

Comparison between Saudi and British nursing students toward working with older people

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Abstract: Globally, the ageing population is currently one of the main issues facing international health care systems. The kingdom of Saudi Arabia, like the rest of the world, has a growing older population with urgent health care needs (Al Saif et al, 2012). The current acute shortage of qualified Saudi nurses in the hospitals and health centers dictates an urgent review of the kingdom's present and future nursing training, especially in the older people care. However little prior research has been undertaken on this topic. The general objective of this study was to explore the intentions of Saudi nursing students toward working with older people as baseline data for Saudi nursing students' perspectives using the scale developed by Nolan *et al* (2002). A comparison was made between British and Saudi nursing students to explore similarities and differences in intentions towards working with older people. Consequently, specific geographical and historical nursing organizational factors relevant to the status of gerontological nursing in Saudi Arabia and the United Kingdom may have elaborated their endorsement of specific items on the intentions of working with older people scale. The results of this comparison revealed similarities in responses to most of the statements about working with older people in general between Saudi nursing students and British nursing students. Significantly, this study, for the first time, shed light on potential similarities and differences in intentions towards working with older people between student nurses in two geographically dissimilar locations in the East and West. The results of this comparison revealed similarities in responses to most of the statements about working with older people in general between Saudi and British nursing students. However, there was a diversification of opinions about the status of gerontology between Saudi nursing students and British nursing students. The reason may be ascribable to culture diversity and concerned with the values of older people in society, it may be because of aspects of different gerontological education and student nursing training with older people in clinical placement, or it may be because of the meaning of the status of gerontological work, and the nursing history in each country might be varied. In conclusion, there was widespread agreement that more active measures should be taken in gerontological nursing, especially in education and training in both countries, to increase the proportion of nursing students who will seek to choose working with older people as a first choice in their future careers. Having gerontological courses with an emphasis on the clinical skills and knowledge required in caring for older people as human beings in the nursing curriculum will help nurses to understand the ageing process, including changes in physical, psychological and social needs, and will encourage more nurses to begin the challenge of caring for older people. The widespread preparation of nurses by gerontological specialists could have a positive impact on students' knowledge of ageing and care for older people in the clinical arena. Such preparation would not only affect the quality of nursing care toward older people, but would also increase the potential of the graduates to become influential in manpower, community and political activities affecting the welfare of the older people in the Kingdom of Saudi Arabia.

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1. Introduction

Globally, the ageing population is currently one of the main issues facing international health care systems (Al Saif et al, 2012). It is a recognized fact that with advancing age, the likelihood of developing health problems and chronic disease will increase and the demand for health care resources will rise. This study, for the first time, shed light on potential similarities and differences in intentions to work with older people between Saudi student nurses and British students nurses in two geographically dissimilar

Eastern and Western locations. As a researcher in gerontological nursing, I found this comparison and exploration of the similarities and differences between Saudi nursing students and British nursing students very significant, especially as it may be possibly due to a shortage of nurses due to increased nursing globalisation in moving staff nurses worldwide. However, exploring the type of this learning experience towards working with older people from the viewpoints of geographically diverse groups of nursing students could promote this as an interesting

area where the major goal is to improve the status of gerontology in both countries. Heikkinen *et al.* (1983) report that older people's way of life has undergone faster changes during the process of industrialization, which has altered the physical living conditions of a growing proportion of older people, meaning that information and social planning have become essential. Similarly, Watson (2008) claims that nursing organizations have a responsibility with regard to age: they have to be involved in the organization of care for older people in different care settings such as nursing homes, acute care and long-term care settings, and they need to understand the changes involved in the ageing process. The impact of these changes will be felt by the young nurses of the future, who will be faced with the challenging task of caring for this older population in a range of different care settings. This task may be affected by personal beliefs, attitudes, values, culture, experience or observations.

Early, Reinhardt and Quinn, (1979) recognized that the physiological and mental health of older people are closely interrelated, and in many people's judgment, should not be separated. Also, Stevens and Crouch (1995) point out that in both practice and public perception the nursing profession and the aged have always been linked. It is for this reason that major problems in gerontology nursing education revolve around attitudes toward older people as this study was taken account of and has been evident throughout several studies (Howeidi and Hassan, 2005; Zakari, 2005; Mckinlay and Cowan,2003; Lookinland *et al.*, 2002; Nolan *et al.*,2001 Hawk, 2001; Soderhamn *et al.*, 2001; Brown, 1999; Sheffler, 1995; Wei , 1995; Kevin and Hope, 1994; Wilhite and Johnson, 1976).

The throw more light on these problems the numerous of the studies in western counters such as the USA and the UK have proposed that nursing students tend to have positive attitudes toward older adults and/or toward the care of older people (Beard *et al.*,2004 ; Ryan & McCauley, 2004; McKinlay and Cowan 2003; Nolan *et al.*, 2002; Lookinland, 2002;Schechterly, 2000 Lareau, 2000; Tennies, 1995; Wei 1995; Oglesby, 1992; Kuhn, 1990), although some have found negative attitudes, which may affect the profession's ability to meet the growing demand for qualified nurses to care for older people (Herdman, 2002; Soderhamn *et al.* 2001; Hoffman 2000; Happel 1999; Steven and Crouch, 1998; Ebersol and Hess, 1997). Moreover, their perceived attitudes toward the gerontology field might make it difficult to recruit the nurses required in this area. The possibility that older people were being abused within the caring sectors came to public attention in 1960 due to ageism stereotypes and negative misconceptions of the aged

(Basford and Thorpe, 2004). In addition, in Canada in the mid-1990s, several researchers and government officials decided to use different labels for the terms "elder abuse" and "neglect due to ageism stereotype." This ageism negative stereotype recognized in Canada may be due to inadequate preparation of nurses and social workers for careers in gerontology, which influences their knowledge and attitudes as well as their motivation for work with older people (Bianchini, 2000). Hence, if these ageism stereotypes persist in nursing care, they may lead to nursing malpractice and negligence towards older people as result of negative attitudes by nursing students, and a preference not to work with older adults may affect their career decisions. Montoya (1993) reports that there is evidence that human service providers display consistent negative ageism in their attitudes and behaviours toward older people.

On the other hand, in Eastern countries such as Saudi Arabia the previous research is limited and has not examined students' and professionals' attitudes and intentions toward the care of older people, with a focus on factors such as personal, educational, or clinical experiences that positively or negatively influence attitudes and intentions. Zakaria (2005) noted that little is known about Saudi nursing students in nursing programs with regard to their attitude, willingness, and intention to work with older people. The majority of this brand of study has been evaluated and examined in developed countries. While, few studies have been found in Eastern countries that have investigated these experiences (Howeidi & Al Hassan, 2005; Zakeria, 2005; Hweidi & Al-Obeisat, 2006).

However, since the student nurse of today is the health care provider of tomorrow, the attitudes of these baccalaureate students toward older patients is a vital concern. For that reason, the study of attitudes held by baccalaureate nursing students toward older people continues to be a major focus of concern for nursing educators and for nursing research in gerontology worldwide (Howeidi and Al Hassan, 2005 ; Hawk, 2001; Soderhamn *et al.*, 2001; Brown, 1999; Sheffler, 1995; Kevin and Hope, 1994; Wilhite and Johnson, 1976). While, since the 1950s, studies have identified negative attitudes towards geriatric nursing among registered nurses and nursing students (Clare & Tulpule, 1994). The number of nurses interested in working with older people has decreased (Herdman, 2002; Soderhamn *et al.* 2001; Happell, 1999). In contrast, several studies in Taiwan have showed that nursing students hold positive attitude toward older people (Wei,1995; Liou and Hsu,1994). While, exposure to unpredictable clinical experiences with very ill older people can damage students' attitudes and thus influence their future career options

(Stevens & Crouch, 1992, 1995).

However, findings of previous studies by other researchers in western countries concerning knowledge of ageing and attitudes toward the older people and nurses' demographic characteristics have been worrying and alarming (Herdman, 2002; Soderhamn et al., 2001; Happell, 1999). Early, Kayser and Minnigerode (1975) pointed out that student nurses have developed stereotypes and misconceptions about older people and the study showed minimal interest in working at nursing homes caring for older people. Similar, Nolan (2000) notes that acute care setting obviously more positive view attracting in nursing than long care setting. Keller (1986) as well as Williams (1982) also found that nurses in long-term care institutions had more negative attitudes than other nurses. This views may be due to nurses in long term care institutions having greater contact with older people who fit the negative stereotypes (Palmore, 1998). However, in review of the studies, contradictory evidence still gaps exists as whether health care professional hold negative or positive attitudes toward older people and specific older people care. Furthermore, the previous studies of attitudes which focus on simple behaviours or attitudinal items do not contribute to our understanding of the situations within which attitudes are expressed and future studies should not neglect to articulate evaluative ranking distinctions. Perhaps the most important general gap finding from these studies is that most people without training in gerontology such as nurses have many negative misconception about older people. Hence, Gerontology nursing education play an important role in the modelling of more positive attitude and increase knowledge toward older people as the studies suggested.

2. Material and Methods

This study was considered whether intentions to work with older people are influenced by nursing students' attitudes towards older people, subjective norms and perceived behaviour control. In order to tap into such intentions I elected to use the Intent to Work with Older People questionnaire that was developed and used by Nolan *et al* (2002) specifically to focus on the intention of student nurses to work with older people. This recent instrument is grounded in the experiences of nurses and students as Nolan *et al* (2002) identified a number of significant issues during interviews and focus groups with nurses and students and used these issues, together with a consideration of the relevant literature as the basis for this questionnaire. This provides it with good face and content validity. The questionnaire asks nursing students about their intentions regarding working with older people in three broad areas: working with older

people in general, personal disposition to work with older people and perceived consequences of working with older people. Items were rated from 1 (strongly agree) to 5 (strongly disagree), with 3 representing 'undecided or neutral'. Negative statements were coded in reverse. For this study, all 15 items from the original scale were translated into Arabic language and no content was changed. The reliability of the scale was checked and α was found to be greater than 0.7, indicating that the scale is reliable. Nolan *et al* (2002) carried out a survey of 718 student nurses and 855 qualified nursing practitioners to produce a large volume of quantitative and qualitative data, which shed light on nurses' knowledge about the demography of ageing in the UK and their feelings and understanding about older people's needs and use of services. I conducted a pilot study to determine the feasibility of conducting this study. Gerrish and Lacey (2006) assert the importance of pilot studies in testing data collection instruments on small samples of people with similar characteristics to those in the full study to pick up misinterpretations and items that are frequently missed out or elicit partial responses. Furthermore, I obtained approval from the ethical committee at the University of Sheffield. I contacted several faculty Deans from the Baccalaureate of Nursing programme in Saudi Arabia, whether their nursing curricula met the following criteria for this study:

1. The school provides five-year Bachelors nursing degree programmes.
2. The school provides integrated gerontology courses for nursing students.
3. The school has a large number of Saudi nursing students.
4. The school has recruited faculty members from different specialties: medical and surgical nursing, fundamental nursing, community health and psychiatric nursing.
5. The school provides clinical experience with older patients in a hospital setting.
6. The school would provide support for me to facilitate and promote the study.

Of the schools contacted, three were found to meet the study criteria. One school was located in the eastern region, with a total population of 213 nursing students, the second was in the central region and had a total population of 205 nursing students, and the third was in the western region and had a total population of 351 nursing students. The total population thus comprised approximately 769 nursing students on identical baccalaureate nursing programmes in three universities. I approached the schools prior to the beginning of the semester and requested permission to conduct the study. The sample population was obtained from schools that met the

study criteria listed above. I conducted this study in the three government-funded nursing schools at major universities in three cities in Saudi Arabia: Western University in Jeddah, Central University in Riyadh and Eastern University in Dammam. Sampling is an important step in the research process. In quantitative studies in particular, the findings can be seriously compromised by sampling inadequacies (Polit and Beck, 2004). The target population for this study was made up of nursing students and their teachers in university nursing programmes in the central, western and eastern provinces of Saudi Arabia. Questionnaires were returned by 566 students for a response rate of 74 % and the overall response rate was acceptable. There were approximately 26 % of the students who did not respond. Because this was a very busy time for the students, some may have been reluctant to take the time to complete the questionnaire. Gerrish and Lacey (2006) warn that low response rates in research can have a significant impact on the usefulness of findings and suggest that the generally accepted level of response to be aimed for is 80%, but Veeramah (2004) found a 51% variation in response rates among graduate nurses and midwives, while Russell *et al* (2004) reported a 44% response rate among nurses, doctors and dentists in primary care. Significantly, Gerrish and Lacey (2006) suggest that sample sizes should be increased to increase the power of analysis and minimize sample error. Similarly, Seaman (1987) points out that the size of the sample depends on the size and nature of the population and large samples are better.

3. Result

This study used the Statistical Package for Social Science (SPSS) version 18,0 to analyse all quantitative data, using descriptive and inferential statistics. This study used a scale developed by Nolan *et al* (2002) to measure intentions of working with older people; this scale consists of 15 items and was constructed to involve three important aspects of intentions toward work with older people. The first of these aspects is students' intentions of working with older people in general, and consist of six statements. The second aspect is students' personal disposition towards working with older people, and this concept involves four items. Finally, the third aspect refers to students' intentions of the consequences of working with older people and consists of five statements. Nursing students who participated in this study were asked for their responses to these items on a five-point Likert scale, which ranged from 'strongly agree' (5) to 'strongly disagree' (1). However, this study revealed a generally favourable intention toward working with older people, as shown in Table (1). Furthermore, in this study, I conducted a comparison between the intentions

towards working with older people held by Saudi and British nursing student, as explored in Table (2). However, students' intentions to work with older people are presented in 15 items, arranged to correspond with three broad areas: perceptions of work with older people in general: personal disposition, experiences of work with older people and perceived consequences of work with older people.

A. Students' perceptions of working with older people in general:

The results of this comparison revealed similarities in responses to most of the statements about working with older people in general between Saudi nursing students (n=566) and British nursing students (n=718). Similarly, 52% of British students and 43% of Saudi students reported that they strongly disagreed with the statement that nurses work with old people because they cannot cope with high-tech care. Meanwhile, 47% of British students and 41% of Saudi students agreed that nursing older people is a highly skilled job, and 47% of British students and 48% of Saudi students agreed that nursing older people is challenging and stimulating. Similarly, 48% of British students and 49% of Saudi students agreed that older people are really interesting to nurse. Similarly, 49% of British students and 44% of Saudi students disagreed that nursing older people is mainly about basic care and does not require much skill. In contrast, 37% of Saudi students agreed, while 46% British students disagreed, that it is easier to have a good rapport with older people.

B. Students' personal disposition towards work with older people

As regards plans to work with older people in future, 35% of British students disagreed and 32.2% Saudi students were undecided about the statement that working with older people does not appeal to them at all. Similarly, 34% of British students and 41.5% of Saudi students expressed uncertainty about working with older people when they qualified, while 39% of British students disagreed and 42% of Saudi students were undecided with regard to the statement about being anxious about their first placement with older people. On the other hand, 42% of Saudi students agreed and 39% of British students were undecided about whether they were looking forward to their first placement with older people.

C. Students' perception of the consequences of working with older people

The majority of Saudi students (40%) agreed that working with older people has a high status, while 38% of British students were undecided on this issue. On the other hand, 46% of British students and 45% of Saudi students disagreed with the statement that working with older people is not a good career move, Furthermore, 41% of British students and 51% of

Saudi nurses disagreed with the statement that working with old people is a dead-end job, while 51% British students and 39% of Saudi students disagreed with the statement that nursing older people provides little satisfaction, as they rarely get better. Similarly, 38% of British students and 38% of Saudi students disagreed that once you work with old people, it is

difficult to get a job elsewhere. However, the cross cultural similarities in intentions towards working with older people found between British and Saudi nursing students' accounts are remarkable in several respects in the context of the global nursing profession.

Table 1: Saudi students' intention of working with older people (n=566).

Statements	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
	%	%	%	%	%
Students' perceptions of working with older people in general					
Nursing older people is a highly skilled job	31	41	12	13	3
Nursing older people is challenging and stimulating	24	48	16	9	3
Nurses work with old people because they cannot cope with high tech care	4	7	13	33	43
I think older people are really interesting to nurse	19	49	20	9	3
Nursing older people is mainly about basic care- it does not require much skill	7	15	9	44	26
The older you are the easier it is to have a good rapport with older people	14	38	18	26	5
Students' personal disposition towards work with older people					
I am really anxious / I was really anxious about my first placement with older people	10	25	42	16	7
I will definitely consider working with older people when I qualify	7	22	42	20	10
Working with older people does not appeal to me at all	10	15	32	30	14
I am really looking forward/ I really looked forward to my first placement with older people	20	42	22	11	5
Students' perceptions of the consequences of working with older people					
Once you work with old people it is difficult to get a job elsewhere	5	15	22	38	2
Nursing older people provides little satisfaction as they rarely get better	5	12	23	39	22
Working with old people has a high status	27	39	21	9	4
Work with old people is a dead-end job	4	9	17	51	19
Working with older people is not a good career move	6	9	16	45	24

Table 2: Comparison between Saudi & British nursing students toward working with older people. B= British nurse (n=718) , S=Saudi nurse (n=566).

Statement	Strongly Agree		Agree		Neutral		Disagree		Strongly Disagree	
	B %	S %	B %	S %	B %	S %	B %	S %	B %	S %
Students' perceptions of working with older people in general										
Nurses work with old people because they cannot cope with high tech care	2	4	3	7	8	13	36	33	52	43
Nursing older people is a highly skilled job	13	31	47	41	31	12	8	13	1	3
Nursing older people is challenging and stimulating	17	24	47	48	25	16	10	9	2	3
Nursing older people is mainly about basic care - it does not require much skill	2	7	8	15	8	9	49	44	33	26
The older you are the easier it is to have a good rapport with older people	3	14	14	38	16	18	46	26	22	5
I think older people are really interesting to nurse	21	19	48	49	22	20	7	9	2	4
Students' personal disposition towards work with older people										
Working with older people does not appeal to me at all	5	10	12	15	23	32	35	30	24	14
I am really looking forward/ I really looked forward to my first placement with older people	10	20	31	42	39	22	15	11	5	5
I will definitely consider working with older people when I qualify	12	7	28	22	34	42	17	20	9	10
I am really anxious / I was really anxious about my first placement with older people	3	10	13	25	24	42	39	16	21	7
Students' perceptions of the consequences of working with older people										
Working with old people has a high status	2	27	10	39	38	21	33	9	16	4
Nursing older people provides little satisfaction as they rarely get better	2	5	6	13	12	23	51	39	30	2
Working with older people is not a good career move	1	6	5	9	22	16	46	45	26	24
Once you work with old people it is difficult to get a job elsewhere	2	5	8	15	26	22	38	38	27	20
Work with old people is a dead-end job	2	4	2	9	11	17	41	51	43	19

4. Discussion

The general objective of this study was to explore the intentions of Saudi nursing students toward working with older people as baseline data for Saudi nursing students' perspectives using the scale developed by Nolan *et al* (2002). However, this study found that positive attitudes toward older people accompany favourable intentions toward working with them. Similarly, the theory of planned behaviour states that a combination of attitudes toward behaviours, subjective norms and perceived behavioural control lead to the formation of behavioural intentions. Intentions have often been viewed as the "cognitive component of attitude," and it has usually been assumed that this cognitive component is related to the attitude's affective component. This conceptualisation has led to the assumption of a strong relationship between attitudes and intentions (Fishbein and Ajzen, 1975).

"A person's intention to perform a given behavior is a function of two basic determinants, one attitudinal and other normative. The attitudinal component refers to the person's attitude toward performing the behavior in question; the normative component is related to the person's beliefs that relevant referents think he should or should not perform the behavior and his motivation to comply with the referents. Thus the information of a given intention depends on the prior information of a particular attitude." (p.332)

However, this study revealed a generally favourable intention toward working with older people, as illustrated below under the three important headings.

A) Work with older people in general

The results of this study indicate that nursing students on the Saudi BSN program hold favourable intentions towards work with older people in general. These positive and enriching experiences with older people had helped some of the respondents, who saw working with them as challenging and stimulating opportunity. In this light, nursing students who had already had a positive experience in general of working with older people consider that it is the older you are the easier to have a good rapport with older patients. This suggests that most of the time, female nursing students' contact with older people, sharing, talking, listening and providing healthy advice for them, represented a significant challenge for nursing students and helped some of them to see older people from different viewpoints and learn from their life experiences. These life experiences in Saudi society with older people

outside the school context provided useful direction and better understanding of older people, helping nursing students to shape their intentions and to learn how to communicate and build a good rapport with older people. Student nurses responded positively to those older people who could communicate easily, especially when they found similarities between their grandparents and other older people in the clinical area. Similarly, Williams *et al* (1993) found that effective communication strengthens the bond between grandparents and grandchildren and can influence the grandchildren's interaction with all older people. Consequently, these opportunities to develop a good rapport with older patients had a significant impact on these Saudi nursing students' intentions towards work with older people. However, there was still a significant number who were yet to come to a decision about whether older people are interesting to nurse. This suggests that nursing students are still ambivalent toward older people, seeing some experiences as positive and enriching and others as negative and discouraging. Similarly, several other studies have found that the number of nurses interested in working with older people has decreased (Herdman, 2002; Soderhamn *et al*, 2001; Happell, 1999). Alongside this, working with older people in general serves as a focal point in nursing students' concept of care for older people, especially in the clinical area, and has a great impact on their career choices and preferences towards working with older people. In this light, Nolan *et al* (2002) suggested that there is much that needs to be done if work with older people is to grow to be an attractive career choice for nurses and other health care professionals. However, the qualitative data showed a need for greater effort in the preparation of nursing students, with the provision of integrated skills and knowledge in the care of older people.

B) Personal disposition towards work with older people

A significant number of students remained ambivalent and had not decided whether they would consider working with older people when they qualified or whether this type of work would appeal to them at all and they if looked forward to their first placement with older people. Many respondents were unsure in answering statements about anxiety relating to their first placement with older people and felt anxious about working with them. Similarly, the findings of this study support those that have found that anxiety levels may be sharpened prior to placement with older people (Fielding, 1986, Mahat, 1992). However, this study has also shown that students are lacking the knowledge and skills required for working with older people, due to the absence of a gerontology course in the nursing curriculum: this factor might explain, or at least

contribute to, their uncertainty and hesitance with regard to working with them when they become qualified nurses. Similarly, Kaempfer *et al* (2002) point out that knowledge about older people was very low and insufficient because the students had not taken any courses related to the care of older people. In this light, inadequate preparation of nursing students in terms of knowledge and skills can lead to indecisiveness about working with them in terms of career choices and preferences, as this study has shown. This is a very relevant issue and might affect the quality of care that they can provide in future and their career pathways in nursing in Saudi Arabia. Some nursing students see work with older people as a constraint and a barrier to an otherwise bright future. Similarly, Huber *et al* (1992) claim that a lack of knowledge about ageing can lead to a decrease in the quality of care for older people and an increase in anxiety and tension for nurses. This might affect nursing students' desire to work with older people in future. For that reason, nursing students and their teachers suggested that schools of nursing should include gerontology courses in their curricula to convince those that are undecided about the appeal of working with older people. Similarly, Nolan *et al* (2002) suggested that it is essential to persuade undecided students to work with older people and reinforce training in those students who want to work with older people when they are qualified. The present study suggests that introducing students to a variety of clinical settings with ill and well older people can have a positive effect in enriching their experiences with this group, which can affect their subsequent career choices and convince unconfident students to work with older people when they are graduated. In this light, when nursing students are given an opportunity to work directly with older people, they often become more positive in their views toward working with older people (Sheffler, 1995; Brower, 1985). Similarly, Brown *et al* (2008 a, b) described the importance of the role of clinical placement experience in structuring student nurses' intentions of gerontological nursing.

C) The consequences of working with older people:

The final set of intentions were concerned with the possible future consequences of working with older people, such as job status, job satisfaction and professional career moves. More than half of the Saudi nursing students did not consider that work with older people is a 'dead-end' job, offers little satisfaction, is not a good career move and is associated with low status. Therefore, Saudi Arabia has not yet effectively expanded its nursing workforce to meet the health care demands of the Saudi population, especially with regard to older people. As a result, a large number of nursing students in this study disagreed with the statement that it is difficult to

get a job elsewhere once you have worked with older people. On the other hand, as might be anticipated, there were still some participants who were unsure about whether they would consider working with older people as a future career. Some respondents felt that that caring for older people involved only basic cleaning and feeding and would lead to low self-esteem and a sense of being in a low-status, dead-end job. Similarly, Happell and Brooker (2001) explain that students do not prefer to work with older people because they see the work as uninteresting, unpleasant and frustrating. Gray and Smith (2000) found that students were suffering in clinical placement due to their assignment as auxiliary nurses rather than qualified nurses, and that might contribute to the fact that some of them regarded care for older people as a low status and dead end job. The findings of this study support those that have found that affect of clinical placement on nurses' attitudes and willingness to care for older people (Brown *et al*, 2008 a ,b; Tovin *et al*, 2002; Hoffman, 2000; Sheffler, 1998, 1995; Tennes-Moseley, 1995; Roberts-Rudd, 1984). Indeed, despite these findings, there is an urgent need for specialized treatment centres for older people, including gerontology clinics, for example, emphasizing the importance of establishing professional nursing homes and residential homes, as found in western countries, to reduce costs and inappropriate institutionalization. In the same vein, Day *et al* (1995) found that clinical placements play a vital role in influencing professional development and attitudes among nursing students.

Accordingly, as a researcher and faculty member in a nursing school, I feel that it was crucial to shed light on this issue to give this study more depth, meaning and richness of data and to ascertain the intentions of Saudi nursing students toward working with older people. This information is considered important to the development plan to improve professional standards and practices in gerontology nursing in the kingdom. However, this study revealed a generally favourable intention toward working with older people, as illustrated below under the three important headings. A comparison was made between British and Saudi nursing students to explore similarities and differences in intentions towards working with older people. Significantly, this study, for the first time, shed light on potential similarities and differences in intentions towards working with older people between student nurses in two geographically dissimilar locations in the East and West. The literature relating to the effect that cultural norms may have on influencing career choices is somewhat limited and contradictory (Gerrish *et al*, 1996). The results of this comparison revealed similarities in responses to most of the statements about working with older people in general between Saudi and British nursing students.

I made this comparison for two reasons: firstly, nursing students today will become staff nurses in the future, and exploring these issues will have an impact on the care of older people in both countries. Similar, Al-Shahri (2002) recommends that nursing programmes must increase awareness and understanding of culturally sensitive attitudes and practice. Nowadays, many Saudi nurses receive state sponsorship for their education in western countries such as the United Kingdom and the United States to increase their professional opportunities in nursing. In the light of this, Halligan (2006) reported increasing culture diversity in many health-care settings and considered exploration of this issue to be imperative and highly significant in nursing care.

The second reason is that, in light of global workforce movement and the shortage of nurses in Saudi Arabia, it is likely that some of these British students will work in Saudi Arabia in the future, so exploring their intentions toward working with older people is a crucial issue for nursing organizations worldwide. In 1991, Jackson and Gary conducted a health workforce study the findings of which indicated that approximately 25,000 nurses were recruited in the kingdom of Saudi Arabia, of whom only 8.5% were Saudi nationals, while 91.5% were expatriates. The majority of nurses were not Saudi, as there were inadequate numbers of Saudi nurses to meet the demand of the kingdom (Aboul-Enein, 2002). Nurses are working with patients from different ethnic background both in their own countries and when they move to other countries and need to increase their knowledge of culture aspects of health (Parfitt, 1998). Watson *et al* (2003) also emphasised the importance of cross-cultural considerations in nursing research and the need to measure differences and similarities in intentions of care.

Accordingly, the present study found that British and Saudi students are similar in that they expressed positive views on most items relating to intentions to work with older people. The present study used a sample of student nurses (n=566) from three different nursing schools, while the British study (Nolan *et al*, 2002) used a postal survey with a large sample of students (n=718). The Saudi sample was all female and younger (mean age 21), while in the UK sample, 80% of them were under 30, 83% female and 17% male. On the other hand, while relevant British data were not collected in this study, it is probable that student nurses from both countries had considerably different gerontological education, training levels and previous backgrounds in working with older people. Nolan *et al* (2002) reported in the UK that large numbers of students had worked with older people previously and many for several (often 10+) years. In contrast, in this study the results showed that

large numbers of Saudi respondents had not previously worked with older people. In this light, it appears that clinical past experiences with older people can play a major role in acceptance or non-acceptance of working with older people as a career option among nursing students. Consequently, specific geographical and historical nursing organizational factors relevant to the status of gerontological nursing in Saudi Arabia and the United Kingdom may have elaborated their endorsement of specific items on the intentions of working with older people scale. The results of this comparison revealed similarities in responses to most of the statements about working with older people in general between Saudi nursing students and British nursing students.

However, in Eastern cultures such as Saudi Arabia, people, including older people, are very talkative and it is easy to communicate with them: for that reason, many Saudi students agreed that it is the older you are the easier to have good rapport with older people, while British students disagreed with this statement. Williams *et al* (1993) reported that accurate communication between nurses and older clients will reflect in the quality of nursing care and argued that students should move beyond stereotypical attitudes to empathetic and effective relationships with older people. Similarly, Davies *et al* (1997) pointed out that it is important in nursing education to improve the quality of nursing care by establishing relationships with older people in different health care settings.

However, in Saudi Arabia, as explained previously, the curriculum of the nursing schools from which data were collected did not focus on gerontology: this might lead nursing students to feel that they are not sufficiently competent and skilled to consider working in this field, which might explain their uncertainty. In the same vein, Nolan *et al* (2002) report that student nurses, qualified practitioners, the general public and university students all show limited knowledge about older people in the UK and suggested the importance of widespread gerontology education to meet the needs of older people. Similarly, it is also important to mention that both studies found that nursing students did not prefer to work with older people and preferred instead to work with children. However, this result is not necessarily because of negative prospects from older people themselves: it might be due to lack of knowledge and experience with older people's care, especially with so much diverse illness; it may make some of them consider another specialty, such as paediatrics. Kuhn (1990) and Nolan *et al* (2002) found that area more attractive for nursing students than working with older people, and many students prefer to work in the child branch rather than in the geriatric specialty. Significantly, the

majority of Saudi students agreed that working with older people has a high status, while large numbers of British students were undecided on this issue. In the UK, there are different areas for the institutional care of older people, such as nursing homes and residential homes, therefore, many of the British nursing students had previously worked with older people and took this statement to refer to the status of caring for older people from this perspective, while most of the Saudi nursing students were new to the nursing profession. Many Saudis would make the claim that attitudes toward nursing homes and long-term care facilities among older people are clearly negative (Umeh, 1991; Albkheil, 1988; Mufti, 2002). Furthermore, nursing as a professional career is still young in Saudi Arabia – it was only established in the 1960s, in contrast to the extensive nursing history in the UK. Additionally, Saudi Arabia has few institutional places for older people because older people are generally cared for within the family and nursing homes are not accepted in the Saudi culture, although older people still seek hospitals in acute care settings and require nursing care in this context. For that reason, the students understood the status of care for older people as being similar to the status of general nursing from an acute care setting. In the light of this, Parfitt (1998) reported that values, beliefs and practices are found in particular cultures. The expression of care also varies, assuming different meanings in different cultures. Similarly, Sheffler (1995) points out that the Western culture tends to devalue the ageing individual, and this has been reflected in the lower status of working with older people. Meanwhile, in Saudi Arabia, the gerontology nursing speciality is in an early developmental phase and older people are managed and placed like young adults in an acute hospital setting. However, taking the results from the above surveys, it could be argued the current acute shortage of qualified nurses in the hospitals and health centres worldwide dictates an urgent review of present and future nursing training. A major education programme is needed to raise the status of the gerontological nursing profession in both countries. Interestingly, the cross cultural similarities in intentions to work with older people found between British and Saudi nursing students' accounts are remarkable in several respects in the context of the global nursing profession. Consequently, health professionals need to be aware of the multiple intentions of health shared by people from different sociocultural, religious and linguistic backgrounds to deliver culturally sensitive health care (Ypinazar and Margolis, 2006).

However, these students are in an almost unique position regarding nurses' intentions to work with older people in very different societies and cultures. It is possible to conjecture as to why there may be

similarities and differences in some items regarding the intentions to work with older people by nursing students in two different countries. One possible explanation for the communalities and similarities in the two groups' intentions is that nurses share the professional responsibility and accountability to provide care for anyone in need, regardless of their culture and society: they are very kind and willing to provide nursing care for all patients, whatever their age and background. Similarly, Palmore (1998) described that a shared professional ideology might be an important issue in shaping intentions towards working with older people. However, there was a diversification of opinions about the status of gerontology between Saudi nursing students and British nursing students. The reason may be ascribable to culture diversity and concerned with the values of older people in society, it may be because of aspects of different gerontological education and student nursing training with older people in clinical placement, or it may be because of the meaning of the status of gerontological work, and the nursing history in each country might be varied. This finding, supported by Reinhardt and Quinn (1979), points out that the aged in Western societies have yet to gain a preferred social status due to generation gaps, and in the Western culture, there is more lack of esteem and role significance for older people than in the Eastern culture. In conclusion, there was widespread agreement that more active measures should be taken in gerontological nursing, especially in education and training in both countries, to increase the proportion of nursing students who will seek to choose working with older people as a first choice in their future careers. In Saudi Arabia, as with other countries, health care has become increasingly specialized. The specialties have developed in response to technological and social improvement and modernisation, which has influenced the management of older patients.

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