



## PERCEPTIONS ABOUT ORGANIZATIONAL AGEISM AMONG UNDERGRADUATE NURSING STUDENTS: CROSS-SECTIONAL STUDY\*

### PERCEPÇÕES SOBRE ETARISMO ORGANIZACIONAL ENTRE DISCENTES DA GRADUAÇÃO DE ENFERMAGEM: ESTUDO TRANSVERSAL

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#### RESUMO

**Objetivo:** analisar a percepção de discentes da graduação em enfermagem sobre o etarismo organizacional. **Método:** estudo descritivo, transversal, de abordagem quantitativa, realizado entre setembro e novembro de 2023, com 166 graduandos de enfermagem de uma universidade pública do Rio de Janeiro, a partir de um formulário de caracterização sociodemográfica e da Escala de Ageísmo no Contexto Organizacional (EACO), composta por 13 itens distribuídos nos domínios atitudes negativas e positivas. Os dados foram submetidos a análises descritivas e inferenciais utilizando o Coeficiente de Correlação por Postos de Spearman. Protocolo de pesquisa aprovado pelo Comitê de Ética em Pesquisa. **Resultados:** os participantes apresentaram idade média de 22,8 anos; 83,1% eram mulheres, 54,8% autodeclarados brancos e 94,6% solteiros. Pela EACO, 83,1% não apresentaram atitudes negativas em relação a profissionais mais velhos, enquanto 42,8% expressaram atitudes positivas. Identificou-se correlação inversa, embora fraca, entre o período cursado e as atitudes positivas e negativas ( $p < 0,05$ ), sugerindo diminuição das atitudes positivas ao longo da graduação. **Conclusão:** destacou-se a predominância da ausência de atitudes negativas, acompanhada de limitada presença de atitudes positivas em relação a profissionais mais velhos, evidenciando a necessidade de estratégias educativas que fortaleçam a valorização geracional no contexto da formação em enfermagem.

**Descritores:** Saúde do Trabalhador; Enfermagem; Educação em Enfermagem; Programas de Graduação de Enfermagem; Envelhecimento; Etarismo.

#### ABSTRACT

**Objective:** to analyze the perception of undergraduate nursing students regarding organizational ageism. **Method:** descriptive, cross-sectional, and quantitative study conducted between September and November 2023 with 166 nursing undergraduates from a public university in Rio de Janeiro, using a sociodemographic form and the Ageism Scale in the Organizational Context (EACO), which consists of 13 items distributed across the domains of negative and positive attitudes. Data were analyzed by using both descriptive and Spearman's Rank Correlation Coefficient inferential analyses. The Research Ethics Committee approved the research protocol. **Results:** the mean age of participants was 22.8 years; 83.1% were women, 54.8% self-identified as White, and 94.6% were single. According to the EACO, 83.1% did not display negative attitudes toward older professionals, while 42.8% expressed positive attitudes. An inverse correlation, although weak, was identified between the period studied and positive and negative attitudes ( $p < 0.05$ ), suggesting a decrease in positive attitudes throughout the undergraduate course. **Conclusion:** the predominance of the absence of negative attitudes was highlighted, alongside a limited presence of positive attitudes toward older professionals, underscoring the need for educational strategies that strengthen generational appreciation within nursing education.

**Descriptors:** Occupational Health; Nursing; Education, Nursing; Education, Nursing, Diploma Programs; Aging; Ageism.

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## INTRODUCTION

Aging is a natural process involving biological, social, and cultural factors, giving an unique perspective to how each person experiences this stage of life<sup>(1)</sup>.

In Brazil, the demographic transition is marked by a reduction in the young population and a significant increase in people over 60 years of age<sup>(2)</sup>, which reinforces the need to discuss the challenges of aging, including maintaining health, social inclusion, and remaining in the labor market<sup>(3)</sup>.

Furthermore, there is a deep-seated prejudice that associates aging with illness. This stigma is aggravated by the frequent exclusion of older people from the labor market, which has significant economic repercussions on their lives. Thus, the perception that old age is neither functional nor productive for the world of work reinforces ageism, known as age prejudice<sup>(4)</sup>.

Ageism, also known as age discrimination, was a concept defined in 1969 by Robert Butler, characterized by a type of prejudice and discrimination that uses age as a factor in judgment, currently discussed in three dimensions: stereotypes (thoughts), prejudices (feelings) and discrimination (actions or behaviors); in three levels of manifestation - institutional, interpersonal and against oneself; and two forms of expression - explicit (conscious) and implicit (unconscious)<sup>(1)</sup>.

At the institutional level, organizational ageism is observed as a set of negative or positive attitudes that value or devalue the workforce considering age, supporting or disadvantaging worker inclusion in the work environment<sup>(5)</sup>. Older people are the ones who suffer the most prejudice at work, resulting in dismissals and forced retirements, highlighting the devaluation of the elderly in the workplace<sup>(6)</sup>.

Ageism permeates different institutions and sectors of society, including those that provide healthcare training. In nursing field, the discussion about ageism has traditionally been linked to the care provided to older people, with evidence that curricular components focused on gerontology can reduce prejudices<sup>(7-8)</sup>. However, investigations into organizational ageism are still incipient, especially in nursing education, an area where values and attitudes will influence future professional practice.

Therefore, this study aims to understand how students perceive organizational ageism during their undergraduate studies, providing an opportunity to identify weaknesses in nursing training and to propose educational strategies to promote the construction of inclusive and intergenerational practices in the field of health.

## METHOD

This is a descriptive, cross-sectional study with a quantitative approach, conducted between September and November 2023 at a nursing school of a public university in the city of Rio de Janeiro, following the recommendations of the STROBE checklist for observational studies.

The population consisted of 296 students from the first to the eighth semester of the undergraduate nursing course. Sample size calculation considered a finite population, with sampling error of 5%, and a confidence interval of 95%, resulting in a minimum of 123 participants. The final sample consisted of 166 students. Students enrolled in the

academic periods were included, and those on leave of absence for any reason were excluded.

Data collection took place in person, inside the classroom, with the nursing school's consent, without participant's additional displacement, using two instruments: (1) a socio-demographic and academic characterization form (sex, age, race/color, education, enrollment period) developed by the researchers; and (2) the Ageism in Organizational Context Scale (EACO), composed of 13 items distributed across two domains (negative attitudes and positive attitudes) assessed on a five-point Likert scale<sup>(9)</sup>.

The EACO presents evidence of content and internal structure validity, confirmed by confirmatory factor analysis in samples of Brazilian workers, with adequate fit indices (CFI=0.93; TLI=0.91; RMSEA=0.05) and satisfactory internal consistency (Cronbach's alpha ranging from 0.70 to 0.82). Considering that the psychometric evidence does not support the interpretation of a robust overall score, the analysis of responses in frequency was chosen, which allows for a better representation of the pattern of positive and negative attitudes<sup>(10)</sup>.

Data were organized in an electronic spreadsheet (Excel 365) and analyzed using SPSS software (IBM, version 22). Descriptive statistics (frequencies, means, and measures of dispersion) and inferential statistics were performed. To verify the association between the graduation period and the scores of positive and negative attitudes, Spearman's correlation coefficient was applied, as it was an ordinal variable derived from a Likert scale and a non-normal distribution, which makes this test more appropriate for identifying relationships between constructs. The following parameters were adopted for interpreting the magnitude of the effect: weak ( $0.10 < \rho < 0.30$ ), moderate ( $0.30 < \rho < 0.50$ ), and strong ( $\rho > 0.50$ )<sup>(11)</sup>.

The study complied with the ethical standards for research involving human beings (CNS Resolution No. 466/2012), having been approved by the Institution's Research Ethics Committee and authorized by the local dea. All participants signed the Informed Consent Form.

## RESULTS

Among the 166 students who participated in the study, with a mean age of 22.8 years (minimum 18; maximum 43), mostly female (83.1%), single (94.6%), and self-declared white (54.8%). The average number of children was 0.4 (ranging from 0 to 4), and 94% were in their first undergraduate degree. The distribution by academic year was balanced across the eight years, ranging from 9% (5th year) to 15.1% (2nd year), as shown in Table 1.

As can be seen in Table 2, in the EACO, 83.1% of students did not show negative attitudes towards older professionals, while 42.8% expressed positive attitudes.

In the inferential analysis, the only factor associated with ageist attitudes was the academic period. An inverse, albeit weak, correlation was identified between the period of study and both negative ( $\rho = -0.217$ ;  $p = 0.002$ ) and positive ( $\rho = -0.261$ ;  $p < 0.001$ ) attitudes. This finding suggests that, as they progress through their undergraduate studies, students tend to reduce their negative attitudes but also demonstrate a decline in positive attitudes towards older professionals.

**Table 1** - Nursing undergraduate students' sociodemographic and academic variables characterization. (n=166). Rio de Janeiro, RJ, Brazil, 2023

Sociodemographic and academic variables		n	f(%)
<b>Gender</b>	Female	138	83.1
	Male	27	16.3
	Other	1	0.6
<b>Race/Color</b>	White	91	54.8
	Black	75	45.2
<b>Scholarship</b>	Undergraduate	156	94.0
	Second undergraduate	9	5.4
	Not declared	1	0.6
<b>Age (years)</b>	$\mu=\pm 22.86$	Min = 18	Max = 43
<b>Enrolled semester</b>	First (1th year)	22	13.3
	Second (1th year)	25	15.1
	Third (2th year)	16	9.6
	Fourth (2th year)	20	12.0
	Fifth (3th year)	15	9.0
	Sixth (3th year)	22	13.3
	Seventh (4th year)	24	14.5
	Eight (4th year)	22	13.3

**Notes:**  $\mu$  - mean; Min - minimum; Max - maximum.

**Table 2** - Nursing undergraduate students' positive and negative attitudes (n=166). Rio de Janeiro, RJ, Brazil, 2023

Variables	Yes	No	p-value ( $\rho$ )
	n (%)	n (%)	Enrolled semester
Positive attitudes	71 (42.8%)	95 (57.2%)	0.0003 (-0.261)
Negative attitudes	28 (16.9%)	138 (83.1%)	0.0024 (-0.217)

**Notes:**  $\rho$  - Correlação de Spearman.

On the other hand, no significant associations were observed between sex, age, marital status, color/race, number of children, or type of degree and the positive or negative attitudes measured by the scale, demonstrating that the sociodemographic profile did not exert a relevant influence on the EACO results, with the academic period being the variable that best explained the differences identified.

## DISCUSSION

Based on the findings, it is observed that the sociodemographic data are consistent with a 2021 study on female representation in universities, which revealed that, although women are the majority in higher education, the courses with the highest concentration of female students are those focused on teacher training, humanities, and biological sciences applied to health. This, in theory, perpetuates the traditional sexual division of labor, in which women are frequently responsible for education and care. The proportion of men in the profession is 16.3%<sup>(12)</sup>. This reality, implicitly, perpetuates a paradigm that hinders the achievement of gender equality in the academic environment<sup>(13)</sup>. Regarding age, the academic environment is predominantly composed of young people. This also explains the result of the study that analyzed the sociodemographic profile of nursing graduates, highlighting the rejuvenation in the nursing category in which 25.3% were professionals aged up to 30 years and 61.7% up to 40 years<sup>(14)</sup>.

Despite advances in the field of diversity and inclusion, the age factor still occupies a marginal position in organizational debates. Frequently, the exaggerated valorization of discourses that praise innovation, flexibility, and operational agility ends up reinforcing stigmas against older professionals by associating such characteristics exclusively

with youth. This implicit bias manifests itself in selective recruitment practices, in the limitation of promotion opportunities, in the exclusion from training processes, and in early dismissals, thus consolidating structural barriers to the full insertion and permanence of the aging workforce in the labor market<sup>(15)</sup>.

In the context of nursing, from an organizational standpoint, older professionals frequently face stigmas related to the supposed loss of physical vigor, slowness in the execution of tasks, resistance to technological innovation, or less adaptability to institutional changes. These perceptions, often implicit in managers' decisions, result in the exclusion of these professionals from more complex activities, in limitations to access to leadership positions, and in their early or unjustified dismissal<sup>(16-17)</sup>.

Such practices reproduce a productivity logic that values youth as synonymous with efficiency, to the detriment of experience, accumulated clinical knowledge, and the judgment capacity developed over the years. This process compromises not only the dignity of the elderly worker, but also the collective potential of intergenerational teams, which could benefit from the exchange of knowledge and the complementarity of skills<sup>(18)</sup>.

Although most students consider themselves white, the findings are close to the number of people who self-identify as Black and Brown (45.2%), a significant finding when considering the previous years of quota policies within public universities, which is seen as an extremely important factor in the pursuit of social equality<sup>(19)</sup>.

However, although these numbers are encouraging, they still do not fully reflect the social profile of Brazil. According to a study by the IBGE, carried out in 2022, about 92.1 million people (or 45.3% of the country's population) declared themselves Brown. Another 88.2 million (43.5%)

declared themselves white, 20.6 million (10.2%) black, 1.7 million (0.8%) indigenous, and 850,100 (0.4%) Asian. Thus, more than half of the population (55.5%) self-identifies as black<sup>(20)</sup>. Therefore, the disparity between representation in universities and the country's demographic composition highlights the continued need for affirmative action and inclusion policies. Furthermore, it is crucial to analyze not only access but also the retention and academic success of these students, ensuring that they have the same opportunities for graduation and entry into the job market.

However, when analyzing the profile of Brazilian nursing from the perspective of class, gender, and race/skin color, it is found that 85% of nursing professionals are female and 53% identify as black (11.5% black and 41.5% mixed race). Most of these professionals are black women, who predominantly occupy the roles of nursing assistants and technicians<sup>(21)</sup>. These data reflect structural racism, sexism, and social inequality in Brazilian society, since the higher the professional hierarchical position, the lower the representation of Black people. These issues are interconnected with socioeconomic inequalities, highlighting the need to promote equal opportunities and combat racism and sexism through public policies and awareness<sup>(22)</sup>.

Understanding aging as a multifaceted process, involving biological, psychological, and social dimensions, is fundamental to deconstructing the negative representations historically associated with old age. Age discrimination, or ageism, is revealed not only in interpersonal relationships, but also in organizational and institutional systems that reproduce exclusionary norms<sup>(18)</sup>. This is a phenomenon that, by naturalizing the inferiority of older people, compromises intergenerational equity and weakens the social fabric in the face of the undeniable increase in population longevity.

There is a greater number of responses from second-year students (15.1%) and the smallest from fifth-year students (9%). It is noteworthy that the median number of people present in each class is about 36 students, however, in the fifth year, there were 27 students enrolled.

Regarding conducting studies including undergraduate students as research subjects and as data collection agents, an article published in 2020 analyzed students' views on scientific production and how this process is often late within undergraduate studies. It was found that most academics begin their contact with scientific research during the development of their final course work. Thus, they often fail to see themselves and collaborate as research subjects, which can reduce their interest in the field<sup>(23)</sup>.

Furthermore, another relevant factor is the approach to topics related to the health of the elderly during undergraduate studies. In the chosen research scenario, the study that addresses the health of the elderly begins in the fourth semester and is more focused on the process of health promotion and prevention of chronic non-communicable diseases, but without a direct focus on issues of prejudice to which the elderly person may be subjected.

Regarding organizational ageism in the context of student training, there is a scientific gap on the subject. To combat such prejudices and broaden positive attitudes towards the elderly, it is essential to adopt a multifaceted approach that involves education, inclusive policies, and cultural change. Creating educational programs and awareness campaigns is crucial to dispel myths about old age, highlighting the capabilities and contributions of older individuals<sup>(24)</sup>.

The results reveal an interesting disparity between the absence of negative attitudes and the limited presence of positive attitudes towards the elderly.

That said, according to the EACO, the items on the **negative spectrum** most frequently answered with a tendency toward prejudice were: “*Older workers tend to get sick more easily*,” “*Older workers take longer to perform tasks in the workplace*,” and “*Younger workers are more productive than older workers*”<sup>(21)</sup>. It is emphasized that it is important to reflect on how negative stereotypes associated with advanced age are related to illness, disability, low productivity, and dependence in general.

As for **positive attitudes**, the most frequent items were: “*Older workers are more committed to their work than younger workers*,” “*Older workers are more skilled at solving problems than younger workers*,” and “*Older workers are more persistent than younger workers*”<sup>(10,22)</sup>. It is observed that it is possible to interpret that the positive description of older people characterizes them as wise, responsible, kind, and communicative.

In the analysis of the correlations, it can be inferred that the shorter the undergraduate study period, the higher the average scores for negative attitudes (Spearman's rho=-0.217; p=0.00217) and positive attitudes (Spearman's rho=-0.261; p=0.0003), suggesting that there may be a transformation in students' views on the evaluated phenomenon, although there are still aspects to be clarified.

Despite apparent improvement in negative ageist attitudes in the organizational context during undergraduate studies, with a reduction in average scores as the semester progresses, the average scores related to positive attitudes also tend to decrease, with a higher average score at the beginning of undergraduate studies. As this is a topic that has been poorly explored in the literature in this educational context, further studies are needed for a better understanding of this finding.

To combat such prejudices and broaden positive attitudes towards older adults, it is essential to adopt a multifaceted approach that involves education, inclusive policies, and cultural change. Creating educational programs and awareness campaigns is crucial to deconstructing myths about old age, highlighting the capabilities and contributions of older individuals<sup>(24)</sup>.

It is necessary to recognize that the approach to ageism cannot be limited to denouncing its deleterious effects. A strategic response requires, first and foremost, overcoming a negative and passive attitude towards aging. Accepting old age as an inseparable part of the human life cycle implies recognizing its singularities, including its physical limitations, without reducing the elderly person to their organic functionality. Longevity, far from being an obstacle, carries with it potentials that should be valued: accumulated experience, emotional maturity and tacit knowledge, often essential for complex decision-making and conflict mediation in organizations<sup>(18)</sup>.

In some cultures, aging is understood under an ancestral logic, in which the elderly person occupies a prestigious place as guardian of collective memory, tradition, and practical wisdom. This contrast highlights the social construction of old age and demonstrates that age stigmas are products of a Western cultural logic, centered on productivity and the aesthetics of youth.

In addition, inclusive policies should promote the par-

participation of older people in all aspects of society, including the labor market, through incentives for hiring, continuous training, and adaptation of workplaces. Promoting active and healthy aging, investing in health and well-being programs, and valuing the experience of older people are fundamental measures that should be prioritized in public policies and social strategies. These combined actions can build towards a more inclusive and just society, in which old age can be viewed more positively and respectfully<sup>(18)</sup>.

### Study Limitations

The study is limited by its single-scenario nature, with a particular training curriculum, meaning the findings may not be similar to those found in other training programs and locations. Furthermore, the inferential power is limited by the characteristics of the instrument used to assess the outcome variable. The tests used do not establish causal relationships.

### CONCLUSION

Results highlight the reduction of negative attitudes and the limited presence of positive attitudes towards older professionals in the organizational context among students during their undergraduate studies at a nursing college. No significant associations were observed between other socio-demographic variables and the related attitudes.

This indicates an urgent need for more comprehensive and emphatic educational and cultural interventions on this topic throughout academic training, focusing on reducing organizational ageism, as well as promoting a more inclusive and respectful work environment for all members of the nursing team, regardless of age, where nursing students spend a significant part of their training.

Within the university, in both theoretical and simulation-based teaching environments, such measures are equally indispensable, considering that ageism is an issue that is

rarely addressed both in academia and in society in general. This silent prejudice affects individuals in various contexts, including the job market. Therefore, a society that aims to be just and inclusive must ensure that each phase of life, from childhood to old age, has legitimate space for personal, professional, and social development.

To this end, it is imperative to adopt integrated and intersectoral strategies that encompass political, economic, cultural, and institutional dimensions. Addressing ageism involves identifying its structural and symbolic determinants, which includes normative practices, organizational values, and ineffective or absent public policies. More than combating exclusion, it is about building a culture that recognizes aging as a natural, legitimate process full of possibilities, and not a stage of reduced social or professional life.

By creating a culture that values generational diversity, it is also possible to improve the quality of care provided, as well as to foster a healthier and more productive study and work environment for all involved.

It is therefore evident that it is essential to promote research and implement changes in the academic environment, especially in curricular components, focusing on reducing negative attitudes and promoting positive attitudes towards age. This can contribute to better preparing students for their future professional lives and their entry into the job market.

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### CONFLICT OF INTERESTS

Authors declare no conflict of interests.

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