
“More to Life than MacGyver and Crocheting”: Medical Students Respond to a Recreational, Intergenerational Event

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ABSTRACT

Background

Enrolment in geriatric-related specialties continues to decrease from already critical levels. Contributing factors include lack of student interest, ageism, and little professional exposure to healthy older people. Medical literature suggests that increasing student interaction with the older adults outside of the medical setting may be successful in improving students' attitudes toward care of older adults.

Methods

In March 2005, over 100 medical and dentistry students, seniors, and University of Western Ontario faculty members enjoyed a sit-down dinner, dancing, and games at the Four Points Sheraton in London, Ontario. Students completed a brief survey assessing their attitudes toward older adults, aging, and geriatric medicine before and after this recreational, intergenerational event.

Results

No significant change was noted in students' pre- and postevent responses to “I look forward to having older patients in my practice” ($p = .155$). Following the event, students were significantly more likely to consider a career in geriatric medicine ($p = .048$). Qualitative data communicated a high level of student enthusiasm for this event.

Conclusions

Although positive results must be interpreted cautiously, students overwhelmingly indicated that this was a valuable experience and would attend a similar event again. Results suggest that supplementing undergraduate medical curriculum with nonclinical, recreational interactions may have a beneficial effect on students' attitudes toward marginalized patient groups.

Key words: geriatrics, knowledge and attitudes, nonclinical interaction, undergraduate medical education

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Dinner, dancing, games, and music—on the evening of March 23, 2005, 50 students from the University of Western Ontario's (UWO) Schulich School of Medicine and Dentistry and 50 residents from the Grandwood Park Retirement Residence in London, Ontario, organized and attended the first annual Intergenerational Spring Gala. Over 100 students, seniors, and UWO faculty members enjoyed a formal sit-down dinner at the Four Points Sheraton, followed by salsa and swing dance lessons, a photo session, and table games. The night was deemed a success by organizers and participants alike, and by the night's end, local media, including the Canadian Broadcasting Corporation, had arrived unexpectedly to cover this student-initiated event.

It is well recognized that the care of older adults is inadequately addressed in the undergraduate medical curriculum.^{1,2} Despite the current need for physicians trained in the care of older adults and the looming shortage of geriatric specialists able to effectively care for Canada's aging population, enrolment in geriatric medicine and related specialties continues to decrease from already critical levels.³ Possible factors contributing to this impending crisis in geriatric-friendly care include lack of student interest, societal and institutional ageism, and little professional exposure to healthy older people.⁴⁻⁶ Increased student exposure to older adults outside of the medical setting and promoting education that focuses on the functional and social issues associated with aging have been suggested as potential approaches to encouraging medical students' awareness of comprehensive care of older adults.^{7,8} This article reports on student survey responses to issues of aging and attitudes toward older adults gathered prior to and following a recreational event.

Methods

Ethical approval was granted by UWO for administering a brief pre-event and postevent survey designed to assess students' attitudes toward older adults, aging, and geriatric medicine before and after this recreational, intergenerational event.

Prior to the gala, 50 medicine and dentistry students were paired with a senior resident from Grandwood Park Retirement Residence, a few of whom initiated contact with each other via e-mail. On the evening of the event, the seniors arrived by chartered bus and were met by the students in the lobby of the hotel. Introductions, socializing, corsage exchanges, and short speeches took place before a catered dinner of salad and lasagna. Tables of approximately 10 students and seniors each participated in a game in which each group tried to find individuals at their table who had completed or experienced certain tasks or activities: for instance, students and seniors were asked to identify someone in their group who had "seen all five *Rocky* movies," "been born in the 1920s," "five or more grandchildren," "milked a cow," or "bought something over the Internet," to list just a few items. A disc jockey played dinner music familiar to the seniors and stu-

dents alike, and throughout the evening each senior-student couple had their photograph taken together and framed as a commemorative gift.

Following dinner, the students and seniors enjoyed a demonstration of ballroom and salsa dancing by a local dance studio, after which most participants made their way to the dance floor. Some impromptu Charleston and twist lessons were interrupted only by dessert, coffee, and an MP3 raffle. When the Grandwood Park bus was ready to leave, several students noted as a highlight, "Hearing one senior say, 'Do we have to go already?' and 'Can't we stay longer?'"

Although student organizers planned the gala primarily as a unique and enjoyable social opportunity, shortly prior to the evening, it was suggested to UWO's research department in the Division of Geriatric Medicine that the event would be a potential opportunity for feedback and evaluation.

Instrument

The pre-event survey consisted of a one-page questionnaire designed for completion in approximately 2 minutes. Students were asked three open-ended questions: "What are your reasons for attending the 2005 Intergenerational Spring Gala?" "In your opinion, what are the objectives of this evening?" and "To me, growing older means ..." Three questions were asked using a seven-point Likert scale (1 = strongly disagree, 4 = neutral, 7 = strongly agree): "I look forward to having older patients in my practice," "I would consider a career in geriatric medicine," and "I look forward to growing older." Students were also asked to provide demographic data including year of birth, gender, year currently enrolled in medical school, and anticipated field of specialization.

The postevent survey was also designed to be filled out quickly while providing a cursory evaluation of the impact of this event on students' attitudes toward issues pertaining to geriatrics. Using the same seven-point Likert scale, students were asked to respond to the same three quantitative questions asked in the pre-event survey, in addition to eight more questions that addressed the impact of this event on students' perceptions of aging, how valuable the event was for the students and seniors, overall satisfaction with the event, and the likelihood of students attending an event like this again. Students were asked three open-ended questions: "What did you enjoy most about this evening?" "What would you change about this evening?" and "To me, growing older means ..." Students were also encouraged to provide general comments and feedback regarding the event.

Statistical Analysis

Data were analyzed using SPSS software for Windows version 12.0 (SPSS Inc., Chicago, Illinois). Paired *t*-tests were used to test differences in students' mean responses to identical questions in pre-event and postevent survey data. Simple means and frequencies were calculated for the remainder of the quantitative questions.

All open-ended responses were independently analyzed using inductive analysis by two authors (A.C.D., L.L.D.); recurring categorical themes in the data were identified without prior assumptions. The two authors agreed on main response categories derived from the data, and any differences were resolved by consensus. When students' responses contained more than one category, the response was split and its phrases listed separately under the appropriate categorical headings.

Results

Two days prior to the event, organizers e-mailed the pre-event survey and a letter of information explaining the purpose and objective of the research to all participating students. Twenty-six students (52%) had completed a pre-event survey prior to their arrival. The remaining 23 students (46%) completed the pencil-and-paper pre-event survey at the research location. Overall, 49 of 50 participating students completed the pre-event survey (98% response rate).

The paper-and-pencil postevent survey was administered to students immediately following the event and once the senior residents had departed. Forty-three students completed the postevent survey (86% response rate).

Quantitative Analysis

See Table 1 for participants' demographic information. Paired t-tests revealed no significant change in students' pre- and postevent response to "I look forward to having older patients in my practice." Although it did not reach statistical significance, students' responses to "I look forward to growing older" trended toward improvement following the event. However, in the postevent survey, students were significantly more likely to agree with the statement "I would consider a career in geriatric medicine" (Table 2).

On a seven-point Likert scale, students' mean response to "I feel this evening has been a valuable experience for students" received a mean rating of 6.51 (± 0.91 , $n = 43$). On the same scale, students' mean response to "I would come to an event like this again" was 6.77 (± 0.95 , $n = 43$).

Qualitative Analysis

Pre-event Survey

When asked what were their reasons for attending the event, students' answers comprised five major categories: "entertainment value" (emphasizing the social aspects of a fun evening out), "a novel experience" (the unique nature of the event), "do-gooding" (an emphasis on students pleasing the seniors or relieving them from the perceived monotony of their everyday routines), "community involvement" (a mutual opportunity for both students and seniors to benefit from their interaction), and "learning experience" (a chance for students to apply the knowledge or experience gained by the event to their future medical practice). The vast majority of students (63.2%) suggested "entertainment value" as a reason for

attending the event, while 6.1% listed "learning experience" (Table 3).

Students' pre-event answers to "What are the objectives of this evening?" were also categorized by "entertainment value," "doing good," "learning experience," and "community involvement." "Facilitating intergenerational relations" and "assisting in professional development" also comprised categorical responses. More than half the students (55.1%) cited entertainment value as their perceived objective of the evening, whereas 12.2% listed learning experience and 18.3% listed facilitating intergenerational relations as the apparent purpose of the event.

When asked to complete the sentence "To me, growing older means ..." students' pre-event survey answers were grouped according to the following themes: "personal growth" (accumulating wisdom or insight as a result of increased life experience), "changing life priorities" (having the opportunity to engage in activities they are unable to pursue presently), "acknowledging positive and negative aspects of aging" (a more nuanced understanding of the aging process that

Table 1. Demographic Profile of Student Participants

	<i>n</i>
Total student participants	49
Gender (%)	
Male	18 (36.7)
Female	31 (63.3)
Year of birth	
Range	1977–1984
Median	1981 ($n = 11$)
Mode	1982 ($n = 14$)
Anticipated field of specialization (%)	
Family medicine	11 (22.4)
Pediatrics	7 (14.3)
General internal medicine	6 (12.2)
Surgery	5 (10.2)
Internal medicine subspecialty	4 (8.2)
Psychiatry	4 (8.2)
Other	9 (18.4)
Geriatric medicine	1 (2.0)
Year of enrolment* (%)	
1	17 (34.7)
2	29 (59.2)
3	1 (2.0)
4	1 (2.0)

* One entry missing

Table 2. Pre- and Postevent Analysis of Students' Responses Regarding Aging, Treatment of the Older Adults, and Interest in Geriatric Medicine*

Survey Statement	Pre-event (n = 49): Mean (SD)	Postevent (n = 43): Mean (SD)	Difference (p Value)
I look forward to having older patients in my practice.	5.26 (1.36)	5.58 (1.09)	.155
I look forward to getting older.	4.14 (1.68)	4.93 (1.47)	.065
I would consider a career in geriatric medicine.	3.8 (1.65)	4.49 (1.45)	.048

*Likert scale: 1 = strongly disagree; 4 = neutral; 7 = strongly agree.

includes the possibility of health, not simply disability), and "anxiety" (a primarily negative view of aging, especially with regard to physical and cognitive functions). Fifty-seven percent of students' responses included comments regarding personal growth, while 47.1% remarked on changing life priorities. Twenty percent of students' answers suggested anxiety about growing older (Table 4).

Postevent Survey

Immediately following the event, more than half the students listed entertainment value as what they had enjoyed most about the evening. A large number also suggested relationship building (47.6%) or do-gooding (16.6%) as the highlight of the event.

Students' postevent responses to "To me, growing older means ..." were also categorized by personal growth, changing life priorities, acknowledging positive and negative aspects of aging, and anxiety. A new category, "Old doesn't mean sick," comprised more than one quarter of students' postevent responses to this question (see Table 4).

Discussion

Medical literature has reported on the positive impact on attitudes and clinical behaviours of exposing medical students to marginalized patient groups in nonclinical settings.^{7,9} Although it was organized exclusively as an enjoyable and memorable social event, UWO's First Annual Intergenera-

Table 3. Students' Pre-event Responses to the Question "What Are Your Reasons for Attending?"

Response Categories	Sample Comments
Entertainment value (n = 32)	"Thought it would be fun." "To meet other students socially." "Old people are cute, and this should be a fun event."
Novel experience (n = 12)	"I think it's an excellent idea to merge the generations. I am excited to see what this is all about." "I thought it was a great and very unique idea for an event, and I wanted to be a part of it." "It's a great way to spend time with people from another generation in a setting that isn't volunteer work."
Do-goodism (n = 12)	"To do something good, be a bright light in a senior's life, be a part of an exciting event that the seniors can look forward to." "It's a chance to make seniors feel like they are indeed special and not the 'forgotten' population in society ... and to show them that there are more exciting things than MacGyver and crocheting!"
Community involvement (n = 11)	"I enjoy volunteering, and this is a great opportunity to step outside of Western." "It's a good opportunity to interact with the community, represent the Faculty of Med/Dent." "To become involved in the London community and interact with the older adults."
Learning experience (n = 3)	"They [the seniors] can teach me how to be a better MD through their experiences." "To spend more time with seniors whom we can learn so much from!"
Other (n = 1)	"Peer pressure ..."

tional Gala is quite possibly an inadvertent example of such an “intervention.” This event provided students with the opportunity to interact socially with older adults, a patient population that, within the next 20 years, is predicted will comprise approximately 50% of future patient loads for physicians in nonpediatric specialties.¹⁰

Some generalizations can be made regarding students’ attitudes toward older adults and geriatric medicine. Notably, student interest in geriatric medicine was significantly higher following the event. This may be due to the experiential nature of this encounter; increasing participation in learning experiences outside of a strictly “academic” environment has been shown to

improve student interest in less popular medical subjects.^{11,12} Since the majority of student participants were in their second year of medical school, the timing of this event may have been fortunate in this regard. Many third-year medical clerks undergo a worsening of attitude toward older adults during their clerkship experience,^{13,14} and casual interactions such as this may contribute to preventing, if only in a small way, such attitude erosion. Extracurricular activities like the gala might provide another kind of experiential supplement to undergraduate medical curriculum that seeks to improve attitudes toward older adults.¹⁵

Despite observations of students’ widespread enthusiasm, it is important to note that it was not possible to validate the

Table 4. Students’ Pre- and Postevent Responses to the Statement “To Me, Growing Older Means ...”

Response Categories	Sample Comments
Pre-event	
Personal growth (<i>n</i> = 28)	“Gaining new experiences.” “Getting wiser.”
Changing life priorities (<i>n</i> = 23)	“Being able to see more clearly what is important in my life.” “Fewer distractions from the unimportant things ... money, appearance, etc.” “Having more time to enrich my life with activities I can’t do now.”
Anxiety (<i>n</i> = 10)	“Having more stress and worries about life.” “Physical/mental weakness and aging.” “I don’t think about growing older yet, but I do worry about my parents.”
Acknowledging ± aspects of aging (<i>n</i> = 7)	“Just another ‘stage’ in my life—one with its ups and downs just like any other.” “Finding more about what’s really important in life, and earning through observation, fortune, and hardship the privilege of wisdom.” “Evolution in life—inevitable. A time to continue activity and maintain social relations.”
Postevent Survey	
Old doesn’t mean sick (<i>n</i> = 12)	“Continuing to have fun and enjoy life.” “Living more life.” “Having more great life experience.”
Personal growth (<i>n</i> = 11)	“Getting wise and telling the same jokes over and over again and getting away with it.” “Gaining insight into life.”
Acknowledging ± aspects of aging (<i>n</i> = 7)	“Just another stage of life.” “Wiser, slower, but still full of life, desires, and dreams.” “Learning new things and seeing a lot, but losing some valuable parts of your life too.” “Having the chance to experience and change physically and emotionally.”
Anxiety (<i>n</i> = 4)	“Appreciating younger days.” “Fear, stress, death.”
Changing life priorities (<i>n</i> = 2)	“Spending time with my family. Watch grandchildren grow. Relax.”

assessment tools used in this informal survey. Although some survey questions asked had appeared on surveys used to assess other educational interventions at UWO, and others were based on Palmore's Facts on Aging Quiz,^{16,17} due to time constraints there was no opportunity to pilot the survey before its distribution. Furthermore, student responses were likely influenced by a considerable Hawthorne effect, which may have unduly exaggerated positive responses in both qualitative and quantitative results. A follow-up evaluation at 1 or 6 months would be a worthwhile assessment of the durability of this event's impact on student attitudes toward older adults. Unfortunately, it was not possible to ask similar questions of the senior residents because of institutional restraints. This data would have been a valuable addition to the student responses, and will be an important aspect of future evaluations of this event. Researchers involved in the second Intergenerational Gala, held in March 2006, did receive approval to survey seniors and students.¹⁸

A likely Hawthorne effect notwithstanding, qualitative data gathered from this study suggest a more nuanced overview of student attitudes prior to and following the gala. As intended by the student organizers, most students suggested entertainment value as the objective of the event, their reason for attending, and (following the gala) the highlight of the event. Despite the event's entertainment appeal, there was also a prevalent tendency among students to infantilize seniors prior to the event {"old people are cute"} {"it's such a cute idea"}. Notably, such diminutives do not appear in students' comments following the event. Many more students seemed genuinely excited by the prospect of an evening out {"it's always interesting to meet new people!"} {"sounded like a great night!"}.

Categorical analysis of qualitative data required a distinction between categories of community involvement and do-gooding. A clear difference was apparent in comments that saw the

evening as an opportunity to interact with persons outside of their peer group and the university {"it's a great chance to celebrate with seniors, an opportunity I would not otherwise have"} {"a great opportunity to step outside of UWO"} and those who interpreted the event primarily as a charitable gift for the senior residents {"to be a bright light in a senior's life, a part of an exciting event that the seniors can look forward to"} {"it's a chance to make seniors feel like they are indeed special and not the 'forgotten' population in society ... and to show them there are more exciting things than MacGyver and crocheting!"}. This was an important distinction since inherent to the latter category appears a distinct ageism in the students. Although a smaller percentage of student responses were categorized as do-gooding following the event, at least 16% of students' answers to postevent survey questions retained this attitude toward older adults.

More than 50% of pre-event survey responses to "What are the objectives of this evening?" identified learning experience, facilitating intergenerational relations, or assisting in professional development, although only 6% of students' responses identified learning experience as a reason for their attendance (the other categories were not identified as potential reasons for attending). However, almost half of the postevent survey responses identified relationship building as a highlight of the evening, which suggests that many students acknowledged the mutual benefits of interacting with older adults {"I LOVED my senior and hearing about her life!"} {"I enjoyed connecting with my senior partner on the dance floor!"}.

The event's entertainment value was highly appealing for students before and after the event. It was by far the most popular category of response when students were asked about the objectives of the evening, their reason for attending, and what they enjoyed most about the event. Overwhelmingly positive comments following the event referred to the social interaction with the seniors, the "couple" photographs, the games, the dinner, and the event as a

whole {"awesome idea ... wish it were longer"}. Although the data collected can only gesture toward possible attitudinal trends, students' comments regarding the gala indicate a high level of student enthusiasm for this event and a potentially significant increase in the appeal of geriatric medicine.

Conclusions

The First Annual Intergenerational Spring Gala, organized by medical and dental students at UWO, provided a unique opportunity for students to interact with a patient population outside of a clinical context. While pre-event and postevent survey data suggest a statistically significant increase in the consideration of geriatric medicine following the event, this increase was modest and must be interpreted cautiously in light of a likely Hawthorne effect. Qualitative data collected suggest a widespread enthusiasm for the event, although some students demonstrated (and evidently retained) potentially ageist attitudes toward older adults in pre-event and postevent surveying. While steadfast conclusions cannot be drawn from this data, our results suggest the potential benefit to enhancing medical students' attitudes toward marginalized patient groups by supplementing undergraduate medical curriculum with nonclinical, recreational interactions.

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