

# The Relationship Between Impulsivity and Intergenerational-Tension

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**Received date:** June 01, 2026; **Accepted date:** June 14, 2026; **Published date:** June 21, 2026

**Citation:** Mohammad Beigi Ali, Zahra Saberi, (2026), The Relationship Between Impulsivity and Intergenerational-Tension, *Psychology and Mental Health Care*, 10(4): DOI:10.31579/2637-8892/376

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## Abstract

The associations between impulsivity and intergenerational-tension people from Iran were examined.

**Method:** The participants in the research were 783 people from Iran, of whom 374 were male (47.8%) and 409 were female (52.2%). The age range of the participants was from 17 to 66 years, with an average of 30.45 and a standard deviation of 9.61. We used 2 questionnaires: the Barratt Impulsiveness Scale and the prescriptive intergenerational-tension ageism scale.

**Results:** The results showed that there was a significant correlation between impulsiveness and its dimensions and prescriptive intergenerational-tension ageism and its dimensions. These correlations were almost the same for men and women, with some minor differences. The results of multiple regression showed that impulsiveness and its dimensions in some cases predict intergenerational tension and its dimensions.

**Conclusion:** Based on the results of this study, it can be said that people with high impulsiveness, considering their characteristics, enter into competition with the elderly, who are actually the owners of power, position, social influence, and wealth, in order to achieve their goals and desires. They use impulsiveness to obtain the rights they assume for themselves, satisfy their needs, and achieve their goals. Since it does not consider the rights and consent of the elderly, it leads to intergenerational tension and ageism. These findings emphasize the importance of paying attention to the impulsivity construct and its dimensions as a trait, personality trait, and behavioral characteristic that can affect intergenerational tension and ageism in young people.

**Keywords:** elderly, impulsivity; intergenerational tension; ageism

## Introduction

Impulsivity is a personality trait that affects human behavior in many areas of life (Sharma, Markon & Clark, 2014). It has various definitions according to different approaches. According to Eysenck (Eysenck, 1993), impulsivity is characterized by unplanned, rapid, and risky behaviors. Generally, Impulsivity is defined as a persistent behavioral pattern associated with rapid and unplanned responses to various external and internal stimuli (Moeller et al., 2001). Impulsivity in its various dimensions is associated with risky choices, lack of planning, a tendency to act prematurely, difficulty delaying responses, and choices made without thinking and expecting immediate rewards (Moeller et al., 2001; Dalley, Everitt & Robbins, 2011; Bari & Robbins, 2013; Nigg, 2017;

Morris, O'Callaghan & Le Heron, 2022). It is a multifactorial construct that aims to explain behavior that appears to be premature, misperceived, excessively risky, inappropriate to the situation or frequently leads to undesirable consequences (Dougherty et al., 2005; Enticott & Ogloff, 2006; Evenden, 1999; Morgan et al., 2011; Sharma et al., 2014). Accordingly, impulsivity is a multi-component construct rather than a single construct (Nigg, 2017; Morris, O'Callaghan & Le Heron, 2022; Sharma, Markon & Clark, 2014). Impulsivity, according to Barratt (1994), consists of three dimensions: a motor dimension (acting without thinking), a cognitive dimension (rapid cognitive decision-making), and a non-planning dimension (reduced future orientation). Nigg et al (2005) defined impulsivity as a hasty response in situations where a more considered response would be more appropriate. Also, according to

Patton et al (1995) three factors contribute to impulsivity: acting in the moment (motor activation), not focusing on the task at hand (inattention), and not planning and thinking carefully (non-planning). From a behavioral perspective, impulsivity is defined as actions that are immature, risky, inappropriate to the situation, and inconsiderate, and that usually have negative consequences (Evenden, 1999). Cognitive impulsivity is assessed in decision-making, where individuals are unable to compare immediate and long-term consequence (Bechara et al., 1994). Recent research emphasizes the multidimensional nature of impulsivity and its different types (Evenden, 1999). Given that measures of impulsivity are based on different theoretical approaches, rarely has research examined all measures of impulsivity in order to assess its multidimensional nature (Dougherty et al., 2005; Lane et al., 2003; Reynolds, et al., 2006). It is also unclear whether the different measures are related to each other (Morgan, Gray & Snowden, 2011). Moeller et al (2001) view impulsivity from a bio-psycho-social perspective. They argue that a comprehensive definition of impulsivity should include reduced sensitivity to the negative consequences of behavior, immediate and unplanned responses to stimuli before fully processing information, and disregard for the long-term consequences of a behavior. According to Dickman (1990, 2000) who believes that there are two types of impulsivities: dysfunctional impulsivity or impulsivity with negative consequences and functional impulsivity with positive consequences. Impulsivity is a personality trait that is an important characteristic of several mental illnesses and is associated with high-risk behaviors (Bijttebier et al., 2009). In relation to personality traits, impulsivity is associated with psychosis (Eysenck, et al., 1992; Zuckerman, 1979) or low conscientiousness (Costa & McCrae, 1992). High impulsivity is associated with risky behaviors from motorcycle riding and motor vehicle crashes (Cheng & Lee, 2012; Teese & Bradley, 2008) Sensation seeking, an aspect of impulsivity models (e.g., Whiteside & Lynam, 2001), has been associated with a variety of risky recreational activities, such as skydiving (Myrseth Et al., 2012), rock climbing (Llewellyn & Sanchez, 2008), and extreme sports (Carlson, 2008). High scores on impulsivity are associated with problematic behaviors such as cell phone misuse (Billieux, Van Der Linden, & Rochat, 2008) and viewing Internet pornography (Wetterneck et al., 2012) These individuals are unplanned and procrastinate (Youzhi & Jing, 2009), have high unsecured debt (Ottaviani & Vandone, 2011), and have difficulty adjusting socially at school and in the workplace (Whiteside & Lynam, 2001) People with high impulsivity face peer rejection due to their behavioral and thought patterns (Hays, 2000) and experience various types of cognitive distortions (Gagnon et al., 2013). Impulsivity is an important personality trait associated with mental health problems (Sharma, Markon, Clark, 2014). Impulsivity is a major feature of mental disorders such as addiction (Rømer Thomsen et al., 2018) paraphilia (Solla P et al., 2015). personality disorders (Gunderson et al., 2018) and self-harm (Ran et al., 2021). Furthermore, impulsivity often leads to many undesirable outcomes, including interpersonal and social problems such as aggression (Gvion & Apter, 2011) juvenile delinquency, and criminality (Sharma, Markon, Clark, 2014). A review of the literature on impulsivity suggests that it encompasses a wide range of theoretical constructs, behaviors, and traits (Enticott and Ogloff, 2006; Evenden, 1999; Reynolds et al., 2006). Two main domains of impulsivity are reflected in the literature: trait impulsivity and neurobehavioral impulsivity. Trait impulsivity may refer to measures of general impulsivity, such as that measured by the Barratt Impulsivity Scale (BIS-11) (Patton & Stanford, 1995) or to specific aspects of trait impulsivity related to positive or negative emotional states

(emotional urgency), such as that measured by the UPPS Impulsive Behavior Scale (Whiteside & Lynam, 2001). Trait and neurobehavioral measures of impulsivity are generally not correlated, suggesting that they represent distinct dimensions of the impulsivity construct (Patton & Stanford, 1995).

### Ageism

People are generally living longer than in the past (WHO, 2021). but in many different countries and cultures around the world, there are also negative associations with aging (Ayalon & Tesch-Römer, 2018; Levy & Apriceno, 2019; Löckenhoff et al., 2009; North & Fiske, 2015; Swift et al., 2019; WHO, 2021). Age is a social construct (Giles & Reid, 2005; Levy & Macdonald 2016). Ageism exists towards groups across the age spectrum, such as young adults who are subject to negative stereotypes (entitled, reckless, spoiled, incompetent, unreliable and unstable) and discrimination in employment, housing and everyday life (also referred to as youthism) (Ayalon, 2013; Chasteen et al., 2020; Francioli & North, 2021; WHO, 2021). Historically, ageism has represented both positive and negative views and interactions with older people (Levy & Macdonald, 2016; Nelson, 2005; Palmore, 1989). Stereotyping is the prejudice or discrimination against people based on age (Ayalon & Tesch-Römer, 2017). Age discrimination against older people includes stereotyping (e.g., assuming older people are incompetent and old and a burden on society), prejudice (e.g., assuming hearing and cognitive impairments and therefore speaking loudly and slowly in simple sentences), and discrimination (e.g., treating older people with disrespect, prejudice, and indifference) (Levy, Lytle & Macdonald, 2022). Ageism and discrimination are surprisingly widespread, according to available research (Levenson, 1981). Age discrimination against older people is seen in a variety of settings (e.g., being ignored for common illnesses that are a natural part of aging (Bowling, 1999, 2007) In the workplace (e.g., Cleveland & Landy, 1983; Liden, Stilwell, & Ferris, 1996). Their abuse in nursing homes (e.g., Griffore et al., 2009; Malmadal, Ingebrigsten, & Saveman, 2009) Even within their own families (e.g., Coyne, Reichman, & Berbig, 1993; Gaugler, Leach, & Anderson, 2005; Pillemer & Wolf, 1986; Ramsey-Klawnsnik, 2004). Deprivation of Leading roles in films (Bildtgård, 2000), and in magazine advertisements that become stereotyped (Miller, Miller, McKibbin, & Pettys, 1999). Evidence suggests that there is a relationship between higher levels of education and lower levels of ageism (Officer et al. 2020). Psychological research suggests that people combine multiple stereotypes about aging (Cuddy et al., 2005). Reflecting this diversity, some researchers define "ageism" as encompassing both favorable and unfavorable prejudices toward older people (Palmore, 1999). Older people are seen as good and kind to children, but also as forgetful, sick, incompetent, and unattractive (Levy and MacDonald, 2016). These positive and negative views of older people have been reflected in the emergence of multifaceted definitions of ageism. However, most ageism emphasizes the negative aspects (Cuddy et al., 2005) The World Health Organization also defines ageism as beliefs that view older people as necessarily dependent, weak, or a burden on others (WHO, 2018). Age stereotypes and negative perceptions of aging are so prevalent in our society that we can continue to endorse them even after we ourselves have become older adults (when these age stereotypes become self-directed thoughts or perceptions of aging) (Levy, 2009). Ageism is undoubtedly detrimental to the quality of life of the elderly population. Ageism is associated with the mental health of older people. High levels of ageism are associated with a greater risk of loneliness and mental health problems, and reducing ageism is essential to improving the

quality of life of older people, especially when it comes to mental health. Public policies and cultural changes that help reduce ageism can lead to a reduction in feelings of loneliness in individuals (Rosell & Vergés, 2023). According to the latest World Health Organization report on aging and health, there are many health inequalities and problems, especially regarding mental health, among the elderly population (Officer et al., 2016; WHO, 2015). Loneliness and ageism have a significant negative impact on the mental health of older adults (Donovan & Blazer, 2020; Holt-Lunstad, 2021; Officer et al., 2016; Ribeiro-Gonçalves et al., 2023). Ageism is a major threat to the well-being of older adults (Marques et al., 2020). Psychologists also report that ageism, emphasizing negative stereotypes, leads to harmful behaviors toward the elderly, such as childishness, which occurs when “a person in power treats, responds to, or treats an older person in a childlike manner (Marson & Powell, 2014). Since aging is a process and, of course, a personal and unique experience, the attitude of individuals towards the aging process may not only affect their quality of life in later years but also their long-term health outcomes (Harrison, 2008). When older people hold ageist attitudes towards themselves, this is associated with higher rates of all-cause mortality, poorer health, and slower recovery from illness (Meisner, 2012). The roots of prejudice at the individual, interpersonal, evolutionary, and sociocultural levels have been explored from the perspectives of social psychological theories (North & Fiske, 2012). At the individual level, theorists have described age stereotypes as a self-protective function (North & Fiske, 2012). These theories include terror management theory (TMT) (Becker, 1973). who believes that the fear and avoidance of older people is because they remind us of our own aging and mortality (Martens et al., 2005). Social identity theory (SIT), which highlights the relationship between personal identity and group identity, along with the need to feel positive about one's group, may also explain age discrimination (Kite & Wagner, 2004; Tajfel & Turner, 1979). Interpersonal theories focus on face-to-face interactions. Many of these perspectives emphasize the role of older people's physical appearance in reinforcing age discrimination (Palmore, 2003). Also, according to North & Fiske (2012), social structure and the limitation of resources for young people can create intergenerational tension. A fundamental point that is present in almost all theories of ageism examined is that older people are largely excluded from the mainstream of society (Robinson & Skill, 1995; Thompson, 2007; Thompson & Thompson, 2009). The increase in the elderly population and their life expectancy has led to an increase in intergenerational tension with the younger generation, thereby reinforcing the view that older people are a greater burden on society (Marques et al., 2020). According to North and Fiske's (2012) intergenerational tension theory, older people are consuming and depleting resources shared with young people, and given that they have more power, influence, and resources, older people should give up their political employment and influence and not participate in activities that are exclusive to young people (North & Fiske, 2012, 2013, 2016).

### Overview and Predictions

Regarding the characteristics of impulsivity such as (hasty behavior, irresponsibility, disregard for consequences, playing a significant role in criminal behavior, inability to focus thoughts, tendency to act without thinking, and lack of orientation towards the future), which were discussed in the introduction. Since impulsivity has significant consequences for individuals, their friends, and families and also various studies that emphasize that impulsivity is a behavioral characteristic that can be the source of various social problems (Andrade, Alessi & Petry,

2013; Grant, Odlaug & Wozniak, 2007; Honkanen et al., 2012; Horn et al., 2003). It is necessary to examine the relationship between impulsivity and intergenerational tensions and age discrimination. The results of this study can have valuable achievements in understanding the problems between the elderly and the young and improving the situation of the elderly, whose population is increasing day by day

The aim of the present study was to investigate whether impulsivity traits and its dimensions, which include attentional impulsivity, motor impulsivity, and disorganized impulsivity, are associated with intergenerational prescriptive-stress age discrimination and its dimensions (consumption, substitution, and identity) among people of Iran.

### We formulated the following hypotheses for the present study:

#### Hypothesis 1:

We expected total impulsivity and its dimensions to be associated with total prescriptive intergenerational-tension ageism.

#### Hypothesis 2:

We expected total impulsivity and its dimensions to be associated with consumption.

#### Hypothesis 3:

We expected total impulsivity and its dimensions to be associated with succession.

#### Hypothesis 4:

We expected total impulsivity and its dimensions to be associated with identity.

## Methods

### Participants and Procedure

The participants in the research were 783 people from Iran, of whom 374 were male (47.8%) and 409 were female (52.2%). The age range of the participants was from 17 to 66 years, with an average of 30.45 and a standard deviation of 9.61. In women, the age range is between (17 to 66) with a mean of 31.72 and a standard deviation of 9.69. In men, the age range is between (18 to 64) with a mean of 29.05 and a standard deviation of 9.35. The economic situation of the participants in this study was as follows: 2.2% very bad, 16.9% good, 57.9% average, 19.2% bad, and 4% very bad. The research design used is the correlation research method with a cross-sectional approach. The data collection method was done online and through social media. The method of work was as follows: participants were contacted, and the objectives of the research were explained to them. After expressing their consent, a link to the questions designed in Google Forms software was sent to them, and the participants answered the test questions. We used three online self-report questionnaires, which were carefully translated from the original English version under the supervision of linguists. The statistical method used in this study was the Pearson correlation test. Data were analyzed using SPSS 27 software.

## Measures

### Barratt Impulsiveness Scale, 11th version

The Barratt Impulsiveness Scale (BIS-11) (Patton & Stanford, 1995) is a 30 item self-report instrument designed to assess the

personality/behavioral construct of impulsiveness. All items are measured on a 4-point Likert scale (1=rarely/never; 2=occasionally; 3=often; 4=almost always/always). This scale consists of three components as follows: (1) attentional impulsiveness, (2) motor impulsiveness, (3) non-planning impulsiveness. Some items are scored in reverse order to avoid a response bias. The higher the BIS-11 total score, the higher the impulsiveness level is. The present research, Cronbach's alphas for the subscales (categories) are as follows: attentional impulsiveness subscale was (items8;  $\alpha = .51$ ); motor impulsiveness subscale was (items11;  $\alpha = .66$ ); non-planning subscale was (items11;  $\alpha = .46$ ) and total Impulsiveness Scale was (30 items;  $\alpha = .80$ ).

### prescriptive intergenerational-tension ageism scale: (SIC)

The SIC contains 20 items and three subscales: Succession, Identity, and Consumption. Although prior scales focus mainly on what older people allegedly "are" (descriptive stereotypes), the current analysis centers on the role of more controlling, "should"-based, prescriptive beliefs. This approach proposes three prescriptive dimensions that younger generations are particularly likely to endorse: active Succession of enviable positions and influence, (2) age-appropriate, symbolic Identity maintenance, and (3) minimizing passive shared-resource Consumption. The Succession subscale contains eight items, an example item from this scale is, "It is unfair that older people get to vote on issues that will impact younger people much more." The Identity subscale contains five items, an example from this scale is, "Older people shouldn't even try to act cool." The Consumption subscale contains seven items, an example from this scale is, "Older people shouldn't be so miserly with their money if their younger relatives need it." All of the items on the SIC are measured on a 6-point scale, where 1 = strongly disagree and 6 = strongly agree. Items on the scale are averaged to give an overall score of prescriptive stereotype endorsement. North and Fiske (2013) found that the SIC prescriptive ageism scale had strong reliability (.91) as well as strong divergent and convergent validity. In addition, they found that the SIC significantly predicted ratings of warmth and competence for violating targets. In this investigation, the SIC scale also achieved high internal consistency ( $\alpha = .93$ ) (North and Fiske, 2013). The present research, Cronbach's alphas for the subscales (categories) are as follows: Succession subscale was (items8;  $\alpha = .70$ ); identity subscale was (items5;  $\alpha = .83$ ); consumption subscale was (items7;  $\alpha = .53$ ) and total prescriptive intergenerational-tension ageism scale was (20 items;  $\alpha = .77$ ).

## Result

### Descriptive statistics and zero-order correlations

The descriptive statistics and zero-order correlations are presented in Table 1.

#### Descriptive statistics and zero-order correlations

The descriptive statistics and zero-order correlations are presented in Table 1.

As shown in the M-column (Table 1), the mean "intergenerational-tension ageism" is ( $M = 61.96$ ,  $SD = 11.27$ ). Also, the means of the subscale's "consumption" ( $M = 20.64$ ,  $SD = 4.78$ ), "succession" ( $M = 30.32$ ,  $SD = 5.98$ ), and "identity" ( $M = 11.01$ ,  $SD = 4.95$ ) are given.

Moreover, the mean of men's "intergenerational-tension ageism" was ( $M = 64.54$ ,  $SD = 10.95$ ). Also, the means of the subscales for men "

Consumption" ( $M = 21.43$ ,  $SD = 4.89$ ), "Succession" ( $M = 31.09$ ,  $SD = 6.19$ ), and "Identity" ( $M = 12.02$ ,  $SD = 5.15$ ) are given.

The mean for women for "intergenerational-tension ageism" was ( $M = 59.61$ ,  $SD = 11.05$ ). Also, the means of the subscales for men "consumption" ( $M = 19.92$ ,  $SD = 4.56$ ), "succession" ( $M = 29.61$ ,  $SD = 5.69$ ), and "identity" ( $M = 10.08$ ,  $SD = 4.57$ ) are given.

As the results show, the mean scores of intergenerational tensions in women were lower than the mean scores of men in both the total test score and the subscales. According to these results, intergenerational tension towards the elderly is less among women than among men. The correlations between attentional impulsiveness with consumption (0.15), identity (0.24) and total prescriptive intergenerational-tension ageism (0.18) is positive and significant. The correlations between attentional impulsiveness with succession (0.03) is positive and not significant. In the men, the correlations between attentional impulsiveness with consumption (0.13), identity (0.23) and total prescriptive intergenerational-tension ageism (0.16) is positive and significant. The correlations between attentional impulsiveness with succession (-0.02) is negative and significant. In the women, the correlations between attentional impulsiveness with consumption (0.15), identity (0.23) and total prescriptive intergenerational-tension ageism (0.19) is positive and significant. The correlations between attentional impulsiveness with succession (0.06) is positive and not significant. The correlations between motor impulsiveness with consumption (0.17), identity (0.36) and total prescriptive intergenerational-tension ageism (0.23) is positive and significant. The correlations between motor impulsiveness with succession (0.00) is not significant. In the men, the correlations between motor impulsiveness with consumption (0.17), identity (0.38) and total prescriptive intergenerational-tension ageism (0.20) is positive and significant. The correlations between motor impulsiveness with succession (-0.08) is negative and not significant. In the women, the correlations between motor impulsiveness with consumption (0.17), identity (0.33) and total prescriptive intergenerational-tension ageism (0.25) is positive and significant. The correlations between motor impulsiveness with succession (0.08) is positive and not significant. The correlations between non-planning impulsiveness with consumption (0.22), identity (0.27) and total prescriptive intergenerational-tension ageism (0.23) is positive and significant. The correlations between non-planning impulsiveness with succession (0.04) is positive and not significant. In the men, the correlations between non-planning impulsiveness with consumption (0.22), identity (0.26) and total prescriptive intergenerational-tension ageism (0.19) is positive and significant. The correlations between non-planning impulsiveness with succession (-0.06) is negative and not significant. In the women, the correlations between non-planning impulsiveness with consumption (0.20), succession (0.13), identity (0.27) and total prescriptive intergenerational-tension ageism (0.26) is positive and significant. The correlations between total impulsiveness with consumption (0.21), identity (0.35) and total prescriptive intergenerational-tension ageism (0.25) is positive and significant. The correlations between total Impulsiveness with Succession (0.02) is positive and not significant. In the men, the correlations between total impulsiveness with consumption (0.20), identity (0.35) and total prescriptive intergenerational-tension ageism (0.22) is positive and significant. The correlations between total impulsiveness with Succession (-0.07) is negative and not significant. In



the women, the correlations between total impulsiveness with prescriptive intergenerational-tension ageism (0.27) is positive and consumption (0.20), succession (0.10), identity (0.33) and total significant.

|   |                                                     | G | M     | Sd    | 1     | 2      | 3     | 4     | 5     | 6     | 7     | 8 |
|---|-----------------------------------------------------|---|-------|-------|-------|--------|-------|-------|-------|-------|-------|---|
| 1 | Consumption                                         | T | 20.64 | 4.78  |       |        |       |       |       |       |       |   |
|   |                                                     | M | 21.43 | 4.89  |       |        |       |       |       |       |       |   |
|   |                                                     | W | 19.92 | 4.56  |       |        |       |       |       |       |       |   |
| 2 | Succession                                          | T | 30.32 | 5.98  | .34** |        |       |       |       |       |       |   |
|   |                                                     | M | 31.09 | 6.19  | .30** |        |       |       |       |       |       |   |
|   |                                                     | W | 29.61 | 5.69  | .36** |        |       |       |       |       |       |   |
| 3 | Identity                                            | T | 11.01 | 4.95  | .38** | .11**  |       |       |       |       |       |   |
|   |                                                     | M | 12.02 | 5.15  | .27** | -.01   |       |       |       |       |       |   |
|   |                                                     | W | 10.08 | 4.57  | .45** | .20**  |       |       |       |       |       |   |
| 4 | Total prescriptive intergenerational-tension ageism | T | 61.96 | 11.27 | .77** | .72**  | .66** |       |       |       |       |   |
|   |                                                     | M | 64.54 | 10.95 | .74** | .69**  | .59** |       |       |       |       |   |
|   |                                                     | W | 59.61 | 11.05 | .79** | .75**  | .70** |       |       |       |       |   |
| 5 | Attentional impulsiveness                           | T | 17.73 | 3.29  | .15** | .03    | .24** | .18** |       |       |       |   |
|   |                                                     | M | 17.99 | 3.10  | .13** | -.02** | .23** | .16** |       |       |       |   |
|   |                                                     | W | 17.50 | 3.44  | .15** | .06    | .23** | .19** |       |       |       |   |
| 6 | Motor impulsiveness                                 | T | 23.45 | 4.54  | .17** | .00    | .36** | .23** | .66** |       |       |   |
|   |                                                     | M | 23.71 | 4.70  | .17** | -.08   | .38** | .20** | .67** |       |       |   |
|   |                                                     | W | 23.21 | 4.38  | .17** | .08    | .33** | .25** | .65** |       |       |   |
| 7 | Non-planning impulsiveness                          | T | 23.13 | 3.82  | .22** | .04    | .27** | .23** | .54** | .61** |       |   |
|   |                                                     | M | 23.38 | 3.90  | .22** | -.06   | .26** | .19** | .53** | .62** |       |   |
|   |                                                     | W | 22.90 | 3.74  | .20** | .13*   | .27** | .26** | .54** | .60** |       |   |
| 8 | Total Impulsiveness                                 | T | 64.31 | 10.03 | .21** | .02    | .35** | .25** | .83** | .90** | .84** |   |
|   |                                                     | M | 65.09 | 10.10 | .20** | -.07   | .35** | .22** | .83** | .91** | .84** |   |
|   |                                                     | W | 63.61 | 9.92  | .20** | .10*   | .33** | .27** | .84** | .89** | .83** |   |

Note: \*p < .05; \*\*p < .01. T= Total (men and women) N= 783, M= men, N= 374 W= women, N= 409

**Table 1: Intercorrelations and Descriptive Statistics**

In order to explain and predict prescriptive intergenerational-tension ageism and its dimensions as an outcome variable, a multiple regression model was used on impulsivity and its dimensions as a predictor variable. Multiple linear regression was performed to examine the variance of prescriptive intergenerational-tension ageism scores and its dimensions. The total impulsivity score and its dimensions as predictor variables, with the total score of prescriptive intergenerational-tension ageism and its dimensions as outcome variables, were entered into the model separately using the Enter method (given that we had 4 outcome variables [which included the total score of prescriptive intergenerational-tension ageism and its 3 dimensions], each of them was entered into the model separately with the total impulsivity score and its 3 dimensions as predictor variables). The software assumed the Motor impulsiveness predictor variable as (Excluded variable) and did not include it in the regression model and calculated the other variables. For this reason, in (Table 2), 2 impulsivity dimensions and total impulsivity are listed as predictor variables. According to Table 2, the model was able to explain 6.7% of the variance in the outcome variable (adjusted R<sup>2</sup> square = 0.063), which significantly predicted the outcome variable. (p=0.000, F= (3,780) =18.830) One predictor variable contributed significantly to the model, Also, total impulsivity was associated with the total score of prescriptive intergenerational-tension ageism (p=0.008, t=2.645, β=0.330). The other

two variables, non-planning impulsiveness and Attentional impulsiveness, did not contribute significantly to the variance in the total score of prescriptive intergenerational-tension ageism. According to Table 2, the model was able to explain 5% of the variance of the outcome variable (adjusted R<sup>2</sup> square = 0.047), which significantly predicted the outcome variable. (p=0.000, F= (3,780) = 13.796). None of the variables contributed significantly to the variance of consumption. According to Table 2, regarding the relationship between impulsivity and its dimensions and succession, the model was able to explain 0.3 variance of the outcome variable (adjusted R<sup>2</sup> square = -.001), which not significantly predicts the outcome variable (p=0.534, F= (3,780) = 0.731). None of the variables contributed significantly to the variance of succession. According to Table 2, regarding the relationship between the total impulsivity score and its dimensions with identity, the model is able to explain 13.4 variance of the outcome variable (adjusted R<sup>2</sup> square =.131), which significantly predicts the outcome variable (p = 0.000, F = (3, 780) = 40.260). Three predictor variables significantly contributed to the model. Also, Attentional impulsiveness was associated with identity. (p=0.001, t= -3.493, β= -.367). Non-planning impulsiveness was associated with identity. (p=0.010, t= -2.565, β= -.234). Total Impulsiveness was associated with identity. (p=0.000, t=-6.544, β=.346).

|                                               | Predictor variable         | R <sup>2</sup> square | Adjusted R <sup>2</sup> square | F      | p     | Constant value | $\beta$ | t      | p     |
|-----------------------------------------------|----------------------------|-----------------------|--------------------------------|--------|-------|----------------|---------|--------|-------|
| prescriptive intergenerational-tension ageism |                            |                       |                                |        |       |                |         |        |       |
|                                               |                            | .067                  | .063                           | 18.668 | 0.000 | 43.433         |         |        |       |
|                                               | Attentional impulsiveness  |                       |                                |        |       |                | -.252   | -1.016 | 0.310 |
|                                               | Non-planning impulsiveness |                       |                                |        |       |                | 0.077   | 0.357  | 0.721 |
|                                               | Total Impulsiveness        |                       |                                |        |       |                | 0.330   | 2.645  | 0.008 |
| Consumption                                   |                            |                       |                                |        |       |                |         |        |       |
|                                               |                            | 0.050                 | 0.047                          | 13.796 | 0.000 | 13.727         |         |        |       |
|                                               | Attentional impulsiveness  |                       |                                |        |       |                | -.020   | -.187  | 0.851 |
|                                               | Non-planning impulsiveness |                       |                                |        |       |                | 0.161   | 1.744  | 0.082 |
|                                               | Total Impulsiveness        |                       |                                |        |       |                | 0.055   | 1.033  | 0.302 |
| Succession                                    |                            |                       |                                |        |       |                |         |        |       |
|                                               |                            | 0.003                 | -0.001                         | 0.731  | 0.534 | 29.007         |         |        |       |
|                                               | Attentional impulsiveness  |                       |                                |        |       |                | 0.135   | 0.988  | 0.323 |
|                                               | Non-planning impulsiveness |                       |                                |        |       |                | 0.150   | 1.270  | 0.204 |
|                                               | Total Impulsiveness        |                       |                                |        |       |                | -.071   | -1.033 | 0.302 |
| Identity                                      |                            |                       |                                |        |       |                |         |        |       |
|                                               |                            | 0.134                 | 0.131                          | 40.260 | 0.000 | .699           |         |        |       |
|                                               | Attentional impulsiveness  |                       |                                |        |       |                | -.367   | -3.493 | 0.001 |
|                                               | Non-planning impulsiveness |                       |                                |        |       |                | -.234   | -2.565 | 0.010 |
|                                               | Total Impulsiveness        |                       |                                |        |       |                | 0.346   | 6.544  | 0.000 |

**Table 2:** Multiple linear regression analysis of prescriptive intergenerational-tension ageism scores and its dimensions.

## Discussion

The correlations between attentional impulsiveness with consumption, identity and total prescriptive intergenerational-tension ageism is positive and significant. The correlations between motor impulsiveness with consumption, identity and total prescriptive intergenerational-tension ageism is positive and significant. The correlations between non-planning impulsiveness with consumption, identity and total prescriptive intergenerational-tension ageism is positive and significant. The correlations between total impulsiveness with consumption, identity and total prescriptive intergenerational-tension ageism is positive and significant. One thing that can be said about the results of this study is that the results of this study are in line with previous research, considering that it examines the relationship between personality dimensions and intergenerational tension. In a study conducted by Mohammad Beigi and Saberi (2026), it was found that there is a relationship between aspects of narcissism and intergenerational tension and dangerous social worldviews. Another study, which is currently being published, also found that there is a relationship between aspects of narcissism and intergenerational tension with justice and injustice. (Mohammad Beigi & Saberi, In press). Also, in another study, there was a relationship between psychopathic personality traits and intergenerational tension. This study shows that there is a relationship between different aspects of personality and intergenerational tension (Mohammad Beigi & Saberi, 2025). According to the SIT group identity theory (Kite & Wagner, 2004; Tajfel & Turner, 1979) young people like to associate with their own age group and try to exclude, reject, and humiliate older people from their group in order to protect their self-esteem and protect themselves from identity threats. Young people need to identify more strongly with their own group (other young people) and thus alienate outgroup members (older people)

in an effort to enhance their self-esteem. As older adults are reminded of their ultimate mortality, younger individuals may emphasize differences in attitudes and personality traits to maintain psychological distance to protect themselves from identity threats (Greenberg et al., 2004). According to this theory, it can be said that young people try to stay away from the elderly, but considering that the elderly have social influence, power, resources and facilities in society, these people are considered potential serious competitors for the young, and young people consider the elderly as a danger to themselves and their group identity, so they enter into intergenerational tension and challenge them. One point that can be said regarding the subject of this research is that people who are more impulsive, according to their personality characteristics, when they feel a threat from the elderly, they react much worse and more severely towards the elderly and try to keep them away from them, and to do this, they try to take over their facilities, power and capital in any way possible so that they can more easily keep them away from themselves. These behaviors somehow eliminate and diminish the presence of the elderly and discriminate against them in a way. We found support for the prediction (Hypothesis 1) that total impulsivity and its dimensions associated with total prescriptive intergenerational-tension ageism. Multiple regression results showed that total impulsivity as a predictor variable predicts total prescriptive intergenerational-tension ageism. As rational animals, humans do what they believe is good for them. But sometimes they do not act in this way and behave in a way that does not reflect their values. (Strack & Deutsch, 2004). It is also believed that humans are rational and act in their own best interests, and when they do not, it must be because there is something wrong with them, a defect or lack of ability (Kopetz, Woerner, & Briskin, 2018). The fact that humans sometimes engage in self-destructive and irrational behaviors despite

having logic and reason is due to their impulsive behaviors, because impulsive behavior indicates "lack of control over unwanted behaviors or failure of inhibitory processes" (de Wit & Richards, 2004). It is also believed that impulsive behavior results from individuals' associations between a stimulus and a behavioral schema, appears automatically, and requires very few cognitive resources (Strack & Deutsch, 2003). In line with this concept, impulsive behavior has been described as a primary hedonic response to tempting stimuli (e.g., Loewenstein, 1996; Metcalfe & Mischel, 1999), a tendency to act without forethought and consideration of consequences (Ainslie, 1975; Rachlin & Green, 1972) a reflection of poor executive control (Hoyle, 2006; Romer et al., 2011; Strack & Deutsch, 2003) a failure to inhibit strong responses (Barkley, 1997; Logan, Cowan, & Davis, 1984; Logan, Schachar, & Tannock, 1997). With this introduction, it can be said that people who score high in impulsivity seek the assets, power, status, and influence of the elderly without logic or thought, and in order to obtain greater and immediate pleasure without thinking or foresight. For this reason, they enter into conflict with the elderly and fuel age discrimination. We found support for the prediction (Hypothesis 2) that total impulsivity and its dimensions associated with consumption. Multiple regression results showed that total impulsivity and its dimensions as a predictor variable predicts consumption.

In explaining the results of this study, according to Jeffrey Gray's (1970, 1981, 1987a), Reinforcement Sensitivity Theory (RST) (Gray, 1970, 1981, 1987a), it can be said that impulsivity is caused by reward motivation, which is regulated by the Behavioral Activation System (BAS) (Fowles, 1980).

It can be said that impulsive people are more responsive and motivated to positive motivational stimuli, so that they tend to gravitate towards situations that are likely to bring reward or freedom from punishment. With this introduction, considering that according to the theory of intergenerational tension, the elderly have more wealth, influence, power, and social status, and young people with high impulsivity, considering their characteristics, consider reaching the position of the elderly as their inalienable right according to the theory of intergenerational tension, and they consider achieving the benefits of the elderly as a reward for themselves. Therefore, their behavioral activation system is activated to achieve that reward and rights assumed for themselves, and they find sufficient motivation to eliminate the elderly and achieve their rights through impulsivity, so they begin to make impulsive behaviors and decisions against the elderly, which leads to intergenerational tension and age discrimination against the elderly. We found support for the prediction (Hypothesis 3) that total impulsivity and its dimensions associated with succession. Multiple regression results showed that total impulsivity and its dimensions did not predict succession as a predictor variable. We found support for the prediction (Hypothesis 4) that total impulsivity and its dimensions associated with total prescriptive intergenerational-tension ageism.

Multiple regression results showed that total impulsivity as a predictor variable predicts identity.

In explaining the results of this research, it can be said that impulsive behavior can be a goal-directed act. For example, John Dewey (1936) believed that impulsive behaviors, even if they occur without conscious awareness, are intended to achieve a goal. Gray (1972, 1981) stated that impulsivity predisposes individuals to engage in goal-directed efforts. Finally, Strack and Deutsch (2003) point out that some behaviors may be

performed "impulsively" to meet current needs. Also, according to Kopetz, Woerner & Briskin (2018), impulsive behavior may be a response to specific needs or goals that individuals currently have and an attempt by individuals to fulfill their current motivations or needs. These ideas point to the possibility that impulsive behaviors may actually reflect individuals' efforts to fulfill their goals. In fact, impulsive behavior can be a means for these individuals to achieve their current goals. Given that young people are now in a situation where they see older people who have more status, wealth, and influence as their competitors in order to build a better future for themselves, people who scored higher in impulsivity, given their characteristics, are naturally in the world of immediate gratification and achieving their own desires. Therefore, they engage in impulsive behaviors to satisfy their needs and achieve their goals. Since these behaviors do not consider the rights of the elderly, they lead to intergenerational tension and age discrimination.

## Conclusion

The results of this study were very interesting. It was found that there is a significant correlation between Impulsiveness and its dimensions (attentional impulsiveness, motor impulsiveness, non-planning impulsiveness) and prescriptive intergenerational-tension ageism and its dimensions (consumption, succession, and identity). These correlations were almost the same for men and women, with some minor differences. The results of multiple regression showed that impulsiveness and its dimensions in some cases predict intergenerational tension and its dimensions. Based on the results of this study, it can be said that people with high impulsivity, due to their characteristics (such as hasty behavior, irresponsibility, lack of attention and thinking about the consequences of actions, quick and hasty decision-making, and lack of understanding of conditions beyond the here and now), enter into competition with the elderly, who are actually the owners of power, status, social influence, and wealth, to achieve their goals and desires. Young people consider the status, position, influence, and facilities of the elderly as their right and use impulsivity to obtain them, as well as to satisfy their needs and achieve their goals. Since it does not consider the rights and consent of the elderly, it leads to intergenerational tension and ageism. These findings emphasize the importance of paying attention to the impulsivity construct and its dimensions as a trait, personality trait, and behavioral characteristic that can affect intergenerational tension and ageism in young people. One limitation of this study was the limited focus on prescriptive intergenerational-tension ageism. It is important that other related issues (such as religious, cultural, social, ethnic, and economic factors) be examined more carefully in future studies. Another limitation of this study was that, due to the design of this study, it was not possible to examine causality between the variables studied. Future studies may provide a better understanding of the causal links between these variables by using experimental manipulations or longitudinal approaches. A third limitation of this study was that we focused exclusively on data collected from self-report questionnaires, which may have biased the responses of participants, which could have affected the results of the study.

This study did not receive any specific funding from funding agencies in the government, commercial, or non-profit sectors.

## Acknowledgements

I would like to thank Dr. Michael North for using his resources and encouraging the use of the intergenerational tension approach in this article.

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DOI:10.31579/2637-8892/376

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