What Influences Nursing Students to Desire to Work in Geriatrics

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The geriatric population is growing rapidly. When the Social Security Act was established in 1935, only 5% of the population was 65 years of age or older (Hooyman & Kiyak, 2008) and age 67 was the life expectancy (L.M. Lorenzen-Huber, P513 lecture, April 7, 2008). Today adults over the age of 65 not only account for a larger portion of the population but also entail a greater percentage of its health care. In the United States, one in eight adults were at least age 65 or older in 2002. This statistic will be one in five by 2030. In the world, the elderly is the most rapidly growing population. In the United States, the elderly is the largest patient population in home care, hospital, and long-term care. Today, 60% of outpatient visits encountered are from the elderly population and a minimum of 50% of all patients are older than 65 years old. Increasingly over time, the elderly will make up the greater number of patients in nursing practice and be the substance of nursing care. Even in the pediatric population, nurses must work with the elderly who are taking care of their grandchildren. Even though many nursing programs include the developmental life stages in their curriculum, only a handful have a class that solely addresses the overall needs of older adults (Bonifazi, 2004). According to Wade (1999), “a key concern is that nursing education has failed to address the care needs of older people or to convey the expertise required for their care” (343). Today’s 65-year-old is vastly different from the 65-year-old 40 years ago. Due to decreased accidents, breakthroughs in disease treatment, and improvements in health and wellness care, people are living longer and have an increased level of functioning. But the older adults’ bodies are not the same as when they were younger. Due to the process of aging, older people’s metabolism, organ constitution and function become altered. This alteration lead to high cholesterol, high blood pressure, diabetes and other health problems that need to be addressed (Bonifazi, 2004).
To add to this problem of increased geriatric health care needs, the overall consensus by the nursing profession that taking care of elderly patients is not as desirable a field when compared to other fields of nursing practice. Elder nursing care is seen by student nurses and many practicing nurses as boring, routine, and not rewarding. They stereotype the care of the elderly as depressing, not stimulating, and not demanding of the use of highly technical nursing skills (Happell & Brooker, 2001). Many nurses and nursing students view older people in a homogenous subgroup and do not look at the special qualities of each person, regardless of chronological age. To ensure the deliverance of quality care, nursing students and practicing nurses must keep themselves from accepting stereotypes and negative attitudes about older people. These misconceptions and inaccuracies about the older population may bias the health care giver’s understanding of elderly care needs (Fajemilehin, 2004). These negative stereotypes may also be perpetuated by the traditional use of unqualified and inexperienced staff employed to care for the elderly. Studies have found as the dependency of the patients in a health care setting increased, the number of graduate nurses and registered nurses decreased. The elderly population has multiple health care needs, especially those in long term care settings. If the health care needs of older people and the nursing skills required to assist them are not identified by long term care staff, then these needs will not be expressed to nursing students and colleagues who come to their long-term care setting for clinical experiences. Due to lack of qualified staff, the elderly patients’ needs in long term care setting are often incorrectly considered as ‘basic’ care when most often the issues are in need of ‘skilled’ care and not followed through (Wade, 1999). In an opposite scenario, critical care nurses tend not to view themselves as practicing geriatric nursing when in fact more than 50% of intensive care patients in the United States are over 65 years old, and 25% or more are 75 years old (Trossman, 2003). Studies have shown that
retention and recruitment of nurses in long term care settings is difficult. These studies reveal that working in long term care settings remained unpopular internationally. Professional challenges and clinical experiences were the reasons given for the preference not to work in aged care (Kloster, Hoie, & Skar, 2007). Trossman’s article (2003) explains the nursing frustration in long term care settings by stating that “long-term care nurses must constantly juggle the desires of residents, physicians, and most commonly, resident’s family members” (p. 67).

Influencing nursing students to pursue working in the field of geriatrics is multi-faceted. According to Kloster, Hoie, and Skar (2007), “nursing educators, clinical nurses and policymakers must reconsider their priorities and improve working conditions for nurses in aged care in order to meet society’s need for nurses” (155). Geriatric education in nursing school curriculum is vital for nursing students’ exposure to even begin thinking about working in the geriatric field. To transform nursing student’s attitudes of geriatric care, nursing education must give increased consideration to the field of gerontology. Educators in nursing must also investigate the way caring for the elderly is presented within the nursing curriculum (Happell & Brooker, 2001). Increased knowledge in the field of gerontology may help promote positive attitudes (Wade, 1999). Studies have also suggested that if education addresses prevalent held inaccuracies and misconceptions about older people this may add the number of skilled nurses willing to work in the gerontology field. It has also been identified that nurse educators, instead of focusing on a cure emphasis, must focus on a care attitude, improving the interest and value in elderly care. Wade (1999) also “suggests that positive attitudes would be best fostered by offering a broad-based integrated curriculum where recognition of older people and their needs is seeded across and throughout the whole course, so increasing and cultivating knowledge. This should then be built upon and reinforced with a specific focus on gerontology towards the latter
part of the course” (p.344). The field of gerontologic nursing must be taught and acknowledged as a nursing practice area of specialty (Happell & Brooker, 2001). In addition, the gerontologic curriculum should be on a health-illness continuum, stressing the facilitating and enabling of the elderly to maximize their potential and identifying the many types of settings in which the elderly population are being cared for. Nursing students’ attitudes toward older people will be improved when in contact with nursing educational staff having a positive interest in older people or having a specialty degree in gerontological education (Wade, 1999). Nurse educators also need to keep up their level of gerontological clinical practice to be seen as role models by the nursing students (Wade, 1999). The nursing profession as an entirety must dispel these negative misconceptions of the elderly to promote a more positive and accurate attitude toward the field of gerontological nursing (Happell & Brooker, 2001).

According to Williams, Nowak, and Scobee (2006), “positive clinical experiences with older adults have been found to improve student attitudes and have increased interest in geriatric care roles in related disciplines” (p.190). With the changes in the health care industry and an increasing elderly population, nursing curriculum must promote student learning in obtaining an accurate knowledge base in geriatric care, experiences to apply advanced technical skills with complicated chronically ill older adults, and opportunities that facilitate positive attitudes toward caring for the elderly patient in a professional nursing role. Typically, sophomore nursing students have clinical in a long-term care setting where they practice the basic assessment skills and personal care skills learned in the nursing learning resource center. These beginning nursing students are focusing on basic psychomotor skills and are not able to integrate the intricacies of geriatric nursing care or view the value the role of the nurse in the long-term care setting. To promote positive attitudes toward caring for the elderly, it has been suggested to expose nursing
students to multiple experiences with geriatric patients (Williams, Nowak, & Scobee, 2006). In Williams, Nowak, and Scobee’s research study (2006) “expanding senior nursing students’ clinical experiences by revisiting long term care was rated positively by students, facility staff, and faculty, and all parties recommended continuing the program for future students” (p. 192).

Kloster, Hoie, & Skar (2007) state “educational programmes alone cannot change graduate nurses’ preferences for work areas. Changes to the working conditions in nursing homes must also occur” (p.161). Historically, long term care settings have had challenges in retaining and recruiting nurses, due to inadequate wage and benefit packages, taxing workloads, and misperceptions of nursing home employment (Williams, Nowak, & Scobee). The White House Conference on Aging is addressing these issues and have suggested an increase in Medicare, Medicaid, and Older American Act funding to provide the best practice in the gerontological setting (White House Conference on Aging, 2005). Nursing staff who care for the elderly in any health care setting, should continue in their professional education and development (Wade, 1999). Gerontological educated nursing staff taking care of elderly patients will portray to nursing students a positive attitude working with the elderly population. The role of the advanced practice gerontological nurse needs to be promoted in long term care settings to be an educational support for the nursing aides and staff nurses and to demonstrate expert care to the elderly (Reinhard, Barber, Mezey, Mitty & Peed, 2002), (Kloset, Hoie, & Skar, 2007).

For nursing students to consider geriatric nursing as a viable option, there must also be political and financial backing to promote gerontological educated nursing staff in long term care settings rather than continuing the employment of untrained staff (Kloset, Hoie, & Skar, 2007). According to Kloset, Hoie, & Skar, (2007), “these changes are needed to recruit and retain nurses to work in aged care institution” (p.161). The 2005 White House Conference on Aging
Final Report listed 3 recommendations to improve geriatric health care workforce issues. Their recommendations included educating and training all geriatric health care professionals, supporting the recruitment and retention of geriatric health care professionals, and providing reimbursement provision through the Centers of Medicare and Medicaid Services (White House Conference on Aging, 2005). The John A. Hartford Foundation Geriatric Nursing Program and the American Academy of Nursing have sponsored funding to focus on the developmental and clinical issues related to aging, enable research necessary for sound practices, provide educational information to practicing nurses, and increase the number of gerontological prepared faculty to teach future nursing students (Bonifazi, 2004). In 2003 the American Nurses Association was awarded a grant to help nursing organizations support geriatrics focused groups and establish gerontological educational content into their programs. Nursing organizations included the American Association of Critical Care Nurses, who will expand the geriatric content in its critical care nurse certification exam, the Oncology Nursing Society foundation, who will focus on educating oncology nurses about specific elderly patient needs with cancer, and the American Psychiatric Nurses Association, who is developing a online continuing nursing education program that will focus on geriatric psychiatric needs. One of the John A. Hartford Foundation grant selectors is researching the relationship between emergency department nurses and long-term care nurses, hoping to create a more positive relationship between these two institutions. Trossman (2003) explains this researcher “hopes it will lead to long-term care nurses receiving the respect “they deserve” and an increase in the number of nurses willing to practice in this setting (p.67). From 2000 to 2005, The John F. Hartford Foundation provided funding for countless schools of nursing to increase geriatric content in their nursing curriculum, from bachelors to post-doctorate (Trossman, 2003). The Hartford Institute has also provided an
online course that allows the American Nurses Credentialing Center of the American Nurses Association to certify registered nurses as gerontological nurses. This online course focuses on the healthy, ill, institutionalized, and dying elderly population. The course is recommended for those who want to learn the basic fundamental needs of geriatric nursing care, and is geared for nursing students, nurse educators, and practicing nurses (Gould, 2002).

The field of nursing needs to view as a whole the question of how to improve attitudes about aging and how to encourage nursing students to pursue geriatrics as a career (Williams, Nowak, & Scobee, 2006). There may be other avenues to develop in the nursing curricula to stimulate an interest for nursing students to pursue the field of geriatric nursing. Positive clinical experiences, such as intergenerational programs, assisted living facilities, and senior centers may be more effective than only exposing nursing students to the nursing home setting. Traditionally, the negatives of aging have been stressed in nursing educational programs. This emphasis of the decline of aging has concealed students’ views about the elderly aging process as well as their own. Research has revealed that even though the elderly have mental and physical disabilities and illnesses, they perceive themselves as aging successfully. Per chance this is because the elderly possess wisdom, spirituality, and resilience (Ferraro, Freeman, Nellett, & Scheel, 2008). Ferrario. Freeman, Nellet, & Scheel (2008) state that “the elderly population have much to teach us and our students about aging successfully (p.63). Wade (1999) contends that “as the population ages and the majority of patients in almost all settings are older, there is little place for the nurse who states they do not wish to care for older people or who lacks the knowledge and attributes to give this care” (p. 343).
References


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