

# A Study of Occupational Therapy Students' Beliefs and Attitudes Regarding Gerontological Practice

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The purpose of this pilot study was to explore occupational therapy students' beliefs and attitudes about working with older patients and the students' intentions to engage in gerontological practice. Thirty-seven occupational therapy students participated in focus group interviews stratified by grade levels. Participants reported feeling less prepared to work with older patients than with other age groups, in terms of both professional education and exposure to older patients. Participants' responses and recommendations were consistent across groups and addressed issues at both societal and professional preparation levels. Three salient themes were identified in the data analyses. **Key words:** *beliefs and attitudes, geriatric rehabilitation, occupational therapy, older patients*

**D**EMOGRAPHIC changes during the 20th century resulted in record growth in the number of persons aged 65 years and older living in the United States, increasing from 3.1 million persons in 1900 to 35 million by the year 2000.<sup>1</sup> Within this group, the fastest rate of growth, at 6 times that of the general population, occurred among persons aged 85 years and older.<sup>2</sup> Population projections fore-

cast a near doubling of the population aged 65 years and older in a span of 25 years, from 37 million in 2005 to 71 million by 2030. As with previous demographic changes, the segment of the population aged 85 years and older will continue to experience the fastest rate of growth.<sup>3</sup>

Aging individuals experience sensory, physiologic, and psychosocial changes, which impact their ability to engage in important roles and occupations. For some individuals, these age-related changes, coupled with an increased probability of experiencing chronic conditions and comorbidity, present a threat to their functional performance and independence and increase their risks for falls, injuries, and adverse events. As a result, older individuals are also more likely to experience higher rates of hospitalization as well as physical and functional declines associated with these events.<sup>2,4,5</sup>

The projected growth of an aging population will bring increased utilization of medical, nursing, and rehabilitation services, as well as admissions to nursing homes. All things remaining equal, serving the healthcare needs of this growing population at the current ratio of professionals to population will require a workforce of approximately 13 552

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health professionals.<sup>3</sup> However, the literature indicates that fewer students in medical, nursing, and health-related programs are choosing to work with older patients.

Ensuring an adequate supply of clinicians to meet the rehabilitation needs of an aging population will necessitate identifying factors that influence students' choices of practice areas. The purpose of this qualitative pilot study was to explore factors that may influence occupational therapy students' intentions to engage in gerontological occupational therapy practice.

## REVIEW OF THE LITERATURE

Happell,<sup>6</sup> in her review of the nursing literature, found pervasive, negative attitudes regarding the care of older patients among both nursing students and registered nurses. Stevens and Crouch,<sup>7-9</sup> in a series of studies of nursing students' intentions to engage in gerontological practice, found that both personal beliefs that stereotyped older individuals and the educational process itself predisposed nursing students to devalue the elderly and to attach a low status and low prestige to their care.

Studies of medical, social work, and physical therapy students reveal similar key findings. First, students in clinical programs commonly feel unprepared to work with the elderly and report having insufficient knowledge of aging as well as limited exposure to aging persons. Second, and perhaps most important, students in health professions hold unfavorable beliefs and attitudes toward working with older persons.<sup>6,10</sup>

McNeil,<sup>11</sup> in a study of therapeutic recreation students, hypothesized that working with older clients may serve as a reminder to healthcare workers of their own mortality. McNeil also proposed that stereotypes of the elderly promote a sense of futility in treating older individuals due to expectations of limited potential, less than positive health outcomes, or personality traits that make them appear intractable. Such findings and hy-

potheses raise serious concerns regarding the potential discrepancy between the supply of healthcare personnel and the demands created by a growing aging population.<sup>11</sup>

Studies of undergraduate students conducted by Funderburk et al<sup>12</sup> indicated that when compared with control participants, students who participated in an elective aging course had more positive attitudes toward older adults. The study also indicated that these attitudes tended to endure over time, as measured by posttests at 3, 6, 9, and 18 months following completion of the aging course.

Berenbaum<sup>13</sup> explored this issue in a published review of research on students' preferences and motivations related to working in gerontological practice. Several studies in her literature review concluded that working with the elderly carried a number of negative connotations, from being considered a less prestigious practice than working with other age groups to the practitioner's personal fears of aging. Students' preferences and intentions were found to be influenced by their own cultural beliefs, by perceptions of their peers' beliefs and attitudes toward working with the elderly, and by exposure to older individuals in a gerontological fieldwork experience.<sup>13</sup>

Although the issue of attitudes and beliefs regarding working with the elderly has received a great deal of attention across healthcare disciplines, it appears to be conspicuously absent from the occupational therapy literature. Studies such as this one fill an important gap in occupational therapy research and provide valuable information regarding the preparation of occupational therapy professionals.

## METHODS

This pilot study used a cross-sectional, qualitative, focus group methodology utilizing a semistructured format to allow participants to elaborate on their responses and to encourage interaction among participants. Focus groups of 8 to 12 individuals were planned

in order to make the sessions more manageable and productive. Interviews and data analyses followed Krueger's<sup>14</sup> recommendations for conducting focus groups and analyzing focus group data.

### Participants

The purposive sample was obtained from the population of occupational therapy students at a large university in the Southeast. After obtaining approval to conduct the study from the university's Institutional Review Board, students' participation was solicited through flyers, electronic communications, personal invitations through classroom visits, and sign-up sheets. Interview groups were stratified by grade levels within the Occupational Therapy Program.

### Theoretical framework

Constructs from the Theory of Planned Behavior provided the framework that guided the interviews and data analyses. The theory proposes that an individual's behavior is predicted by his or her intention to engage in the behavior. Intention, in turn, is influenced by the individual's beliefs and attitudes regarding the behavior (ie, the positive or negative value attached to the behavior), subjective norms (ie, the individual's perceptions of the value attached to the behavior by significant persons in the individual's life), and perceived behavioral control (ie, the individual's perception of his or her ability to engage in the behavior).<sup>15,16</sup>

Although qualitative studies generally do not use a theoretical framework, the Theory of Planned Behavior provided a useful foundation to inquire about intentions to work with older patients and to explore students' beliefs and attitudes about working with this segment of the population. Questions developed for the group interviews were based on constructs of the Theory of Planned Behavior and were also derived from information in the research literature.

### Data collection, management, and analyses

Focus group sessions were conducted by a moderator, and data were collected by 2 assistant moderators in each group. Verbatim transcriptions were completed by each interview team from notes collected by assistant moderators and audio recordings of the focus groups. As recommended by Krueger,<sup>14</sup> reports of each focus group were generated and verified by members of the research team who were present in the group interviews.

Transcriptions were color-coded for the analysis to indicate the different grade levels and facilitate comparisons between groups. Two to 3 members of the research team were assigned specific questions to conduct the initial content analysis applying Krueger's<sup>14</sup> "long table" method to identify emerging themes within and between groups.

### RESULTS

Thirty-seven students from the undergraduate and graduate Occupational Therapy Programs at the study site participated in 5 semistructured focus groups stratified by class level. A description of participants by gender and class level is provided in Table 1.

### Participants' intentions

Participants were asked the practice area they intended to pursue upon completing their education. Of 37 students, 6 (16%) expressed an interest in geriatric practice; 11 (30%) either did not identify their intentions or were undecided; 8 (22%) indicated they intended to work with a wide range of ages,

**Table 1.** Sample demographics

	Junior class	Senior class	OT Master track	Master	
				Year I	Year II
Sex					
Female	5	8	6	8	8
Male	1	0	0	1	0

from children to older patients; and 12 (32%) expressed their intentions to pursue pediatric practice.

### Participants' perceptions of subjective norms

Based on participants' responses, subjective norms did not appear to exert any influence as to their choice of practice areas. Participants reported their choices were based on their own preferences and personal experiences.

### Participants' perceptions of behavioral control

In terms of behavioral control, participants indicated they felt they would be able to pursue their practice preferences, given the shortage of occupational therapists and the projected growth of the profession.

### Participants' beliefs and attitudes

Three salient themes captured participants' beliefs and attitudes regarding working with older patients. In the first theme, participants described working with older patients as an opportunity for enrichment through interactions with these individuals. Responses within "aging as enrichment" fell in either of the 2 categories:

1. Personal enrichment—Participants described working with the elderly as an opportunity for personal enrichment (ie, an opportunity to learn about life and coping, through their interactions with older patients). Group members also felt they would derive a sense of satisfaction by making a difference in someone's life. The following excerpts captured the meaning of personal enrichment:

We learn from their life experiences and all they went through. They teach us to be good people.

They teach you to value life, they have advice to tell you.

They are inspiring to me ... their drive to live life to the fullest.

Sometimes they teach you more than you'll ever show them in therapy ... they teach you a lot about life.

Just being able to actually improve their quality of life ... they want to be helped and you're able to see progress. Small improvements make a big difference in their lives.

2. Professional enrichment—Participants also viewed working with the elderly as an opportunity for professional enrichment. They felt they could learn skills and strategies from their interactions, which they could later apply or share with other elderly individuals. The following comments reflect participants' views of professional enrichment:

Learning how they cope with different life situations and aspects of aging can help you with the next person that you see ... that's a positive. ...

Learning how to provide support systems for them.

They challenge me to find creative ways to adapt their environments.

The challenge of meeting their needs ... it's very motivational to see their pride.

The second theme, aging as limited potential, described participants' perceptions of limitations associated with aging. Participants alluded to declines in physical capacity, personality traits that potentially limit outcomes of care, the impact of a patient's impending death, and the therapist's sense of loss. The responses below are representative comments provided by participants:

Restrictions ... in the variety of things you can do with them.

I found at the nursing home some ... they tended to be stubborn ... it sounds awfully morbid, but they just wanted to die ... they just wanted to give up.

Seeing them deteriorate and seeing them depressed about getting older . . . making them understand why they need to do exercises.

Their mental health status, the chronic conditions that don't allow you to do much. . . their endurance and everything . . . there's only so much you can do. . . .

The sadness of seeing someone that might be dying or someone who does die. You get close with them during treatment and then a lot of them die.

It's hard to separate yourself from the patients . . . you get kind of attached even though you're not supposed to . . . so you're working so hard and doing all these things in therapy and the next day you come in and you find the patient has passed away . . . that's extremely difficult.

The third theme, aging as a mirror image, described a reflective process through which clinicians working with older patients are reminded of their loved ones' and their own aging and mortality.

I think some people avoid this population because there's less room for improvement and people perceive them as low energy and low excitement and . . . because they remind us of our own mortality.

I think our own fears of facing death, facing what old age is like. I think that's probably the number one reason why a lot of us stay away from working with this population . . . because it is tough . . . and to know that all of us . . . and all the ones we love will eventually get there . . . that's really hard.

## DISCUSSION

Results of this study reflect findings from the research literature in that occupational therapy students, as have students and practitioners in other disciplines, reported feeling less prepared to work with the elderly than with other age groups, wanted to increase their knowledge of aging, and felt they had limited exposure to aging persons. Participants expressed an interest in having access to more aging courses and more opportunities to work with aging persons to increase their knowledge of aging and exposure to this population.

In terms of beliefs and attitudes, participants' responses regarding the aged persons as having limited potential, achieving less than desirable outcomes, and serving as a reminder of the students' own mortality mirrored barriers hypothesized by McNeil<sup>11</sup> as discouraging practitioners from choosing to work with older patients.

Responses, observations, and recommendations within the large group and between grade levels were consistent and addressed barriers to working with older persons on 2 levels:

### 1. Professional preparation

Participants observed that limited required and elective coursework on aging and limited exposure to the elderly in the classroom and fieldwork serve to perpetuate negative stereotypical views of aging. Their recommendations included offering more gerontology courses in the required occupational therapy curriculum, offering more elective courses on aging and the aged, providing more "hands-on" experience with older persons, and requiring a geriatric specialty rotation.

### 2. Societal level

Participants observed that society and the media portray older persons in a negative manner that devalues aging and the aged. They felt that increased media coverage of active aging would improve people's beliefs and attitudes toward older individuals and that a more positive media portrayal of the elderly would help transform negative stereotypes of older persons.

## DELIMITATIONS AND LIMITATIONS

The study was limited to occupational therapy students at a large university in the Southeast. The fact that participants were obtained from a single venue may be a limitation of this qualitative study. The multicultural environment of this university and



the surrounding metropolitan area may, in itself, add another dimension to this sample that may not be exhibited by occupational therapy students in other settings. Additionally, students who volunteered to participate in the interviews may hold beliefs, attitudes, and intentions that differ from those of nonparticipants.

## CONCLUSION AND IMPLICATIONS FOR OCCUPATIONAL THERAPY EDUCATION AND PRACTICE

Occupational therapy, as other health professions, will face increasing demands to provide services to an aging population. While students' intentions to embrace a geriatric practice may be moderated by market demands, ensuring that care will be appropriate, available, and accessible will require a workforce prepared to address the complex issues and health problems of the elderly.

The need to ensure a sufficiently large and adequately prepared healthcare force makes

it imperative to understand the factors influencing students' intentions to work with this segment of the population. However, identifying factors that influence students' intentions to work with older patients is only the beginning. The challenge now is to critically review existing programs to enhance the professional preparation of geriatric practitioners.

## RECOMMENDATIONS FOR FUTURE RESEARCH

This exploratory study provided a glimpse into the beliefs, attitudes, and intentions of students from varied cultural backgrounds within a single venue in a large metropolitan area in the Southeast. Further research is indicated to determine the extent to which findings from this study reflect the beliefs, attitudes, and intentions of students in other professional occupational therapy programs and the degree to which current occupational therapy preparation is meeting the educational needs of an emerging workforce.

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