



ANTIDOTES FOR AGEISM:

A brief guide to creating inclusive care in an ageist society

Guide to presenting the film



Thank you so much for hosting and facilitating a workshop about age-friendly healthcare. This guide provides you with everything you'll need. Feel free to tailor this; make it your own and reach out with any questions.

A movement requires everyday people to become involved. Your agreement to host helps to build the movement to create age-friendly healthcare!

Why are we doing this?

Ageism—the stereotyping, prejudice, and discrimination against people based on their age—is pervasive and it has real impact on our health and wellbeing. [One out of five](#) people over age 50 experience ageism in healthcare settings. In an analysis of over 400 studies [that looked at the impact of ageism on health](#), almost 96% showed that ageism has a negative impact on the health of older adults.

“My goal is to change the way we think about growing older, and to create a new reality where every one of us as we age can experience true belonging, meaningful purpose, and continued growth in our lives.” ~Jill Vitale-Aussem

Our goals for the **Age-Friendly Healthcare** campaign are to:

- Increase understanding of ageism and its adverse effects on our health
- Motivate people to continue talking about the impacts that ageism has on our health and what can be done about it
- Discover methods for improving healthcare interactions
- Identify actions to address it.

Thanks in advance for what you're doing to address ageism in healthcare. If you have questions or need assistance, please see our Age-Friendly Healthcare Webpage <https://changingthenarrativeco.org/age-friendly-healthcare/>, which has additional tools. Questions? Reach out to our healthcare campaign manager Kris Geerken at Kris@ChangingtheNarrativeCo.org.

FACILITATOR TIPS

Your role is to ask questions, draw people out and ask people to summarize conclusions. We've provided sample questions to help. Keep in mind this definition of a facilitator: "*Facilitate: to make easier, aid, assist, smooth the progress of, to make possible, create, compose.*"

It's best for facilitators to avoid dominating the discussion, or even interjecting much. The more space the facilitator takes up in a discussion, the less space there is for participants to explore and engage with the topic. So, let your guests be the stars of the show.

Virtual or in-person equipment needed

In-person - You'll need access to a screen and audio to play the short film.

Virtually - You'll need access to a computer with a mic and camera, and a platform such as Zoom. Additional, but optional, interactive tools you could include polls and Google JamBoard.

Checking in with yourself

Before you guide a discussion, it is helpful to consider your own identities, beliefs, and biases around the topic. Anticipate your own and your participants' possible points of view, so you can focus on the intent of the workshop. Some questions to consider:

- How might my **experiences** with ageism and healthcare influence how I facilitate this discussion?
- What are my **thoughts and feelings** about ageism and healthcare?
- How could my **identities** (e.g., age, gender, race, class, abilities, LGBTQ+ status, etc.) influence the dynamics during the discussion?

Be prepared

- Review the activities and questions you've selected, so that you're comfortable.
- Make sure you test the link to the video that you received via email when you signed up to screen the film.
- Share the agenda with participants ahead of time. This can be very short, stating that there will be a short film followed by facilitated discussion. If you want to focus on a certain question or two, you could share those with your participants.
- Have a plan for how to want to share questions during the presentation. *In person?* You could just ask them out loud, print them out, or have them on a whiteboard or screen.

Virtual? You could paste your questions in the chat box or have a slide with the question(s) on it.

Start on time

A key element of a successful discussion is being respectful to the people who are there and ready to get started.

(For more facilitator tips, see the section at the end of the document.)

THE DISCUSSION

The discussion can be scheduled for 60 to 90 minutes and can be held virtually or in-person. Don't start with many instructions. Instead, we want to draw people into the topic right away.

Opening Activity (5 minutes)

Depending on the number of participants, try not to spend more than five minutes on your opening. The goal is to build a sense of connection around the topic by having everyone introduce themselves and briefly share why they are here.

Virtually - Ask people to type their name and location in the chat.

In-person - Go around the room and ask people to state their name and in one-sentence, share why this topic is important to them. This works for groups of 10 or fewer. (You could provide name tags if that's helpful).

Play the short film, Antidotes for Ageism (16 minutes)

When you signed up to screen the film, you received the link to the video in an email.

Discussion (35 - 65 minutes)

Depending on the number of participants, you can conduct a group discussion or create breakout groups.

- Less than 20 participants? We'd recommend a group discussion.
- More than 20 participants? Create breakout rooms in groups of 4 or 5 participants.

Set the stage for a safe environment and discussion by **setting out group agreements like:**

- Listen with an open mind
- Engage respectfully
- Make space for others to share
- Share your experiences
- No personal judgements

Start with your first question or share the list, depending on what you have prepared. If you are in-person, ask participants to raise their hands. If virtual, ask everyone to set themselves on mute and use the chat and/or the "raised hand" function when they'd like to speak.

DISCUSSION QUESTIONS

Following are some suggested questions. Depending on your audience, you may want to use questions tailored to healthcare professionals or to consumers - or you may want to mix it up.

For Healthcare Professional Participants

In the film, Dr. Jeff Wallace mentions that patients should interrupt their physicians.

- What are some respectful ways patients can express their concerns so they are heard?

Carolyn Love mentioned that no one is as much of an expert on one's body and health as oneself.

- What can healthcare professionals do to bring out that expertise and make sure patient voices are not only heard but understood?

Judith Blair pointed out how important it is for healthcare professionals to be an ally to their patients.

- What can healthcare systems and providers do to show allyship?

Danelle Hubbard talked about the importance of healthcare providers not making assumptions about people based on their age.

- What can healthcare systems do to decrease ageist assumptions?
- What could you do in your own practice?

Gilliane Lee chose to work with older adults as an Occupational Therapist. But we know the US has a shortage of healthcare professionals trained to work with older adults.

- What can be done to encourage more people who are in your field and who are entering your field to work with older adults?

Thinking about policies impacting the health of older adults, how can we as healthcare professionals, patients, or caregivers of older adults influence policy decision making to create equitable care throughout our life span?

For Healthcare Consumer Participants

FACT: Individually, one out of five people over age 50 experience ageism in healthcare settings.

Quote from film: *“As you get older, when you go to the doctor, everything is attributed to your growing older. And that is not always the case.”* ~Carolyn Love, PhD

- Carolyn mentioned that no one is as much of an expert on one’s body and health as oneself. What can we do to make sure that healthcare professionals hear and understand what we’re expressing?
- Are you hesitant to ask your practitioner questions? If so, what could you do to become more comfortable?

FACT: Worldwide, in a [study conducted with over 7 million participants](#) from 45 countries, across 5 continents, it was found that ageism harms the health of older people. They were more likely to have worse physical and mental health and reduced recovery from illnesses due to ageism.

Quote from film: *“When someone gets older, their concerns are not treated with the same urgency as younger demographics, where they typically won’t suggest certain treatments.”* ~Danelle Hubbard, Gerontologist

- The film addresses assumptions made about older people which can have impacts on their health. Have you experienced ageism in a healthcare setting? What are examples of those biases?
- Do you make any assumptions about yourself because of age - and, if so, are they accurate?
- When a healthcare office staff member uses elderspeak, what are some specific comments we could use in response? How can we each be ambassadors for ending this practice?

- Thinking about policies impacting the health of older adults, how can we as patients and loved ones of older adults' influence policy decision making to create equitable care throughout our life span?

THE CLOSING

If there is a major point that you'd like people to take away from the program, this is when to do it. Research shows that people remember most the beginning and ending of an event. One overall takeaway from the event is this:

Ageism happens. We all have biases, and ageism is one of them for most of us. The goal of this film was to illustrate how it shows up in healthcare and how it diminishes our wellbeing. Equally important, we can do something about it.

Wrap up with a call to action for all participants:

What is one thing you will do to create age-friendly healthcare?

Share this link in case your participants would like to request hosting a screening event:

<https://actionnetwork.org/forms/interested-in-screening-antidote-to-ageism/>

ADDITIONAL FACILITATION TIPS

Active listening tips:

- **Don't assume.** Do not assume you already know what is being said. Too often when someone has an opposing view, people simply talk past each other without really engaging in meaningful conversation. Opportunities are then missed.
- **Listen with empathy.** Try to put yourself in their place and understand their position. The goal is to seek common ground.
- **Pause to reflect.** It is not necessary to respond immediately. This discussion is about connecting. Take a moment to reflect on what you just heard. It may be helpful to reflect back, e.g, "So what I hear you saying is... Do I have that right?"

What to do if:

Someone is trying to dominate the discussion

- Let the person have their "say," but limit each person's time.
- After the person is done speaking, let the group know that you would love to hear from people who haven't shared so everyone can hear multiple perspectives.

As facilitator, it's okay to politely cut people off if they are on a 5-minute monologue or to call on people who have not spoken at all. Some helpful phrases:

Cutting people off: *"(NAME), I'm sorry to cut you off, but for the sake of time, I'm going to ask that we now hear from someone else..."*

Getting people to share: *"(NAME) I've noticed that you haven't said much yet. Is there something you would like to share."* OR *"(NAME), I notice that you nodded at what (so & so) said, would you like to add anything?"*

Someone is getting off track:

- Make a statement that summarizes their thoughts, acknowledging that they've been heard, (you may even jot them down) and then return to the main topic.
- Follow this with a restatement of the intended topic or question. *“It seems like we have gotten a little off topic, can we go back to . . . (repeat question if necessary)?”*

In both cases, remind participants gently about the bigger picture of what we are trying to accomplish, and the time limitations. “This is a great discussion, but I think we are going to run out of time for our main topic . . . so let’s save this for another time.”