

# **How Ageist is Wales? – Executive Summary (Accessible Edition)**

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Ageism is a prejudice by one age group towards other age groups and it can also be internal. It is unique because everyone will experience ageism, unlike racial or sexual discrimination. Ageism grows in importance because our population is getting older. By 2032, over half of the UK will be over 50. Age discrimination is illegal in the UK, and the Welsh Government has tried to make Wales more age-friendly through policies and organisations like the Older People's Commissioner for Wales.

Ageism, like other forms of discrimination, is based on individual and social attitudes. This report shows findings from the academic literature on how ageism affects older people and what can be done to help.

To do this, we searched four databases and reviewed documents provided by staff working for the Welsh Government. We found 2231 documents, and 75 were included in the report.

In work, ageism prevents inclusion of older workers. Often, colleagues will only interact with people who are a similar age to them. Older people have a harder time finding work. They are invited to interviews 21.2% less frequently than younger people. They are also offered jobs that pay 15.7% less. Older migrants with limited English skills also have problems in finding work outside of their community.

The law does not protect women experiencing menopause enough. Employers are indirectly protected from wrongful termination lawsuits surrounding menopause if they do not have menopause policies or discussions. In 2014, the Equality Act 2010 was changed to prevent claims on 'dual discrimination', which stops women from seeking action against gender and age discrimination when fired for experiencing menopause.

Employers are reluctant to train older workers because they believe they will soon retire. Flexible working is difficult for blue-collar workers. Many workers believe they should retire between 60 and 65, despite the state pension age being higher. It is important to remember that older people benefit the economy in ways other than paid work. Examples include caring for children and adult loved ones and volunteering.

The law does not protect older people on the basis of age enough, despite age discrimination being illegal. Hate crimes based on age carry a lesser sentence than racial hate crimes. Older domestic abuse victims are often denied access to criminal or civil justice.

Ageism harms our health. It increases the risk of frailty, and older people report feeling ignored by doctors. Half of doctors believe the NHS is “institutionally ageist”. Institutional ageism is where the culture and policies of an organisation are ageist, shown through collective behaviour and practices. In the pandemic, older people’s human rights were compromised. For example, do not resuscitate orders were given without consulting patients or families. Untested Covid patients were also moved into care homes, spreading infection among the most vulnerable.

Sexual health is also an area of growing concern. Diagnosis of STIs (Sexually Transmitted Infections) are increasing amongst older people, whilst they are decreasing for other age groups. Often, health professionals are reluctant to discuss sexual activity and health with older patients.

Political attitudes towards older people are negative. Older people are shown as a burden on society with ageist terms like “grey tsunami” which suggest there are too many older people for the the UK to manage. This

blames older people for social problems, increasing hostility between generations.

Advertising is not friendly towards older people. Adverts rely on stereotypes to be effective. Beauty adverts show youthfulness as preferable to aging skin and pressure people to purchase anti-ageing products. Despite this, most older people are comfortable in their own skin. However, women of all ages and younger people are more insecure. Adverts must be authentic and representative of older people's diverse experiences. Currently, adverts are dominated by stereotypes of frailty, decline and death.

In health and social care, students are reluctant to work with older people. This is despite most of them having a positive view of older people. Ageism makes doctors less likely to respond to minor health issues, as they often view chronological age and illness as the same. Older LGBTQ people are often invisible in care homes which fail to create an LGBTQ friendly environment. Many people may return to the closet.

Our review had many recommendations for developing an anti-ageist campaign. Importantly, policy alone cannot tackle ageism. Good campaigns should involve individuals through bonding with those of different ages and social spaces tailored towards interaction with different ages. Another important aspect is awareness, especially on issues like older people's sexuality and marginalised communities. There should also be more discussion around older people and domestic abuse.

We must also change the way older people see themselves by promoting strengths, activity and continued independence. This maintains purpose in older people's lives. We must also emphasise that older people can still

make great achievements in their future, whilst also recognising the achievements of the past.

Strong messages are needed. Messages must: recognise individual differences, recognise the greater sense of purpose we get as we age and emphasise the skills and strengths of older people. We must forge a collective understanding that longer lives are an opportunity rather than a burden.