Introduction

It is clear that health care professionals training now for their careers will be working with a decidedly older population, as “baby boomers” age. By 2030, all of the Baby Boomer cohort (born 1946-1964) will be beyond the 65-year-old mark and will represent approximately 20% of the US population, or 72.1 million people.

In addition, there are approximately one billion people worldwide, with the number of people living with some form of disability around 15% of the world’s population. How prepared are healthcare workers of the future to work with elderly people or people with disabilities? What preconceived notions, or attitudes, do they have that can help or hinder their success in working with these populations? The best time to assess these attitudes is while they are training to become those healthcare workers, i.e., the pre-service period.

This study uses an approach to assessing innermost feelings that people have about age and disability, asking pre-service health care professionals (NIU students) to complete a sorting exercise that measures truthful opinions toward disabled/abled persons and young/old persons. The Implicit Association Test (IAT) accomplishes that by providing the participants with images that correlate with aged/disabled and young/old and asking them to sort the items, along with positively or negatively connoted words (evaluations/stereotypes). The theory is that it is easier (and thereby faster) to make a response when the items that are more closely related share the same response key (disabled and good, old and bad, etc.).

Results

The sample included 3 students in a nursing class and 7 students in an introductory occupational therapy class, was predominantly female (n=9), and aged in the mid-twenties (21-26). Their results were combined and overall averages (per IAT category) calculated, then compared to international averages. This provides a juxtaposition to a larger and more randomized sample. Their aggregate scores are reflected in the following graphs and table.

<table>
<thead>
<tr>
<th>Preference result for IAT</th>
<th>Participant (numbered for confidentiality)</th>
<th>Preference result for IAT</th>
<th>Participant (numbered for confidentiality)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strong for abled people</td>
<td>1,2,5,7</td>
<td>Strong for young people</td>
<td>5,7</td>
</tr>
<tr>
<td>Moderate for abled people</td>
<td>4</td>
<td>Moderate for young people</td>
<td>1,2</td>
</tr>
<tr>
<td>Slight for abled people</td>
<td>3,6</td>
<td>Slight for young people</td>
<td></td>
</tr>
<tr>
<td>Neutral between abled and disabled people</td>
<td>8</td>
<td>Neutral between young and old people</td>
<td>3,4,6,8</td>
</tr>
</tbody>
</table>

Discussion

These results aligned with the available literature, as most participants preferred abled persons over disabled persons, and some preferred young over old. The level of preference is more varied for age, but more neutral in terms of disability.

When it comes to age IATs, it is common for participants to prefer younger persons over older persons, regardless of their own age. According to the Project Implicit website, it is actually typical for older persons to classify young as good and old as bad, due to societal values and stereotypes.

Compared to international averages, this NIU sample skewsl more toward young and abled bodied. 0% of respondents had a preference of any level for disabled or old persons. This can reflect a lack of knowledge and experience with older/disabled people.

However, 50% of the NIU respondents were neutral toward age, which is considerably more than the IAT website average. This may be attributed to greater exposure to elderly persons at home or in society, compared to people with disabilities.

Further Implications

The results of this project point to a need for additional training or exposure for pre-service healthcare professionals, in order to increase awareness and acceptance of elderly people and persons with disabilities. An argument can be made that the students who don’t have a strong preference (and even those that do) could be exposed to disabled/older people in order to foster awareness and more positive attitudes. These students represent a “blank slate” of individuals who may be more willing to work with this population of disabled/older clients. Future research will involve a larger sample and a comparison of pre-service helping professionals to other majors, as well as professors.

Knowledge about and exposure to the elderly impacts attitudes, and attitudes of registered nurses appear to affect their preference for working with older people as well as the quality of care offered to them. Additionally, the sheer self-awareness of a predisposition (that could interfere with the ability to perform effectively) is something that could encourage students to seek additional training to heighten favorable awareness.

References

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