Track D – Social Research, Policy and Practice

PD8 679 SOCIAL IMAGES AND FEAR OF OLD AGE IN CHILEAN UNIVERSITY STUDENTS
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Introduction: Chile, with a population of 16.3 million, is undergoing major demographic changes. It is aging quickly and in this matter stands out in Latin America. In societies such as ours, which have not given the new senior citizens a role in society and which are dominated by individualization processes with perceptions of uncertainty, the presence of negative social images on old age should not surprise. In this scenario, we wondered what images the senior citizens of the future, today’s youth, have of old age and whether these perceptions are associated with a fear of reaching this stage of life. This work deals with the link between the social images that young Chilean university students attribute to old age and their fear of aging. Methods and materials: A study was carried out that applied an adaptation of the Osgood’s Semantic Differential to 682 university students of both sexes and later with two focal groups. Results: The results indicate an extended negative image projected onto old age that is associated with the fear of aging that the students reported in the study. Conclusion: The analysis was based on current social theories that emphasize that most of the handicaps of older people come from their social exclusion than from factors associated with the condition of their organisms or mental state. We suggest that this exclusion is generated by a society that doesn’t know how to give meaning to and integrate a stage of life that has expanded considerably in the last decades. The evidence obtained shows the importance that social stereotypes have on the way in which today’s young students imagine their own future, affecting their expectations of well-being and reinforcing the cultural idealization of youth and non-ageing behaviors of a “gerontophobic” society.

PD8 680 SITUATED AGE – SITUATIONS THAT MAKE ELDERLY PEOPLE FEEL ESPECIALLY OLD AND/OR YOUNG
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Introduction It is important to know more about elderly peoples possibilities and limitations as it appears to them in relation to their own agendas, expectations and emotions. One aspect is to highlight situations that make elderly people feel old and/or young. What situations make 65- and 75-year olds feel particularly young or especially old in Sweden and Finland? What are the key aspects of feeling young and/or old among the sample of elderly? Methods and materials The empirical material contains the answers from two different but corresponding open questions in the GERDA-survey. The respondents were asked to verbalize situations in which they feel especially old and situations in which they feel especially young. A qualitative situational analysis was applied in the material with a focus on perceptions of feeling young and/or old. Results The survey questions gave 407 open answers about “feeling-young-situations” and 282 “feeling-old-situations”, 111 individuals answered both open questions. Totally 689 age related situations to deal with in the material given by 578 different individuals. The results reveal a complex pattern of “feeling-old-situations” and “feeling-young-situations” containing the mind-body self as much as other people and activities. Conclusion Situations in which elderly people feel especially young contains interaction with other people and managing to live smoothly. To feel young is much about freedom and success within the mind-body self and in interactions with others. Situations in which elderly people feel especially old often contains frustration and otherness in relation to the mind-body self and to the society in several different ways. Feelings of being old are analysed as a role of feeling alienated in ones own eyes or in the eyes of others. To feel old is much about representing oneself.

PD8 681 THE EFFECTS OF SPECIFIC EDUCATION AND DIRECT EXPERIENCE ON IMPLICIT AND EXPLICIT MEASURES OF AGEISM
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There are two attitude subsets; implicit which are formed through the sum of evaluations associated with salient outcomes of observed behaviours and explicit which are formed through a process of normalisation. Commonly, Likert scale measures have been employed taking a measure of explicit attitudes and not the underlying implicit beliefs. More recently, Implicit Association Tests (IATs) have been used to measure implicit attitudes in ageing and together with explicit measure studies indicate pervasive wide reaching ageist attitudes. With this negative attitude being held in the social conscious, research has illustrated that care of older people may be less than that given to younger people. Of concern is that medical students’ implicit and explicit scores were not different from those negative attitudes held by the general populous and did not improve after completion of medical training. This study investigates the strength and prevalence of implicit and explicit attitudes amongst several populations. The primary longitudinal investigation will assess implicit and explicit attitudes held by 40 psychology students upon commencement, midpoint and completion of their degree programmes (age range of 18-40 years). This investigation uses a bespoke IAT measuring implicit attitudes and the Fraboni scale for explicit attitudes, assessing effects of gerontological education and nurse training. Analysis of the course commencement data indicates no correlation between explicit/implicit measures (r=.73, p=0.538) with implicit results being significantly more negative (F = 10.162, p>0.002). Nursing students demonstrated significantly more positive attitudes in both explicit and implicit measures. Findings illustrate a stark difference between implicit/explicit measures of ageing where individuals can employ impression management and self monitoring techniques. Midpoint data indicates no implicit benefit of current age specific education suggesting a need for more effective intervention measures to address negative attitudes and associated behaviours.

PD8 682 THE IMPACT OF THE AUSTRALIAN AGE DISCRIMINATION ACT 2004 ON HEALTH CARE FOR OLDER PEOPLE
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Introduction Ageism can directly influence the quality of health care that older people receive. Greater choice and control for older people should be key components of measures to reduce ageism in health care. The Age Discrimination Act 2004 (ADA) was enacted as a catalyst for attitudinal change and to address individual cases of age discrimination throughout Australia. Methods and materials: The ADA was undertaken to analyse its impact on the wellbeing of older people. Results The emphasis of the ADA is the protection of workers older than 45 against discrimination in the workforce. It contains some provisions, ss 28 and 29, relevant to health care for older people which allow positive discrimination such as the provision of services specifically for older people e.g. Transition Care. The Act also provides an exemption (s42) which can be construed as an extension to positive discrimination rather than an opportunity to (lawfully) discriminate against older people for economic or other reasons including perceptions of their relative worth or the needs of other people. The determination of discrimination is to be based on the ability of the older person to “benefit” from goods or services rather than be disadvantaged. However s42 can also be construed as permitting discrimination due to uncertainties surrounding the standard of evidence and professional knowledge of the medical decision maker. The ADA is silent as to other reasons for the decisions of clinicians or health managers such as negative stereotyping and resource limitations. Additionally the exemptions under the ADA include overt discriminatory provisions such as the retention of the insurance provision known as Lifetime Healthcover. Conclusion The ADA provides uncertain and incomplete protection against age discrimination for older people who require health care. Amendments to the ADA should be enacted to specifically address the protection the wellbeing of older people.

PD8 683 PERCEPTIONS OF BIRTHDAY CARD MESSAGES: NEGOTIATED, CONTRADICTORY AND COUNTER-HEGEMONIC MEANING
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Age and ageing related humour expressed in birthday cards has been suggested to support negative attitudes towards aged people. Little attention has been paid to how retired people themselves experience these messages. The objective in this presentation is to depict some of the perceived meanings of age related messages envisioned in birthday cards. The empirical material consists of six focus group interviews collected in Sweden (3) and Finland (3) in 2007-2008. Retired women and men, urban and rural, living at home and institutionalized informants of different ages have participated. In the interview different cards were used as focus- or questions to achieve a “…culturally appropriate instrument that accurately reflected the community’s life experiences” (Willgerodt, M.A. 2003, Western Journal of Nursing Research; 25[7]: 798-814) with regards to ageism as a phenomenon. Results indicate that informants negotiate consensus to the meaning of the age related messages in greeting cards within groups. Contradictory perceptions occur between groups. Perceptions of the messages in the cards appear both positive (good) and negative (bad). There is a notion of individual discrepancy in that individuals do not conform to neither of the two mentioned. This is discussed in terms of counter-hegemonic meaning and as counterracting ageism in everyday life. It can be concluded that negative attitudes are supported according to some people, but this does not give us the complete picture. Other people, other voices explicitly claim otherwise. There is a greater picture of meanings that the two mentioned. This is discussed in terms of counter-hegemonic meaning and as counterracting ageism in everyday life. It can be concluded that negative attitudes are supported according to some people, but this does not give us the complete picture. Other people, other voices explicitly claim otherwise. There is a greater picture of meanings that the two mentioned. This is discussed in terms of counter-hegemonic meaning and as counterracting ageism in everyday life. It can be concluded that negative attitudes are supported according to some people, but this does not give us the complete picture. Other people, other voices explicitly claim otherwise. There is a greater picture of meanings that

PD8 684 SOCIAL STRATIFICATION, AGE DISCRIMINATION AND HEALTH T. MAXIMOVA* (National InstitutePublic Health, Moscow, Russian Federation)

Introduction: The aim of the study was to evaluate the prevalence of main health, medical and social problems elderly people. Method and materials: For calculation (SPSS)