



STARBUCKS[®]
GLOBAL ACADEMY

Resource Toolkit for
To Be Welcoming Curriculum

WELCOMING DIALOGUE ON AGE BIAS



OVERVIEW

Public spaces and third places are more welcoming to all when we celebrate our shared humanity. By understanding each other, we deepen connections. To encourage more meaningful conversations on this topic, leaders at Starbucks partnered with experts at Arizona State University to create To Be Welcoming, a 15-course curriculum designed to address bias through understanding the human experience.

Below are 4 core resources from the “Welcoming Dialogue on Age Bias” course. This learning experience presents key terms related to age and ageism, facts about the future need for caregivers in the United States, an exploration of cross-cultural perspectives on aging, and a guide to encourage dialogue on age bias. Learn more about the program and register for courses at [ToBeWelcoming.com](https://www.tobewelcoming.com).



RESOURCE 1

Key Terms and Concepts

RESOURCE 2

The Future of Caregiving in the United States

RESOURCE 3

Cross-Cultural Perspectives on Aging

RESOURCE 4

Dialogue Challenge

We will begin by defining key terms and concepts related to age and age bias. These terms have been defined specifically to fit the context of this course, and will be used to enhance your understanding of the course topic.



AGING SUCCESSFULLY

As life expectancy grows, it is important that quality of life continues into the later years. The model for aging successfully is to live without disease or disability, with high cognitive and physical abilities, and with meaningful social interactions.



AGEISM

Stereotyping and prejudice against people based on age.



LIFE STAGES

Refers to the different stages of life. Research generally categorizes older people as "young old" (60-74), "middle old" (75-84), and "oldest old" (85 and older).



OLD

Old refers to someone who has lived and is no longer young. We consider antiques either old and valuable or antiquated and useless. In Indigenous communities, old refers to wisdom, experience, and knowledge, as well as tradition.



WISDOM

The ability to look at things from a different perspective acquired through experience; one of the widely recognized positive aspects of aging. It is important not to use the label "wise" to expect passivity, which could deny someone their right to be angry or passionate.



INFANTILIZATION

The act of denying the elderly their dignity by treating them like they are not capable of caring for themselves, or talking to them as if their children.



DEMENTIA

A disease that interferes with memory and the ability to perform basic daily functions. For those with these disorders, clear communication is needed, but be careful not to infantilize them. Alzheimer's disease is a form of dementia.



FRAILITY

Frailty refers to the increased risk of being hurt by accident, falling, and breaking something. Having higher risk is not the same as being frail or fragile, and most older adults are neither of these things.



ISOLATION

Isolation refers to the state of being alone. Isolation is a growing risk for older adults as more people age and live further from friends and family. Isolation is closely linked to depression.



FINANCIAL EXPLOITATION AND NEGLECT

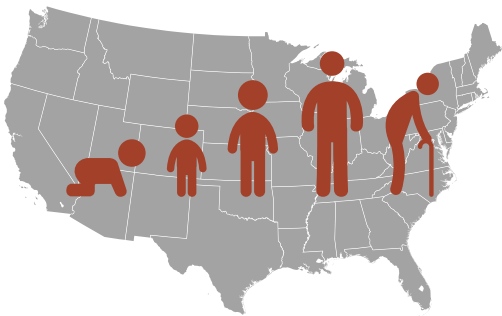
When someone takes financial advantage of older adults, who may be overly trusting or under pressure to comply.

Summary: Bias of any kind generally stems from ignorance about situations different from the norm, which can lead to prejudice against others. These key terms will help you understand and demystify the "unknown," as well as give a glimpse of the trauma that certain groups of people still endure due to bias.

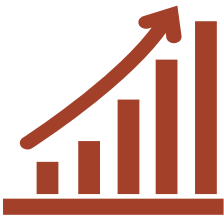
Family caregivers are more and more common in the United States. For family caregivers, issues of burden, stress, and self-care are important. Being able to get away to enjoy a cup of coffee is a rare privilege sometimes, and just as with parents of young children, those who care for other adults deserve respect, support, and empathy for taking on the heroic and selfless task of supporting another adult’s dignity and well-being.

THE FUTURE OF CAREGIVING IN THE UNITED STATES

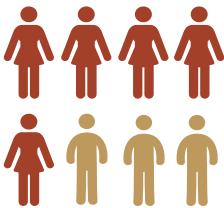
As the average age climbs, there are more people who need care due to advanced old age, cognitive disorders, and late stage illnesses such as cancer and kidney failure.



More families are taking care of people in their homes, and people are “aging in place” rather than moving to retirement communities. Quality of life is one reason older adults choose to stay in their communities.



Over 34 million people in the US have provided care for another adult over the age of 50 in the last 12 months.



More than half of these care providers are women, and most of them are spouses or partners, although more and more frequently adult children care for their parents.



Our culture’s gender roles demand that women take on these caregiving responsibilities, and when different needs arise in the family, women are expected to step aside from their careers to meet those needs.



By reducing wages and savings for retirement, this adds financial risk for family caregivers later in life.

SUMMARY

The risk of financial destabilization is compounded for women of color and other members of marginalized genders, LGBTQIA+ identities, and classes, who due to structural inequalities in our country will have a harder time hiring private nurses or nursing homes, leading to higher rates of stress and burden.

The population of people aged 60 or over is growing faster than all younger age groups all over the world. According to the United Nations, "Population ageing is poised to become one of the most significant social transformations of the twenty-first century, with implications for nearly all sectors of society, including labor and financial markets, the demand for goods and services such as housing, transportation and social protection, as well as family structures and intergenerational ties."

There are cross-cultural differences in how aging is viewed. The elderly are highly valued in many cultures and in some others, aging is depicted negatively. Below are four examples of how the elderly are treated in different cultures around the world.



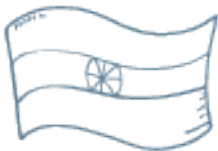
CHINA

The "Elderly Rights Law" was passed in China to ensure that senior parents are not ignored by their adult children.



JAPAN

Japan celebrates the third Monday of September as "Respect for the Aged" Day.



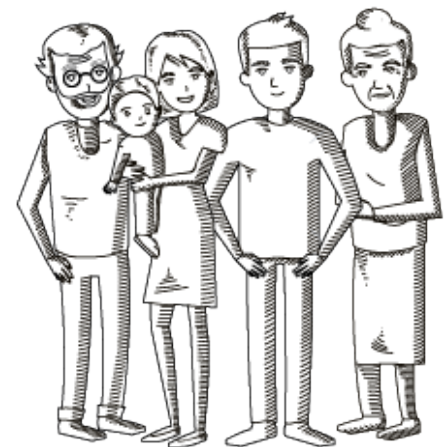
INDIA

In India, the oldest person in a joint family unit (extending family living together) acts as the head of the family.



SCOTLAND

"Reshaping Care for Older People" is an initiative by the Scottish government. The initiative is aimed at listening to older adults in order to provide them with better care.



SUMMARY

In the United States, we often have a skewed vision of what it means to age. This leads to numerous incorrect assumptions about abilities, knowledge retention, physical capacity, and lifestyles. However, views of aging vary across cultures.

Talking about age bias requires a complex and creative communication skill set. This series introduced you to the role civility, empathy, and dialogue play in navigating critical conversations around bias. As you practice these skills, your awareness will increase and you will get better at engaging in critical conversations on sensitive topics.

It can be difficult to start a dialogue on these issues. Use the following list of questions to guide your conversation on age bias.

DIALOGUE CHALLENGE

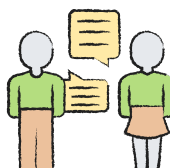
I'm learning about the role civility, empathy, and dialogue play in critical conversations around age bias in the To Be Welcoming Series featured on Starbucks Global Academy. One of the activities is a dialogue challenge where I am encouraged to engage in dialogue with a close family member or friend on their perceptions of aging. Do you mind if we discuss your perspective? Thank you.



What are your impressions about growing older?
What do you think about older people?

What or who influenced you the most about your views of growing older and older people?

How have you seen older adults portrayed in the media?

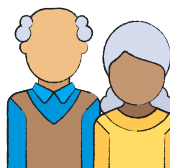


Did your parents ever discuss their perspectives about aging and older adults? If so, what were their views?

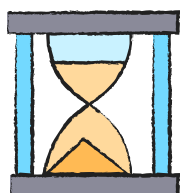


Do you think your perceptions about older adults match with other people's views in society?
What about the perceptions of people in your social circles and community?

How do you think most Americans perceive older adults?



What is your experience with older adults from different backgrounds?
How are they similar to one another and from you?



Who is an older adult that has had a key influence in your life?

What similarities do you believe you share with people who are older adults?

COURSE AUTHORS



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David W. Coon is associate dean of research initiatives, support, and engagement and professor in the College of Nursing and Health Innovation at ASU. After receiving his Ph.D. from Stanford University, he was the associate director of the Older Adult Center of the VA Palo Alto Health Care System and the Stanford University School of Medicine and research scientist at UCSF/Mt. Zion Institute on Aging.

Professor Coon designs and evaluates interventions, such as CarePRO and EPIC, that focus on culturally diverse groups of midlife and older adults facing chronic illnesses (e.g., dementia, cancer, depression) and their family caregivers. Several of these empirically based treatments have been recognized by the American Psychological Association, the Substance Abuse and Mental Health Services Administration, the Administration on Aging's Alzheimer's Disease Supportive Services Program, and other entities. A fellow of the Gerontological Society of America and a PLuS Alliance Fellow, he has had his work funded through federal and foundation grants. Professor Coon and his community partners received The Rosalynn Carter Institute's 2013 National Leadership Award in Caregiving for CarePRO as well as the ASU President's Medal for Social Embeddedness.



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Dr. Chapple has worked as a social worker in the areas of mental health, crisis intervention, education and disabilities. Her areas of research and teaching include Social justice and human rights, deafness and disability studies and cultural competent social work practice. She received her B.S.W., M.S.W. and Ph.D. in Justice Studies from Arizona State University. Her dissertation was titled: Being a Deaf Woman in College is Hard. Being Black Just Adds: Understanding the Complexities of Intersectionality.