delve into the different types of ageism and their profound implications for the well-being of older people. This session will take about 15 minutes.

Learning objectives



Show: Slide 2



Learning objectives

By the end of this module, you will be able to:

- Describe ageism and its effects
- Classify different types of ageism
- Identify common myths associated with ageing
- Explain the impact of ageism on individuals and society
- List strategies and recommended actions to combat ageism



Say:

Now, let us look at the learning objectives for this module. By the end of the module, you will be able to:

Describe ageism and its effects:

Understanding what ageism is and how it operates is crucial in addressing its impact on individuals and society.

Classify different types of ageism:

Recognizing these classifications will enhance our ability to identify and challenge ageist attitudes and behaviours.

Identify common myths associated with ageing:

By debunking these myths, we can foster a more accurate and positive perception of older people.

Explain the impact of ageism on individuals and society.

List various strategies and recommended actions to combat ageism:

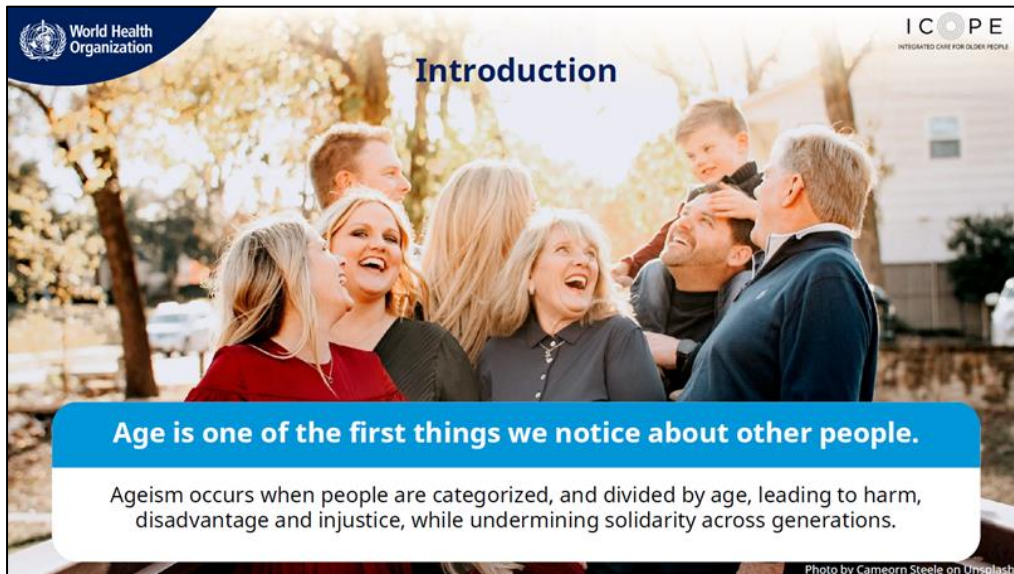
We will discuss a range of strategies and recommended actions to combat ageism with the aim of creating environments that promote inclusivity and dignity for older people.

Through our exploration of these learning objectives, we aim to empower you with the knowledge and tools needed to contribute to the creation of age-inclusive, integrated care environments.

Introduction



Show: Slide 3



Ask:

What are some of the things that we first notice when we look at other people?



Do:

Discuss the natural tendency to notice and take note of a person's age when we first encounter them. This observation can influence our assumptions and attitudes.



Say:

Age is one of the first things we notice about other people. Ageism occurs when people are categorized, and divided based on their age in ways that result in harm, disadvantage and injustice. This negative bias not only impacts individuals but also erodes solidarity between different age groups, hindering collaboration and understanding across generations.



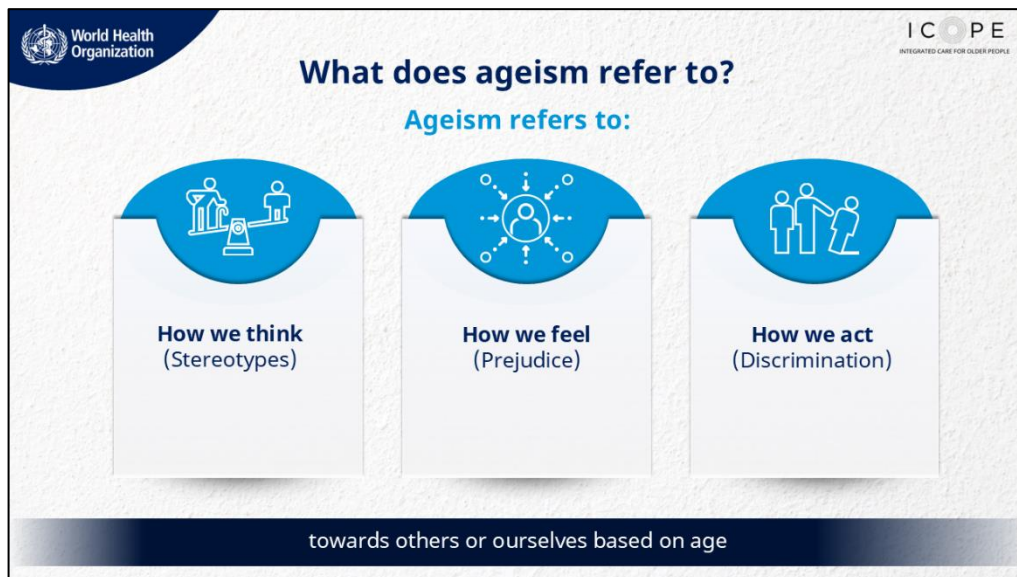
Ask:

What does ageism refer to?

What does ageism refer to?



Show: Slide 4



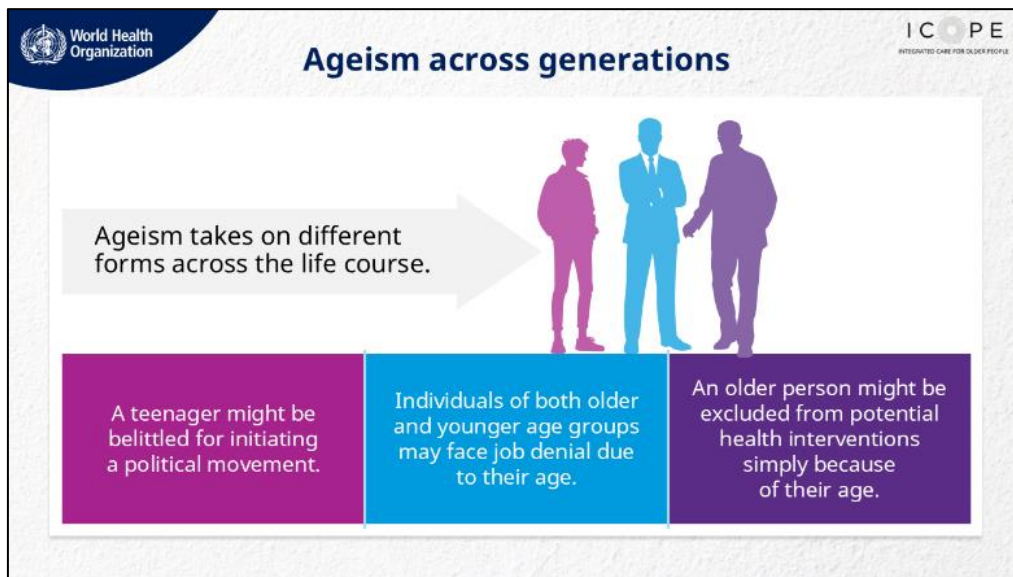
Say:

Ageism refers to how we think, feel and act towards others or even ourselves based on age. It involves having stereotypical thoughts (e.g., older people are frail, younger people lack experience), prejudicial feelings (e.g., pity or sympathy for older people), and discriminatory behaviours (e.g., deciding based on age rather than individual health status or preferences).

Ageism across generations



Show: Slide 5



Say:

There are different forms that ageism can take across generations.

For instance, a teenager might be belittled for starting a political movement, showcasing how age-based stereotypes affect the younger generation. On the flip side, both older and younger individuals might be denied job opportunities simply because of their age, highlighting the pervasive nature of ageism in employment.

In another scenario, an older person could be excluded from clinical trials or potential health interventions based solely on their chronological age, underscoring the serious consequences of ageism in healthcare.



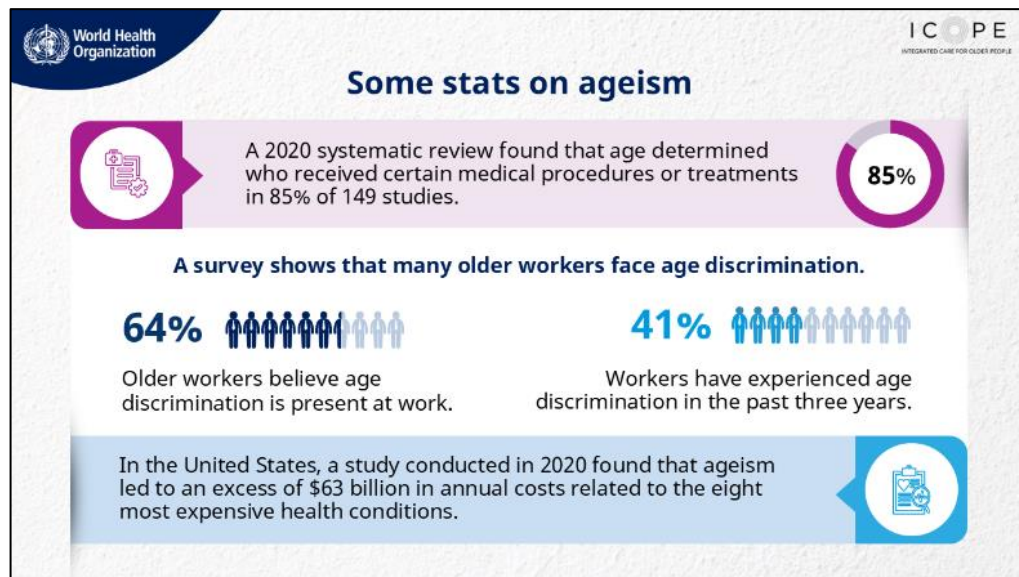
Ask:

As we explore these examples, let us reflect on how ageism plays out in our own lives and communities. Feel free to share any thoughts or experiences you might have.

Some stats on ageism



Show: Slide 6



Say:

Let us now turn our attention to some compelling statistics on ageism. These figures shed light on the widespread impact of age-related biases in various aspects of life.

A systematic review in 2020 showed that in 85% of 149 studies, age determined who received certain medical procedures or treatments.

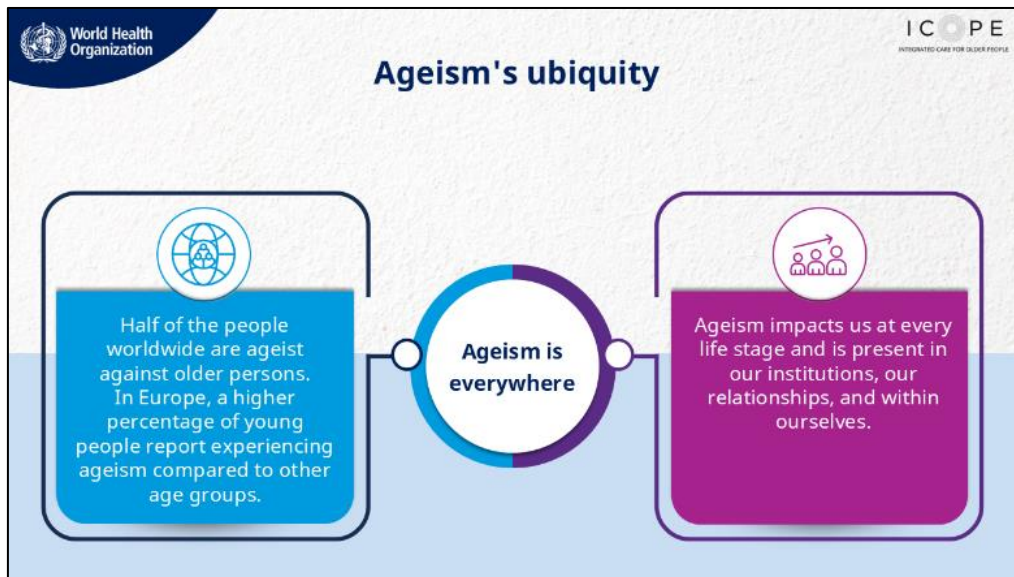
Results from a different study show that many older workers face age discrimination. It reported that 64% older workers believe age discrimination is present at work. And 41% workers have experienced it in the past three years.

In the United States, a 2020 study showed that ageism, in the form of both negative age stereotypes and self-perceptions, led to excess annual costs of US\$ 63 billion for the eight most expensive health conditions.

Ageism's ubiquity



Show: Slide 7



Say:

Ageism is prevalent across various aspects of our lives.

It has been estimated that 1 in 2 people globally holds ageist views against older people, with rates higher in lower-income countries. In Europe, the only region for which data is available on all age groups, younger people report more age discrimination than other age groups.

Ageism permeates our institutions, relationships and how we perceive ourselves. Ageism affects people of all ages and is widespread in all countries and regions of the world, and hence requires local, national and global action.

Popular myths of ageing and its facts



Show: Slide 8

 World Health Organization	IC O P E INTEGRATED CARE FOR OLDER PEOPLE
Myths	Facts
"To be old is to be sick"	Most older people can perform daily living tasks and manage independently, even into very advanced ages.
"You can't teach an old dog new tricks"	Older people can learn new things and continue to do so over the life course.
"Too little, too late"	It is never too late to reap the benefits of recommended healthy behaviours and interventions.
"Life's lottery is won at birth"	Genetic factors play a relatively small role in longevity and quality of life.
"The lights might be on, but the voltage is low"	Most older people with partners and without major health problems are sexually active.
"Older people don't pull their own weight"	Most older people who are not working for pay engage in productive roles in their families or communities.



Say:

Our goal is to debunk common misconceptions about ageing and explore the realities that counter these myths. Let us uncover the truth behind each one:

1. **To be old is to be sick**

Contrary to this belief, most older people can perform daily functions independently and manage well into advanced ages.

2. **You cannot teach an old dog new tricks**

This myth does not hold true. Older individuals are not only capable of learning new things but also continue to do so throughout their life course.

3. **Too little, too late**

It is never too late to benefit from highly recommended behaviours and interventions. Positive changes can happen at any stage of life.

4. **Life's lottery is won at birth**

Genetic factors play a relatively minor role in determining longevity and quality of life. Lifestyle and environmental factors have a significant impact.

5. **Do not judge a book by its cover**

Contrary to this myth, most older individuals with partners and without significant health problems are sexually active, challenging stereotypes about intimacy in later years.

6. **Older people do not pull their own weight**

This myth is debunked by the fact that most older people, even those not working for pay, are actively engaged in productive roles within their families or the broader community.

Global report on ageism



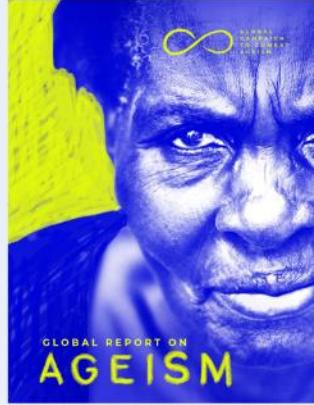
Show: Slide 9




Global report on ageism

In 2021, the World Health Organization, the Office of the High Commissioner for Human Rights, the UN Population Fund, and the UN Department of Economic and Social Affairs released the Global Report on Ageism, summarising evidence on its nature, causes, and impact on health and well-being.

The report outlines strategies to prevent and address ageism, highlights research gaps, and guides future work. The Global Campaign to Combat Ageism aims for a world inclusive of all ages.




Say:

The global report on ageism compiles the best available evidence on the nature and magnitude of ageism. It sheds light on how ageism manifests, its underlying determinants and the impact it has on health and well-being.

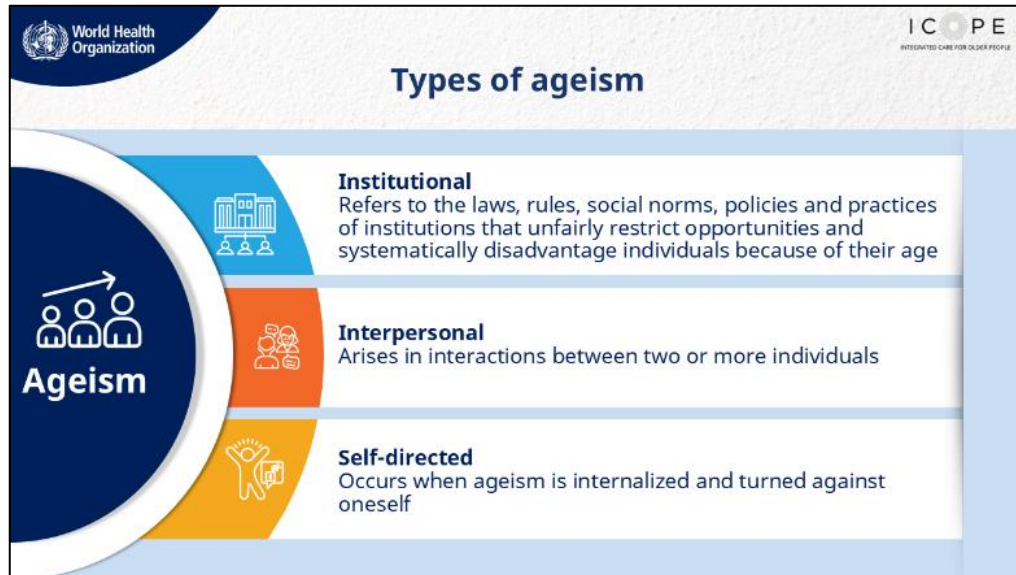
The report outlines effective strategies to prevent and counter ageism. Additionally, the report identifies gaps in our understanding of ageism and proposes future lines of research.

The driving vision behind the Global Campaign to Combat Ageism is important and profound: to create a world for all ages. This ambitious goal reflects a collective effort to build a society where individuals of all ages are valued, respected and included.

Types of ageism



Show: Slide 10



Say:

Ageism can manifest in various ways:

Institutional ageism: This type is rooted in the laws, rules, social norms, policies and practices of institutions. It unfairly restricts opportunities and systematically disadvantages individuals based on their age.

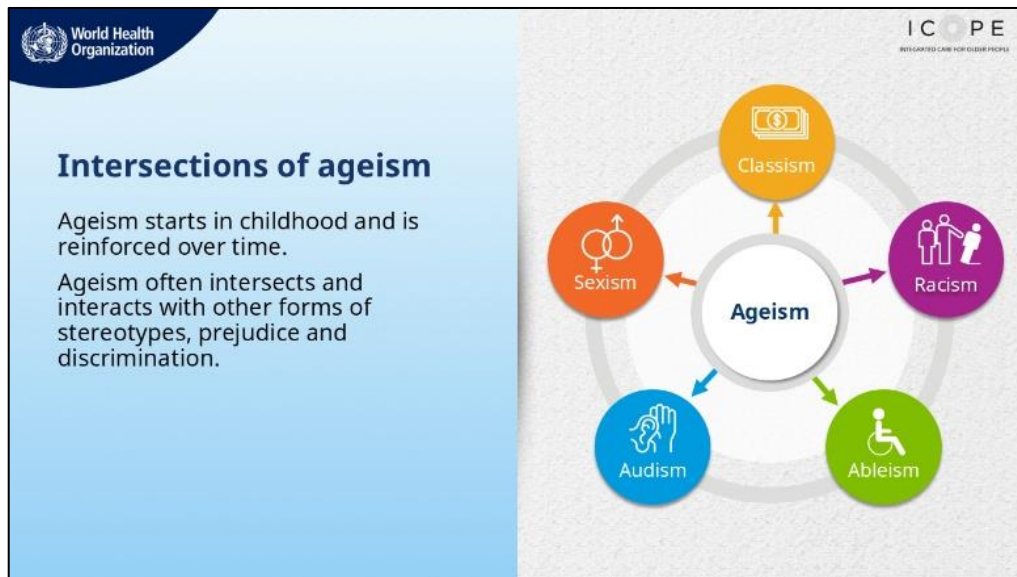
Interpersonal ageism: Arising in interactions between two or more individuals, interpersonal ageism involves attitudes, behaviours or language that perpetuates age-related biases during personal exchanges.

Self-directed ageism: This occurs when ageist stereotypes are internalized and used to guide our feelings and behaviours towards people of different ages and ourselves.

Intersections of ageism



Show: Slide 11



Say:

We are not born ageist, but it starts early and is reinforced over time. Children as young as four years are aware of their culture's age stereotypes and prejudices (e.g., through story books, media, and family culture).

Ageism frequently intersects with other forms of stereotypes, prejudice and discrimination, such as racism, ableism, sexism, and more.

Note: The definitions below are provided for reference only and need not be explained during the session. Use them if clarification or additional context is requested.

Racism refers to the stereotypes, prejudice and discrimination directed towards individuals or groups based on their race or perceived racial characteristics.

Ableism refers to the prejudice, stereotypes and discrimination directed at individuals with disabilities or those perceived to have a disability.

Audism refers to the stereotypes, prejudice and discrimination directed towards individuals who are deaf or hard of hearing.

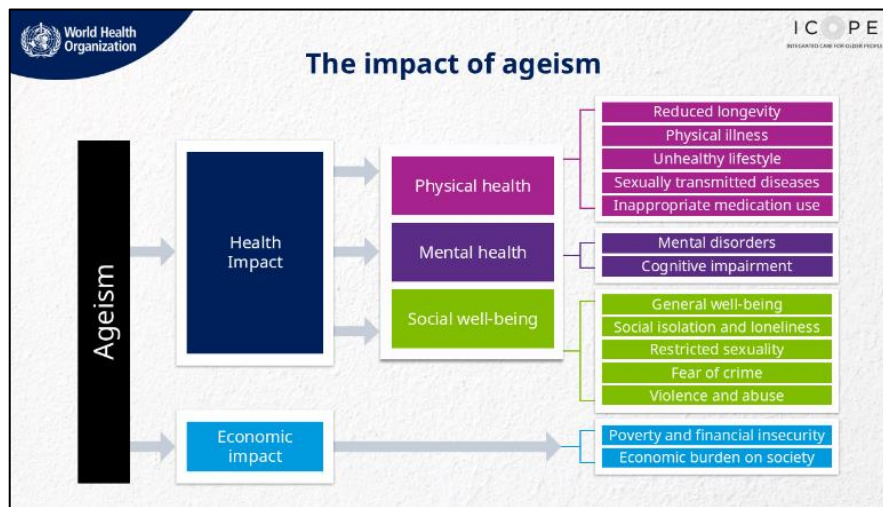
Sexism is prejudice, stereotype or discrimination based on sex or gender.

Classism refers to stereotypes, prejudice and discrimination against individuals based on their socioeconomic class or perceived social and economic status.

The impact of ageism



Show: Slide 12



Say:

The infographic illustrates the interconnected impact of ageism on both health and economic aspects.

Ageism has detrimental effects on the physical and mental health as well the social wellbeing of the individual. It is associated with higher risk of death, diseases, physical and mental impairments, unhealthy lifestyle, social isolation, and increased vulnerability to violence and abuse.

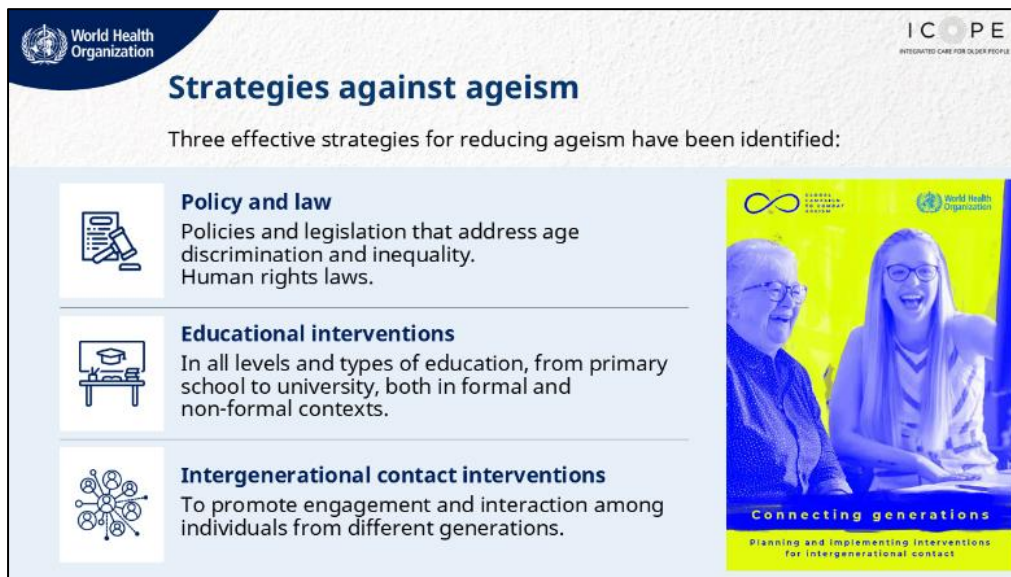
At the same time, ageism can contribute to poverty and financial insecurity in older age by precluding opportunities through stigma, prejudice, and discrimination.

This visual representation highlights the far-reaching consequences of ageism, which impact individuals' health and well-being and pose economic challenges for society as a whole.

Strategies against ageism



Show: Slide 13



Strategies against ageism

Three effective strategies for reducing ageism have been identified:

- Policy and law**
Policies and legislation that address age discrimination and inequality. Human rights laws.
- Educational interventions**
In all levels and types of education, from primary school to university, both in formal and non-formal contexts.
- Intergenerational contact interventions**
To promote engagement and interaction among individuals from different generations.

Connecting generations
Planning and implementing interventions for intergenerational contact



Say:

There are three strategies to counter ageism that have shown positive outcomes:

1. **Policy and law:**

One key strategy involves the implementation of policies and legislation aimed at addressing age discrimination, inequality and upholding human rights. These legal frameworks play a crucial role in protecting individuals from age-based discrimination.

2. **Educational interventions:**

Education proves to be a powerful tool in the fight against ageism. Interventions span across all educational levels, from primary schools to universities, encompassing both formal and non-formal settings. By instilling age-inclusive perspectives, we can challenge stereotypes and promote understanding.

3. **Intergenerational contact interventions:**

To foster meaningful connections and break down stereotypes, interventions promoting intergenerational contact are essential. These initiatives, as the WHO Guidance “Connecting generations”, aim to encourage interaction between people of different age groups, contributing to the creation of a more age-inclusive and understanding society.

Recommendations for action



Show: Slide 14



Say:

This slide outlines actionable steps to address ageism:

1. **Invest in evidence-based strategies:**

Allocate resources to evidence-based strategies for preventing and addressing ageism. Prioritize the implementation and scaling up of the three strategies that have proven to be most effective. Interventions should be adapted, tested and scaled up when proven successful in new contexts.

2. **Improve data and research:**

Enhance our understanding of ageism through improved data and research. Collect comprehensive data on all aspects of ageism, particularly focusing on low- and middle-income countries. Develop targeted strategies to reduce ageism based on the insights gained effectively.

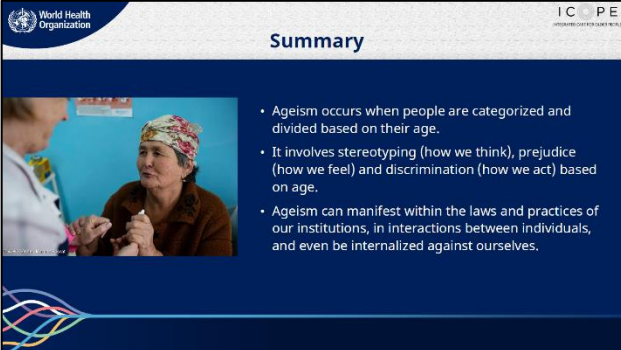
3. **Build a movement to change the narrative:**

Initiate a collective movement to reshape the narrative around age and ageing. By fostering a positive and inclusive dialogue, we can challenge stereotypes and biases associated with age.

Summary

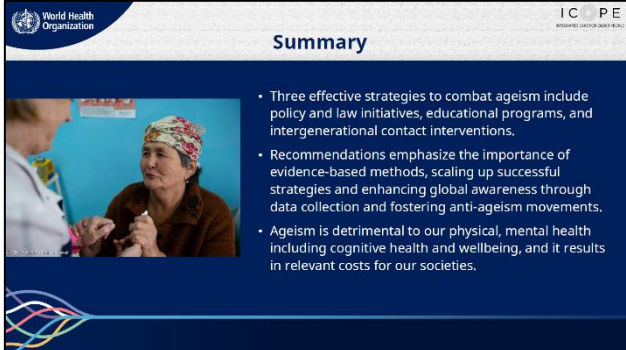


Show: Slides 15 and 16



Summary

- Ageism occurs when people are categorized and divided based on their age.
- It involves stereotyping (how we think), prejudice (how we feel) and discrimination (how we act) based on age.
- Ageism can manifest within the laws and practices of our institutions, in interactions between individuals, and even be internalized against ourselves.



Summary

- Three effective strategies to combat ageism include policy and law initiatives, educational programs, and intergenerational contact interventions.
- Recommendations emphasize the importance of evidence-based methods, scaling up successful strategies and enhancing global awareness through data collection and fostering anti-ageism movements.
- Ageism is detrimental to our physical, mental health including cognitive health and wellbeing, and it results in relevant costs for our societies.



Do:

Go through the slides and recap the points discussed during the session.



Say:

To summarize this module, ageism occurs when people are categorized and divided based on their age. It involves stereotyping (how we think), prejudice (how we feel), and discrimination (how we act), based on age.

Ageism can manifest within the laws and practices of our institutions, in interactions between individuals, and it can also be internalized against ourselves.

We have seen that three effective strategies to combat ageism include policy and law initiatives, educational programs, and intergenerational contact interventions.

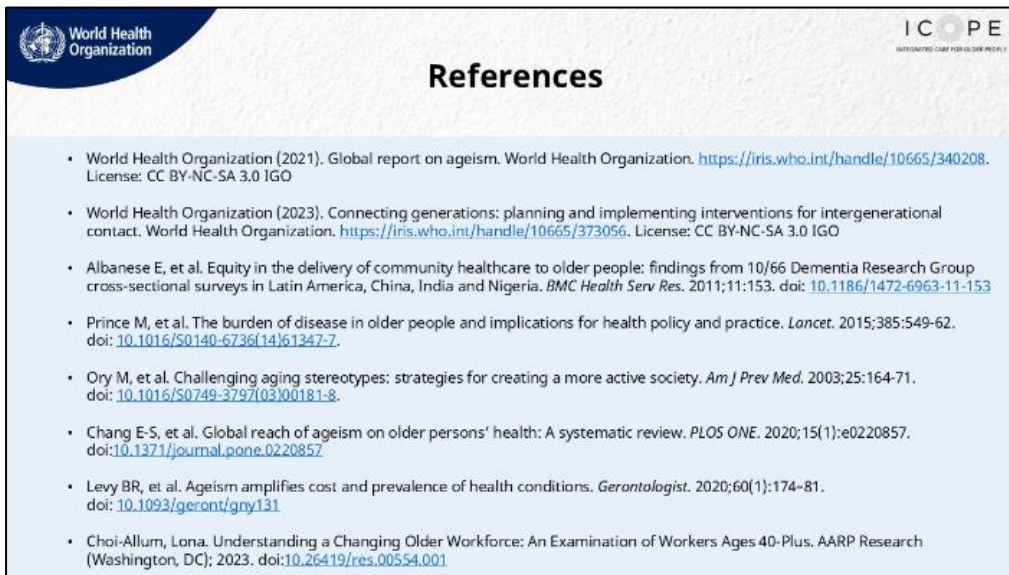
The recommendations emphasize the importance of evidence-based methods, scaling up successful strategies, and enhancing global awareness through data collection and fostering anti-ageism movements.

Remember that ageism is detrimental to our physical and mental health, and it results in relevant costs for us as individuals and for the society we are part of.

References



Show: Slide 17



World Health Organization logo and IC O P E logo are visible in the top left and right corners of the slide respectively.

References

- World Health Organization (2021). Global report on ageism. World Health Organization. <https://iris.who.int/handle/10665/340208>. License: CC BY-NC-SA 3.0 IGO
- World Health Organization (2023). Connecting generations: planning and implementing interventions for intergenerational contact. World Health Organization. <https://iris.who.int/handle/10665/373056>. License: CC BY-NC-SA 3.0 IGO
- Albanese E, et al. Equity in the delivery of community healthcare to older people: findings from 10/66 Dementia Research Group cross-sectional surveys in Latin America, China, India and Nigeria. *BMC Health Serv Res*. 2011;11:153. doi: [10.1186/1472-6963-11-153](https://doi.org/10.1186/1472-6963-11-153)
- Prince M, et al. The burden of disease in older people and implications for health policy and practice. *Lancet*. 2015;385:549-62. doi: [10.1016/S0140-6736\(14\)61347-7](https://doi.org/10.1016/S0140-6736(14)61347-7).
- Ory M, et al. Challenging aging stereotypes: strategies for creating a more active society. *Am J Prev Med*. 2003;25:164-71. doi: [10.1016/S0749-3797\(03\)00181-8](https://doi.org/10.1016/S0749-3797(03)00181-8).
- Chang E-S, et al. Global reach of ageism on older persons' health: A systematic review. *PLOS ONE*. 2020;15(1):e0220857. doi: [10.1371/journal.pone.0220857](https://doi.org/10.1371/journal.pone.0220857)
- Levy BR, et al. Ageism amplifies cost and prevalence of health conditions. *Gerontologist*. 2020;60(1):174-81. doi: [10.1093/geront/gny131](https://doi.org/10.1093/geront/gny131)
- Choi-Allum, Lona. Understanding a Changing Older Workforce: An Examination of Workers Ages 40-Plus. AARP Research (Washington, DC); 2023. doi: [10.26419/res.00554.001](https://doi.org/10.26419/res.00554.001)



Say:

Here are some useful links and citations for your reference. Thank you for your time and participation.