

A call for intersectionality in gerontological nursing education

openaccessgovernment.org/article/a-call-for-intersectionality-in-gerontological-nursing-education/178617

27 June 2024

Addressing the triple jeopardy of ageism, sexism and racism within healthcare systems is crucial to ensuring equitable health outcomes for all older people, write Professor Jordana Salma, Professor Sherry Dahlke and Professor Kathleen Hunter of the Faculty of Nursing at the University of Alberta

Understanding ageism, sexism and racism and their impact on gerontological nursing education

Ageism involves negative thoughts, beliefs and behaviours towards older people, and its effects are felt worldwide, leading to the denial of human rights based on age (World Health Organization, 2021).

Ageism often accompanies other biases related to gender, religion and race. Benevolent ageism includes paternalistic beliefs that older people are incapable of certain activities, which results in over-accommodation (Vale et al., 2020).

On the other hand, hostile ageism stems from negative attitudes towards aging and older individuals, which, much like racism and sexism, is reinforced through social interactions and media discourses. Sexism, racism and ageism often intersect, leading to compounded challenges for older adults.

Ageism and other forms of discrimination contribute to older people's diminished sense of wellbeing, depressive symptoms and low self-esteem, often because negative stereotypes about aging become internalized (Han & Richardson, 2015; Marquet et al., 2019).

Gerontologists warn that older people face a high risk of social exclusion due to various age-related changes, including physical limitations, loss of autonomy, social connections and financial resources, as well as experiences of crime, gender biases and racism (Scharf et al., 2001; Van Regenmortel et al., 2016; Walsh et al., 2017).

A case study: Intersectionality and Muslim older adults in Canada

As a registered nurse and academic, Dr Salma's research programme -Implementing Research for Equity in Aging (IREA) – focuses on improving health outcomes of immigrant and racialized older people. Her work draws attention to the urgent need for an intersectional approach in gerontological nursing education.

She led the Muslim Seniors Study (MSS) in 2018 that identified the needs for healthy aging in Muslim communities in an urban centre in Canada.

In collaboration with grassroots communities, caregivers, service providers and policymakers, culturally and religiously sensitive recommendations were brought forward to advance health and social services in ways that met the needs of Muslim communities (Salma & Salami, 2020).

In the MSS, intersectionality shed light on neglected dimensions of older people's identities (Abrams et al., 2020). Ageism, racism and sexism were identified as a triple jeopardy that creates significant barriers to aging well and that must be tackled to improve health outcomes in older people.

Canada has nearly 1.8 million (1 in 20 people) who identify as Muslim from diverse ethnocultural and linguistic backgrounds, with many older Muslims who are first-generation immigrants (Statistics Canada, 2022).

Identifying as Muslim and practising Islam carries unique health implications in Western societies (Samari et al., 2018). The rights of older people, however, are often overlooked in discourses concerning the integration and wellbeing of Muslims.

Older Muslims report fewer opportunities for involvement in their communities and experience racism and Islamophobia in public settings. Older Muslims entering long-term care facilities lack culturally and religiously tailored services, and caregiving challenges persist within Muslim communities due to discriminatory experiences and social exclusion.

While traditional Islamic values of filial piety can be protective for older adults, family dynamics are changing with increasing economic and social stressors.

Older Muslims who migrate after retirement can become economically dependent on family and report losing autonomy and a sense of self-worth in older age.

Family-sponsored older immigrants, older refugees and older parents on temporary visiting visas to Canada lack access to cohesive social and health benefits and are more likely to experience poverty, social isolation and unmanaged chronic health conditions.

During the COVID-19 pandemic, there was an increase in cases of violence against Muslim women of colour in Canada, especially against Black Muslim women who wear visible signs of their faith like the hijab. This led to more reports of older Muslim women who had become socially isolated and had limited mobility outside their homes.

Despite these challenges, older Muslims are resiliently contributing to their well-being and that of their communities. They volunteer, help with childcare in their families and are involved in social and political activism.

An example of this is the Council of Muslims on Aging Gracefully, which is an advocacy organisation founded and run by older Canadian Muslims that aims to enhance quality of life in older age via mobilising for culturally and religiously sensitive services.

A second notable example of resilience can be seen in the narratives of Canadian Muslim older women who participated in a photovoice project during the Covid-19 pandemic titled the Women-CONNECT Study.

The above case exemplar highlights both the ways negative impacts of ageism are amplified in the presence of other forms of exclusion and the ongoing resilience of older people.

Intersectionality in gerontological nursing education

Gerontological education must include recognition of ageism, racism and social justice issues. Intersectionality serves as a valuable tool in expanding nursing horizons, targeting inequities and aiming for social justice (Collins, 2015).

Nursing programmes should consistently aim for gerontological competencies to address and manage the care of older people. Nurses must learn to challenge prevailing stereotypes and avoid homogenising older adults from diverse backgrounds.

Addressing the triple jeopardy of ageism, sexism and racism within healthcare systems is crucial to ensuring equitable health outcomes for all older people. Expanding to incorporate an intersectional framework in gerontological nursing education is one feasible approach to achieve this goal.

References

- Abrams, J. A., Tabaac, A., Jung, S., & Else-Quest, N. M. (2020). Considerations for employing intersectionality in qualitative health research. *Social Science & Medicine*, 258, 113138. doi:<https://doi.org/10.1016/j.socscimed.2020.113138>
- Collins, P. H. (2015). Intersectionality's definitional dilemmas. *Annual Review of Sociology*, 41, 1-20. doi:<https://doi.org/10.1146/annurev-soc-073014-112142>
- Han, J., & Richardson, V.E. (2015). The relationships among perceived discrimination, self-perceptions of aging, and depressive symptoms: A longitudinal examination of age discrimination. *Aging & Mental Health*, 19(8), 747-755. doi: <https://doi.org/10.1080/13607863.2014.462007>
- Hunter, K., F., & Dahlke, S. (2023). Nurses use of binary thinking contributes to care rationing. *International Journal of Older People Nursing*. <http://dx.doi.org/10.1111/opn.12538>
- Levy, B. R., Slade, M. D., Change, E. S., Kanno, S., & Wang, S. Y. (2020). Ageism amplifies cost and prevalence of health conditions. *The Gerontologist*, 60(1), 174–181. doi: <https://doi.org/10.1093/geront/gny131>

- Lourdes López-Hernández, Francisco Miguel Martínez-Arnau, Elena Castellano-Rioja, Marta Botella-Navas, & Pilar Pérez-Ros. (2021). Factors Affecting Attitudes towards Older People in Undergraduate Nursing Students. *Healthcare*, 9(9), 1231. doi: <https://doi.org/10.3390/healthcare9091231>
- Lyons, A., Alba, B., Heywood, W., Fileborn, B., Minichiello, V., Barrett, C., Hinchliff, S., Malta, S., & Dow, B. (2018). Experiences of ageism and the mental health of older adults. *Aging & Mental Health*, 22(11), 1456-1464. doi: <https://doi.org/10.1080/13607863.2017.1364347>
- Marquet, M., Chasteen, A.L., Plaks, J.E., & Balasubramaniam, L. (2019). Understanding the mechanisms underlying the effects of negative age stereotypes and perceived age discrimination on older adults' well-being. *Aging & Mental Health*, 23(12), 1666-1673. doi:<https://doi.org/10.1080/13607863.2018.1514487>
- Salma, J. & Salami, B. (2020). "We are like any other people but we don't cry much because nobody listens.": The need to strengthen aging policies and service provision for minorities in Canada. *The Gerontologist*, 60(2), 279–290. doi: <https://doi.org/10.1093/geront/gnz184>
- Samari, G., Alcalá, H. E., & Sharif, M. Z. (2018). Islamophobia, health, and public health: A systematic literature review. *American Journal of Public Health*, 108(6), e1-e9. doi: <https://doi.org/10.2105/AJPH.2018.304402>.
- Scharf, T., Phillips, C., Kingston, P., & Smith, A. (2001). Social exclusion and older people: Towards a conceptual framework. Centre for Social Gerontology, working paper no. 6, 1-23, Keele University.
- Statistics Canada. (2022). The Canadian census: A rich portrait of the country's religious and ethnocultural diversity. <https://www150.statcan.gc.ca/n1/en/daily-quotidien/221026/dq221026b-eng.pdf?st=JyX0GGBV>
- Van Regenmortel, S., De Donder, L., Dury, S., Smetcoren, A. S., De Witte, N., & Verte, D. (2016). Social exclusion in later life: A systematic review of the literature. *Journal of Population Ageing*, 9, 315-344. <https://doi.org/10.1007/s12062-016-9145-3>
- Vale, M.T., Bisconti, T.L. & Sublett, J.F. (2020). Benevolent ageism: Attitudes for over accommodative behaviour towards older women. *The Journal of Social Psychology*, 160(5), 548-558.
- Walsh, K., Scharf, T., & Keating, N. (2017). Social exclusion of older persons: A scoping review and conceptual framework. *European Journal of Ageing*, 14(1), 81-98. <https://doi.org/10.1007/s10433-016-0398-8>
- World Health Organization (2021). Global report on ageism. <https://www.who.int/teams/social-determinants-of-health/demographic-change-andhealthy-ageing/combating-ageism/global-report-on-ageism>. Geneva

Please Note: This is a Commercial Profile



This work is licensed under [Creative Commons Attribution 4.0 International](https://creativecommons.org/licenses/by/4.0/).

More About Stakeholder

The University of Alberta: Improving nursing practices
with older people

How to improve nursing practice with older people? Here, Dr Dahlke explores how she has been awarded funding from Canadian national funding, as well as other provincial funding bodies, to do just this Dr Dahlke is an associate professor in the faculty of nursing at the University of Alberta, Canada. She has received international recognition [...]

