Beliefs of students about growing older and perceptions of working in gerontology

Educators in health and social care could do more to overcome the stereotypical views that deter trainees from choosing a career in the specialty, say Alice Coffey and colleagues.

Abstract

An ageing population that is increasing does not necessarily mean an increase in people who require health and social care. However, it is predicted that a wide range of such services is likely to be needed. This demand is set against a shortage of skilled healthcare professionals and a lack of interest in working with older people. There is a particular shortage of skilled gerontological workers in the developed world, made worse by a perceived lack of professional esteem, economic reward and poor working environments in the specialty. Most studies recommend education to enable individuals to develop accurate knowledge about the ageing process and interest in working with older people. There is a discrepancy in the literature as to whether health and social care workers hold positive or negative attitudes towards older people. As attitudes are strongly linked with perceptions of working with older people, this article presents a review of the literature and discussion on attitudes of health and social care students to ageing and perceptions of working with older people.

Keywords

Ageing, attitude, reward, students, workplace

AGEING POPULATIONS are proving a challenge for public health and social care systems (Liu et al 2013). The World Health Organization (WHO) (2014) states that between 2000 and 2050, the proportion of the world’s population over 60 years of age will double from about 11% to 22%. This is coupled with the fact that the oldest segment of this population, those aged 80 and over, is rapidly growing and expected to quadruple to 395 million by 2050.

While an increased number of older people does not necessarily mean more people requiring health and social care (Walter 2006, Kruse 2013, Remmers and Walter 2013), predicted increased dependency levels suggest that there will be a need to provide care for older people in hospitals, residential care, health and community settings (Lin et al 2011). The growing demand for care is set against a global shortage of skilled healthcare professionals (Fagerberg and Engström 2012) but, more worryingly, a lack of professionals interested in working with older people (Amrhein and Backes 2007, Gonçalves 2009, Samra et al 2013). In 2006, the WHO noted the shortage of skilled gerontological workers in the developed world and urged the development of training specific to older people’s care. However, issues such as low professional esteem and economic reward, poor working environments and lack of personal satisfaction (Koskinen 2010, Kydd et al 2013) have hampered efforts to attract more professionals to the specialty.

Attitudes have been defined as either positive or negative appraisals of people, places, things or events. Attitudes contain cognitive, behavioural and affective constituents and are based on individuals’ beliefs and values (Bundesministerium für Familie, Senioren, Frauen und Jugend 2010a, Matarrese et al 2013). Attitudes can change over time and are affected by social influence and emotional appeal (Bundesministerium für Familie, Senioren, Frauen und Jugend 2010b).
There is a discrepancy in the literature as to whether health and social care workers hold positive or negative attitudes towards older people (McLafferty and Morrison 2004, Nolan et al. 2006, Wehr and Buchwald 2007, Klaghofer et al. 2009, Boswell 2012, Berner et al. 2012, Liu et al. 2013). However, most studies advocate that education that enables individuals to develop accurate knowledge about the ageing process might improve responses to ageing and interest in working with this group (Boswell 2012, Swanlund and Kujath 2012, Duggan et al. 2013, Samra et al. 2013).

Butler (1969) described ageism as systematic stereotyping of, and discrimination against, people because they are old. Ageism is cited as a major factor in recruitment difficulties for the health and social care sectors (Masciadrelli 2014). Societal views exist of older people as a burden, unproductive, infirm and unable to perform basic care tasks (Lovell 2006, Kruse 2012), and several studies have highlighted the importance of societal influence on students’ views of older people (McKinlay and Cowan 2003, Remmers and Walter 2013). Attitudes are related to the quality of care. Research conducted with healthcare workers suggests that negative attitudes affect their decisions about care and treatment (Eurich 2008) and shape healthcare professionals’ behaviours in care delivery (Jacelon 2002, McLafferty and Morrison 2004). Recent changes in healthcare provision have focused on community care, which has resulted in many older people with complex needs being cared for in nursing homes or other residential settings (Tolson et al. 2011). If this care is seen as ‘simple and uncomplicated service provision’ (Phelan and Tolson et al. 2011), it could influence professionals’ decisions to work with older people.

**Literature review**

A review of literature published from 2003 to 2014 was conducted to explore the attitude of health and social care students towards older people and working with older people. The keywords ‘attitude’, ‘ageing’, ‘students’, ‘working with’ and ‘older people’ were searched in CINAHL, Academic Search Complete, SocINDEX, Psychology and Behavioral Sciences Collection, and PsycINFO.

**Attitudes to ageing**

In 2004, Mason and Sanders found negative attitudes towards older people prevalent in all social care undergraduate courses and working with older people described as students’ least preferred career choice. In contrast, Amrhein and Backes (2007) found that German students of health and social care had an unprejudiced view of age, but would prefer to work with younger people in the future.

Studies have shown that poor knowledge of ageing has been linked to negative attitudes and lack of interest in working with older people (Hautala 2008, Boswell 2012). Researchers have suggested that education about ageing and older people can have a negative and positive effect on these attitudes. In an effort to understand this conflicting information Boswell (2012) investigated whether increasing the knowledge of professional trainees would decrease ageist attitudes. Using the Fraboni Scale of Ageism (Fraboni et al. 1990) and the Facts on Aging Quiz (Palmore 1977) with 43 undergraduate health professional students, Boswell (2012) found that those who were anxious about ageing and had little knowledge of the process before the course had more ageist attitudes and less interest in working with older people. Education increased interest in working with older people and decreased ageist attitudes (Boswell 2012).

In their examination of the attitudes of German medical students (n=308) to older people Klaghofer et al. (2009) reported similar findings. These findings suggest that education on ageing increases interest in working with older people, however, interest in working with a particular group does not always translate to intent, therefore, these findings should be viewed with caution (Hirvonen et al. 2004).

Similarly, Masciadrelli (2014) used a pre-test post-test approach with 49 undergraduate social work students to measure the effects of an experiential learning activity on their competency and attitudes to older people. Significant increases were found in the targeted competencies and statistically significant decreases in ageist attitudes after the introduction of the learning activity. Dorfman et al. (2004) suggested that experiential learning was a useful method of helping students to overcome ageist attitudes and beliefs.

In a study of undergraduate physiotherapy students, Hobbs et al. (2006) measured attitudes towards and knowledge of older people at three time points. The Geriatric Attitudinal Scale (Reuben et al. 1998) was used to measure attitudes and the Facts on Aging Quiz (Palmore 1977) to measure knowledge. Findings showed that students had a somewhat positive attitude to older people at time point one. However, while knowledge of older people improved from below 50% to 52%, there was no corresponding significant increase in positive attitudes to older people at time point three. The researchers suggested that further education might help to increase the level of knowledge and...
that influence on attitudes was broader. This study is limited in its generalisability because it was conducted with only one cohort of students from the same university. Nevertheless, it is incumbent on educators to provide curricula that prepare students for working with older adults and address ageist attitudes and misconceptions about ageing (Guthell et al 2009). In a study with psychology students, Wehr and Buchwald (2007) found positive, negative and neutral attitudes about ageing. Negative attitudes included ‘immobility’, ‘fragility’ and ‘inflexibility’, while positive attitudes included ‘experienced’, ‘caring’ and ‘authentic’.

Studies have highlighted the lack of gerontological content in nursing curricula and often students are exposed to negative attitudes to older people in their clinical placements (Baumbusch et al 2012). Higashi et al (2012), in their study of attitudes of physicians in training towards older people, found that participants expressed positive and negative views. The physicians’ medical training as well as their own preconceived beliefs shaped these views. These authors suggested that such attitudes are a result of a bias in curricula towards a biomedical discourse, where older people are seen as dependent and frail rather than dynamic and healthy. Negative views can influence students’ desire to work with older people and also the way they perceive patient needs (Higashi et al 2012). Of all professional groups the views and attitudes of nurses to ageing are perhaps most well researched. In a systematic review, Liu et al (2013) identified 25 papers that discussed nurses’ attitudes towards older people. Results were inconsistent with positive, negative and neutral attitudes reported. In the selected studies, Kogan’s Attitudes towards Older People Scale (Kogan 1961) and Facts on Aging Quiz (Palmore 1988) were most often used. Variables most frequently examined were age, gender and education level. However, none were consistent predictors of attitude to older people. The review highlighted that students’ age affected their attitudes to older people, with older students/nurses having more positive attitudes but education level showed inconsistent findings (Wells et al 2004). According to Wells et al (2004), living with or interacting with older people was not significantly associated with attitudes in most studies. However, work setting had a negative and positive effect on attitudes, with those working in acute care having the strongest negative attitudes.

The review identified that positive attitudes increased the preference to work with older people, but it acknowledged a lack of well-designed studies that explored attitudes of registered staff and nursing students (Wells et al 2004). Amrhein and Backes (2007) recommended that an educational programme that incorporated knowledge transfer and interactions in care situations could change attitudes towards older people.

Yilmaz et al (2012) investigated the views of university students (n=378) on ageist practices. They found that while students correctly identified ageist statements in the questionnaire used, they endorsed behaviours that were ageist. This showed a contradiction between their espoused and lived beliefs. Interestingly, 56% of the sample were studying social sciences. Attitudes and actions do not always match and this has implications for all studies that aim to explore attitudes towards older people.

Perceptions of working with older people

There is a difference between attitudes towards ageing and perceptions of working with older people. Where attitudes towards ageing might be positive, this may not translate into positive ideals or indeed attitudes towards caring for older people (McKinlay and Cowan 2006). In the past, studies have assumed that positive attitudes towards older people translated into intention to work with this group. However, researchers have challenged that assumption (Boswell 2012, Liu et al 2013). It is suggested that working with older people is often students’ least preferred career choice (Boswell 2012). Conversely, Walter (2007) found little reliable knowledge about perceptions of working with older people. According to Mason and Sanders (2004), many students and professionals view working with older people as having low status, which encourages the view that it is unimportant or unrewarding.

Using open-ended questions and face-to-face interviews Mason and Sanders (2004) explored the attitudes of social work students (n=22) to working with older people. Results were positive and negative. Positive themes such as learning from older people, being appreciated and feeling more competent were highlighted, while the most frequently cited negative aspect was that older people die and students did not feel adequately prepared to deal with this loss. While the sample size was small, it is interesting that several students were appalled by the discovery of unequal treatment for older people and as a consequence felt more inclined to work with them when they graduated.

Later studies are consistent with these findings (Gonçalves 2009, Guthell et al 2009, Putkonen et al 2011, Baumbusch et al 2012), highlighting the need for curricula to adequately prepare students for working with older people.
Kydd and Wild’s (2013) research examined healthcare professionals’ attitudes towards working with older people in 1999 (n=376) and 2009 (n=546) using a multifactorial questionnaire. Themes examined were ageism, learning environment, working environment, professional esteem and specialist status. Little significant difference was found between the two time periods with both sets of respondents being enthusiastic about working with older people and having positive attitudes. However, some changes occurred between the time periods. While participants in 2009 still expressed the view that care of older adults took place in less desirable working environments and did not offer opportunities for career advancement, a higher percentage than in 1999 stated they had chosen or would consider a career in gerontology. Further research is necessary to explore reasons for this change as it has implications for attracting staff to gerontology.

Stevens (2011) used a survey to explore undergraduate bachelor of nursing (BN) students’ career choices. The findings confirmed those of previous studies (Stevens 1995, Happell 2002), that nursing students’ desire to work with older people was ranked last as a career choice for most and seemed to decrease over time. Students rated working in technical areas as highest in their preference lists and working with older people was seen to have a negative effect on their careers. Stevens (2011) noted that at the end of a three-year BN degree students had a strong preference for working in areas such as intensive care and theatre and low preference for more hands-on areas such as care of the older person. Interestingly, this study showed that the more days students spent on practicum, the lower they ranked working with older people. This seems to suggest, as highlighted by Kydd and Wild (2013) and Nolan et al (2006), that students’ work placement environments were

References


not rewarding, thereby predisposing them to view working with older people as lower status.

A further finding of Stevens (2011) was that while students’ perceptions of working with older people were not initially negative, poorly resourced care environments increased their negative attitudes.

Conclusion

Negative attitudes to ageing and a lack of interest in working with older people result in fewer people working with this population and also affect quality of care. Overall, students’ attitudes to ageing and perceptions of working with older people were mixed. Failure of nurse education curricula to address stereotypes about ageing hampers students’ ability to deal with practice situations and further increases prejudiced views around ageing.

Preventative medicine and increased life expectancy have led to a challenge to provide healthcare professionals with knowledge and skills to meet the needs of this growing demographic. The literature supports the view that students who hold positive views of older people express an interest in working with them. Initiatives such as experiential learning and engaging students in older adult research had positive effects on attitude and intention to work with this group. Work environments that were not supportive and that did not privilege working with older people affected students’ attitudes during placements.

As the population continues to age there is an increased need for competent professionals to work with older adults. Educators need to provide curricula that prepare students for working with older adults, and address misconceptions about ageing. There remains a need to examine the views and perceptions of students from all health and social care disciplines, since their views and perceptions are the basis for future professional practice.


