

## **Ageing and Ageism in Naga Society: A Study on Determinants**

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### **Abstract**

*While the chronological process is an inevitable part of human life, the problems associated with ageing appear to be a product of modern era. As of 2022, with about 10 per cent of population above 60 years of age, India is considered a greying nation which all the more requires for review of the status of older adults from different perspectives. While traditional Naga society had assigned a place of honour and respect to the older people as they played a valuable role in transmission of cultural heritage, rapid social and economic changes are poised to have severe implications on the circumstances under which they live in contemporary Naga society. There prevails the stereotype of older adults as unproductive human resource which often leads to them being as burden towards society and redundant. Unlike other forms of discrimination such as racism, sexism, etc., ageism has not received much academic attention particularly in Naga society. Ageism can significantly impact the experiences of the older adults in terms of economic opportunities, access to health care and overall wellbeing. In light of this, the present paper explores the attitude of the society towards the older adults with the objective of arriving at a more nuanced understanding of the issue of ageism in the Naga society. As Naga society straddles the transition between traditionalism and modernity, bridging the knowledge gap of this significant segment of population through critical sociological engagement can yield important policy implications in line with the challenges and prospects of the Act East Policy.*

**Keywords:** Population, ageing, ageism, older adults, Nagaland.

## **Ageing and Ageism in Naga Society: A Study on Determinants**

### **Introduction**

The world population is undergoing a profound transformation, marked by a steadily increasing proportion of older adults as compared to younger cohorts. According to the United Nations Population Fund (2024), the global percentage of persons aged 65 and above is currently about 10.3% and is expected to rise to approximately 20.7% by the year 2074. Factors such as fall in fertility rates and decline in mortality rates accentuated by improved health care services, diets and living conditions have been attributed to population ageing globally. Population ageing is no longer a concern confined to developed countries, but even developing country like India has begun to experience population ageing and its effects through implications across social welfare, health care and economic aspects. In fact, as per the definition of the United Nations, any country with proportion of population aged 60 years and above crosses 7% is considered as 'ageing' or 'greying' nation. According to the report by International Institute for Population Sciences & United Nations Population Fund (2023), India has been undergoing rapid population ageing since 2010. Proportion of the population of the country aged above 60 years, which was approximately 8.6% during the 2011 census, has increased to 10.5% as of 2022, and is projected to exponentially rise to 20.8% by 2050.

Population ageing in itself is a positive aspect when it results from factor such as increase in longevity; however it becomes a concern when at the macro level, countries starts to experience increased economic challenges as a result of lower economic growth, higher strain and costs on the health care sector and labour shortages and so on. Even at the micro level, population ageing have shed light on the different aspects of life that older adults experience day in and day out. Being out of the work force, declining health condition, low income and savings, unstable living arrangements and care giving can significantly impact their wellbeing.

The concern however in this context is how institutions or individuals in the society perceive the older adults, as such perceptions can also affect their experience of ageing process and overall outlook of life. In this aspect, population ageing has also shed lights on prevailing stereotypes of how older people are viewed or looked upon by the younger people in the society. This attitude towards the older adults either positive or negative purely on the basis of age is what came to be termed as ageism. In recent years efforts have been given to undertake studies related to ageism because, society in general devalues older adults due to their perceived redundancy which often leads to them being generalized as burdens and not as productive human resources in society.

Conceptually, the term ageism was first defined as a form of prejudice or discrimination based on age and is directed by one age group towards other age groups, usually more often

by younger people towards older people (Butler, 1969). And now ageism in recent years has become so evident that it has also been considered as the third great “*ism*” following racism and sexism (Palmore, 1999). And worldwide, many countries are experiencing population ageing and because of which greater interaction among younger and older people cannot be ignored anymore and unless steps to remove the notions and stereotypes about older people which are unfortunately rooted deeply in the society, ageism would continue to be a common destructive and rampant social problem.

According to WHO (2021), ageism against older people is very much prevalent across the world, be it in health sector, work place, policies or various aspects of day to day life and affecting billions of people. The scale of ageism is so rampant that it was observed that at least one in two people have ageist attitude towards older people. And at the same time one in three older people have experienced ageism in various forms. For instance, in the health sector ageism occurs when health care is rationed based on age and in the work place older people may face discrimination during recruitment, employment and retirement. Even in the media older people are either underrepresented or generalized in a negative light. Across 57 countries the study indicated that rates of ageism were highest among the low and lower middle income countries as such India, South Africa, Algeria, Egypt, Thailand and Nigeria.

Ageism towards older people also manifests in various forms, encompassing both positive and negative stereotypes. These stereotypes often depict older persons as kind, wise, experienced, dependent and respected, but also as frail, unattractive, technologically challenged, resistant to change, dependent and unproductive (Palmore, 2005; Bugental & Hehman, 2007).

Given these conditions, despite considering having culture and traditions where high regards for older people in the community are shown, even Naga society cannot be completely free from harbouring ageist attitudes against older people as some forms of prejudice or stereotypes can be expressed explicitly or implicitly. The Nagas are a very closed knitted tribal society with a sense of strong community belongingness. Elders are someone who is highly regarded and respected by the community members and considered to have an important role and position in the society. As such, this paper is an attempt to study how given the rising number of older people in the society continue to increase, ageism towards older people manifests across various socio-demographic characteristics among the younger cohorts.

### **Determinants and effects of ageism towards older adults**

Various socio-demographic and economic factors and existing cultural settings in which individuals live or were brought up have been known to have a direct influence on how ageism towards older people are exhibited. According to Garrido *et al.* (2019), in their study of ageing and incidence of ageism in Spain among different age groups, it was observed that one of the main

reasons for continued wide spread was due to very low knowledge about ageing among the younger age groups of the population. The study also observed that age was a significant determinant of ageist attitude, in that older adults held more negative perception against ageing than the younger individuals. In a very elaborate review on the determinants of ageism from previous literatures, Marques et al. (2020) found that about 13 factors were closely associated with ageism against older adults. Out of the various variables, most prominent items such as age, years of education and marital status were mainly negatively associated with ageism. Whereas, factors like culture and ethnicity, area of residence whether rural or urban and behavioural and psychological factors such as fear of death, anxiety regarding ageing were found to have mainly positive association with ageism. Ha & Kim (2021) too, in their study on the factors affecting ageism among Korean nursing students reported that age was one of the main demographic variable related to ageism, where older nursing students were more ageist than compared to younger students.

Ageism, whether conscious or unconscious, can profoundly impact the daily lives of older adults. According to Nolan (2011), any experience with ageism will negatively impact older people's view on life and may feel like outsiders who are invisible to the society and ultimately diminish the sense of belongingness. It was particularly identified that ageism was highly prevalent in health care practice where older people were rampantly discriminated against based on their age resulting in under treatment, receive lower standard care, delay in diagnosis, treatment and may also not follow same medical protocol for older adults as done for the younger patients.

Study on the global reach of ageism by Chang *et al.* (2020) also observed that ageism be it institutional, interpersonal or self-directed, has been found to be negatively impacting the older people in all the aspects of life in which it is manifested including health, workplace and everyday social life.

Raynor (2015) observed that impacts of ageism are commonly found in work place, healthcare, media, politics and in civil engagements. The negative impacts of ageism usually take the form of finding difficulty to get gainful employment despite willing to work, being dismissed by health care professionals due to frequent health concerns and normally being portrayed in a negative light in media. Even in politics, older people running for office are questioned on their age and the ability to perform under intense pressure of running the government. Many a times, being generalized and looked upon as old and useless, society fail to harness the knowledge and wisdoms of the older people. Lyons *et al.* (2017) studied the relationship between experience of ageism and mental health outcomes such as depression, anxiety, stress and positive mental health among older adults above 60 years in Australia. In a correlation analysis between ageism and the mental health outcomes, experience of ageism was significantly linked to effects in all the factors of mental health, where higher levels of depression, anxiety and stress was observed.

Given the above discussed premises, in this study we have tried to understand the overall

attitude of the respondents between the age of 12 to 59 towards the older adults above 60 years of age in Nagaland, a tribal state located in the North-Eastern region of India. In order to do that this study seeks to observe the characterization of the older adults in the Naga society and study the differences in the attitude towards older adults based on socio-demographic factors such as age, gender, marital status, education and co-residence with older adults in the family.

### **Data and Methodology**

Ageism can either be directed towards others or be self-directed and in this study we are concerned with the former, particularly by the younger people towards the older adults in the society. The present study is based on a cross sectional primary data collected through online survey method from a total of 220 respondents ranging between the ages of 12 to 59 years. Even though community was not a part of any variable, in order to justify the research objectives it can be stated that all the respondents were from various Naga tribes spread across the state of Nagaland.

In order to draw a more robust analytical comparison among the respondents, the sample was categorized into three different age groups identified as respondents belonging to Generation Z (12 to 27 years of age), millennials (28 to 43 years of age) and Generation X (44 to 59 years of age) respectively (henceforth Gen Z, millennials and Gen X). Besides age, other socio-demographic characteristics such as gender, marital status and highest level of education and current co-residence with elderly were defined and included as the main predictor variables for our regression model.

To measure the level of ageism among the respondents a 4-point Likert scale based on Fraboni Scale of Ageism (Fraboni, Saltstone, & Hughes, 1990) was implemented in the study. Scores for responses in the scale were coded as 1 (Strongly disagree), 2 (Disagree), 3 (Agree) and 4 (Strongly agree) respectively and for questions reflecting positive attitude were reverse coded during the analysis process. Scores of each respondent for all questions were summed up and was placed within the range of total possible score of 29 to 116, where higher score indicate a higher level of ageism.

To test the reliability of our Fraboni Scale of Ageism (FSA) for measure of ageist attitude, Cronbach's Alpha test was done resulting in a coefficient alpha value of 0.85 indicating a reliable correlation among the items of the scale and that the grouped values measure the referenced variable. To examine the determinants of ageism towards older adults, multiple linear regression using the Ordinary Least Squares (OLS) method was applied. All tests and analysis was done using SPSS 20.

## Overview of population ageing in Nagaland

This section provides an initial preview of the population ageing status in the state of Nagaland since 2011 as recorded by the official Census of India. As seen in Table 1, the population of Nagaland can be considered a young population as per the estimates of 2011 Census where people above 60 years of age consisted of about 5.19% of the total state population. Even though data indicated a fluctuation since 1991 census, in recent years there has been an increase in proportion of population above 60 years over the past decades, as during 2001 census the percentage of individuals above age 60 was about 4.5% of the total population. Nevertheless, along with the country and the rest of the world with a better health facilities and care, access to resources, etc. proportion of people above 60 years of age is expected to increase even more.

We can also see that number of people living beyond 80 years of age may not be increasing, but number of people crossing the threshold of age 60 sure is increasing decade after decade, which to some extent does affirm that within the next two to three decades the proportion of older adults above 60 years will grow even more significantly. As of 2011, the state of Nagaland also had more older males (53.33%) than older females (46.67%). However, percentage of older males has been declining since 1991 at 58.67% to 56.17% in 2001 to 53.33% in 2011. On the other hand, proportion of older females has been rising steadily from 41.33% in 1991 to 43.83% in 2001 and to 46.67% in 2011.

**Table 1: Nagaland's population above 60 years for 1991, 2001 and 2011 censuses**

Age group	Census 1991 (%)			Census 2001 (%)			Census 2011 (%)		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
60-69	21063	15274	36337	29677	23027	52704	32484	28278	60762
	(57.97)	(42.03)	(56.98)	(56.31)	(43.69)	(58.35)	(53.46)	(46.54)	(59.15)
70-79	9743	6944	16687	13349	10659	24008	14895	13263	28158
	(58.39)	(41.61)	(26.16)	(55.6)	(44.4)	(26.58)	(52.9)	(47.1)	(27.41)
80+	6610	4143	10753	7710	5901	13611	7400	6406	13806
	(61.47)	(38.53)	(16.86)	(56.65)	(43.35)	(15.07)	(53.6)	(46.4)	(13.44)
Total	37416	26361	63777	50736	39587	90323	54779	47947	102726
	(58.67)	(41.33)	(5.27)	(56.17)	(43.83)	(4.54)	(53.33)	(46.67)	(5.19)
Total popu.	1209546			1990036			1978502		

*Source: Government of India, Census 1991, 2001, 2011*

Based on this trend, with the release of the latest census, it can be assured that the proportion of the population aged 60 years and above will be significantly higher in coming years, necessitating a deeper understanding of ageing process among the different cohorts of population so as to reduce ageism towards older adults as well as possibilities to secure their socioeconomic needs, healthcare requirements, and policy interventions to ensure their well-being and overall quality of life.

## Results and Discussion

### *Socio-demographic characteristics of the respondents*

In this section the main socio-demographic characteristics of the respondents of the study along with ageism score given as mean ageism score based on the FSA have been discussed and these variables will also be employed as the main predictor variables for the analysis later on.

**Table 2: Descriptive statistics of socio-demographics characteristics and FSA ageism scores (N=220)**

<i>Variables</i>	<i>n</i>	<i>Percent</i>	<i>Mean</i>	<i>SD</i>	<i>Min</i>	<i>Max</i>
<i>Age groups</i>						
12-27	130	59.1	61.68	8.57	39	102
28-43	54	24.5	58.91	7.56	44	77
44-59	36	16.4	62.33	5.78	47	76
<i>Gender</i>						
Female	125	56.8	61.04	8.79	39	102
Male	95	43.2	61.19	6.88	43	76
<i>Education</i>						
Graduate and below	77	35	62.90	8.16	45	102
Masters and above	143	65	60.14	7.78	39	91
<i>Marital status</i>						
Unmarried	182	82.7	61.34	8.14	44	76
Married	38	17.3	60.00	7.35	39	102
<i>Co-residence with elderly</i>						
No	104	47.3	61.66	8.60	41	102
Yes	116	52.7	60.60	7.44	39	77

As given in Table 2, a total of 220 respondents were covered in the survey of which majority of 125 (56.8%) were female and 95 (43.2%) were male. The respondents were categorized into three main age groups which 130 (59.1%) were in the age group of 12-27 years, 54 (24.5%) were 28-43 years and 36 (16.4%) were in the age group of 44-59 years. Highest level of education attained by the respondents have been recorded by categorizing the qualification into two main groups consisting of graduate and below with 77 (35%) and masters and above with 143 (65%) respectively. The marital status have been broadly categorized into unmarried and married respondents where 182 (82.7%) were unmarried and 38 (17.3%) were married. Respondents who were currently not residing with elderly were consisted of 104 (47.3%) and those who were currently co-residing with elderly were 116 (52.7%). Differences in the mean ageism scores among the various socio-demographic characteristics can also be compared in the table above. Stark difference in the mean ageism score based on FSA can be observed especially with respect to factors such as age groups and levels of education. The overall mean ageism score based on the FSA was  $M = 61.10$ ,  $SD = 8.01$ .

### ***Perceived characteristics of older adults in Naga society***

Normally, ageism towards older adults can take the forms of preconceived notions such as stereotypes, discrimination and avoidance by the younger cohorts. In order to have a glimpse on the impressions that younger age groups normally have when the concept of older adult was presented, definition of older adult by age and other characteristics was examined. As such, when it comes to consider a person as older adult or 'elderly' simply based on age, it was identified that majority of respondents 46.6%% opined that anyone above the age of 60 can be considered as 'elderly' or older adult, followed by 35.3% considered a person above the age of 70 and 13.1% felt anyone above 50 years of age and about 5% selected the age of 80 years and above respectively.

When asked to rank the factors that contribute to labeling a person as an elderly in order of significance such as age, physical appearance, health condition, retirement status and societal norms, age was found to be the most important factor, followed by physical appearance and health status respectively. Factors such as societal norms including marriage, having a grand children and retirement from jobs were not considered to be an important factor in labeling a person as an elderly. Similar characteristics of labeling a person as elderly based on the above factors echoed across inter age groups comparison too. This reinforces the understanding that for many young people, the age of a person is not just a number, rather a sign of reaching certain milestone in life which is marked by certain positive or negative preconceived notions.

Further, the respondents were also asked to rank certain characteristics such as wisdom, life experiences, and frail health, economic and physical dependency which they associated with someone they consider as elderly person. Based on the responses, it was observed that characteristics such as wisdom and having attributes of being experienced and knowledgeable to be associated with an elderly person. Elderly people were also characterized to be frail, but were necessarily not generalized as economically and physically dependent individuals.

### ***Ageism in Naga society***

Descriptive overview of ageism towards older adults among younger cohorts in Naga society based on items of FSA can be seen from Table 3. The 29 items of FSA are broadly divided into three major subscales representing the Antilocution which includes stereotypes, Avoidance and Discrimination forms of ageism respectively. As already mentioned, each items were scored on a scale of 1 to 4 (strongly disagree to strongly agree) with higher score indicating higher levels of ageism. As such higher men score also indicate higher levels of ageism.



**Table 3: Item wise descriptive statistics of Fraboni Scale of Ageism (N=220)**

<i>Scale items</i>	<i>Mean (SD)</i>
<i>Antilocution</i>	
Teenage suicide is more tragic than suicide among the old	2.70 (0.80)
Many old people are stingy and hoard their money and possessions	2.18 (0.60)
Many old people are not interested in making new friends, preferring instead the circle of friends they have had for years	2.63 (0.65)
Many old people just live in the past	2.57 (0.60)
Most old people would be considered to have poor personal hygiene	2.41 (0.59)
Most old people can be irritating because they tell the same stories over and over again	2.19 (0.69)
Old people complain more than other people do	2.59 (0.68)
Complex and interesting conversation cannot be expected from most old people	1.92 (0.72)
Most old people should not be allowed to renew their driver's licenses	2.49 (0.68)
Old people do not need much money to meet their needs	2.25 (0.71)
<i>Avoidance</i>	
Many old people are happiest when they are with people their own age	2.66 (0.67)
I would prefer not to go to an open house at a senior's club, if invited	1.79 (0.67)
I sometimes avoid eye contact with old people when I see them	1.70 (0.64)
I don't like it when old people try to make conversation with me	1.55 (0.58)
Feeling depressed when around old people is probably a common feeling	1.81 (0.57)
Old people should find friends their own age	1.96 (0.75)
Old people should feel welcome at the social gatherings of young people*	1.80 (0.58)
I personally would not want to spend much time with an old person	1.75 (0.62)
Old people can be very creative*	1.89 (0.56)
I would prefer not to live with an old person	1.84 (0.62)
<i>Discrimination</i>	
Most old people should not be trusted to take care of infants	2.23 (0.69)
Old people don't really need to use our community sports facilities	1.82 (0.54)
It is best that old people live where they won't bother anyone	1.80 (0.67)
The company of most old people is quite enjoyable*	1.81 (0.53)
It is sad to hear about the plight of the old in our society these days*	2.05 (0.54)
Old people should be encouraged to speak out politically*	2.09 (0.57)
Most old people are interesting, individualistic people*	2.05 (0.61)
Old people deserve the same rights and freedoms as do other members of our society*	1.48 (0.65)
There should be special clubs set aside within sports facilities so that old people can compete at their own level.	3.10 (0.53)
<i>Total FSA score</i>	61.10 (8.01)

*\*Items are reverse coded*

Review of the overall item wise mean scores of the scale show that young people have more Antilocution or stereotype ageist attitude towards older adults as reflected by matters like death, where in comparison, suicide of younger people seems to be more tragic as compared to that of older person, or preference of company where older adults were stereotyped to not prefer friends or companionship other than their age group. Older people were also generalized regarding the lack of physical capabilities to perform tasks such as maintaining certain level of hygiene or skillful activities such as driving vehicles. And based on the responses, ageism towards older adults especially in the forms of Avoidance and Discrimination were not very prominent. Level of ageism towards older adults based on FSA indicate a mild to below average level of ageism among the respondents ( $M = 61.10$ ,  $SD = 8.01$ ).

### ***Determinants of ageism in Naga society***

To study the determinants of ageism towards older adults in Naga society, a multiple linear regression model based on OLS was applied (Table 4). Given the nature of the continuous dependent variable, this method helped in estimation of the average effect of each socio-demographic factors such as age, gender, marital status and education and status of current co-residence elderly, while controlling for the influence of the other variables in the model.

**Table 4: Results for multiple linear regression for ageism among the respondents**

<i>Variables</i>	<i>B</i>	<i>SE</i>	$\beta$	<i>t</i>	<i>p</i>
Intercept	64.24	1.82	-	35.29	.000
<i>Age</i>					
12 – 27	-3.53	2.02	-0.22	-1.74	.083
28 – 43	-4.83	1.90	-0.26	-2.54	.012*
44 – 59 (ref.)					
<i>Gender</i>					
Male	-0.64	1.11	-0.04	-0.58	.566
Female (ref.)					
<i>Education</i>					
Masters and above	-2.82	1.18	-0.17	-2.39	.018*
Graduate and below (ref.)					
<i>Marital status</i>					
Unmarried	3.55	1.93	0.17	1.84	.067
Married (ref.)					
<i>Co-residence with elderly</i>					
Yes	-1.31	1.08	-0.08	-1.21	.228
No (ref.)					

\*significant  $p < .05$

ref. = reference category

The overall was statistically significant in explaining ageism attitude among the respondents,  $F(6,213) = 2.49, p = .024$ , however, the model explained only a small portion of the variance in ageism ( $r^2 = .065$ , Adjusted  $r^2 = .039$ ). Among the socio-demographic characteristics, age and education were found to be significant determinants of ageism towards older adults. First of all, among the three different age groups, only respondents belonging to the age groups of 28 to 43 years reported significantly lower ageism scores compared to the age group of 44 to 59 years ( $B = -4.83, SE = 1.90, \beta = -0.26, p = .012$ ), but not significant for age group of 12 to 27 years. There was also no significant difference in ageism score between age group of 28 to 43 and 12 to 27 respectively ( $B = -1.30, SE = 1.39, \beta = -0.17, p = .351$ ). Secondly, education was found to be significantly determining the ageist attitude among the respondents whereby, those with higher level of education of masters and above reported lower ageism score than those with lower education of graduate and below ( $B = -2.82, SE = 1.18, \beta = -0.17, p = .018$ ). There was a marginally significant difference between unmarried and married respondents ( $B = 3.55, p = .067$ ), where unmarried respondents tended to report higher ageism scores.

## Discussion

This study aimed to understand couple of issues related to population above 60 years of age particularly with how young people within the age group of 12 to 59 in Naga society characterize and view them and what socio-demographic factors determines the ageist attitudes towards older adults. For many, age was also the most important factor in labeling a person as an elderly, followed by characteristics such as physical appearance and health status. This reinforced the understanding that in Naga society, age of a person is more than just a number rather it is seen as an important milestone that marks a person's life. Factors such as societal norms including marriage and having grand children were not viewed as much as important in considering a person as elderly. Older people in Naga society were also seen as the age group attributed with characteristics like wisdom and very experienced and knowledgeable.

Based on the data, young people were found to have more Antilocution or negative stereotypes form of ageism towards older adults reflected by higher mean scores with respect to suicide of young compared to suicide of older person, physical capabilities and demanding skills like driving, or maintaining a hygienic life, preference for same aged friends, perception of complaining too much than others and so on. On the other hand, respondents showed less ageist attitude in the forms of Avoidance and Discrimination ageism towards older people. Overall, in this paper the FSA indicated a mix of very low to moderate level of ageist attitude towards the older adults.

Results from the regression analysis showed that age and education level had a

statistically significant impact on the determinants of ageist attitude towards older adults among the respondents. Where, respondents in the age group of 28 to 43 years were significantly less likely than 12 to 27 and 44 to 59 years to be ageist. Study such as Garrido *et al.* (2019) also indicated age to be a significant determinant of ageism towards older adults. Besides, respondents with higher education level of masters and above were also significantly less likely to be ageist towards older adults than those with less education level of graduate and below.

The current study has some noticeable limitations such as the method of data collection through online survey. Despite many merits, using this method of data generation, the reach towards diverse sample becomes limited and hence generalization of results needs caution. To increase the variance in the ageism score, identifying and inclusion of other factors based on society and cultural significance can be pursued in future studies.

## **Conclusion**

Population ageing will continue and sooner or later even community like the Nagas will also feel the pinch of large scale increase in the proportion of older adults to the rest of the population either directly or indirectly across the state, country and at global level. Community like the Nagas are seen as a close knit society, where older people are given high respect and regarded as an important part of the community. Perhaps this is also one of the reasons behind why our analysis did not find significantly higher range of ageist attitude among the respondents. This we feel is a positive trait which should be carried on and make changes through spread education and awareness about the natural process of ageing and only then any misconception of generalizing or stereotyping the older people as redundant and an inclination towards growing ageist attitude can be pruned.

**Note:** This paper is a part of research project “*Ageing in Nagaland: A study on Ageism and socio-economic contours of the elderly population*” funded by the Indian Council of Social Science Research (ICSSR), New Delhi.

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