

Article journey

Submitted

13/1/2026

Revised

21/3/2026

Accepted

1/6/2026

Online first

22/10/2026



QUALITATIVE STUDIES

Between respect and prejudice: The duality of perception on aging and ageism among nursing students

Orfelina Arpasi-Quispe¹, Norma Magaly Rojas-Regalado², Danna Daneska Ticllas-Garcilazo³, Ana Maria Tinoco-Salas⁴, Sarai Barsy Quispe-Calsin⁵, Vanny Gloria Ccuno-Melquiades⁶, Jack Roberto Silva Fhon⁷ 

Author information

^{1,2,3,4,5,6} School of Nursing, College of Health Sciences, Universidad Peruana Unión, Peru

⁷ Department of Medical Surgical Nursing, School of Nursing, University of São Paulo, Brazil

 betofhon@usp.br

 <https://doi.org/10.31603/jhns.15958>

Abstract

In today's globalized world, despite the availability of psychometric measures of ageism, a gap remains in understanding how students subjectively perceive and experience ageism. The interplay between students' personal values and socially constructed prejudices remains insufficiently understood, highlighting the need for an in-depth qualitative investigation. This study seeks to contribute to the literature on the aging process and ageism, with particular relevance to gerontological nursing education and practice. Specifically, it aims to explore nursing students' perceptions of the aging process and ageism toward older adults at a private university. This exploratory qualitative study examined perceptions of aging among 55 nursing students. Data were collected between June and November 2024 using individual questionnaires, and the responses were transcribed for analysis. Lexicometric content analysis was performed using the *Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires* (IRaMuTeQ) software to examine word frequencies while maintaining participant confidentiality. A total of six thematic categories were found including respect for older people, social discrimination and violence, negative stereotypes towards older people, life cycle: aging, autonomy and independence of older people, and physical changes during the aging process. Students view aging as an inevitable process and demonstrate respect for older adults based on personal, family, academic, and religious values. However, they also perpetuate negative stereotypes and ageist attitudes. This duality highlights a gap between their appreciation of older adults' autonomy and the persistence of social prejudices in academic discourse. Therefore, critical education is needed to challenge ageism and prepare nursing students to become agents of change.

Keywords: Ageism, aging, nursing students, qualitative research, stereotyping

Introduction

The World Health Organization (WHO) defines aging as the progressive effect of molecular and cellular damage over the course of a lifetime (Gianfredi et al., 2025). This process leads to a gradual decline in physical and physiological functions, increasing an individual's vulnerability to disease and reducing functional capacity (Billot et al., 2020; Tenchov et al., 2024). However, aging is not merely a biological process, as it is also shaped by psychological, social, cultural, and environmental factors that influence how individuals experience later life (Gaviano et al., 2024). These multidimensional aspects of aging may also shape nursing students' perceptions of older adults, including their attitudes toward autonomy, independence, and age-related stereotypes (Castro et al., 2023). According to a study, aging is a multidimensional, irreversible, and universal process that is an intrinsic part of the human life cycle, from conception to death (Garcia & Maya, 2025). In relation to ageism, the WHO defines as a way of thinking (stereotypes), feeling (prejudices), and acting (discrimination) toward others or ourselves based on age (Ayalon et al., 2026). Furthermore, approximately one in two people exhibit ageist attitudes or engage in discriminatory behavior toward older adults (Wang et al., 2026). Ageism can negatively affect their physical and mental health, undermine their well-being, reduce life expectancy, delay recovery from disability, and contribute to cognitive decline. Despite these consequences, ageism remains a significant concern within healthcare systems, potentially compromising the quality of care provided to older adults (Ribera-Casado et al., 2024).

Population aging is one of the most significant demographic trends of the 21st century. By 2060, the population aged 65 years and older is expected to almost double, while the number of individuals aged 85 and older is projected to triple (Shreya et al., 2025). Meanwhile, population aging is progressing rapidly in regions such as Asia and Latin America, leaving healthcare and social systems with less time to adapt to the growing needs of older populations (Sakamoto, 2025; García Chanes et al., 2025). Negative perceptions and stereotypes about aging can make it difficult for individuals to accept the aging process, both as they approach older age and as they experience it. These attitudes contribute to the stigmatization of older adults and age-related changes, including physical decline, chronic diseases, and increased dependency (Martínez-Matamala et al., 2023). A study conducted in Chile and Mexico, with 67 and 50 students, respectively, showed a marked tendency among nursing students to have negative perceptions of old age, such as the character/personality factor, in which both samples scored higher, alluding to a lack of recognition of the positive aspects of aging (Díaz et al., 2022). Therefore, the need to integrate gerontology training into nursing education was highlighted, promoting a comprehensive perspective on older people and fostering positive attitudes. A study of 155 nursing students in Brazil found that negative ageist attitudes were associated with several sociodemographic factors, including male gender, academic year, and the number of people living in the same household (Fhon et al., 2024). That study also explained that first-year students reported more ageist attitudes than students in higher academic years. Both the studies conducted in Chile and Mexico (Díaz et al., 2022) and the study in Brazil (Fhon et al., 2024) coincide in the existence of negative ageist attitudes among nursing students. This indicates that ageism is a persistent and widespread problem in this group. It is worth noting that cultural differences can influence how ageist attitudes are expressed.

In Europe, ageism is primarily associated with the exclusion of older adults based on their perceived economic productivity, whereas in Asia, it is often linked to the erosion of filial piety amid technological modernization (Bergeron & Lagacé, 2021). In Latin America, particularly Peru, perceptions of older adults are often ambivalent. Although older adults may receive affection and respect within their families, benevolent ageism persists, portraying them as inherently frail and potentially limiting their autonomy in healthcare settings (Guachichullca-Ordóñez & Banda-Poma, 2025). Community nursing performs an essential role by providing comprehensive care that prioritizes the patient's dignity, autonomy, and emotional well-being (Jin & Chen, 2025). For nursing students, it is essential to fully comprehend the nature and dimensions of the aging process, as this understanding enables them to build clinical care grounded in empathy and sensitivity (Nissanholtz-Gannot et al., 2025). Prejudice, personal opinions, previous experiences, and sociodemographic factors can create barriers to positive interactions between nursing students and older adults (Huynh et al., 2025). This duality of perception often manifests as a conflict between ingrained respect for elders and internalized ageist stereotypes (Kang & Kim, 2022). While many nursing students express a genuine desire to provide compassionate care, underlying biases can subtly compromise the quality of their clinical interactions. Previous negative experiences or a lack of exposure to healthy, active older individuals frequently reinforces the misconception that aging is synonymous solely with decline and dependency (Thiamwong & Shattell, 2025). Consequently, these mixed attitudes can lead to patronizing communication, such as "elderspeak," which inadvertently undermines the autonomy and dignity of older patients. Addressing these barriers through assessment and qualitative approach is essential to foster truly age-inclusive healthcare environments. Therefore, educational strategies should be integrated into nursing curricula from the early stages of professional training to challenge ageist attitudes and improve the quality of care provided to older adults.

Despite growing international attention to ageism, research exploring the coexistence of respectful attitudes and ageist perceptions among nursing students remains limited in Peru, particularly in Lima. Although previous studies have examined attitudes toward older adults and ageism in different populations, further research is needed to understand how cultural values, family relationships, religious beliefs, and educational experiences shape nursing students' perceptions of aging in the Peruvian context. Evidence specifically addressing this duality among nursing students in Lima is still scarce. Therefore, this study seeks to address an important knowledge gap by exploring how respect for older adults can coexist with negative stereotypes and prejudicial attitudes among future nursing professionals. The findings may contribute to nursing education and healthcare practice in Peru by providing a contextual understanding of the factors that shape nursing students' perceptions of aging and ageism. This evidence could promote the development of appropriate educational strategies that encourage critical reflection, challenge ageist assumptions, and promote the autonomy, dignity, and participation of older adults. Integrating these strategies into nursing curricula may help prepare future nurses to recognize and address ageism in clinical practice. Beyond Peru, this study may offer insights for other countries experiencing population aging and facing challenges in preparing healthcare professionals to care for older adults. Although cultural values and social expectations vary across societies, the coexistence of respect and prejudice toward older people represents an important issue for nursing education internationally. The findings may provide a basis for comparison with research from other cultural contexts and encourage further studies examining how educational

systems, family values, and social norms influence ageist attitudes. The following research question guided this study: How do nursing students at a private university in Lima, Peru, perceive the aging process and ageism toward older adults? Accordingly, this study aimed to explore nursing students' perceptions of aging and ageism toward older adults. The findings were expected to provide a deeper understanding of the coexistence of respectful attitudes and age-related prejudices among future nursing professionals.

Method

An exploratory qualitative design was employed to address the study objectives. The study was reported in accordance with the Consolidated Criteria for Reporting Qualitative Research (COREQ) guidelines (Tong et al., 2007). This approach was appropriate for exploring nursing students' perceptions of aging and ageism in their social and educational contexts. It also allowed the researchers to examine how personal experiences, family values, and academic backgrounds shaped students' views of older adults. The study was conducted at the School of Nursing, College of Health Sciences, at a private higher education institution located in eastern Lima, Peru. The five-year nursing program had a total enrollment of 320 students. The inclusion criteria were active nursing students of any gender who had participated in the first phase of the study. The exclusion criteria were students who could not be reached after three contact attempts or who had discontinued their university studies. Participants were recruited from the first phase of the study, which involved 320 nursing students. Of these, 251 expressed interests in participating in the second phase. All 251 students were contacted; however, only 55 agreed to participate in the interviews.

Before the interviews were conducted, four pilot interviews were carried out to assess the clarity and relevance of the questions and to ensure their alignment with the study objectives. Face and content validity were assessed by seven expert reviewers with expertise in gerontology and qualitative research, selected based on their academic contributions to these fields. The interview questions were subsequently revised to improve semantic clarity and ensure consistency with the research objectives. The final interview guide was then used to explore participants' perceptions of aging and ageism toward older adults. The interviewers received training to ensure consistency in the data collection process and to facilitate open and unbiased discussions. Interviews were conducted using open-ended questions that allowed participants to express their views and experiences in their own words. Follow-up questions were used when necessary to clarify responses and obtain further details. All interviews were conducted in a manner that respected participants' confidentiality and encouraged them to share their perspectives freely. A questionnaire consisting of two sections was used for data collection: the first section was designed to obtain demographic data such as age and gender, and the second section consisted of questions that guided the interview, such as: What is your perception of aging? What are the positive aspects you can identify with aging? What are the negative aspects you identify with aging? How does your family view older people? How do your friends view aging? Do you think older people have any limitations? Do you find it strange that older people have routines similar to yours? Describe a discriminatory attitude toward older people that you have seen or experienced.

Data were collected by a research team comprising nurses and nursing students who had received prior training and supervision from the principal researcher. Data collection took place between June and November 2024. During this period, participants were contacted by telephone or WhatsApp to arrange interview dates and times according to their availability. Individual interviews were conducted by trained nursing students, either face-to-face in a private university classroom or online via Google Meet, with participants joining from their homes. Each interview lasted approximately 40–60 minutes and was audio-recorded for subsequent transcription. No follow-up interviews or additional contact were required to clarify or supplement the collected data. For data analysis, a textual corpus was constructed from the complete interview transcripts. The research coordinator reviewed and validated the transcripts to standardize terminology and improve the consistency of the analysis while preserving the original meaning of participants' accounts. Data collection and preliminary analysis were conducted iteratively to assess the adequacy of the qualitative data. The researchers reviewed participants' responses, identified emerging codes, and compared subsequent responses with previously identified codes and themes. Data saturation was considered to have been reached when additional responses no longer contributed substantively new concepts or meaningful insights relevant to the research objectives. The decision was documented through the ongoing comparison of responses and discussion among the researchers.

Lexicometric content analysis was employed to examine the frequency and distribution of words within the textual corpus, facilitating the identification of recurring terms and linguistic patterns relevant to nursing students' perceptions of aging and ageism. The corpus was analyzed using the Spanish-language version of *Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires* (IRaMuTeQ), version 0.6 alpha 3. The Reinert method was applied to perform Descending Hierarchical Classification (DHC), which identified lexical classes based on associations

between words and their contexts. This process helped identify distinct lexical patterns and provided a systematic basis for organizing the findings into analytical categories. Methodological triangulation was conducted by combining computational lexicometric analysis with qualitative content analysis performed by the research coordinator. This approach aimed to integrate the systematic identification of lexical patterns with contextual interpretation while preserving the meaning of participants' original accounts. Grammatical categories and lexical patterns were examined to support the interpretation of the textual corpus. The resulting categories were independently reviewed by two researchers with experience in gerontology and qualitative research. Any disagreements regarding categorization were resolved through discussion and consensus, resulting in six final categories intended to reflect participants' perspectives as faithfully as possible.

To ensure the rigor and trustworthiness of the findings, the study addressed four criteria: credibility, confirmability, dependability, and transferability (Lincoln & Guba, 1985). Credibility was supported through researcher triangulation and the involvement of a trained research team in conducting the interviews. The research coordinator reviewed the transcripts to standardize terminology while preserving the meaning of participants' original accounts. Confirmability was strengthened through the use of IRaMuTeQ software to conduct lexicometric analysis using DHC, providing a systematic basis for identifying lexical patterns and informing category development. Direct quotations from participants were also included to support the presentation and interpretation of the findings. Dependability was addressed by following the COREQ guidelines and documenting the research process, from participant recruitment and data collection to transcription and analysis, to facilitate methodological transparency and auditability. Finally, transferability was supported by providing a detailed description of the research setting, participants, and inclusion criteria. Although the findings reflect the specific context of a private university in Lima, Peru, this contextual information enables readers to assess the potential relevance of the findings to other nursing education settings with similar characteristics in worldwide. To ensure participants' confidentiality and anonymity, their statements were identified using a combination of letters and numbers (e.g., St X). The study was reviewed and approved by the Institutional Research Ethics Committee (approval number: 2022-CE-FCS-UPeU-011). All participants provided informed consent before the interviews commenced.

Results

The study included 55 students, of whom 46 were female and 9 were male. The participants had a mean age of 21 years, ranging from 18 to 49 years. Regarding their year of study, 26 students were in their third year, 15 were in their second year, and 14 were in their fourth year. The textual corpus comprised 55 interviews, which were divided into 1,539 text segments and contained 55,892-word occurrences. Of the 4,564 analyzable word forms, 2,326 appeared only once in the corpus, representing 51.62% of the analyzable forms and 4.22% of all word occurrences. In the lexical analysis of the texts, a dendrogram was formed showing the classes composed of the 1,539 (95.13%) analyzable text segments (**Figure 1**). The analysis identified six categories or themes, which were organized according to the theoretical framework and named as follows: category 1, autonomy and independence of older people (20.8%); category 2, respect for older people (20.4%); category 3, social discrimination and violence (14.2%); category 4, the life cycle: aging (21.2%); category 5, negative stereotypes toward older people (11%); and category 6, physical changes during the aging process (12.4%).

The dendrogram illustrates the relationships among the ideas identified in the textual corpus. The first major division separates the corpus into two main subgroups. Subgroup A (right), represented by Class 6, focuses on the biological and functional aspects of aging, including physical decline and disease. In contrast, Subgroup B (left), comprising Classes 1–5, reflects psychosocial perceptions, values, and behaviors related to aging and older people. The following section provides detailed descriptions of the categories. Not all statements made by the participants are presented; instead, the researchers selected representative excerpts to illustrate and support each category.

Subgroup A: The biological and functional aspects of aging, including physical decline and disease.

Category 6: Physical changes during the aging process

The aging process entails physical changes in older people, such as changes in the skin, muscles, sensory organs, and various systems, among others, which can worsen this process and reduce the quality of life of older people.

"Another would be the changes that occur naturally, such as a decrease in physical strength, so older people no longer have the same abilities, the same energy, or the same strength as young people. That would be one of the negative points I could see" (Student number 14).

"It is a process that occurs in older people, and it will bring many challenges and opportunities, because older people will experience a lot of physical and mental deterioration" (Student number 17).

"Perhaps they may suffer a fall because they are not as strong as they used to be. They also begin to suffer from insomnia or, conversely, sleep too much. They lose their sight and hearing, and often develop complications from illnesses they have been carrying throughout their lives" (Student number 27).

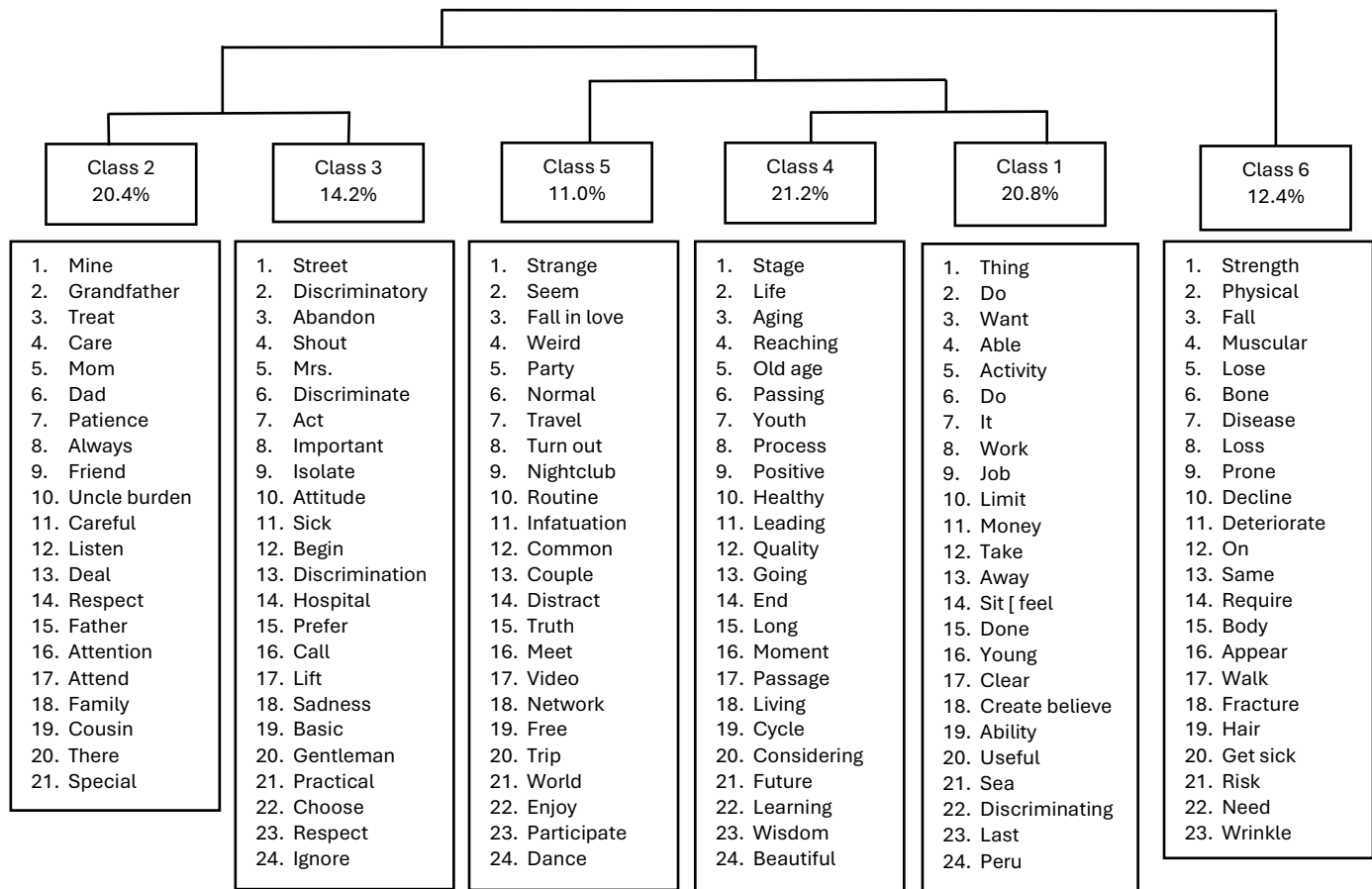


Figure 1. Study findings.

Subgroup B: The reflection of psychosocial perceptions, values, and behaviors related to aging and older people

Category 2: Respect for older people

In this category, nursing students described respect as an integral part of their life philosophy, developed within the family, reinforced by the university's institutional environment, and influenced by Adventist religious values. These influences highlight respect as a fundamental value that should be extended to all people, particularly older adults.

"The truth is that my family, being from a small town, has a lot of respect for older people. Whenever we visit the town, everyone teaches us to greet older people, even if we don't know them" (Student number 10).

"My parents treat them with great respect and affection because in our degree courses we study how to provide care for older people, therefore we have had a lot of contact with them and from what I have seen they are very patient in listening to them" (Student number 13).

"My family treats them with great respect because we are all important, and regardless of age, we all deserve respect and to be given the place we deserve" (Student number 15).

Category 3: Social discrimination and violence

The students stated that social discrimination is considered a negative behavior toward older people, based on their experiences during hospital internships and/or where they live. On the other hand, they reported that acts of violence are also constantly directed toward this population. These experiences highlight the vulnerability of older people to ageism, discrimination, and mistreatment in both healthcare settings and the community. Therefore, nursing education should emphasize the recognition and prevention of age-related prejudice and violence while promoting respectful, equitable, and person-centered care for older adults.

"It often happens at work; it is difficult for them to find a job without being rejected due to their age. They are often pushed aside, ignored, and not even given a chance" (Student number 2).

"I have seen many people impose restrictions on older people, for example, in games they limit them, do not let them participate, and do not take their opinions into account. On the other hand, when looking for work, many of them really need it, but they are rejected because employers only want young people due to their physical condition." (Student number 10).

"Before I started my studies, I had a neighbor who constantly went to the market with her mother, who was an older woman. However, we always saw how her daughter mistreated her... The older woman was abandoned, left alone at home when there were events at her children's school" (Student number 18).

"I have seen situations where older people are ignored in conversations about technology. In other words, everyone automatically assumes that because they are older, they cannot understand these modern concepts, and many of them are underestimated and belittled. I even saw one of them who wanted to learn how to use a tablet, but instead of helping and training him, his family suggested that he should delegate this activity to someone else" (Student number 40).

Category 5: Negative stereotypes toward older people

In this category, students reported that there are stereotypes associated with aging that are deeply rooted in society, creating a distorted perception of old age, often associated with the deterioration of faculties, social isolation, and dependence. These stereotypes may influence how older people are perceived and treated, potentially reinforcing ageist attitudes and overlooking the diversity of experiences and capabilities among older adults. Therefore, nursing education should challenge these misconceptions by promoting a more comprehensive understanding of aging that recognizes older people's individual strengths, autonomy, and potential for continued social participation.

"I find it strange because, well, that's what happens with my mom. I don't go out to parties, but she, at her age and since she has a partner, does go out. I tell her that she's not in her teens anymore, she wants to eat, travel, and not think about her problems, and that's why I often wonder why they do it now if their time has already passed. I don't judge them, but it's unusual" (Student number 20).

"For me, it's not strange for an adult to share the same moments as a young person, but it would be strange for them to fall in love with someone else in their old age, if they fall more and more in love with the same partner every day, that would be normal, but if they flirt like young people, that would be strange to me because at that age it wouldn't look good" (Student number 43).

"Regarding parties, it also depends, for example, if it is a family gathering, it is normal because it is not related to nightclubs, which are parties where people dance, although I do find that strange. Furthermore, when one falls in love, it is during adolescence or youth, so it would be very unusual because one has already formed a family and lived" (Student number 47).

Category 4: Life Cycle: Aging

The life cycle is the process through which a person experiences various physical, psychological, and social changes. Throughout the aging process, there are positive or negative perspectives depending on the lifestyle habits they had and/or the comprehensive health care they received during their lifetime. On the other hand, participants stated that the decisions made in the present will have an impact on the future, especially in the last stage of life.

"It is an inevitable stage in everyone's lives. I believe that this phase reflects the decisions and habits we have had throughout our lives. Some people manage to enjoy it thanks to good planning and saving, while others face more difficulties" (Student number 11).

"It is a stage that all of us will reach. I feel that at this stage, we reap what we sowed in our youth, because if a person has been good, when they reach this stage, those who have been by their side will repay them with love and affection" (Student number 27).

"It means being mature and learning from past mistakes, because over time you gain a different perspective on things. That's why older adults become good guidance counselors for young people. It's a peaceful stage of life" (Student number 29).

"I believe that reaching that stage while staying healthy in certain aspects is ideal, which is why we must take care of ourselves now, because no one deserves to suffer in old age. Sooner or later, it will come to us all equally" (Student number 32).

Category 1: Autonomy and independence of older people

Autonomy is a person's ability to make their own decisions and the independence to perform daily activities, manage their time, make responsible decisions, work in a team, and resolve conflicts, preparing themselves to face life's challenges with confidence and improving their quality of life. Promoting autonomy among older adults is essential for preserving their dignity, self-esteem, and sense of control over their lives. Therefore, nursing students should recognize older people's individual capabilities and preferences, provide opportunities for independent decision-making, and offer appropriate support without unnecessarily restricting their independence.

"Older people may also be capable of doing many physical tasks if they were accustomed to physical activity and staying active during their youth" (Student number 6).

"Well, there are older people who are still strong at their age and do things for themselves, and others who are overcome by illness and do need financial assistance as well. Ideally, they should receive it, but it will depend on the family" (Student number 17).

Discussion

The present study showed the perception that nursing students have of older adults, identified by experiences arising from their family environment, hospital internships, and social activities. The aging process is characterized by the progressive loss of physiological functions and regenerative potential in multiple tissues and organs (López-Otín, et al., 2023). In classes one, four, and six, the narratives show that most nursing students have different perspectives on aging. Younger generations believe that physical changes are perceived as something negative, which they seek to contend with until cosmetic medicine allows them to do so (Cigarroa et al., 2025). Many people perceive physical changes as a natural part of the human life cycle (Menezes et al., 2023). However, in Brazil, these changes are often associated with prejudice and discrimination, which may negatively affect the quality and equity of care provided to older adults. Nurses play a crucial role in challenging age-related stereotypes and ensuring that older adults receive respectful, equitable, and person-centered care (Gurung & Chaudhury, 2025). Furthermore, nursing education should equip future nurses with the knowledge and skills to recognize ageism, address discriminatory practices, promote the dignity and autonomy of older people throughout the aging process. Additionally, physical and physiological changes associated with aging may reinforce the misconception that older adults are asexual. However, older people continue to value intimacy, physical contact, communication, dignity, and the emotional security that comes from feeling loved, just as they do at other stages of life. Another study highlighted that individuals who perceive aging positively tend to be healthier, live longer,

and maintain more active social lives (Montoya Rosales et al., 2024). These positive perceptions may enhance health and well-being by mitigating the negative effects of age discrimination and improving the overall experience of aging.

Furthermore, changes in self-image during the aging process are often associated with accumulated life experience and wisdom (Diehl et al., 2021). Physical decline does not necessarily coincide with cognitive deterioration, and many older adults continue to perceive themselves as independent, autonomous, and self-sufficient. Nurses should recognize and value the life experiences, wisdom, and individual capabilities of older adults while avoiding assumptions based on their age or physical condition (Lampersberger et al., 2024). With promoting autonomy and adopting person-centered care, nurses can support older adults in maintaining their independence, dignity, and quality of life. Therefore, attitudes toward one's own aging are related to stable social bonds, family bonds, and personal characteristics that strengthen self-perception, generating well-being and reducing anxiety levels (Maya-Pérez et al., 2022). The statements extracted from Classes 3 and 5 reveal experiences of discrimination and social violence against older people across various settings, with several participants expressing disapproval of the way this population is treated. Furthermore, gender, academic year, family background, social environment, and the university's philosophy emerged as important factors influencing students' perceptions of discrimination and social violence toward older adults. It is undeniable that this age group is vulnerable to ageism, and it could be inferred that one in ten older persons has suffered abuse (Nițulescu et al., 2026). Even the family could play an important role, as they could promote healthy aging or ignore the situation and cause neglect (Mak et al., 2026). Nursing students reported witnessing these cases of discrimination in professional settings such as hospitals. Studies indicate that many older persons often receive inadequate care based on a violent approach due to inappropriate language, ageist behavior, care based on personal beliefs, and restrictions on treatments and surgical interventions (Yazdi-Feyzabadi et al., 2025; Theodorakis et al., 2025). The discourse extracted from the classes points to a manifestation of negative attitudes toward stereotypes of older people by nursing students. These attitudes are related to social connotations, health, competences, adaptability, disinterest, and personality. These limiting beliefs are clarified in the older people course offered at the university, where perceptions of old age are modified according to the knowledge acquired and the practice involving older people. Therefore, these acquired prejudices, which were not modified in either nursing students or professionals, significantly affect the quality of care (Machado et al., 2025).

The protective factors against ageism among students include values of respect (family/religious), but they lack the critical training needed to eliminate unconscious biases. It is essential to strengthen nursing practice by upholding these values, as this is necessary not only to eliminate clinical ageism but also ageism in public healthcare (Segura-López & Giménez-Andreu, 2024). Studies have shown that nursing students have negative stereotypes (Fhon et al., 2024; Sarabia-Cobo & Castanedo Pfeiffer, 2015). A study conducted in Chile and Mexico, including 67 and 50 students respectively, revealed a negative perception of old age, the character/personality factor in which both samples showed a lack of recognition of the positive aspects of aging, thus highlighting the need to integrate gerontology training into nursing (Díaz et al., 2022). In addition, there is a prevalence of negative stereotypes toward old age among nursing students, which are related to factors such as health, motivation, social factors, and character/personality. The narratives in Class 2 highlight respect for older people as a protective factor against discrimination, as moral sensitivity and early exposure to caring for older adults may foster more compassionate and respectful attitudes toward aging. These findings suggest that integrating ethics education and professional values into nursing curricula may help reduce age-related prejudice and promote equitable, person-centered care for older adults (Wen et al., 2025). Furthermore, nurses serve as important part in addressing ageism by translating values of respect and compassion into evidence-based, equitable, and person-centered nursing practice. Although family and religious values may encourage respectful attitudes toward older adults, these values alone may be insufficient to eliminate implicit biases and negative stereotypes. Therefore, nursing education should integrate gerontological knowledge, critical reflection, and practical experiences that enable nursing students to recognize ageist attitudes, challenge misconceptions about aging, and appreciate the diverse capabilities and contributions of older people (Alves et al., 2024). Nurses can also act as advocates and role models by challenging discriminatory practices within healthcare institutions and the wider community.

A study among university students in Nuevo León, Mexico, found that older adults were positively perceived in terms of independence, wisdom, reliability, and pleasantness (Villarreal-Salazar et al., 2024). However, negative perceptions were associated with difficulties in social interactions and personality traits. The participants also emphasized that respect for older adults depends on education and social awareness. A Peruvian study found that students over the age of 26 from the jungle region who reported high life satisfaction and civic engagement held more positive attitudes toward older adults. However, the study also revealed that one in four nursing students exhibited ageist

beliefs, proving that living with elderly relatives does not guarantee respect despite familiarity (Bello Vidal et al., 2024). Societal beliefs and attitudes toward older people evolve across generations, often perpetuating and normalizing discriminatory practices. The authors argue that these perceptions can lead to discriminatory attitudes that distance older adults from society because they serve as a constant reminder of human vulnerability and the inevitability of aging. Nurses have a crucial responsibility in challenging ageist beliefs and discriminatory practices by promoting positive perceptions of aging and advocating for the rights and dignity of older adults. Through health education, person-centered care, and community engagement, nurses can help raise social awareness, challenge age-related stereotypes, and promote inclusive environments in which older people are respected, valued, and supported as active members of society. Several limitations should be acknowledged in this study. First, the sample was selected from the initial phase of the research project, with only those students who agreed to participate in the second phase of the study being interviewed. Second, the research method does not allow the findings to be generalized to the wider nursing student population. Nevertheless, the findings indicate that nursing students have an awareness of the aging process though also exhibiting certain ageist attitudes that need to be addressed by educators throughout their academic education.

Conclusion

The findings reveal a duality in how future nursing professionals perceive aging and older adults. Respect for older people emerged as a deeply rooted value, shaped by family experiences and reinforced by university education and religious beliefs. Students generally viewed aging as an inevitable part of life, associating it with the consequences of past decisions, physical limitations, personal maturity, and a sense of tranquility. They also acknowledged the importance of preserving older adults' autonomy and independence, while recognizing that these may be influenced by health conditions and family support. Despite these positive perspectives, students also expressed views that reflected negative stereotypes about aging. Their accounts further highlighted the persistence of ageism, discrimination, and violence against older people in society. This contrast suggests that respect for older adults does not necessarily prevent the acceptance or reproduction of ageist attitudes. Nursing education should therefore extend beyond the teaching of gerontological knowledge. Learning activities need to encourage students to examine their own assumptions about aging, engage with diverse and positive representations of later life, and develop the skills to recognize and challenge ageism in clinical practice and everyday interactions.

Acknowledgments

The authors would like to thank everyone who contributed to and supported the study and its publication.

AI statements

No AI was used in the development of this manuscript.

Author's declaration

All authors have made substantial contributions to complete research and manuscript for publication.

Availability of data and materials

The authors welcome requests for research data and materials through the corresponding author.

Competing interests

The authors declare no potential conflict of interests.

Ethical clearance

The study was approved by the Research Ethics Committee of Universidad Peruana Unión, under approval number 2022-CE-FCS-UPeU-011.

Funding

Project titled "Attitudes and perceptions regarding ageism among nursing students: a multicenter study," conducted between 2023 and 2025 and funded by the *Conselho Nacional de Desenvolvimento Científico e Tecnológico* (CNPq), Universal Project No. 406136/2021-1.

Publishers and journal's note

This study is unique in involving 55 nursing students to explore the duality of their perceptions of aging and ageism in Peru. However, qualitative research does not have a universal maximum sample size; methodological coherence and data adequacy are more important than the number of participants alone.

References

- Alves, S. B., Magalhães, C. P., Fernandes, A., Palmero, M. J. F., & Fernandes, H. (2024). Gerontology and geriatrics in undergraduate nursing education in Portugal and Spain: An integrative and comparative curriculum review. *Healthcare*, 12(17), 1786. <https://doi.org/10.3390/healthcare12171786>
- Ayalon, L., de Paula Couto, M. C. M. P., Rothermund, K., Nikitin, J., Li, X., Xiao, Z., & Murray, A. L. (2026). The World Health Organization ageism towards older persons scale: Preliminary validation of a novel measure of ageist stereotypes, prejudices, and discrimination in four different countries. *Age and Ageing*, 55(1), afaf384. <https://doi.org/10.1093/ageing/afaf384>
- Bello Vidal, C., Landauro Rojas, I. G., Cortez Cuaserna, G., Muñoz Moreno, K., Saez Alania, M., & Villanueva Benites, M. E. (2024). Life satisfaction, civic participation, and attitudes of Peruvian nursing students toward older adults [Satisfacción vital, participación cívica y actitudes de estudiantes peruanos de Enfermería hacia el adulto mayor]. *Revista Enfermería Herediana*, 16, 10–17. <https://doi.org/10.20453/renh.v20i20.5364>
- Bergeron, C. D., & Lagacé, M. (2021). On the meaning of aging and ageism: Why culture matters. *University of Toronto Quarterly*, 90(2), 140–154. <https://doi.org/10.3138/utq.90.2.06>
- Billot, M., Calvani, R., Urtamo, A., Sánchez-Sánchez, J. L., Ciccolari-Micaldi, C., Chang, M., Roller-Wirnsberger, R., Wirnsberger, G., Sinclair, A., Vaquero-Pinto, N., Jyväkorpi, S., Öhman, H., Strandberg, T., Schols, J. M. G. A., Schols, A. M. W. J., Smeets, N., Topinkova, E., Michalkova, H., Bonfigli, A. R., Lattanzio, F., ... Freiburger, E. (2020). Preserving mobility in older adults with physical frailty and sarcopenia: Opportunities, challenges, and recommendations for physical activity interventions. *Clinical Interventions in Aging*, 15, 1675–1690. <https://doi.org/10.2147/CIA.S253535>
- Castro, C., Antunes, R., Simoes, A., Bernardes, C., & Fernandes, J. B. (2023). Nursing students' knowledge and attitudes toward older adults. *Frontiers in Public Health*, 11, 1150261. <https://doi.org/10.3389/fpubh.2023.1150261>
- Cigarroa, I., Alonso, J., Vallejos, M. G., Parra-Rizo, M. A., Basoalto, D., Robles-Tapia, D., Concha-Cisternas, Y., Pizarro, R., Borja-González, J., & Yañez-Yañez, R. (2025). Attitudes toward older adults: A descriptive cross-sectional study in Chilean University students. *International Journal of Environmental Research and Public Health*, 22(9), 1450. <https://doi.org/10.3390/ijerph22091450>
- Díaz, D. M. M., Rendón, T. L., Benavides, G. C., & Sequeira, D. D. (2022). Negative Stereotypes associated with old age in Chilean and Mexican nursing students. Effect of the subject «Geriatric Nursing». *Educación Médica*, 23(6), 100765. <https://doi.org/10.1016/j.edumed.2022.100765>
- Diehl, M., Wettstein, M., Spuling, S. M., & Wurm, S. (2021). Age-related change in self-perceptions of aging: Longitudinal trajectories and predictors of change. *Psychology and Aging*, 36(3), 344–359. <https://doi.org/10.1037/pag0000585>
- Fhon, J. R. S., Alves, N., Santos Neto, A. P. D., Djinan, A. R. F. S., Laurenti, A. V., & Lima, E. F. C. (2024). Attitudes and perceptions about ageism among nursing students: A scoping review. *Revista Latino-Americana De Enfermagem*, 32, e4116. <https://doi.org/10.1590/1518-8345.6851.4116>
- García Chanes, R. E., Casasola Espinosa, B. A., & Gutiérrez Robledo, L. M. (2025). Disparities in functional dependence and population aging in Latin America. *Revista panamericana de salud publica = Pan American journal of public health*, 49, e108. <https://doi.org/10.26633/RPSP.2025.108>
- Garcia, A. M. A., & Maya, Á. M. S. (2025). Analysis of the concept of aging 2024. *Gerokomos*, 36(3), 161–169. <https://doi.org/10.4321/s1134-928x2025000300002>
- Gaviano, L., Pili, R., Petretto, A. D., Berti, R., Carrogu, G. P., Pinna, M., & Petretto, D. R. (2024). Definitions of ageing according to the perspective of the psychology of ageing: A scoping review. *Geriatrics*, 9(5), 107. <https://doi.org/10.3390/geriatrics9050107>
- Gianfredi, V., Nucci, D., Pennisi, F., Maggi, S., Veronese, N., & Soysal, P. (2025). Aging, longevity, and healthy aging: The public health approach. *Aging Clinical and Experimental Research*, 37(1), 125. <https://doi.org/10.1007/s40520-025-03021-8>
- Guachichullca-Ordóñez, L. A., & Banda-Poma, B. P. (2025). Ageism as an expression of social inequality in Latin America: Characteristics, sources and overcoming strategies. *Telos*, 27(3), 963–971. <https://doi.org/10.36390/telos273.16>
- Gurung, S., & Chaudhury, H. (2025). Relationship-centered care for older adults in long-term care homes: A scoping review. *Journal of Applied Gerontology*, 44(9), 1513–1532. <https://doi.org/10.1177/07334648241309761>

- Huynh, Q. T., Lai, A. X., Chua, T. S., Phoon, Y. L., Wong, K. L., Ng, Y. E., & Soon, M. M. L. (2025). Ageism toward older adults among healthcare workers and students: A scoping review. *International Journal of Nursing Studies Advances*, 10, 100468. <https://doi.org/10.1016/j.ijnsa.2025.100468>
- Jin, F., & Chen, T. (2025). Community nursing on subjective well-being of the elderly: Evidence from CLASS data. *BMC Nursing*, 24(1), 757. <https://doi.org/10.1186/s12912-025-03205-7>
- Kang, H., & Kim, H. (2022). Ageism and psychological well-being among older adults: A systematic review. *Gerontology & Geriatric Medicine*, 8, 23337214221087023. <https://doi.org/10.1177/23337214221087023>
- Lampersberger, L. M., Lohrmann, C., & Großschädl, F. (2024). Nurses' perspectives on old age and caring for adults aged 80 years and older: A cross-sectional study in long-term care. *BMC Nursing*, 23(1), 850. <https://doi.org/10.1186/s12912-024-02503-w>
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. SAGE Publications.
- López-Otín, C., Blasco, M. A., Partridge, L., Serrano, M., & Kroemer, G. (2023). Hallmarks of aging: An expanding universe. *Cell*, 186(2), 243–278. <https://doi.org/10.1016/j.cell.2022.11.001>
- Machado, J. B., Souza, M. M., Djinan, A. R. F. S., & Fhon, J. R. S. (2025). Perceptions of aging and ageism among nursing students at a public institution. *Journal of Evaluation in Clinical Practice*, 31(4), e70119. <https://doi.org/10.1111/jep.70119>
- Mak, P. Y., Tyrovolas, S., & Liu, J. Y. W. (2026). Family support in healthy dietary behaviours among community-dwelling older adults: A scoping review. *Nutrients*, 18(6), 963. <https://doi.org/10.3390/nu18060963>
- Martínez-Matamala C., Baeza-Cabello C., Díaz-Herrera C. y Oliva-Lagos P. (2023). La persistencia del “edadismo” en el trato hacia las personas mayores: Un análisis de los medios digitales en Chile (2014-2022). *Revista Pensamiento y Acción Interdisciplinaria*, 9(1), 31-56. <https://doi.org/10.29035/pai.9.1.31>
- Maya-Pérez, E., Galindo Soto, J. A., López Cervantes, P., & Ramírez Pérez, D. (2022). Perception of subjective well-being and negative and positive attitudes towards aging itself [Percepción del bienestar subjetivo, actitudes negativas y positivas hacia el propio envejecimiento]. *Horizonte Sanitario*, 21(3), 477–484. <https://doi.org/10.19136/hs.a21n3.4689>
- Menezes, L. M., Neves, B. M. D., Motta, B. B., Azeredo, F., & Quintão, C. C. A. (2023). Life cycle phases: Literature review and new classification proposal for application in healthcare. *Dental Press Journal of Orthodontics*, 28(5), e23spe5. <https://doi.org/10.1590/2177-6709.28.5.e23spe5>
- Montoya Rosales, J. N., Hernández Nava, N., Fabela Sánchez, L. F., & Rocha Rodríguez, M. del R. (2024). Perceptions of aging: a generational issue?. *LATAM Revista Latinoamericana De Ciencias Sociales Y Humanidades*, 5(6), 289 – 300. <https://doi.org/10.56712/latam.v5i6.3008>
- Nissanholtz-Gannot, R., Grinberg, K., Goldberg, S., Fighel, H., Sela, Y., Cohen, Y., & Hazoref, R. H. (2025). Examining the contribution of nurse practitioners to geriatric and palliative care in Israel. *Nursing reports*, 15(3), 101. <https://doi.org/10.3390/nursrep15030101>
- Nițulescu, R., Calapod, A., Tribus, L., & Hostiuc, S. (2026). The depths of elder abuse: A narrative review with medico-legal perspectives. *Behavioral Sciences*, 16(2), 180. <https://doi.org/10.3390/bs16020180>
- Ribera-Casado, J. M. (2024). Ageism revisited. *European Geriatric Medicine*, 15(2), 291–294. <https://doi.org/10.1007/s41999-024-00963-6>
- Sakamoto, R. (2025). Aging in Southeast Asia and Japan: Challenges and opportunities. *Geriatrics & Gerontology International*, 25(7), 837–854. <https://doi.org/10.1111/ggi.70062>
- Sarabia-Cobo, C. M., & Castanedo Pfeiffer, C. (2015). Changing negative stereotypes regarding aging in undergraduate nursing students. *Nurse Education Today*, 35(9), e60–e64. <https://doi.org/10.1016/j.nedt.2015.06.006>
- Segura López, G., & Giménez-Andreu, M. R. (2024). Contributing and protective factors against ageism among nursing students: A scoping review [Factores potenciadores y protectores frente al edadismo entre estudiantes de enfermería: Una scoping review]. *Gerokomos: Revista de La Sociedad Española de Enfermería Geriátrica Y Gerontológica*, 35(2), 96–101. <https://enfispo.es/servlet/articulo?codigo=9774969>
- Shreya, D., Fish, P. N., & Du, D. (2025). Navigating the future of elderly healthcare: A comprehensive analysis of aging populations and mortality trends using National Inpatient Sample (NIS) data (2010-2024). *Cureus*, 17(3), e80442. <https://doi.org/10.7759/cureus.80442>
- Tenchov, R., Sasso, J. M., Wang, X., & Zhou, Q. A. (2024). Aging hallmarks and progression and age-related diseases: A landscape view of research advancement. *ACS Chemical Neuroscience*, 15(1), 1–30. <https://doi.org/10.1021/acscchemneuro.3c00531>

- Theodorakis, N., Kollia, Z., Christodoulou, M., Nella, I., Spathara, A., Athinaou, S., Triantafylli, G., Hitas, C., Anagnostou, D., Kreouzi, M., Kalantzi, S., Spyridaki, A., & Nikolaou, M. (2025). Barriers to implementing effective healthcare practices for the aging population: Approaches to identification and management. *Cureus*, 17(2), e79590. <https://doi.org/10.7759/cureus.79590>
- Thiamwong, L., & Shattell, M. (2025). Every fall matters: Challenging ageism and negative self-perception of aging. *Journal of Psychosocial Nursing and Mental Health Services*, 63(12), 10–13. <https://doi.org/10.3928/02793695-20251106-02>
- Tong, A., Sainsbury, P., & Craig, J. (2007). Consolidated criteria for reporting qualitative research (COREQ): a 32-item checklist for interviews and focus groups. *International Journal for Quality in Health Care*, 19(6), 349–357. <https://doi.org/10.1093/intqhc/mzm042>
- Villarreal-Salazar, A. del C., Enríquez-Reyna, M. C., & Hernández-Cortés, P. L. (2024). Attitudes of university students toward older adults [Actitudes de jóvenes universitarios hacia las personas adultas mayores]. *Revista CienciaUANL*, 27(124), 57–62. <https://doi.org/10.29105/cienciauanl27.124-8>
- Wang, C. Y., Ni, C. H., Chiu, C. W., Chen, R., Chen, I. H., Liu, M. F., & Chuang, Y. H. (2026). Discrimination against older adults and related behaviors among nurses: A cross-sectional study. *The Journal of Nursing Research:JNR*, 34(3), e457. <https://doi.org/10.1097/jnr.0000000000000743>
- Wen, H., Huang, Z., Zhang, R., Jiang, Y., Peng, L., & Chen, Y. (2025). Enhancing nursing ethics education: comparing the PAD model and traditional lecture-based learning. *BMC Medical Ethics*, 26(1), 158. <https://doi.org/10.1186/s12910-025-01319-w>
- Yazdi-Feyzabadi, V., Sabermahani, M., Borhaninejad, V., & Iranmanesh, M. (2025). Breaking barriers: Challenges faced by the older adults in accessing primary healthcare in a developing country. *BMC Geriatrics*, 25(1), 946. <https://doi.org/10.1186/s12877-025-06712-z>

Authors' insight

Key points

- Nursing students may demonstrate respect for older adults while simultaneously holding negative stereotypes about aging, revealing a potential gap between their personal values and their attitudes.
- Family experiences, cultural backgrounds, religious beliefs, and nursing education may influence how students perceive aging and interact with older adults.
- Understanding this duality can help educators develop learning strategies that challenge ageist attitudes, promote positive perceptions of aging, and improve the quality of care for older adults.

Emerging nursing avenues

- How do nursing students perceive aging and older adults, and what factors contribute to the coexistence of respect and ageist attitudes?
- How do family backgrounds, cultural values, religious beliefs, and academic experiences shape nursing students' perceptions of aging and ageism?
- How can nursing education address the gap between students' expressed respect for older adults and the persistence of negative stereotypes and ageist attitudes?

How to cite this article (APA style)

Arpasi-Quispe, O., Rojas-Regalado, N. M., Ticllas-Garcilazo, D. D., Tinoco-Salas, A. M., Quispe-Calsin, S. B., Ccuno-Melquiades, V. G., & Fhon, J. R. S. (2026). Between respect and prejudice: The duality of perception on aging and ageism among nursing students. *Journal of Holistic Nursing Science*, 13(2), 266-277. <https://doi.org/10.31603/jhns.15958>