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RESEARCH

## PERCEPTIONS OF SECOND YEAR MEDICAL SCHOOL STUDENTS REGARDING AGEING AND GERIATRIC EDUCATION: A QUALITATIVE STUDY

### ABSTRACT

**Introduction:** Existing literature on the geriatric-related attitudes of medical students reveals inconsistent results in terms of feelings for the elderly. This study aims to determine the perceptions of medical students regarding ageing and geriatric education.

**Materials and Method:** A qualitative study was conducted with 160 second-year medical students who visited a nursing home and responded to three open-ended questions about this experience. The responses were qualitatively analysed using the constant comparative method for themes.

**Results:** Second year medical students indicated both positive and negative impressions of ageing. Although they generally believed that ageing brings experience and maturity, happy ageing was seen as being dependent on individual characteristics and personality factors that affect the emotional aspects of ageing and, therefore, quality of life. The students indicated recognition that ageing is related to inevitable physiological changes and a belief that most illnesses in the elderly are untreatable because of the natural decline in health related to ageing. Students indicated a sense of inadequacy in communicating with the elderly and emphasised the importance of introducing geriatric psychiatry lessons into the curriculum to improve their understanding of the elderly.

**Conclusion:** This study provides a better understanding of the opinions of future doctors about ageing and of beliefs that should be addressed to help in the making of doctors with more positive attitudes toward older people.

**Key Words:** Aging; Attitude; Geriatrics; Education; Medical; Qualitative Research.



ARAŞTIRMA

## TIP FAKÜLTESİ İKİNCİ SINIF ÖĞRENCİLERİNİN YAŞLANMA VE YAŞLILIK EĞİTİMİ HAKKINDAKİ GÖRÜŞLERİ: NİTELİKSEL BİR ÇALIŞMA

### Öz

**Giriş:** Literatürde tıp öğrencilerinin yaşlılık ile ilgili düşünceleri hakkında tutarsız sonuçlar bildirilmektedir. Bu çalışmanın amacı tıp öğrencilerinin yaşlanma ve yaşlılık eğitimi hakkındaki düşüncelerini saptamaktır.

**Gereç ve Yöntem:** Bu çalışma 160 ikinci sınıf tıp öğrencisi ile niteleyici olarak yapılmıştır. Bir huzurevini ziyaret eden öğrencilerden bu tecrübelerini değerlendiren üç açık uçlu soruya yazılı yanıt vermeleri istenmiştir. Yanıtlar sürekli karşılaştırma yöntemi kullanılarak niteliksel olarak analiz edilmiştir.

**Bulgular:** Tıp fakültesi ikinci sınıf öğrencileri yaşlanma hakkında hem olumlu, hem de olumsuz izlenimler sergilemiştir. Genel olarak yaşlanmanın beraberinde tecrübe ve olgunluk getirdiğini düşünmektedirler. Buna rağmen, mutlu bir yaşlanmanın bireysel özelliklere ve kişisel etkenlere bağlı olduğu ve bunların yaşlıların duygusal hayatlarını, dolayısıyla yaşam kalitesini etkilediğini belirtmişlerdir. Öğrencilere göre yaşlanma önlenemez fizyolojik değişiklikler ile sonuçlanmakta ve yaşlanmanın doğal bir sonucu olarak ortaya çıkan hastalıkların çoğu tedavi edilememektedir. Öğrenciler yaşlılar ile iletişim konusunda kendilerini yetersiz hissettiklerini bildirmiş ve yaşlıları daha iyi anlayabilmeleri için eğitim programına geriatrik psikiyatri derslerinin konmasının önemine dikkat çekmişlerdir.

**Sonuç:** Bu çalışma hekim adaylarının yaşlanma hakkındaki düşünceleri ve gelecekte yaşlılara karşı daha olumlu tutumlar sergileyen hekimler yetiştirmek için ele alınması gereken inanışları daha iyi anlamamızı sağlamıştır.

**Anahtar Sözcükler:** Yaşlanma; Tutum; Geriatri; Tıp Eğitimi; Niteleyici Çalışma.



## INTRODUCTION

The elderly population in Turkey is increasing faster than that of the other age groups and this demographic transition is expected to result in a higher life expectancy at birth rates leading to an increase in the size of the elderly population. The elderly (65 years and over) represented 4.2% of Turkey's population in 1985 and 5.6% in 2000; they are expected to account for 10.2% of the country's population by 2023. Turkey will thus take its place among the countries with a population commonly characterised as 'older old'. Similarly, life expectancy at birth, currently standing at 70 years, is projected to be 78 years by 2023 (1).

A study of elderly people in Turkey revealed that approximately 90% of them suffer from one or more chronic health problems (2). This results in an increase in the demand on caregiving capacities on the health care staff thereby posing a major public health challenge (3). Regardless of their speciality, medical doctors will face problems associated with the health and social needs of elderly patients. Awareness of the need for geriatrics to be integrated within the medical curriculum has increased substantially although there is a lack of proficient faculty to teach this subject. Some medical schools teach geriatrics, but general knowledge in this area is relatively low among Turkish health care professionals (4). Additionally, the number of services and professionals targeting the elderly population is insufficient and coordination of care for the elderly is lacking (5). Although Turkey's Ministry of Health has launched a 'National Action Plan' on the status of the elderly and ageing in Turkey, the concept of 'elderly health' is inadequately integrated within society, resulting in disorganised health care services for elderly people (6).

Learning cannot be separated from its context and is highly dependent on the environment in which topics are learnt. The attitudes, demeanour and behaviours that an individual exhibits towards certain persons determine the dimension of the relationship and the quality of attention given to these persons. Accordingly, attitudes and intrinsic motivations related to students' perceptions can significantly affect their success in caregiving (7,8).

Studies have shown that the myths and prejudices held by some students with regard to ageing have a negative consequence on their educational activities and on the quality of care that they give to elderly patients (9,10). Negative feelings about the elderly have previously been reported among Turkish nursing students, although Turkish medical students' extra-curricular experience about elderly people is expected to

positively reflect on their general attitude towards the elderly (4).

There is an enormous need for well-trained doctors in the health care system in the future since they will encounter more elderly patients in their daily practice in future than that of what they encounter today. Therefore, in the future, the huge need for doctors with the necessary training in geriatric health care presents a major medical and socioeconomic challenge. There are various recommended curricula on medical education in geriatrics. However, further research on education in geriatrics is necessary because the existing literature on medical students' attitudes in relation to geriatric patients reveals inconsistent results (11,12). Multiple studies have revealed that geriatric education can improve medical students' attitudes towards the elderly and medical instructors recommend home care visits for this purpose (13,14). The opinions of health workers about elderly people affect their attitudes towards and the quality of treatment that they deliver to elderly patients.

The objective of this study is to determine the opinions of second year medical students about ageing and elderly people and what they consider important in geriatrics training. For this purpose, we have evaluated the students' written reflections on the experience of visiting elderly patients in a nursing home; such reflection on a learning event promotes critical thinking and can improve professionalism (15,16).

## MATERIALS AND METHOD

The Institutional Review Board at (University name) University (12.02.2015) approved this study and the medical students participating in this study provided verbal informed consent.

### Context

As part of a geriatric training module, second-year students at (University name) University's medical school participated in a programme that combines lectures and clinical scenarios in a problem-based learning format. Students receive information on the demographics of ageing and the impact of ageing on various bodily systems with the purpose of developing their competence in geriatrics.

During the module, students visit a nursing home in small groups to learn geriatric assessment skills and improve their knowledge and attitudes regarding the elderly. The nursing home accepts persons 60 years and older who have proven material and social deprivation, can meet their needs (ea-



ting, drinking and toilets, etc.) independently, are without a serious illness or disability and have intact mental and spiritual health in accordance with the Elderly Care Nursing Homes and Rehabilitation Centers Regulation 2001. As part of this educational experience, students are expected to assess the residents and to complete the Rapid Estimate of Adult Literacy in Medicine–Short Form (REALM-R) and the Memory Impairment Screen (MIS) which has demonstrated excellent psychometric properties in primary care and community samples (17). As there are no validated Turkish versions of these scales, the authors performed the necessary steps and translated them into Turkish (18). The interview takes, on an average, 15 minutes to complete. After this, each student is expected to write a report and discuss the experience.

### Data Analysis

In this study, qualitative research methods are used to assess the perceptions of medical students who completed the geriatric training module between February and April 2015. The researchers developed three open-ended questions and the students answered these questions. The questions were as follows: (1) 'What is ageing in your opinion?' (2) 'What feelings did the meeting with the elderly evoke?' (3) 'What do you think should be included in geriatrics education?'

The responses were assessed qualitatively using the constant comparative method (19,20). Themes were identified by two authors (TE and MK) who independently read the first five papers, identifying recurring themes by coding the responses. The authors then met to compare their coded responses and reached a consensus regarding the conceptual differences. Subsequently, TE coded the remaining papers and MK independently coded one-third of them to ensure continued consensus. Disagreement was rare and was resolved through a discussion. Finally, the authors grouped the themes into discrete domains using a consensus approach.

## RESULTS

The participating medical students (n=160) had a mean age of  $22 \pm 2$  and 55% were female. The nursing home residents visited (n=154) had a mean age of  $75.7 \pm 8$  and 65.6% were male. The percent of residents without a diagnosed illness was 22.7; all others had at least one illness to report. Whereas 31.2% did not use any medication, 47.4% used one to three medications and 9.2% were taking more than seven medications. Scores on the REALM-R ranged from 0 to 8, with a mean and standard deviation of 2.8 and 4.1, respectively.

The mean overall score was 3.9 (sd=2.3). Fewer than 20% of the elderly adults had good health literacy, as indicated by an overall REALM-R score of 6 or more. Although 7% of study participants obtained a score of 8, approximately 40% obtained a score of 0. The mean ( $\pm$ sd) MIS baseline score was 4.8 showing mild cognitive impairment with a cut-off point of 5. There were 14 patients who scored 0 points, 8 patients who scored 1 point, and 26 patients who scored 2 points on the MIS.

The themes that emerged from the open-ended questions are reported below.

### Perceptions About Ageing

When asked what ageing meant to them, the students most commonly expressed three themes: experience and maturity that come with age, physiological changes related to ageing and requiring care and unhappiness resulting from loneliness and isolation.

First, the theme of experience and maturity was noted by 72.5% of the medical students. Following are typical examples of their observations.

*'Ageing is not only an increase in your age. Your life experience and memories are increasing too. It is a stage where you can decide according to the lessons and emotional experiences you have had previously.'*

*'It was very informative to listen to elderly people's stories from earlier periods of their lives. I felt that happiness in one's older years is related to one's attitudes and behaviour when one was younger. It's definitely related to one's personality.'*

*'I saw that the more you know and see, the more you regret things that you have not done right in your previous years and that lets you feel unhappy.'*

The second main theme highlighted the inevitable physiological changes related to ageing, including functional loss, illness and care requirements, mentioned by 60.6%. Deterioration and limitation of bodily functions were recognised as a function of ageing and increased disease. This category was often mentioned in connection with adults becoming like children again.

*'Ageing is being a child again. Tired of living, elderly persons behave like a child sometimes.'*

*'Actually, your soul is mature, but your behaviour is childish. You are more fragile, touchy and gentle.'*

*'Ageing results in a loss of physical strength and in having multiple diseases. While you were able to maintain yourself previously, now you need help from others and become dependent.'*



*'Ageing means that you have lost your strength and are not able to care for yourself. In a sense, it means becoming a child again, but the difference is that you have no parents to care for you'.*

The last common theme revealed students' perception that ageing is related to unhappiness resulting from loneliness and social isolation (52.5%). Here, they stressed the emotions related to the experience of feeling abandoned.

*'Ageing is a period where you have lost your loved ones and the support of your parents'.*

*'They {the elderly} have lived and seen a lot of things, but now they gaze towards the door awaiting someone they know'.*

*'They do not have many things to enjoy; they feel lonely and the fear of death is intense'.*

*'The most difficult thing for elderly people is to be left alone and to be dependent on others. They feel sad and need someone they can talk to'.*

### Feelings Evoked

Students' responses regarding the feelings evoked by their nursing home visit varied widely. Many of them (64.4%) expressed empathy with the elderly people's grief over the absence of family and friends.

*'I felt sad when talking to them. I believe ageing is more depriving if your family leaves you alone. I could not help feeling angry inside towards the children who left them here'.*

*'People must have lost feelings of love and respect for the elderly. Everyone wants to get rid of them. I don't understand how one can leave his own parents'.*

Some students reported statements of self-reflection and their own imagination of aging, like the individual who stated, 'It's really not easy to be old. They are surrounded by fear of death and reminiscence. This will happen to all of us'. Students also described their attitudes towards their own parents and indicated a desire to support them in their older age. One student indicated, 'They reminded me of my own parents. This is the unavoidable end, but nevertheless it makes you anxious. If we take the responsibility of caring for them, someone will care for us tomorrow'.

### Educational Needs

The students discussed several aspects of education needed to equip doctors to evaluate and manage the elderly in a medical practice. Most students (93.1%) expressed a sense that they lacked skill in communicating with the elderly.

*'I believe that to understand them, you have to be able to communicate with the elderly. Therefore, training should include techniques for communication skills with the elderly'.*

*'Communication with the illiterate elderly is more difficult. Training should address this issue'.*

Students also commented on the need for skills of empathy to help them better understand the elderly overall as human beings.

*'Talking with them and listening to their stories is okay. But when I asked {the elderly person with whom I was working} to take the test, she was not able to complete it because of her visual impairment. Then I read the items, but she couldn't hear me well. I recognised that she kept on talking regardless of what I was saying'.*

*'Training should focus on increasing our ability to understand the elderly and should encompass what to expect when you meet them in the examination room'.*

Some students mentioned the complexity of multisystem illness and polypharmacy in the elderly.

*'We must be able to manage multiple diseases in one patient. The person I interviewed had four different diagnoses and used eight different drugs. He didn't even remember their {the drugs'} names. I was astonished about the things I have to learn in order to manage an elderly patient'.*

The students came to appreciate the importance of assessing the psychological status of the elderly and hence many of them viewed training in geriatric psychiatry as crucial. They concluded that mental health in the elderly is an important contributor to quality of life.

*'I think that psychological status is a major factor in determining the mental state of the elderly. When you have peace mentally, there is nothing that can disturb you or give you sorrow. They {medical faculty} should introduce lessons about psychology of the elderly in our training'.*

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## DISCUSSION

This research provides information on medical students' perspectives about elderly people. To our knowledge, this is the first qualitative study to evaluate medical students' perceptions of ageing and of the geriatric education provided within a medical curriculum from Turkey.

The most prominent theme that emerged regarding students' perceptions of ageing was that age brings experience and maturity, which can lead to happiness or unhappiness. The students recognised that personality and attitudes are important factors affecting the emotional aspects of ageing and, therefore, people's quality of life. Mementos of life history helped students to realise that elderly individuals' past experience and personality factors affect their psychosocial status and have a major effect on their perception of diseases.



The students also recognised that the population of nursing home residents resembles the general population in many ways and those generalisations that treat the elderly as a homogeneous patient group are not appropriate. Medical students' awareness of the diverse health care needs of the elderly led to a loss of confidence in the adequacy of their knowledge and helped them to define areas where they need further learning in geriatric assessment and treatment [of elderly patients].

As we have expected, most of the students reported positive attitudes and feelings towards the elderly. One possible reason for this positive attitude among our students is the observation that respect for older persons is a notable tradition. Turkish culture respects elderly people and values the bonds between family members highly. Our students live in a society with cultural and social patterns that encourage protection of the elderly. Elderly family members generally receive economic and social support from their own children and are seen as a source of wisdom, spiritual guidance and love. In most cases, they continue to receive care from family members, irrespective of any illness and/or disability (21).

Another possible reason is that many of the present elderly are active within their family environment, such as looking after their grandchildren, and helping in the kitchen, which is typical among families across Asia. Many of our students may have witnessed the active role of older adults within their family (22).

In contrast to the predominantly positive views, some of our students had negative preconceptions and ideas about caring for the elderly. These sentiments derived largely from the belief that elderly patients' conditions are related to age and are thus untreatable because of the natural inevitability of decline in health due to ageing. It is plausible that attitudes toward ill older adults (patients) may differ from attitudes toward healthy older adults. The majority of our elderly subjects presented at least one illness and therefore, they may be included in a subgroup within the older adult population who by definition are ill or unwell.

In addition, medical students' negative attitudes were often related to training gaps such as in preparing medical students for the treatment of older people in generally (for example pharmacological therapy in older people, physiology in older people, pathophysiology in older people, non-pharmacological therapies in older people), in concord with other studies (23,24).

Our students take part in training where information about common geriatric diagnoses and treatment in the older pa-

tient population are provided. A review on medical students' attitudes after interventions found that teaching medical students about the care of older patients did not appear to result in positive attitude change. The findings of this review suggested that the inclusion of an empathy-building component in a geriatrics-based intervention may have better chances to obtain a positive attitude change (24). Many students viewed the experience of visiting the nursing home as one that stimulated their empathy for the elderly and increased their sensitivity to the needs of these individuals, which is a common finding reported in the literature (24).

Nearly all of our students perceived a deficit in communication skills. The areas of inadequacy in communicating were most frequently associated with the illiterate, though an overall deficiency in terms of attitude and skills while approaching the normal and healthy elderly was witnessed by the students. Moreover, students suggested a causal link between psychological well-being and quality of life among the elderly population. For this reason, many students emphasised the importance of introducing psychiatry lessons into the curriculum for the purpose of enhancing students' ability to understand elderly people's thinking.

Beliefs about elderly people may include prejudicial opinions that negatively affect the quality of care provided. Therefore, such beliefs should be addressed as part of an effort to graduate doctors with more positive attitudes. One way to ensure this result could be to develop and strengthen the lessons on geriatrics and gerontology in the curriculum of the medical educational programmes pertaining to all health professions. Integrating different aspects of healthy ageing into the medical curriculum could also yield benefits (25).

Our study has several limitations. Firstly, the scales used in this study were translated into Turkish by the authors of this study, but no validation study was performed. Although we used the back-translation method which has been considered the preferred method of obtaining a culturally equivalent instrument and conducted a pretesting of the scales with medical students, instrument validation was not assessed. Secondly, these results reflect the experience of a group of students at a single institution and may differ from those of students at other medical schools. Thirdly, the nursing home visit may have affected their perceptions; interviewing the students both before and after their visit would have enabled us to know more about the positive difference in their attitude towards the elderly brought about by the visit. Despite these limitations, the qualitative nature of this study captured a wide range of student perceptions about ageing and the elderly



in the context of their experiences. Significant themes that resonated with many of the respondents were identified. We feel that our approach to needs assessment has identified areas where increased knowledge and skills could help to change trainees' attitudes towards caring for the elderly.

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### Disclosure Statement

The authors declare no conflict of interest.

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