A Critical Analysis Of Media Portrayal Of Ageism In The Workplace

Summary and Analysis of Article 1

The first article, written by Peggy Klaus and published in the New York Times, details her experience with workplace ageism as a 60-year-old woman using her own narrative as well as a number of different studies (2013). In particular, she describes how not only may the general population treat an elderly person differently, but that older people discriminate against one another too.

Overall, the main aspect of workplace ageism Klaus highlights is the fact that both intergenerational solidarity and self-advocacy is required to make real change.

She promotes a very positive image of older people in the workplace, showing how, as an older person herself, individuals can be complicit in their own marginalisation, but can similarly be self-empowered to understanding, respect and equity. She achieves this by utilising humour and personal anecdotes, providing points of relatability for older demographics and demonstrating the universality of the issue. Her use of statistics and findings a number of studies also provides a logical foundation for her claims, offering credibility and context.

In the article, Klaus initially offers a relatively unbiased perception of the issue. She offers insight into both positive and negative perceptions of older workers – for example, she cites research from a staffing company indicates that some hiring managers view older workers to be reliable and having excellent work ethic, whilst others view them as resistant to learning and taking orders from higher-ups (Klaus, 2013). Despite this, she argues that “the negative perceptions outnumber the positives” in the general population (Klaus, 2013). This might suggest that she portrays elderly workers as simply victims of this prejudice; but she follows this up by stating that true change comes from within, and simply examining and overcoming one’s own fears and stereotypes will go a long way towards turnaround in the broader culture. Beyond this, she portrays the elder population as experienced and wise, suggesting that they share their stories, lending to a richer culture and distinct perspective (Klaus, 2013).

Summary and Analysis of Article 2

As an older worker and leadership coach for executives, Eileen Dooley attempts to explains the dispels many common myths that underpins ageism in the workplace in her opinion piece (Dooley, 2019). She summarises by demonstrating that ageism is a bias that can be made the more dangerous when it is unconscious on either side.

Dooley handles the issue of workplace ageism by systematically disproving each myth, effectively revealing the fact that even no prejudice is rational, ageism has internalised it in both the employer and employee. Firstly, she cites the argument that younger workers are more capable and motivated. However, she later proves that although there is a slight increase in the number of people holding a university degree (Dooley, 2019). For example, in Canada, despite

the rising prevalence of tertiary education in the last 30 years, many older people have equivalent education and experience that was found to be often overlooked by lazy hiring processes (Dooley, 2019). She similarly refutes the argument that younger workers are more loyal and cheaper – realistically, workers of all ages will look out for themselves first and foremost, and a hiring manager looking for tens of years of experience wouldn't likely find it in a 30-year-old (Dooley, 2019). She also recommends open discussions and knowledge of salaries as leverage to reaching pay equity.

Similar to Klaus, Dooley presents a very positive, empowering depiction of older people. By exploring both sides of the issue, she opens the discussion for people of all demographics, allowing the older people to connect with her personal experiences whilst also giving the opportunity for the general population to tackle any prejudices and provide intergenerational solidarity. She suggests that everyone, from all demographics, attempt to move beyond the myth; she portrays the issue as more multi-faceted than Klaus, recognising that the individual's scope of action may indeed be limited by financial, legal and cultural powers.

Summary and Analysis of Article 3

Finally, Claire Moodie's opinion piece from ABC News describes the rampancy and normalisation of the issue. Here, she provides recounts of other people's experiences with workplace ageism, how to identify the issue and what steps can be taken to stamp it out, echoing many of Dooley's sentiments.

Moodie writes from the perspective of a younger person but refers to the experiences of many older workers and jobseekers, as well as experts such as the head of the Australian Institute of Management. This lends to a sense of credibility, whilst also promoting and advocating for the voices of those discriminated against. For example, she is able to use anecdotal evidence from a number of mature jobseekers to highlight the vulnerability of some affected by the bias, as well as professional advice from workplace psychologists to help equip employers and employees abolish these prejudiced beliefs.

One of the key points the author emphasises is the extent of the issue, stating that this was because "this form of discrimination is the most normalised, organisations don't counter it in the same way they might counter [other] types of discrimination" (Moodie, 2018). She gives tips for jobseekers to identify ageist attitudes, e.g. corporate speak for 'you're too old'. She is also critical of the fact that despite laws prohibiting discrimination due to age, studies have shown that over a third of Australian employers were hesitant to higher older workers (Moodie, 2018).

Similar to the previous two articles, the author portrays a very positive image of older people – they are capable of making a difference. She concludes by giving practical suggestions to employers, employees and job seekers; here, her portrayal of the issue is similar to Dooley's, one of intergenerational solidarity and collaboration to work towards stamping out ageism and breaking stereotypes (Dooley, 2019).

Critique and Evaluation

From a holistic perspective, the issue of ageism, especially in the workplace, is becoming increasingly more significant for an increasing number of people. It's an issue that involves a

number of stakeholders including employers, employees, jobseekers, governments and the wider community, changing the way older workers interact with their work environment and vice versa. Additionally, discrimination against older people extends beyond the context of the workplace – in broader social contexts, ageism will manifest itself on a number of ways, despite protective policies like the Age Discrimination Act (ADA) 2004 (Burnes et al., 2019).

One response to ageism is the popular theory of successful ageing, known as the [health] empowerment theory, is echoed principally in Klaus' article. Here, it is understood that ageing is discrimination against one's future self, that internalised gerontophobia enables older people to view themselves as a drain on resources, rather than as a resource themselves (Irving, 2015). Older adults are encouraged to embrace their age, as doing so may also help combat on common psychological hardships one may encounter in the process of ageing (e.g. loss of identify and purpose) (Irving, 2015).

The framework's main strength is its portrayal of older people to be powerful drivers of extensive social change, not just vulnerable people. Proponents of this theory argue for self-empowerment as a way to overcome ageism. Self-empowered ageing involves taking ownership and control of one's own life and actions, developing new skills, expanding horizons and developing resilience and persistence in the face of hardship (Irving, 2015). Having a positive self-perception of old age is so influential that several studies have estimated that individuals with more optimistic and resilient self-awareness outlived other by over seven years (Mendoza-Núñez, 2018). The American Society of Ageing provides a list of paths one might take in the process of self-empowerment and tackling ageism: thorough preparation, arranging an optimal schedule, maintaining perspective and a sense of humour etc (Irving, 2015).

One limitation of this theory, however, is that it neglects the fact that one's scope of decision-making can be hindered by legal, cultural and economic discursive powers. For this framework to be truly effectual, there needs to be community-wide support to provide the conditions to see real change – it would take real consciousness-raising to change such deep-seated prejudices.

On the opposite end of the end of the spectrum is the Intergroup Contact Theory (ICT), initially proposed by Allport (1954). He suggests that in the presence of conditions such as intergroup cooperation and contact, and support by institutional authorities, intergroup relations significantly reduce prejudice (Drury, Hutchinson & Abrams, 2016). Beyond its biological definition, ageing is largely a social construct; thus, establishing solid social connections would indeed shape the perception of age as a social construct.

A study by Lagacé et al. (2019) hypothesises that intergenerational collaboration, knowledge sharing and empathy/perspective talking contributes to lower perceived levels of age discrimination. That is, in the context of workplace ageism, a younger person interacting with an older person would, according to ICT, reduce the perception of ageist stereotypes. In some ways, this is reflected in in Klaus' article, where she urges older workers to embrace their age by sharing their stories and experiences. In the study, it was concluded that establishing a nourishing sense of inclusiveness and intergenerational communication played a large part in reducing the older worker's feelings of being discriminated against (Lagacé et al., 2019). These finding lends to several useful applications, e.g. the important role managers play in building a supportive atmosphere – facilitating cohabitation, communication and cooperation in the workplace (Lagacé et al., 2019).

One limitation of the ICT model is the potential for older workers to be framed as vulnerable and compliant, as it places a large importance on the role of other stakeholders. Additionally, in everyday life, the type of contact encouraged by this framework may be misconstrued as a negative experience, thereby further isolating older workers (Mckeown, 2017). A combination of the ICT model and the empowerment theory would likely be most preferable in tackling the issue of workplace discrimination against older people.

One other key resource to address the issue takes the form of federal legislation, like the ADA 2004. The ADA 2004 proscribes both direct and indirect forms of age discrimination based on age in all parts of public life, with certain conduct applicable to exemption.

In terms of the efficacy of the legislation, there are only a few cases reported under ADA, all of which were non-successfully litigated in the federal courts as of 2016. Many of the cases had undergone conciliation or otherwise abandoned (Macdermott, 2016). The cause of this was identified large due to the dependency of the system on the individual's complaints – this burden could be assuaged by establishing an agency that assists individuals through the process.

Furthermore, the ADA was never intended to impose strict sanctions – it was described by the Australian Human Rights Commission to be "a catalyst for attitudinal change" (Thornton, 1991). This was established on the belief that discrimination was unconsciousness and unintentional. The notion, that a change of mind and heart will follow once the offending conduct has been highlighted, has been subject to much criticism. There is also the lack of appropriate defences to contend with, as well as the relatively high threshold for proof of age discrimination required – according to the University of New South Wales Law Journal, similar requirements were removed from the Racial Discrimination Act 1975 in 1990 (Macdermott, 2016).

Recommendations

In my future career in medicine, I aspire to be a primary care doctor or general practitioner. In this line of work, I believe that the way we will combat the negative stereotypes and discrimination of ageing is multi-faceted. This includes a reflection of my interacting with older patients, how I work with older colleagues and how I may work alongside the general ageing population.

The first way I may help stamp out these prejudices is in the way a doctor should interact with older patients. Discrimination against the elderly is rife in medicine, with many doctors conjuring a stereotype of what ageing looks like and assigning it to many of their older patients. For example, patients are often met with the dismissive attitude that their health problems are merely an uncontrollable part of the ageing process (Ouchida & Loch, 2015). The attitudes are both hurtful and harmful, with studies indicating that they can lend to potential under-treatment and over-treatment (Senger, 2019).

The only way this issue may be rectified is by education; doctors need to learn to appreciate the heterogeneity of older people to be able to adopt non-ageist attitudes. With critical reflective practice, physicians will be able to identify and accordingly handle any subconscious hints of prejudice that may exist (Sollito, 2017). I am interested in specialising in geriatrics, as undertaking a formal program to learn about geriatrics would undoubtedly involve a rejection of

prejudice. Beyond this, doctors from other specialties need to consider – for example, surgeons should consider appropriate evaluation and preparation of postoperative care, and anaesthesiologists are contemplating about delirium as a side-effect, and its long- and short-term effects of an ageing brain (Sollito, 2017). Additionally, my undertaking a paternalistic model of care, I can ensure that I am working with the older patient, where my role would be providing support and advice.

Finally, advocacy is an integral part of the doctor-patient relationship. It has been researched that such emotional support played a large part in contributing towards the patients' perception of good communication with the doctor (Sentinel, 2017).

One way I could accomplish this is championing equity in healthcare, including informing people of their rights and reporting violations too. As a doctor, I need to preserve human dignity throughout the provision of care by being sensitive and open to the patient's demographic and specific circumstances.

There are also a number of ways I'd would be able to help combat this issue alongside and amongst the general ageing population.

Firstly, doctors are regarded as highly respectable professionals in Australian society; in fact, the Australian Medical Association (Australian Medical Association, 2017) has stated that doctors rated at 89% trustworthiness, relatively high in honesty and ethical standards. In many ways, medical practitioners bridge the gap between society and science. With such well-regarded position, to comes as no surprise that doctors can play a large part in social reform and shaping health policies. For example, the Doctors Reform Society of Australia is a medical association of a range of medical professionals and students who advocate for socially-just and equitable manner. Similarly, doctors can play a role in shaping health policy, especially considering that physicians can draw on their expertise to develop evidence-based policies that can make real change. Take, for example, ADA 2014 – physicians hold a unique position that can push governments to reconsider or refine policies.

One limitation of this is the notion that advocacy like this may be viewed as a restriction of patient autonomy.

Lastly, I may help in the fight against ageist discrimination by working with older colleagues. As discussed in the critique and evaluation of part A, ageism is a highly prevalent bias that exists in many workplaces, including those in healthcare settings. By adopting the ICT model and promoting intergenerational communication, I can ensure that I play my part in reducing the prevalence of workplace discrimination against older colleagues.

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