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Student Radiographer Attitudes towards the Older Patient: A Longitudinal Study

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Background

Increasing life expectancy in the western world has resulted in many healthcare services progressively handling larger proportions of older adults. It is now the case that the majority of patients examined in UK medical imaging departments are aged 65 years and over.^[1] Despite this upward trend a strong body of evidence suggests that negative staff/trainee attitudes towards older people remain prevalent in a number of healthcare domains, including radiography itself.^[2] The consequences of this situation for patient care is logically a matter of some concern.^[3] Education is widely viewed as a key component in preventing or reversing the development of negative attitudes towards older people, especially among student healthcare practitioners.^[4] Given this, a two-day programme was designed to 'set' student radiographer attitudes as positively as possible at an early stage in their training, such that they might be resilient to the factors that might result in a deterioration in attitudes

Intervention

A two day workshop was designed. Lectures were organised to dispel the common myths around ageing as well as how ageism is perpetuated both in the media and in health care. Sessions around the normal processes of ageing and compression morbidity were used for education and debate.^[5] Day 2 made use of workshops and role play^[6]. Here students dressed in simulation suits that mimicked some of the pathophysiological processes associated with ageing e.g. muscle fatigue, movement restriction macular degeneration and hearing loss.



Method

The quantitative outcomes of the educational intervention were assessed longitudinally, using Kogan's attitude towards old people scale (KOP),^[7] measurements were taken pre-intervention, and then in the short, medium and longer terms across the course of the participants' training. N=26

Findings



Discussion

Despite the limitations of using the KOP to measure health practitioner attitudes towards older patients and the small sample size, these data, coupled with the discussions from the focus groups (not presented here) suggests that the educational intervention influenced student attitudes towards older patients in a positive way. However clinical experiences can be detrimental if the intervention does not give students some confidence in dealing with some of the communication challenges often associated with Dementia care. The intervention did provide confidence during radiological procedures when negotiating the physiological and sensory deficits associated with ageing, as evidenced by some of the responses given in the focus groups.

Refs

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