

Attitudes of Undergraduate Medical Students toward Elderly Patient Care: A Positive Perspective?

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Introduction

Aging is a natural process that brings physical, psychological, and social changes, often increasing vulnerability to illness and leading to frequent hospital visits (Leung S et al., 2011). With years of medical expertise, healthcare professionals play a vital role in managing the aging population. According to the National Health Policy, India's life expectancy is 68.7 years—67.4 years for males and 70.2 years for females. As life expectancy increases, the risk of morbidity also rises (Ibrahim R et al., 2013). Therefore, it is crucial to assess the attitudes of undergraduate medical students toward elderly care and promote awareness (Yen CH et al., 2009). Introducing necessary changes in medical education can cultivate a positive attitude, greater empathy, and enhanced knowledge in geriatric healthcare.

Aim and Objectives

To assess and compare the attitude of 3rd semester and interns of undergraduate (UG) medical students towards the health care of elderly patients.

Materials and Methods

Third-semester undergraduate medical students and interns who provided consent were included in the study. Socio-demographic details were collected (Figure 2,3), and a pre-test UCLA Attitude Questionnaire (University of California, Los Angeles) was administered via Google Forms (Figure 1) to assess attitudes toward the elderly, with higher scores indicating more positive attitudes. An interventional program, consisting of video and movie clips on geriatric healthcare, was conducted, followed by a post-test questionnaire to measure any changes in attitude. The same students were reassessed in their fourth semester to evaluate attitude shifts six months post-intervention. Additionally, behavioral changes were assessed through feedback from consultants, postgraduates, and nurses using open-ended questions. A 360-degree feedback approach was also employed to evaluate interns' behavioral changes during their clinical postings.

UNIVERSITY OF CALIFORNIA LOS ANGELS (UCLA) GERIATRICS ATTITUDES SCALE:

Directions: Please use the scale to indicate the degree to which you agree or disagree with each statement. The best response is the one that truly reflects your personal opinion. Likert scale of five points (Strongly disagree = 1, Disagree=2, Neutral=3, Agree=4 and strongly agree = 5).

Age:

Gender: **Male/Female**

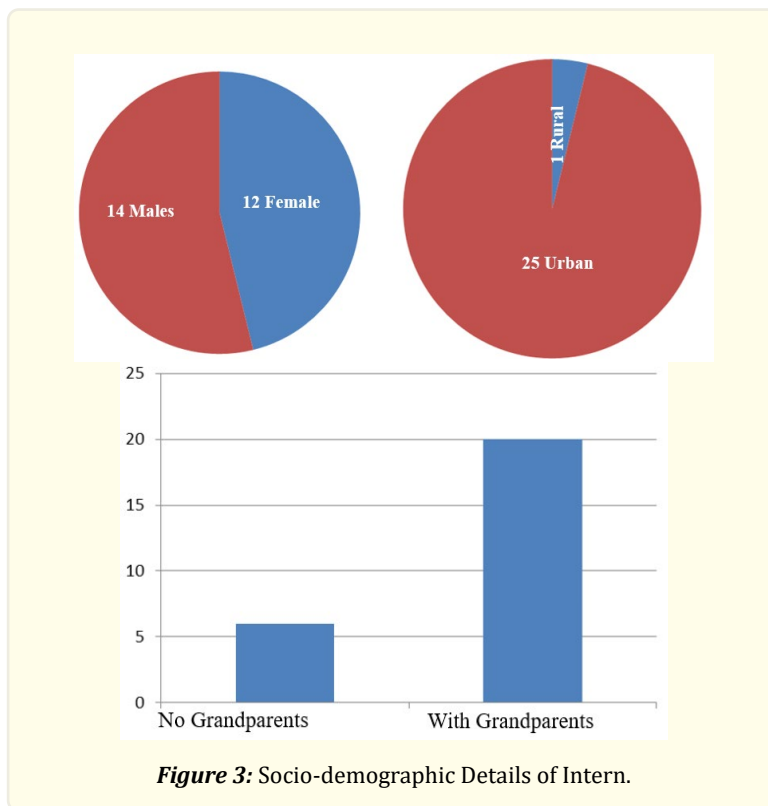
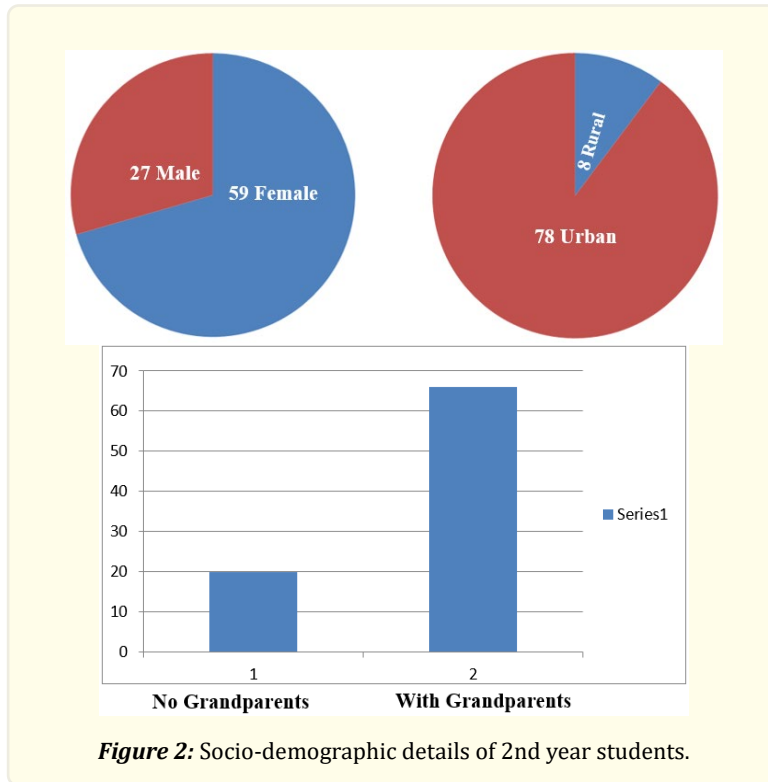
Rural/Urban

Do you have any elderly member in the family? **Yes/No**

Are you aware of the health care facilities for the elderly? If yes, mention

ITEMS	Strongly Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Strongly Agree
1. Most old people are pleasant to be with.					
2. I would rather see younger patients than elderly ones.					
3. It is society's responsibility to provide care for the elderly.					
4. Medical care for old people uses up too much human and material resource.					
5. As people grow older, they become less organized and more confused.					
6. Elderly patients tend to be more appreciative of the medical care I provide than are younger patients.					
7. Taking a medical history from elderly patients is frequently an ordeal.					
8. I tend to pay more attention and have more sympathy towards my elderly patients than my younger patients.					
9. Old people in general do not contribute much to society.					
10. Treatment of chronically ill old patients is hopeless.					

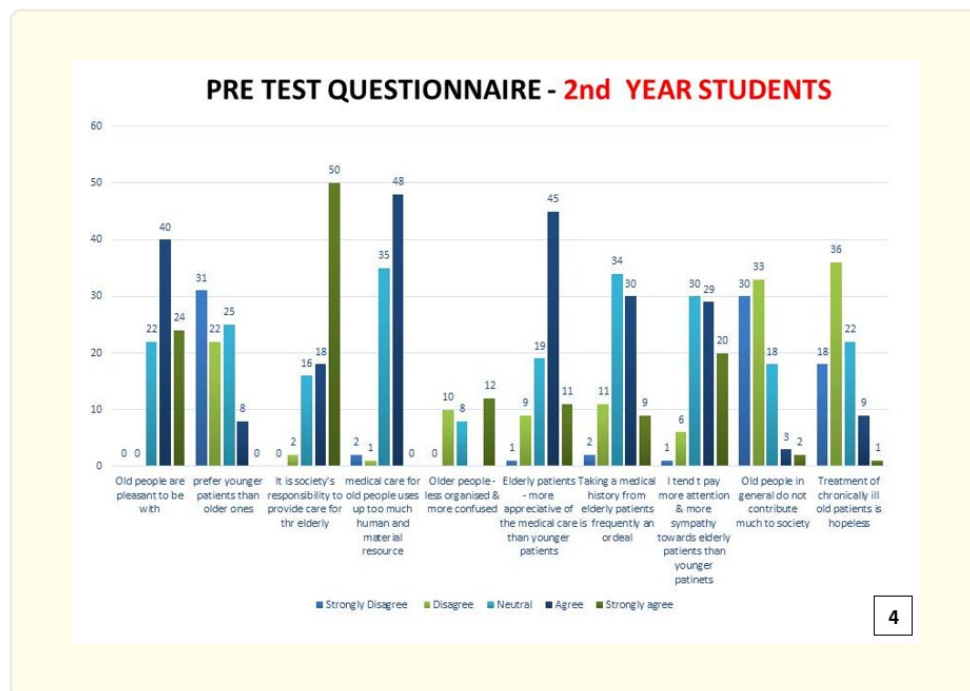
Figure 1: UCLA Geriatrics attitude questionnaire.



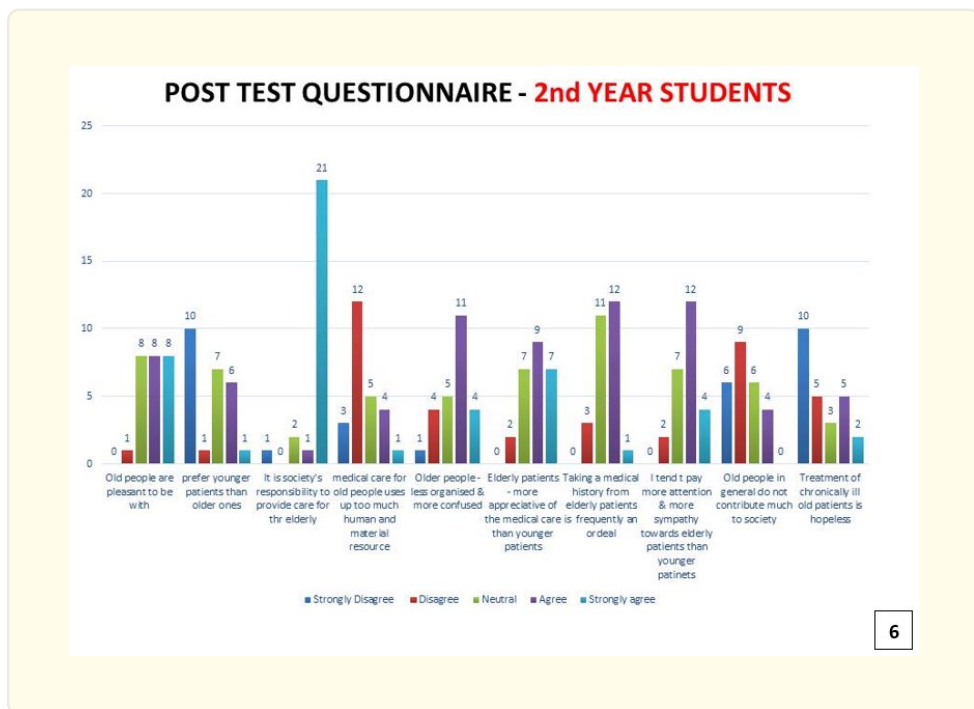
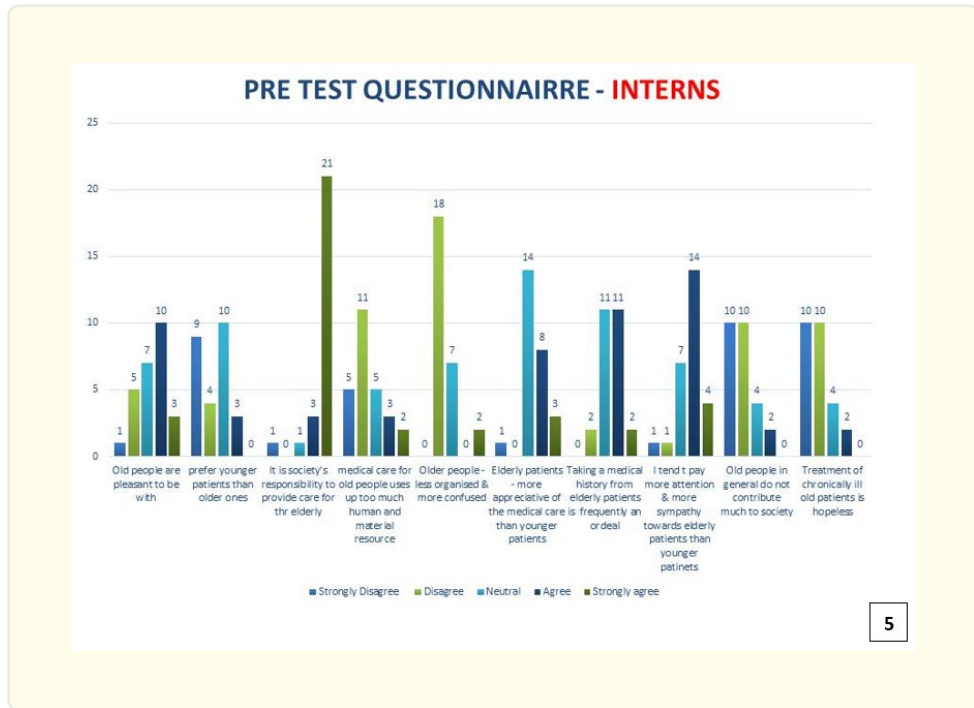
Results

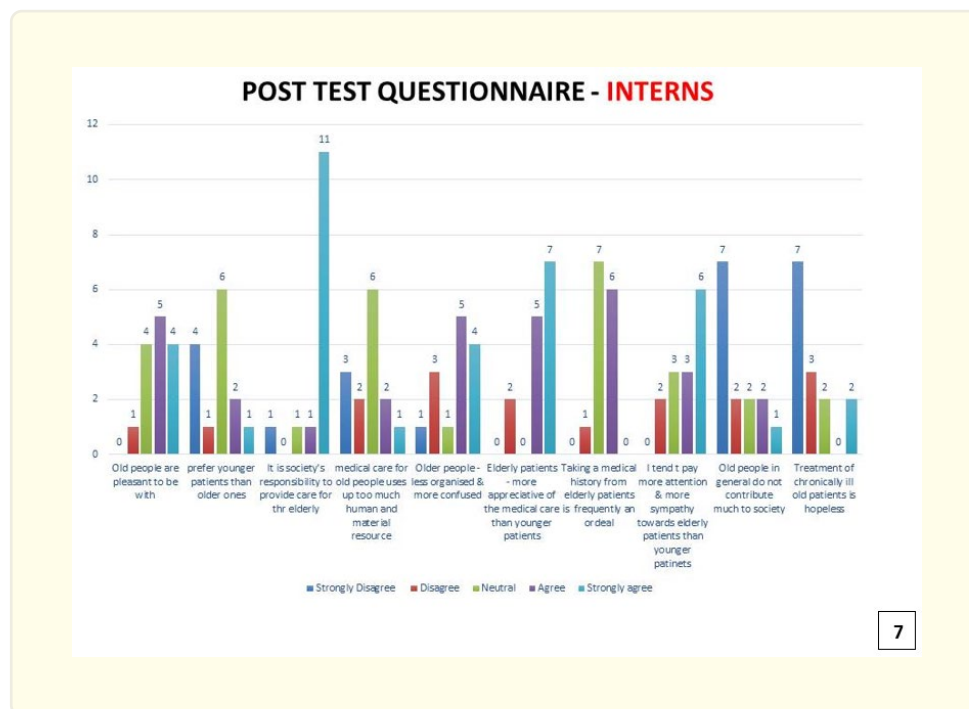
Student Feedback on the Open-Ended Question: “Are you aware of the healthcare facilities for the elderly?”

1. Elderly individuals need routine health checkups.
2. Health camps, such as eye checkup camps, are essential.
3. Nursing care and attendant support are necessary for the elderly.
4. Some students became aware of elderly healthcare through their mothers working in the geriatric department.
5. For the convenience of their families, some elderly individuals reside in old age homes.
6. Some healthcare facilities are available at Primary Health Centers (PHCs).
7. Various national programs, such as the Indira Gandhi National Old Age Pension Scheme (IGNOAPS) and the Annapoorna Scheme, provide support for the elderly.



The pretest results for both groups (3rd semester students and interns) indicated a low level of interest in participation (Figures 4 and 5). However, the posttest results after the intervention were highly encouraging (Figures 6 and 7). Feedback from consultants, postgraduates, and nurses suggested that while the behavioral attitudes of undergraduate students (2nd-year students and interns) were generally good, the intervention led to a noticeable improvement, particularly in their interactions with elderly patients.





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Discussion

Our study found that undergraduate (UG) students consistently practice and maintain a positive attitude toward elderly health care. A systematic review by Samra et al. (2013) on changes in medical students' and doctors' attitudes toward older adults after an intervention suggests that direct interaction with older adults or exercises that encourage individuals to consider the experience of aging may be more effective in fostering positive attitude change than purely educational interventions. Even if an educational intervention enhances knowledge about geriatric care, it may not necessarily lead to improved attitudes. Seaman et al. emphasized that interprofessional education is essential for medical students to effectively care for older patients. Ross et al. (2018), in their systematic review, highlighted that educational interventions incorporating community engagement and mentorship programs with healthy, community-dwelling older adults have been shown to foster positive attitudinal changes in students. Naidoo K and Van Wyk J (2021) assessed the attitudes of final-year medical students toward elderly healthcare using the UCLA questionnaire. Their findings indicated that while students generally exhibited positive attitudes toward the elderly, their knowledge of geriatrics was limited. The authors emphasized the need to review and enhance the UG geriatric curriculum to improve teaching and learning of geriatric competencies. Additionally, students should receive training in communication skills, interprofessional education, and greater community engagement to strengthen their competency in elderly care.

Ozerdogan O et al. (2022) conducted a study on the attitudes of medical students toward elderly healthcare using Kogan's Attitude Scale. The study concluded that students generally exhibited highly positive attitudes toward elderly patients. Additionally, those who had lived with their grandparents at some point in their lives demonstrated even better interactions and relationships with the elderly.

Najomi M et al. (2023) conducted a study using an interview-based method and highlighted the following key findings:

- Discrimination in service delivery was observed due to ageism and stereotyping.
- A lack of interprofessional education was noted among budding healthcare professionals, emphasizing the need for collaborative workshops involving medical, allied health, and paramedical students.

- Interpersonal communication skills should be enhanced through role-playing exercises focused on active listening.
- Hospital infrastructure should be improved to better accommodate elderly patients.
- Experiential learning should be fostered through clinical exposure, community engagement, and reflective learning methods to enhance students' understanding of elderly care.

A study by Al Ghailani A et al. (2024) found that doctors and medical students exhibited moderate attitudes but poor knowledge regarding elderly care. The study highlighted the need for greater integration of geriatrics education into the medical curriculum. The authors also recommended conducting additional geriatrics courses and workshops to enhance knowledge and competency in elderly healthcare.

Conclusion

Attitude is an important characteristic feature of a human being but it's more vital for the health care provider.

Conflict of Interest

We declare no conflict of interest. No funding or grants were used for the publication of this case study.

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