

Canadian Medical Education Journal 2020

Canadian Medical Education Journal

You Should Try This!

Fostering intergenerational education: an experiential learning program for medical students and older adults

Favoriser l'éducation intergénérationnelle : un programme d'apprentissage par l'expérience pour les étudiants en médecine et les adultes plus âgés

Rebecca H. Correia,^{1,2} Lindsay Klea,^{1,2} Graham Campbell,^{1,2} Andrew P. Costa^{1,2}

¹Department of Health Research Methods, Evidence, and Impact, McMaster University, Ontario, Canada

²Michael G. DeGroot School of Medicine, McMaster University, Ontario, Canada

Published ahead of issue: February 13, 2020

CMEJ 2020 Available at <http://www.cmej.ca>

© 2020 Correia, Klea, Campbell, Costa; licensee Synergies Partners

<https://doi.org/10.36834/cmej.69327>

This is an Open Journal Systems article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/2.0>) which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited

Implication Statement

Educational initiatives providing intergenerational, experiential learning opportunities can engage students of various education levels and disciplines. All persons can benefit from initiatives with older adults because our aging population suggests more of these interactions will occur across sectors. While students pursuing an education in health or medical fields are primarily identified as benefiting from intergenerational education to gain skills and knowledge to effectively care for the elderly, these teachings are invaluable regardless of one's age, education, or career background. The program delivery and evaluation criteria can be adapted to assess competencies essential to different education or career paths.

Déclaration des répercussions :

Les initiatives en matière d'éducation procurant des occasions d'apprentissage expérientiel intergénérationnel peuvent favoriser la participation d'étudiants de différents niveaux de formation et de diverses disciplines. Toutes les personnes peuvent tirer avantage d'initiatives avec des adultes plus âgés, car notre population vieillissante suggère que plusieurs de ces interactions se produiront dans tous les secteurs. Alors que les étudiants poursuivant leur éducation dans des domaines de la santé et de la médecine sont principalement reconnus comme tirant profit d'une éducation intergénérationnelle pour acquérir des habiletés et des connaissances pour prendre efficacement soin des aînés, ces enseignements sont inestimables, peu importe l'âge, l'éducation ou l'expérience de carrière d'un individu. La prestation du programme et les critères d'évaluation peuvent être adaptés pour évaluer les compétences essentielles à divers parcours éducatifs ou professionnels.

Correspondence: Andrew Costa, CRL-219, 1280 Main St. W., Hamilton, ON, L8S 4K1; telephone: (905) 525-9140 ext. 22067; email: acosta@mcmaster.ca

As the Canadian population ages, more physicians with skills to care for the elderly are needed.¹ The Canadian Resident Matching Service reports that only 3.3% of matched medicine subspecialty applicants identified geriatric medicine as their first choice discipline during the first match iteration in 2019.² A lack of medical student exposure to older adults may be impeding an interest in caring for this demographic. Research demonstrates that experiential learning in medical curricula improves the relevance, attitudes, and retention of classroom material.³ Previous education programs involving clinically-oriented experiences with older adults have increased positive attitudes.^{3,4}

The “Make a New Old Friend” program provides an intergenerational, experiential learning opportunity for medical students to increase competencies in caring for older adults, enhance communication skills, and explore career pathways in geriatric medicine. This program fosters mutual benefits for students and older adults by creating opportunities for intergenerational knowledge exchange and companionship.

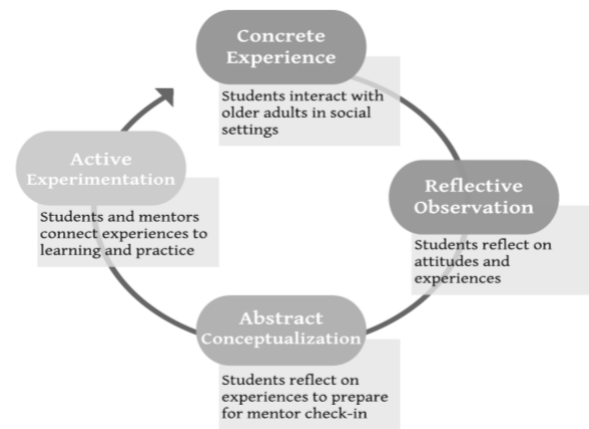
The Waterloo Regional Campus of the McMaster University DeGroote School of Medicine recently developed and launched “Make a New Old Friend.” To date, eight medical students, eight older adults, and four geriatric specialists participated in two program iterations. Pre-clerkship medical students primarily enroll due to their geographic stability. The office of the Hamilton Integrated Research Ethics Board granted this program evaluation a waiver of ethical review.

We collaborate with staff at a Long-Term Care (LTC) residence to enroll older adults and pair them with students. Students and older adults meet in-person on a bi-weekly or monthly basis to facilitate relationship-building. Students and faculty mentors practicing geriatric medicine are matched to discuss their experiences and arrange shadow days.

Students complete an interest survey to facilitate the matching process. Onboarding packages are distributed and contain meeting guides with suggested conversation topics, communication tips, and meeting logs. Researchers facilitate a workshop for students about accommodating the personal expressions of older adults with cognitive impairments.

Students complete evaluations based on Kolb’s Experiential Learning Cycle to consolidate learning outcomes (see Figure 1).⁵ Mentors guide critical reflection based on students’ concrete experiences engaging with older adults, reflective observations, abstract conceptualization of experiences and knowledge, and active experimentation to consider influences on their education and future medical practice.

Figure 1: Examples of “Make A New Old Friend” experiences and reflections, adapted from Kolb’s Experiential Learning Model⁵



Program coordinators collect semi-structured feedback from participants. Overall, students report high levels of satisfaction with this program. Notable strengths include the regular meeting frequency to build rapport and develop communication skills. Reported barriers include administrative intake procedures and the structure of faculty mentor meetings. Suggestions for future iterations include streamlining intake and training procedures, providing more conversations topics and activities for meetings, facilitating subsequent geriatrics-focused clinical skills sessions, and engaging the older adult’s family in the program.

Program debriefs with management staff at the LTC residence evaluate collaborative program procedures. Staff identified high satisfaction among older adults regarding the nature of visits and students’ complete engagement during visits. The limited number of student participants, particularly male students, is a weakness to be addressed in future program iterations. Enhancing the evaluation rigour in the future may be possible with psychometric scales applied before and after exposure to experiential learning.

Conflict of interest: The authors declare that they have no conflicts of interest to report.

Acknowledgement: The authors wish to acknowledge the staff and residents of Schlegel Villages at University Gates for their help coordinating and participating in the “Make a New Old Friend” program.

References

1. Government of Canada. *Action for seniors report* [Analysis in brief on the Internet]. Ottawa: Government of Canada; 2014 38 p. Available from: <https://www.canada.ca/en/employment-social-development/programs/seniors-action-report.html> [Accessed August 23, 2019].
2. Canadian Resident Matching Service. 2019 medicine subspecialty match – first iteration [Analysis in brief on the Internet]. Ottawa: *CaRMS*; 2019 1 p. Available from: https://www.carms.ca/wp-content/uploads/2018/11/msm3e_2019.pdf [Accessed September 14, 2019].
3. Samra R, Griffiths A, Cox T, Conroy S, Knight A. Changes in medical student and doctor attitudes toward older adults after an intervention: a systematic review. *J Am Geriatr Soc*. 2013;61(7):1188-96. <https://doi.org/10.1111/jgs.12312>
4. Wright S, Wong A, Newill C. The impact of role models on medical students. *J Gen Intern Med*. 1997;12(1):53-6. <https://doi.org/10.1046/j.1525-1497.1997.12109.x>
5. Kolb DA. *Experiential learning: experience as the source of learning and development*. 2nd ed. New Jersey: Pearson Education; 2015