

Nursing Students' Attitudes Toward Older Adults After Their First Intentional Encounter: A Cross-Sectional, Correlational Study

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Abstract

AIM This study examined how intentional first encounters as a nursing student, as well as prior relationships with older adults, influenced baccalaureate prelicensure nursing students' attitudes toward this population.

BACKGROUND There is a growing demand for knowledgeable and skilled nurses to provide person-centered care to an aging population. An ongoing challenge is lack of interest in practicing within gerontological settings following graduation.

METHOD A cross-sectional, correlational, comparison research design was used. Ninety-nine nursing students in five groups were recruited from six baccalaureate prelicensure nursing schools.

RESULTS A one-way analysis of variance revealed a significant difference among groups, $F(4, 94) = 4.873, p = .001$. Students completing clinical in half-semester acute care and long-term care ($M = 64.03, SD = 16.9$) had better attitudes than students in other clinical experiences.

CONCLUSION Addressing the development of positive attitudes in nursing students remains imperative to promote person-centered care to the aging population.

KEY WORDS Attitude of Health Personnel – Geriatrics – Nursing Students

Projections for growth in the number of persons 65 years of age and older who will access and require health care services are alarming but predictable as the baby boomer generation moves into this age group (Administration for Community Living, 2019). According to the Centers for Disease Control and Prevention (2018), three in four Americans 65 years of age and older have multiple chronic conditions requiring ongoing medical attention. The demand for knowledgeable and skilled nurses to provide and coordinate care for older adults continues to increase. Of mounting concern is how well newly graduated nurses are prepared to provide person-centered care for an aging population. Infusing care for aging adults into baccalaureate schools of nursing remains a priority (Watman et al., 2011).

Despite initiatives to focus attention on geriatric content in nursing coursework, research focused on best practices to prepare nurses to address the complex health needs of older adults is lacking. To ensure best outcomes for older adults, it remains imperative to understand nursing students' attitudes toward the aging population. The aim of this study was to examine how intentional first encounters with older adults, as a nursing student, as well as prior relationships with

elders influenced baccalaureate prelicensure nursing students' attitudes toward older adults.

BACKGROUND

Prior studies have established that ageist attitudes exist in undergraduate nursing students (Frost et al., 2016). For example, according to Koroknay (2015) and Stone and Harahan (2010), new nurse graduates lack interest in working in gerontological settings. Theories as to why nursing students do not choose an area of nursing that cares primarily for older adults appear in several studies (Gross & Eshbaugh, 2011; Kydd et al., 2014; Phelan, 2011). Phelan (2011) suggests this phenomenon relates to peoples' struggle with the aging process.

Students' negative or neutral attitudes toward older adults (Gross & Eshbaugh, 2011; Kydd et al., 2014) and societal perspectives that may devalue older adults (Holroyd et al., 2009) may contribute to a lack of interest in pursuing a career in geriatric nursing. This phenomenon is not unique to North America. Studies completed in other countries have found similar results (Chi et al., 2016; Rathnayake et al., 2016). In a sample of 185 first-year undergraduate nursing students, Frost et al. (2016) found 97.8 percent of participants exhibited negative behaviors and ageist attitudes. One highly prevalent ageist behavior (87.5 percent) was talking more loudly or slowly to older adults.

Quality relationships with unrelated older adults (Eshbaugh et al., 2010) and increased frequency and improved quality of contact (Cummings et al., 2003) positively predicted the likelihood undergraduate nursing students will work with older adults throughout their nursing practice. Previous research found predictors of positive attitudes and interest in working in long-term care settings were positive clinical experiences (Furze et al., 2008; Mueller et al., 2011) and time spent and experience with older adults (Mattos et al., 2015; Swanlund & Kujath, 2012). Similar results were found in Taiwan and Turkey. Chi et al. (2016) and Karahan et al. (2016) concluded that a

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positive relationship with older adults resulted in improved communication and understanding of aging. However, the literature lacks research in how to design nursing curricula to reduce negative and ageist attitudes.

In a study by Hovey et al. (2018), differences were found in attitudes toward older adults based on the order of clinical assignments. Undergraduate nursing students who had their first clinical experience in long-term care followed by acute care showed improvement in attitudes compared to students who had their first clinical experience in acute care followed by long-term care. By understanding how clinical experiences affect ageism and attitudes toward older adults, faculty could design nursing curricula that create experiences that improve attitudes and reduce ageism.

THEORETICAL FRAMEWORK

Experiential learning theory (ELT; D. A. Kolb, 1984) is the theoretical framework used to guide this study. ELT is a philosophy of education that theorizes that knowledge is created through a transformational learning process consisting of four stages and four basic learning styles. For learning to occur, learners must progress through four stages (concrete experience, reflective observation, abstract conceptualization, and active experimentation) with four basic learning styles: diverging, assimilating, converging, and accommodating (Kolb & Kolb, 2005). D. A. Kolb (1984) theorized that learners not only acquire new skills and knowledge but also form attitudes while progressing through these stages.

The concrete experience and reflective observation stages of ELT occur when students enter the learning experience, reflect on the observation, and begin to form attitudes (Kolb & Kolb, 2005). Nursing students' first encounters with older adults in the role of nurse is the concrete experience; while reflecting on the experience, they will change or reinforce previous attitudes. This theory aids in the understanding of attitudes that prelicensure nursing students develop toward persons who are aged during their first clinical learning experience.

METHOD

This observational study was conducted in a large Midwestern state in the United States. The population of the study was recruited from six baccalaureate prelicensure nursing schools and consisted of 99 participants who had completed their first intentional encounters with older adults as nursing students. Nursing students, 18 years of age or older seeking their first degree, who were in their first semester in nursing school and had an encounter with an older adult through a classroom assignment or clinical rotation were eligible to participate. Exclusion criteria included accelerated nursing students and students repeating their first semester.

Of 352 students invited to participate in this study, 123 responded to the online survey; 24 participant responses were not included in the data analysis because they did not meet the inclusion criteria or did not complete the survey. Of the 24 students who were not included, 1 entered inaccurate data, 13 responded that this was not their first exposure to older people, and 10 entered the survey but did not answer the questions.

Procedure

The authors' university institutional review boards approved the study. Deans of nursing programs at universities in the central region of the state were contacted and provided information about this study; six universities accepted the invitation to participate and signed

a commitment letter. After securing permission from the deans and institutional review boards of the participating universities, the researchers arranged with Adult Nursing I instructors to visit the class(es) to present the study to students. A presentation about the study was delivered, a copy of the informed consent was distributed, and questions were answered by the principal investigator or co-principal investigator.

At the end of the fall semester and a week before finals, students who had their first intentional encounters with older persons as students were emailed a link to the survey; emails were obtained through a class distribution list. Informed consent was obtained electronically before entering the survey. Instructors were notified that the link to the survey had been sent and were asked to remind the students about the study. Data were collected through an online survey at the students' convenience. The survey was administered by a reputable online survey tool supported by the author's university. Because participation was voluntary, students were not required to respond and could exit the survey at any time.

The six participating nursing schools included concepts regarding care of older adults in the didactic element of the course, but five different and distinct first intentional clinical encounters existed. These included: a) classroom assignment involving a visit and interview with an older person in an assisted-living facility, b) long-term care clinical, c) acute care clinical on medical-surgical unit, d) half semester in long-term care and half semester in acute care, and e) a community setting.

Four of the groups had direct care responsibilities with older people in a clinical setting. The fifth group had their first exposure to older adults through a classroom assignment. Students from this group visited one of two assisted living centers and conducted an interview with an older person; interviews took about 30 to 45 minutes. For this group, the first exposure to older people was by an indirect care experience.

Instrument and Statistical Analysis

The Refined Aging Semantic Differential (RASD; Polizzi, 2003) was used to measure attitudes; the Relationship With Elders Scale (Cummings & Galambos, 2002) was used to measure participants' personal relationship with elders. The RASD instructs participants to think of a person 70 to 85 years of age before beginning the survey. This person can be male, female, or nongender. While thinking of this attitudinal object, students score 24 bipolar adjectives along a 7-point semantic scale (Polizzi, 2003). Scores on the RASD range from 24 to 168. A score of 96 is neutral; scores <96 indicate positive attitudes; and scores >96 indicate negative attitudes. The Cronbach's alpha for the RASD in this study was .92, indicating a high reliability.

The Relationship With Elders Scale uses a 5-point Likert scale to measure participants' personal relationships with older persons (Cummings & Galambos, 2002). The Cronbach's alpha for the Relationship With Elders Scale in this study was .79, indicating good reliability. Demographic questions were also included in the questionnaire.

The data were received on a Microsoft Excel spreadsheet and were imported into IBM SPSS Statistics (Version 20), in which all data were analyzed. The data were assessed for outliers. One respondent had entered inaccurate data, which was tagged as an outlier, and the results were omitted. Descriptive statistics were analyzed, and assumptions were checked prior to data analysis.

A one-way analysis of variance (ANOVA) was performed to explore the influence of intentional first encounters with older adults on attitudes as measured by the RASD. Participants were divided

into five groups based upon clinical settings. The five groups included classroom assignment ($n = 12$), a semester in long-term care clinical ($n = 9$), a semester in acute care clinical ($n = 10$), a half semester in acute care and a half semester in long-term care ($n = 62$), and community setting clinical ($n = 6$). A statistically significant difference among groups was identified on the one-way ANOVA ($p = .001$), so a Tukey post hoc test was included for the multiple comparison table. Relationships were checked between total attitudes and relationship with elders using Spearman's rank-order correlation. All statistical significance was reported at $p \leq .05$ using Bonferroni's adjustment for Type I error because of multiple tests.

RESULTS

Most of the 99 students in the final sample were female ($n = 92$, 93 percent) and white ($n = 83$, 83 percent). Other ethnicities were Asian ($n = 7$), black ($n = 4$), and Hispanic ($n = 5$). The average age of participants was 21.29 years ($SD = 7.29$).

Overall, the prelicensure nursing students who participated in this study had positive attitudes toward older persons ($M = 69.86$, $SD = 19.06$). When comparing the five different intentional first encounters with older adults, there was a statistically significant difference noted among groups as determined by one-way ANOVA, $F(4, 94) = 4.873$, $p = .001$. A Tukey post hoc test revealed that nursing students have statistically significant better attitudes toward older adults when their first exposure is during a half semester of long-term care clinical and a half semester of acute care ($M = 64.03$, $SD = 16.9$) compared to a semester in long-term care clinical ($M = 81.67$, $SD = 16.6$, $p = .049$) and community setting ($M = 86.33$, $SD = 7.34$, $p = .032$). No other statistically significant differences were found.

Spearman's rank-order correlation was run to determine how relationships with elders correlate with nursing student attitudes toward older adults. There was one statistically significant negative correlation between scores on the RASD and the Relationship With Elders Scale. A statistically significant relationship was found between attitudes toward older persons and how rewarding one finds interactions to be with older family members and acquaintances, $r(97) = -.25$, $p = .012$. The more rewarding nursing students find interactions with older family members and acquaintances, the more positive their attitude is toward elders. How often one has contact with older adults, how much one has contact with older adults as a child, how much contact one currently has with older adults, and how close one feels to family members and acquaintances over the age of 65 years did not have a significant relationship with attitudes toward elders.

DISCUSSION

In this study, researchers examined the developing attitudes of baccalaureate prelicensure nursing students toward older adults after their first intentional care encounter as a nursing student and how their prior relationships with older adults influenced their attitudes. Overall, students revealed positive attitudes toward caring for older adults. Specifically, the results of the study indicated that students who had their first encounters with older adults in a half-semester long-term care clinical and a half-semester acute care clinical had better attitudes than students who had encounters with older adults in a classroom assignment, semester-long acute care setting, semester-long long-term care setting, or community setting. This is similar to results of previous research by Hovey et al. (2018) that found

differences in attitudes toward older adults based on clinical assignments for first-year prelicensure nursing students.

Keeping in mind that low scores on the RASD indicate positive attitudes and high scores indicate negative attitudes, students who had exposure to older adults through a semester-long clinical in the long-term care setting ($M = 81.67$, $SD = 16.62$) or in the community setting ($M = 86.33$, $SD = 7.34$) had the highest mean score on the RASD. Based on Polizzi's (2003) score interpretations of the RASD, these scores are close to neutral feelings ($M = 96$). To postulate, first-year nursing students in a semester-long long-term care setting spend most of their time caring for the basic needs of residents rather than performing nursing functions. First-year students are anxious to begin performing nursing skills and passing medications. Providing basic care to residents who are well for 16 weeks may cause them to develop neutral to negative attitudes toward working with older adults. Nursing students assigned to the community setting may have had limited exposure to older persons as older adults living at home are generally well and active. Mattos et al. (2015) and Swanlund and Kujath (2012) showed that time spent with older adults and exposure to older adults resulted in positive attitudes, which may not have occurred in the community setting.

The findings reveal that regardless of clinical setting, the means from all five groups were indicative of positive attitudes toward older adults. These results are promising in light of the Eshbaugh et al. (2010) study, which found that quality relationships with unrelated older persons predicted the likelihood of undergraduate nursing students working with this population throughout their nursing career. In addition, Furze et al. (2008) and Mueller et al. (2011) found that interest in working in long-term care was linked to positive clinical experiences. Karahan et al. (2016) noted that, in Turkey, better understanding of the aging process and more effective communication with older adults resulted in improved attitudes among nursing students.

These findings support D. A. Kolb's (1984) ELT. Prelicensure nursing students are experiencing their first interactions as professional caregivers to older adults in an arranged clinical assignment. ELT postulates the development of new concepts is provided by new experiences, such as the concrete experiences encountered by nursing students. As learners move from the concrete experience stage to the reflective observation stage, their reflections become abstract concepts from which attitudes can be reinforced or changed. The diverging learning style prevails in the concrete experience and reflective observation stage. As students reflect on these concrete experiences while writing up required assignments and debriefing in postconference, they begin to reinforce or change attitudes. Although attitudes from experiences are often lasting, they can also change.

The National League for Nursing (2011) advocated for nursing education reform to effectively care for an aging population. Nursing programs have responded by expanding care of older adults in their curricula (Gilje et al., 2007). The recent focus on age-friendly care by the Institute for Healthcare Improvement (n.d.), the American Hospital Association (n.d.), The John A. Hartford Foundation (n.d.), and the Catholic Health Association of the United States (n.d.) may be influencing education delivered by nursing programs and shaping the attitudes of nursing students.

LIMITATION

The authors identified limitations. First, participants were not randomly selected, as convenience sampling methods were utilized in this

study. The variance of type of encounter provided through each university was guided by curricula at each school of nursing. There may be confounding variables, such as faculty expertise in gerontological nursing, not captured in this study. Thus, it remains essential for nursing programs to design curricula resilient to interchanging variables.

Next, as with any self-report instrument, participants may not have conveyed their actual attitudes. However, anonymity of participant responses and institutional affiliation may have reduced this risk. The number of participants enrolled in this study was too small to allow for generalized conclusions. A lack of statistical power limits the validity and generalizability of our conclusions, as Type I error cannot be ruled out. However, the results do offer encouragement for further exploration of baccalaureate nursing students' attitudes toward caring for older adults. Although this study was a multisite study, all participants were located in the central region of a large Midwestern state. Recruiting nursing students from multiple regional areas of the United States would assist in strengthening the design of future studies.

CONCLUSION

It is important to address ageism in nursing curricula to ensure best outcomes for the older adults receiving health care. As health care systems are treating a greater number of older adults, it is imperative that nursing programs graduate nurses who are prepared to care for an aging population that may present with complex conditions with multiple comorbidities. Understanding how intentional exposure to older adults affects nursing students' attitudes is crucial to designing a curriculum that will foster competent, age-friendly care. Well-designed student experiences caring for older adults as part of undergraduate nursing education have the potential to change perceptions and attitudes toward older adults. Prudent selection of clinical sites and experiences with older adult clients may promote students' interest toward caring for older adults. For students who are undecided on their career path, nurse educators play an important role in promoting gerontological nursing interest for undergraduate nursing students.

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