The rapid aging of the world’s population means that the proportion of people ages 60 and older will increase from 11% to 22% between 2000 and 2050 (World Health Organization, 2012). In the United States, 41.4 million people are 65 and older, with 24.7% of these individuals rating their health as “fair” or “poor” (Centers for Disease Control and Prevention, 2011). Furthermore, 1.3 million of these people live in long-term care (LTC) facilities. The situation is similar in countries with smaller populations such as Australia, where 185,482 older Australians lived in LTC facilities as of June 2011 (Australian Institute of Health and Welfare, 2012). There is concern that the growing population of older adults with associated complex health needs will outpace the number of health workers, such as nurses, with the necessary education and skill to provide competent care (Institute of Medicine [IOM], 2008). As a response to the Francis inquiry of older adult care in the United Kingdom...
(The Mid Staffordshire NHS Foundation Trust, 2013), The National Health Service, together with the Royal College of Physicians, have developed an Elder Friendly Ward Quality Mark scheme to recognize the importance of and requirement for competent health workers to care for older adults (Royal College of Physicians, 2013). Nursing, as one of the predominant health disciplines, has a distinct and important role in gerontology because older adults have a greater number of hospitalization days (Gilje, Lacey, & Moore, 2007) and use the largest portion of health services (IOM, 2008). The Eldercare Workforce Alliance (n.d.) stated that by 2020, the gerontological nursing workforce is expected to be 20% below the projected requirements. Such an alarming projection is a reflection of the global shortage of nurses (Auerbach, Staiger, Mencel, & Buerhaus, 2013). However, gerontology is at particular risk of RN shortage because a career in gerontological nursing is not a desirable option, as indicated by undergraduate nursing students (Abbey et al., 2006; Bosco, Ward, & Styles, 2005; DeKeyser Ganz & Kahana, 2006; Henderson, Xiao, Siegloff, Kelton, & Paterson, 2008; Kloster, Høie, & Skår, 2007; McCann, Clark, & Lu, 2010; Shen & Xiao, 2012; Stevens, 2011; Williams, Nowak, & Scobee, 2006). Career preferences are often made during the time spent as an undergraduate student, with many factors influencing the decision. The aim of this literature review was to examine the responses of undergraduate nursing students from around the world toward a career in gerontological nursing, the reasons why they are not choosing...
gerontology as a graduate specialty, what has been done in an attempt to address the problem, and what else may be done.

METHOD

The search strategy involved peer-reviewed, English language, research studies (2003–current). Databases included Medline, CINAHL, PsycINFO, and PubMed. The search syntax and limiters were aged care OR nursing homes OR care homes OR residential aged care facilities OR long term care; older adults OR elders OR elderly OR geriatric OR older people; and undergraduate nurse OR nursing student OR career OR employment OR jobs. It is acknowledged by the authors that students do encounter older people in other parts of the health care system; however, it was decided to focus on LTC facilities given the current employment shortage of nurses in this sector. Yielded and reviewed articles are detailed in Table 1. All authors were involved in the literature search, study selection, and data extraction. Inclusion criteria were both qualitative and quantitative studies that examined what specialty undergraduate nursing students were interested in. Studies were excluded if they focused on perceptions or attitudes toward older adults generally as opposed to working with older adults. The authors conducted a manual search of the reference lists of the 27 retrieved articles to determine whether other relevant articles fit the inclusion criteria. Three suitable studies were extracted using the reference list manual search as outlined in Table 1. No other literature reviews were found.

RESULTS

Two categories of results were identified: studies that surveyed career preferences and studies that examined career preferences as an outcome of a curriculum activity. In most studies, the students provided reasons as to why they had limited or no interest in gerontological nursing. The student perspective is important and we have collated this information (Table 2). Additionally, Table 2 presents other information (e.g., purpose, methods, findings) to aid in an overall critique of the studies.

Surveys of Career Preferences

In 2011, Stevens found that career preferences had differed little from the results of an earlier study in which gerontological nursing rated poorly (Stevens, 1995). This result is echoed in the other studies presented in this literature review (Table 2). Bosco et al. (2005) allowed students to depict their growth in care of older adults from the commencement of their studies to present, by drawing a picture and answering survey questions. Results indicated that students underestimated the knowledge required to be an RN and recommendations were that the role of the gerontological RN needed to be recognized and promoted. In a replication of the study by Henderson et al. (2008), Shen and Xiao (2012) found similar results in that those students with experience in caring for older adults were more likely to demonstrate an interest in this area. The process of aging was also explored, with the majority of students interested in the treatment of chronic diseases associated with aging rather than taking a holistic view of the person in the context of their social environment.

McCann et al. (2010) found that only 1% of students in Year 1, 2% in Year 2, and 0% in Year 3 wanted a career in gerontological nursing. This was explained by the authors as the negative influence of the media, poor quality clinical placements,
<table>
<thead>
<tr>
<th>Study</th>
<th>Country</th>
<th>Purpose</th>
<th>N / Year of Study</th>
<th>Tool</th>
<th>Results</th>
<th>Reasons for Non-Preference</th>
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<tbody>
<tr>
<td>Shen &amp; Xiao (2012)</td>
<td>China</td>
<td>Explored factors affecting intention to work with older adults.</td>
<td>204 (1st year) 218 (2nd year) 123 (3rd year) 77 (4th year)</td>
<td>Questionnaire (Stevens &amp; Crouch, 1998)</td>
<td>Working with older adults ranked as second to least preferred area.</td>
<td>Uninspiring career; lack of confidence with older adults; not technical enough; low pay</td>
</tr>
<tr>
<td>Rejeh, Heravi-Karimooi, &amp; Vais-moradi (2011)</td>
<td>Iran</td>
<td>Explored perspectives regarding care for older adults.</td>
<td>25 (senior nursing students)</td>
<td>Semi-structured interviews</td>
<td>Established two sub-themes: barriers and facilitators to care for older adults.</td>
<td>Time constraints; task oriented; poor nurse-patient ratio; too many organizational problems; poor environmental conditions</td>
</tr>
<tr>
<td>Stevens (2011)</td>
<td>Australia</td>
<td>Developed a profile of career preferences and rationales.</td>
<td>150 (year not identified)</td>
<td>Questionnaire (Stevens &amp; Crouch, 1998)</td>
<td>Gerontological nursing ranked poorly over 3 years with decreasing interest from first year.</td>
<td>Negative stereotypes; poor clinical placement experiences; poor working conditions; not technical enough</td>
</tr>
<tr>
<td>McCann, Clark, &amp; Lu (2010)</td>
<td>Australia</td>
<td>Surveyed career preference for specialty areas.</td>
<td>90 (1st year) 46 (2nd year) 96 (3rd year)</td>
<td>Attitudes and beliefs about mental health problems: Professional and Public Views questionnaire (Jorm, Korten, Jacomb, Christensen, &amp; Henderson, 1999)</td>
<td>Gerontological nursing ranked consistently over 3 years as least preferred career choice.</td>
<td>Media and lay image poorly presented; limited theoretical and clinical experience with elderly; limited contact with gerontological academics</td>
</tr>
<tr>
<td>Henderson, Xiao, Siegloff, Kelton, &amp; Paterson (2008)</td>
<td>Australia</td>
<td>Explored the intentions for practice and attitudes toward older adults.</td>
<td>262 (1st year)</td>
<td>Questionnaire (Stevens &amp; Crouch, 1998)</td>
<td>Those with previous experience in the industry more likely to want a career in gerontological nursing.</td>
<td>Lack of interest; physically demanding; fear of suffering and dying; negative experiences and interactions with older adults</td>
</tr>
</tbody>
</table>
and discouraging contact with their student peers, new graduates, and other RNs. Curricula lacking in theoretical and clinical content and a lack of suitably experienced gerontological nurses as instructors were also noted as deterrents. A comprehensive review of gerontological curricula was recommended. Similarly, Kloster et al. (2007) found gerontology was the least preferred specialty and recommended that timing of clinical placements was crucial to ensure that students appreciated the complex nature of gerontological nursing; they also noted addressing negative societal and media coverage may improve recruitment.

DeKeyser Ganz and Kahana (2006) studied the impact of culture by examining social need, social prestige, interest in clinical areas, and career preference. Poor perceptions of gerontological nursing did not change over time, with positive exposure to clinical areas and clinical nursing faculty eliciting only minor influences on career preferences. The perception of “nurses save lives” as opposed to chronic and long-term care had a significant impact on career preferences. Rejeh, Heravi-Karimooi, and Vaismora-di (2011) conducted their study in two teaching hospitals in Tehran, Iran, as older adults are generally cared for at home, and consequently, LTC facilities do not exist. Students found that working with this population in the acute setting was challenging and frustrating. On a more positive note, religious and cultural expectations encouraged students to persevere with the working conditions, and positive experiences and witnessing competent nurses improved their outlook.

Taken together, these eight studies determined the career preferences of undergraduate nursing students and the rea-
### TABLE 2 (CONTINUED)

#### STUDIES OF UNDERGRADUATE NURSING STUDENT CAREER PREFERENCES

<table>
<thead>
<tr>
<th>Study</th>
<th>Country</th>
<th>Purpose</th>
<th>Method</th>
<th>Tool</th>
<th>N (Year of Study)</th>
<th>Results</th>
<th>Reasons for Non-Preference</th>
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<tr>
<td><strong>Innovative Curriculum Activities</strong></td>
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<tr>
<td>Brown, Nolan, &amp; Davies (2008)</td>
<td>United Kingdom</td>
<td>Explored the way students experience clinical placements (acute and long term) and identified characteristics that create a positive view of working with older adults.</td>
<td>Longitudinal, mixed method</td>
<td>Focus groups, study-specific questionnaire</td>
<td>718 (differing points)</td>
<td>Students respond positively to aged care if they are well prepared for the placement; are able to make links from theory to practice; are well mentored on placement; witness quality care in well-resourced environments; and feel valued when on placement.</td>
<td>Poor mentorship and leadership; lack of educational opportunities; poor working conditions</td>
</tr>
<tr>
<td>Robinson et al. (2008)</td>
<td>Australia</td>
<td>Investigated clinical placements with enhanced orientation practices.</td>
<td>Action research</td>
<td>Meetings, surveys, checklists</td>
<td>60 (2nd year)</td>
<td>Comprehensive orientation practices necessary for students and clinical staff; 35% improvement in attitudes to work in aged care.</td>
<td>Students not asked for reasons</td>
</tr>
<tr>
<td>Abbey et al. (2006)</td>
<td>Australia</td>
<td>Explored the impact of clinical placement on perception of gerontological nursing and effect on career preferences.</td>
<td>Qualitative</td>
<td>Nominal groups, semi-structured interviews.</td>
<td>14 (2nd year)</td>
<td>Clinical placements seen as an opportunity to practice “basic” skills only; students felt poorly prepared for the placement; did not value the role of the RN; and saw it as an end point in career.</td>
<td>Paired with lesser qualified health workers for clinical placement; basic care, not acute; no career pathway; low pay</td>
</tr>
<tr>
<td>Williams, Nowak, &amp; Scobee (2006)</td>
<td>United States</td>
<td>Evaluated the impact of placement in a long-term care facility.</td>
<td>Qualitative</td>
<td>Focus groups</td>
<td>32 (final year)</td>
<td>Students valued the clinical placement but did not see long-term care as a career path.</td>
<td>Students not asked for reasons</td>
</tr>
</tbody>
</table>
sons for not choosing gerontology (Table 2). Four of the studies were undertaken in Australia with other studies from Israel, Iran, China, and Norway. A variety of study methods were used with different sample sizes of students across all stages of their nursing studies. Despite these differences, the results were similar. Gerontological nursing rates poorly as a career path and this is driven by this area of nursing being perceived by students as uninspiring and fraught with poor working conditions. How to comprehensively address these issues remains the challenge for the discipline.

Innovative Curriculum Activities

The following studies used innovative curriculum activities to improve the uptake of gerontological nursing as a graduate specialty, albeit with little success. However, through the review process, a number of sound recommendations to address this issue have come forward. In analyzing the experiences of both students and clinical teachers gained from a LTC clinical placement, Abbe et al. (2006) identified that preparation for the clinical placement for staff, students, and clinical teachers was the key for creating a successful placement. Exposure to gerontological curriculum prior to placement, ensuring clinical teachers were experts in gerontology, and enabling RNs time to mentor students were also considered vital. Williams et al. (2006) designed a project where placement objectives focused on the RN role, which included the application of gerontological theory and patient data management. Students were able to identify the key features of the nursing role such as excellent communication skills, advanced delegation and supervising skills, and the ability of the nurse to precipitate patient and environmental change. However, despite the positive experiences conveyed, none of the students expressed a desire to work in LTC following graduation. Similar results were found by Brown, Nolan, Davies, Nolan, and Keady (2008) who created “enriched environments” to support a sense of security for the student in acute and long-term care.

Robinson et al. (2008) had more success with the introduction of a comprehensive orientation program. Preceptors from the LTC facilities were responsible for student orientation. Students were issued orientation packets upon arrival, staggered shift starts to improve preceptor/student engagement, and information regarding placement objectives and expectations. These measures resulted in a positive improvement in students’ attitudes toward employment in aged care from 55% to 90%.

These four studies represent attempts to use innovative curriculum activities with the aim to change the negative perceptions undergraduate nursing students have toward a career in gerontological nursing. The activities centered on greater preparation of students in regard to nursing older adults and preparing qualified clinical staff to provide an enhanced clinical experience for students. Studies were conducted in acute and LTC facilities. Although some positive changes were noted with enhanced clinical exposure to older adults, a career in gerontological nursing was viewed more as an endpoint rather than a starting point.

DISCUSSION

This literature review, spanning seven countries, demonstrates that a career in gerontological nursing is not rated high for undergraduate students and nothing has changed in 10 years. Specific reasons students identified for why they do not want to work with older adults are outlined in Table 2. Although there are many issues that affect the decision about where to work after graduation, four key issues were identified through this literature review: (a) societal values about aging; (b) undergraduate nursing curriculum; (c) clinical placements; and (d) working conditions that may provide the impetus for deliberation and action.

Societal Values About Aging

Fundamental to the issue as to why undergraduate nursing students are not viewing gerontological nursing as a viable career preference lies in current societal values about nursing and aging and how this is reflected in key carriers of information such as the media. Brown, Nolan, and Davies (2008) argued that the problem lies in that nursing is now focused on “curing” rather than “caring.” Caring is seen as a personal attitude or psychosocial skill that should be found in everyday life and not inherent in a nurse’s role. Historical imagery of compassionate, “caring” nurses at the bedside during humanitarian or military deployment are long gone, replaced by highly trained, professional nurses working in acute care settings. Students’ career preferences for pediatrics, midwifery, and critical care simply reflect society’s high val-

Gerontological nurses need to assist their profession by dismissing the misguided perception that the specialist role is simply hard physical labor. The reality is that most gerontological nurses working in LTC are paid less than those in primary and acute care sectors, despite their complex role.
ue placed on youth, cure, and technological advances in health care. Furthermore, Bosco et al. (2005) and McCann et al. (2010) suggested that this view is perpetuated by the media by portraying these specialties as glamorous and technologically advanced. Limited exposure is given to gerontological nursing and if aged care issues are presented in the media, older adults are rarely portrayed as independent, healthy individuals with the ability to contribute to the wider community. This reinforced negative societal view affects students’ perceptions of older adults prior to commencing undergraduate nursing studies and consequently where they may want to work when they graduate. To overcome these problems, educators in nursing may be able to develop and evaluate engaging teaching strategies to assist students in gaining the skills to critique the portrayal of aging by the media.

Undergraduate Nursing Curriculum

Over the past decade, undergraduate nursing curriculum developers have acknowledged gaps regarding the delivery of gerontological theory. Students cannot be expected to choose a particular career path if they lack confidence in their knowledge and skills (Rejeh et al., 2011; Shen & Xiao, 2012). A major initiative has been undertaken by the American Association of Colleges of Nursing, called the Geriatric Nursing Education Consortium (GNEC), to enhance geriatric content in senior-level undergraduate courses (Wilson, 2010). The GNEC provides faculty with extensive state-of-the-science resources developed by experts to champion geriatric education, train other faculty, and oversee the revision of curricula. Evaluations have revealed that the resources are being widely used for curriculum development and teaching (Wilson, 2010). Internationally relevant programs such as this and others by the Hartford Geriatric Nursing Initiative, which involve nurses from around the world, have ensured that undergraduate nursing students are likely to graduate with competencies in gerontological nursing (Bednash, Mezey, & Tagliareni, 2011).

The poor recruitment of expert gerontological nurses into faculty is a concern (Abbey et al., 2006). Although DeKeyser Ganz and Kahana’s (2006) Israeli students found that the presence of gerontological faculty did not have a significant effect on career preferences, other researchers from Australia and Iran suggested that if this component of the curriculum is left to other academics, they often miss the salient points of nursing older adults (McCann et al., 2010; Rejeh et al., 2011). Some progress to address these gaps has been made, for example, the Faculty Learning About Geriatrics (FLAG) program developed in the United States aimed to enhance faculty interest and knowledge regarding gerontological nursing (Edelstein, Cheung, Voss, & Kaas, 2011). FLAG participants attended a 1-week intensive gerontological course, had a year-long mentorship program, and ongoing opportunities for continuing education, with outcomes such as improved teaching efficacy, use of new curricular strategies, and expressed interest in gerontological nursing by students (Edelstein et al., 2011). Future research to strengthen curriculum delivery of gerontological nursing could focus on faculty characteristics that influence student career preferences upon graduation and how these findings could be applied to gerontological nursing. Additionally, research could look at how faculty champions for gerontological nursing could be created and the effect of such positions on students’ career preferences.

Clinical Placements

The impact of clinical placements to create lasting impressions for undergraduate students is often underestimated by educators, clinicians, administrators, and future employers (Abbey et al., 2006; Brown, Nolan, Davies, Nolan, et al., 2008; Chen, Brown, Groves, & Spezia, 2007; McCann et al., 2010; Neville, Yuginovich, & Boys, 2008; Stevens, 2011). One recurring issue is about the timing of the clinical placement and its effect on nursing students’ career preference (Kloster et al., 2007; Williams et al., 2006). Traditionally, in many nursing programs, first-year nursing students are exposed to gerontological nursing during their first clinical placement, usually in a LTC facility (Abbey et al., 2006). Clinical placements during this time primarily focus on the consolidation of psychomotor skills (e.g., bathing, feeding) (Chen et al., 2007), with students often paired with lesser qualified health workers (Abbey et al., 2006; Kloster et al., 2007). Although

KEYPOINTS


1. Recruitment of nurses to work with older adults is a global issue, especially considering the rapid aging of the world’s population.

2. Gerontological nursing does not rate highly as a career goal for many undergraduate nursing students.

3. Societal values about aging, undergraduate nursing curricula, clinical placements, and working conditions are the key areas identified to concentrate efforts to improve the shortage of gerontological nurses.
this partnership can allow students to communicate with older adults and members of the health care team, professional mentorship may be limited. As Abbey et al. (2006) found, students were not exposed to the role of the RN; therefore, further disengagement in gerontological nursing occurred.

Introducing gerontology placements in the final year of nursing programs appeared to improve nursing students’ interest in a gerontological nursing career (Kloster et al., 2007). Moreover, Robinson et al. (2008) found that a comprehensive orientation of both the student and staff at the LTC facility improved the outlook of the student toward gerontological nursing. A supportive orientation program increased the students’ feelings of being welcomed and valued while on placement, and the involvement of the staff increased their interest in mentoring the students. These recommendations can be applied to any clinical placement in gerontology, not just LTC. Clemmens et al. (2009) created an interdisciplinary community health learning experience with significant outcomes of increased knowledge, skill, and interest in community care of older adults to the extent that graduates were employed in the sector. Future research could explore the use of a variety of instructional strategies for implementing the clinical placement designed by a team that includes faculty, students, preceptors, clinicians, administrators, and consumers.

**Working Conditions Within the Health Sector**

Finally, the aged care and acute health sectors must assume accountability for their role in the development, mentorship, and recruitment of RNs and to improve working conditions. If students are exposed to working conditions such as high workloads, poor remuneration, limited access to educational opportunities, and inadequate skill mixes, there will undoubtedly be problems with recruitment and retention (Abbey et al., 2006; Reinhard, Barber, Mezey, Mitty, & Peed, 2002). Addressing these issues and researching the same will provide quality clinical placements, expose students to the expert gerontological RN role, and develop close associations with the university sector. These are key aspects of growing a workforce.

**LIMITATIONS**

Gerontological nursing is performed in a variety of clinical areas from general hospitals, community clinics, and LTC facilities to health promotion clinics, which is not often recognized. Career preferences were analyzed; however, conversion to employment rates in gerontological nursing were not identified. This is an important component of workforce planning that warrants attention. Comparison of studies for this review was not easy because methods varied from qualitative interviews and focus groups to quantitative cross-sectional and longitudinal designs. Additionally, generalizing to a wider population is difficult when studies have small samples (five studies N = 32 or less).

**IMPLICATIONS FOR NURSING**

As a profession, there is much we need to do to improve this significant part of our practice. Negative societal views of older individuals are perpetuated in the media and this needs to be addressed. Gerontological nurses need to assist their profession by dismissing the misguided perception that the specialist role is simply hard physical labor. The reality is that most gerontological nurses working in LTC are paid less than those in primary and acute care sectors, despite their complex role. It must be acknowledged that gerontological nurses do not solely work in LTC, and a large proportion of people admitted to acute care are older than 65. It is the nurses’ role to promote their specialty as a positive career choice and they need to be the champions of this change. Within this role, advocating the importance of the gerontological specialty to professional bodies, government, and universities is vital in further advancing the cause.

University faculty need to enlist the expertise of gerontological nurses in the development, implementation, and review of gerontological content in curricula. The timing of gerontological content and subsequent clinical placements need careful consideration. Both the university sector and the health care sector need to adequately prepare and organize staff and students prior to clinical placements. Comprehensive orientation programs will ensure that both students and staff feel supported during this time. Students need to be alongside RNs rather than lesser qualified health workers to enable students to witness the gerontological nurse undertake his or her role. The introduction of graduate gerontological nurse programs may improve preceptorship of novice nurses; however, such programs and any other initiatives need to be evaluated to determine whether there is any influence on the career preferences of nursing students.

**CONCLUSION**

From the literature, it has been identified that modifying societal attitudes, evaluating undergraduate nursing curricula together with a comprehensive clinical placement review, and addressing working conditions are essential in promoting gerontological nursing as a desirable career preference for undergraduate students. Nursing curricula need to be delivered by expert gerontological nurses to inspire undergraduate nursing students to care for older adults. Clinical placement options should include healthy aging clinics and areas of older adult health promotion, and should not be restricted to basic nursing care within LTC facilities. Clinical placements should be considered over the duration of
the undergraduate nursing course, and not limited to first-year studies, as this diminishes the complex role of the gerontological nurse. Good working conditions are required to attract qualified staff.

REFERENCES


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