



ELSEVIER

Contents lists available at ScienceDirect

Collegian

journal homepage: www.elsevier.com/locate/colegn

Research paper

“Oh, older people, it’s boring”: Nurse academics’ reflections on the challenges in teaching older person’s care in Australian undergraduate nursing curricula



Jo-Anne Rayner^{a,*}, Deirdre Fetherstonhaugh^a, Elizabeth Beattie^b, Ann Harrington^c, Yun-Hee Jeon^d, Wendy Moyle^e, Deborah Parker^f

^a Latrobe University, Melbourne Campus, Bundoora Vic, Australia

^b Queensland University of Technology, Kelvin Grove Campus, Kelvin Grove, QLD, Australia

^c Australian Centre for Christianity & Culture, Charles Sturt University, Barton, ACT, Australia

^d Faculty of Medicine and Health, University of Sydney, NSW, Australia

^e Menzies Health Institute Queensland, Griffith University, Nathan Campus, QLD, Australia

^f School of Nursing and Midwifery, University of Technology Sydney, Ultimo, NSW, Australia

ARTICLE INFO

Article history:

Received 18 May 2022

Revised 6 July 2022

Accepted 25 August 2022

Keywords:

Ageism

Nursing students

Curricula

Care of the older person

Work readiness

ABSTRACT

Background: Nursing students encounter older people in all health care sectors; however, few choose a career primarily focused on older person’s care.

Aim: To explore the challenges to teaching older person’s care to Bachelor of Nursing students and how pre-registration nursing students are prepared to care for older people, part of a large study investigating content on care of older people in Australian nursing curricula.

Methods: A purposive sample of Australian nurse academics involved in Bachelor of Nursing curriculum development or delivery completed a telephone-assisted survey. Qualitative content analysis of two open-ended questions was undertaken.

Results: All Australian schools of nursing participated, and 45 nurse academics were interviewed. Reflecting on the challenges of teaching older person’s care to nursing students, most participants felt the curriculum was too crowded and some called for a 4 year degree. In addition, students’ ageist attitudes, fuelled by unrealistic portrayals of nursing in popular culture, were reinforced by curricula being acute care focused and the ageist attitudes of some nurse academics.

Conclusions: Teaching older person’s care in Australian nursing curricula is challenged by insufficient time and ageism among students and academics. Regulatory bodies need to urgently provide direction so that nursing curricula content aligns with emerging Australian health care priorities, in particular the health care needs of older people.

© 2022 Australian College of Nursing Ltd. Published by Elsevier Ltd.

* Corresponding author at: Australian Centre for Evidence Based Aged Care, La Trobe University Melbourne Campus, Bundoora Vic, Australia.
E-mail address: j.rayner@latrobe.edu.au (J.-A. Rayner).

Summary of relevance

Problem or Issue

Most care recipients in Australian health care settings are older people, yet the nursing workforce, the largest health care workforce, is insufficient in number, and unprepared to provide high quality care to older adults.

What is already known

International and national research show that graduate nurses do not actively choose a gerontological nursing career.

What this paper adds

Teaching older person's care to Australian nursing students is a challenge because a three-year degree does not allow for the inclusion of fundamental content and experiences relevant to older peoples care in curricula that are already too crowded. In addition, students commence their degree with unrealistic expectations of nursing roles and patient populations. Many have ageist attitudes, reflective of the general population attitudes, and are taught by academics who may also have ageist attitudes. All these issues impact graduates' career choices and their work readiness.

1. Introduction

Australia has no national Bachelor of Nursing curriculum (Schwartz, 2019), and the mandated curricula inclusions are Aboriginal and Torres Strait Islanders' health needs and a minimum of 800 hours of clinical placement (Australian Nursing and Midwifery Accreditation Council [ANMAC], 2019). All Australian nursing curricula are accredited every three to 5 years by ANMAC, in line with the standards for nurses developed by the Nursing and Midwifery Board of Australia. Currently, there are no accepted gerontological competencies for Australian Bachelor of Nursing curricula (Poulos et al., 2020), despite the projections of an increasing number of older people with chronic illnesses using health care services (Australian Institute of Health and Welfare [AIHW], 2021; 2019) and a shortage of nurses to provide care (Health Workforce Australia, 2014).

Graduate nurses need to be work-ready; they should have the appropriate skills, and knowledge, beyond technical competency, to adapt to the challenges of clinical workplaces (Rogers, Redley, & Rawson, 2021). Nurses require specific knowledge and skills to care for older people with complex health care issues (Australian Government, Department of Health [DoH], 2020), and they must also be confident and capable of working with older people. However, over two decades of international literature suggests, that nurses are graduating with little preparation to work with older people (Dahlke, Kalogirou, & Swoboda, 2021), particularly those with dementia (Khait, Menger, Hamaideh, Al-Modallal, & Abdalrahim, 2022). They also hold ageist views (Sarabia-Cobo & Pfeiffer, 2015; Koskinen, Salminen, Stolt, & Leino-Kilpi, 2015); and do not consider a career working with older people to be satisfying or worthwhile (Hunt, Verstappen, Stewart, Kool, & Slark, 2020; Hebditch et al., 2020).

An exploration of how care for the older person is taught in Australian nursing curricula, may provide some understanding of graduate nurses' work readiness and career choices.

2. Literature review

The literature suggests that nursing students' attitudes to caring for older people are negative (Hunt et al., 2020; Liu, Norman, & While, 2013) and that their career choices continue to reflect a preference for working in acute health care with younger people (Hebditch et al., 2020). Neville, Dickie, and Goetz (2014) found that undergraduate nursing students' decisions not to work with older people was related to their educational experiences, in par-

ticular the curricula and experiences on clinical placements; the working conditions of specific health care settings, especially in residential aged care facilities (RACF); and ageism. Undergraduate nursing curricula remain acute-care focused with limited attention to chronic diseases, ageing and ageing-specific services (Fetherstonhaugh et al., 2022; Calma et al., 2019). Content on the older person's care tends to be integrated (Fetherstonhaugh et al., 2022; Garbrah, Valimaki, Palovaara, & Kankkunen, 2017), and there are few nurse academics with expert gerontological knowledge to teach this content (Fetherstonhaugh et al., 2022; Fulmer, 2020). Most Australian nursing students undertake their first clinical placement in a RACF (Parker, Harvey, Johnston, & MacAndrew, 2021; Rayner et al., 2022). They commonly report these placement experiences in negative terms related to feeling unprepared (Keeping-Burke, McCoskey, Donovan, Yetman, & Goudreau, 2020) and unsupported (Forber et al., 2016), having limited interaction with registered nurses (RNs) (Hunt et al., 2020), and poor working conditions in the sector (Kydd et al., 2014). These negative clinical experiences can perpetuate nursing students' ageism and influence their career choices (Naughton et al., 2019).

This paper reports findings associated with the challenges of teaching care of the older person content in Australian nursing curricula, and how pre-registration nursing students are prepared to care for older people, part of a larger study investigating care of older person content in nursing curricula.

3. Method

3.1. Study design

An exploratory study investigated the how care of older people content is incorporated and taught in Australian undergraduate nursing curricula (Fetherstonhaugh et al., 2022).

3.2. Ethical considerations

Ethical approval was obtained from the La Trobe University Human Research Ethics Committee in 2018 and where required from the institutional ethics committee of other research team members universities. All respondents gave informed consent.

3.3. Settings and participants

All Australian Schools of Nursing (SoN) offering a Bachelor of Nursing in 2019 were eligible to participate. Heads of the SoN were asked to nominate one or more academics who had an in-depth knowledge of the undergraduate curriculum, and the qualifications and/or expertise to teach the care of older people content (Table 1, Fetherstonhaugh et al., 2022).

3.4. Data collection

A semistructured survey developed, piloted, and reviewed by the Australian Hartford Consortium for Gerontological Nursing Excellence (Aus-HCGNE) was completed as a telephone interview (Rayner et al., 2022). Participants from three SoN elected to undertake the survey as a small group interview (two interviews with two participants and one with three participants). This approach enabled questions to be answered by the participant with the knowledge to do so, e.g., questions about clinical placements were answered by academics who organise them such as Lead of Professional Practice.

3.5. Data analysis

Responses to open-ended questions were analysed using qualitative content analysis, a method that reduces data into man-

ageable representations through clustering data that are ‘connected...or have common meanings’ into sub and then whole themes (Krippendorff, 2013, p.205). Two authors analysed the data manually, individually identified clusters which were then cross-checked by both with consensus determining themes and sub-themes.

Strategies to establish rigour included analysis by two authors and the use of the Consolidated Criteria for Reporting Qualitative Data (COREQ) (Tong, Sainsbury, & Craig, 2007). Direct quotes illustrative of the categories were utilised to provide the context in reporting.

4. Results

All 35 (100%) Australian SoN participated, including 33 universities, a Technical and Further Education (TAFE) organisation and an Institute of Advanced Education. Forty-five nurse academics, mainly women ($n = 41$, 91%) with at least one from each SoN, were interviewed. Most were co-ordinators of the undergraduate degree ($n = 21$, 60%).

The findings reported here are from an analysis of two open-ended questions: what are the challenges of teaching older person’s care in Australian undergraduate nursing curricula? Furthermore, how pre-registration nurses are prepared to care for older people? The analysis produced two discrete themes – *the curriculum* and *the ageist attitudes of students and nurse academics*.

4.1. The curriculum

Respondents spoke at length about why they could not include more content on older person’s care in their curriculum. The discussion focused on where and when to include this content as the *curricula are already full*, leaving very little time to include additional content.

When we look at everything that must be in the curriculum, and everyone wants a fast-tracked pathway. There is just not enough time to get nurses on graduation to be workforce ready (SoN 28).

We have to have governance, we have got to have risk management, quality and safety, patient safety, all of the standards that need to be addressed now in an undergraduate curriculum make it very packed (SoN 6).

It’s what we are required to have - we must have a mental health unit, an Indigenous unit, an evidence-based/research unit. There is so much required in the curriculum. (SoN 1).

Some respondents, acknowledging that there was insufficient content on older person care despite nurses being most likely to care for older people in all health care settings, reported that their current *curriculum was poorly designed*. The curricula were criticised for being *acute care focused*. The content on older person’s care emphasised bodily care, with little content on healthy ageing, older peoples’ specific needs or communication with people with dementia. In addition, respondents noted that clinical experiences associated with older people were generally undertaken in RACFs in the first year of the degree, which further reinforced students’ perceptions of the care of older people.

We’ve got serious problems about how we conceptualise older person care in the curriculum. We consistently conceptualise clinical placements about older people as aged care facility placements, ignoring the fact that older people are in every area of health service (SoN 2).

We are very much into the pathology behind ageing as opposed to the human side, which impacts the quality of care provided (SoN 31).

The lack of time to teach the care of the older person content, despite acknowledging the need and value of this for nursing students, prompted some respondents to suggest the Bachelor of Nursing should be extended to a *four-year degree*, with curriculum renewal focusing on the care of the older person in line with national health care priorities.

We need more time to do this teaching. I would definitely be an advocate for the four-year degree because there actually isn’t enough time. I don’t think you can take out what we’ve currently got, but it would be great if we had more time to really go into the physiology of ageing and to bring it back in the later years. It’s fine to introduce it in first year, but you introduce a whole lot of foundation concepts that can’t be built, there’s not time to build on all of them (SoN 30).

Others spoke about the difficulties in (re)designing a curriculum while adhering to the ANMAC standards. They felt this made it very difficult to introduce new content or expand on existing areas. Some thought ANMAC should provide guidance to SoN.

If there was some guidance around what needs to be incorporated in undergraduate curriculum, that would be helpful. When you’re trying to put a curriculum together, trying to think of everything is difficult (SoN 13).

Participants supported standalone gerontological subjects in nursing curricula and acknowledgement that gerontological nursing needed to be genuinely promoted as a *legitimate career path*.

Universities are too quick to incorporate older person care into the entire curriculum. I think that the standalone subject is really necessary for the student’s better understanding of older person care. They’re the largest population (SoN 5).

I think [gerontological nursing] needs to be promoted to undergraduate as a legitimate career because they gravitate towards health care that is more acute, and they look for graduate programs within those. I think we need to encourage them. It is a legitimate, challenging career pathway (SoN 15).

Within the curriculum theme, nurse academics reported that *scheduling clinical experiences in RACF for first year students* was a challenge.

The biggest challenge is sending out first year nurses into aged care placements because of who they’re buddied up with - carers (SoN 30).

Many respondents felt that RACF settings were unsuitable for first-year students due to the complex nature of the care required by residents, especially those with dementia, and because there were insufficient numbers of RNs available to supervise students. In addition, respondents felt these experiences reinforced students’ existing ageist views and negatively influenced their attitudes toward pursuing a gerontological career.

4.2. The ageist attitudes of students and nurse academics

The second challenge to teaching care of the older person in Australian undergraduate degrees was the ageist attitudes of students and nurse academics. Respondents spoke at length about the stereotypical attitudes about older people held by nursing students. Some added that this was more evident among graduate-entry students who currently or previously worked in RACFs. Respondents reported that ageist attitudes influenced students’ engagement with older person care content and their clinical experiences with older people. However, they acknowledged that it was difficult to counter these attitudes, which reflective of the wider society.

I think one of the challenges is that ageism does exist, and you've got to really challenge that with students (SoN 27)

It is ageism. Some students email me about it 'It's my third time to go to aged care facilities or look after someone who's older, I think it is enough' (SoN 4).

Further, respondents stated that some nurse academics also held negative attitudes and biases about nursing older people or preferred acute care nursing over gerontological nursing. The ageist attitudes of academics can influence students' pre-existing ageist views, a challenge acknowledged by respondents to teaching content on older person care.

We have many staff who worked in aged care or did placements themselves. That experience of aged care is predominantly their memory, and sometimes they can be quite negative (SoN 22).

Our biggest challenge is attitudes. I don't necessarily mean attitudes of the students. It's more the attitudes of the people teaching them (SoN 34).

Finding the right clinical teacher who isn't someone who just dismisses aged care and already has those negative views. I think staff do hold ageist views (SoN 16).

Coupled with ageist attitudes, respondents reported that students had unrealistic ideas about nursing and who they would be caring for. According to respondents, popular culture, particularly social media and television, significantly influenced whom students imagined they would be nursing and in what health care settings. At odds with the reality of health care settings and patient cohorts, television programs depicted nurses caring for young, acutely ill people in highly technical settings such as intensive care units (ICU) or emergency departments (ED). Respondents reported that popular culture was often the driver for some students to start a nursing degree and that it was difficult to counter these perceptions, especially in the first year.

We're battling against the differing motivations to doing nursing now. It's about fighting against their preconceived ideas about what nursing is, and television is killing us (SoN 23).

It's the perceptions that students have, how they view nursing. They want to perform venepuncture and all the things they see on TV that have formed their image of nursing (SoN 15).

Others spoke about how students conflate care of the older person with care of people living in RACFs; and of the impact of the negative media coverage about RACFs, especially that related to the coverage of the Australian Royal Commission into Quality and Safety in Aged Care, which intensified student's negative views of the care of older people.

The majority of people that students will care for are over 65, regardless of where they work. I don't think students realise that. Even when I've said that you get this surprised look on students' faces, and you think, "I don't know who you're thinking you're going to be caring for". It's going to be a very long battle because, unfortunately, even in the media, there's never a nice light shone on aged care (SoN 16).

When asked about how their SoN advertised their Bachelor of Nursing degree, many added that their websites perpetuated the inaccurate image of nursing and patient cohorts, as very few websites included older people as recipients of care.

Most of our websites tend to be lovely young people with stethoscopes and white coats in labs, which drives us crazy because that doesn't really describe nursing (SoN 34).

On the website, when you see it, it's really the students that are the focus. I mean there is one image of a person who's in bed, and the person is very young, and it's a nice pretty patient (SoN 17).

As a result of these widely accepted yet often inaccurate images of nursing, health care settings and patient cohorts, participants reported that student nurses preferred and valued the acute care content over other areas, especially content on older person's care. They added that students also sought acute care areas for their graduate positions.

They [students] gravitate towards acute health care facilities, and they look for graduate programs in those (SoN 15).

Our biggest challenge is that students see care of the older person as in residential care. Not understanding the complexities of chronic and acute health changes. I think that is associated with the ageist view (SoN 17).

Normally they all want to go and work in ED, or ICU, or midwifery (SoN 35).

All respondents spoke about the limited number of nurse academics in their school with gerontological qualifications, expertise and experience to teach the content on older person's care adequately (Fetherstonhaugh et al., 2022). This lack of expertise also extended to clinical teachers. In addition, respondents acknowledged that older person care was now more complex than previously understood, which was lost on students and some nurse academics. This added to the challenge of finding academics who could teach the content effectively and authoritatively.

One of the challenges is the lack of [academic staff] experience or expertise or being too specialist in another field and getting across to the students the importance of, and differences in, caring for the aged across a variety of settings and the complexities that this entails (SoN 3).

I think one of the challenges is that some academics sometimes have a bit of a blind spot to older people. They want to just give the acute medical ICU type sessions, and they want that biological, biomedical type curriculum to be at the forefront of the nurse, and that's not the reality of what students are going to be seeing now or into the future (SoN 13).

5. Discussion

The changing dynamics of the Australian health care sectors, including the ageing of the population, the increased complexity of care, innovations in health care technologies and restrained spending (Calder et al., 2019), means nursing graduates need to be work-ready. However, the literature suggests that the current preparation of nurses is inadequate, and graduate nurses are not 'work-ready' (Missen, McKenna, & Beauchamp, 2015). In particular, they are insufficiently prepared to care for older people (Fetherstonhaugh et al., 2022), a population cohort they will increasingly encounter in all health care settings.

These findings highlight the challenges in teaching content on older person's care in Australian undergraduate nursing degrees, which may impact student nurses' career choices, as has been found elsewhere (Hunt et al., 2020). Career choices are often made as an undergraduate, with many factors influencing the decision, including the factors identified in this research. While there was consensus concerning the importance of teaching care of the older person in all SoN, there was little indication of a systematic approach to delivering this content because of the challenges reported.

As this study found, international reviews suggest that nursing curricula are overcrowded (Deschodt, Dierckx de Casterle, &

Milisen, 2010), and nurse academics admit that they have no time to comprehensively cover content on older person's care (Dahlke, Davidson, & Kalogirou, 2020). Content on older person's care in Australian undergraduate nursing programs is generally delivered as a combination of standalone subjects and integrated across the curricula, with a small number of SoN reporting the content is included in electives (Fetherstonhaugh et al., 2022). Offering content on older person's care as an elective subject may not provide the attention it deserves. It has been suggested that electives attract fewer students (Grocki & Bert Fox, 2004) especially if the subject matter does not align with their career goals (Babad, 2001). More than 20 years ago, Nay, Garratt, and Koch (1999) argued that the integration of content on older person's care devalues it; however, more research is required as there is a lack of evidence of the effectiveness of offering standalone subjects over embedding or integrating content on older person's care across the curriculum. Some respondents suggested that a four-year degree was required as current curricula are 'full' reiterating Recommendation 12 (exploring ways to extend the current three-year degree) from the recent review of nursing education in Australia (Schwartz, 2019, p. xv). This would also bring the degree in line with nursing degrees in Canada, Ireland, the United States, and many European countries.

The acute care focus of nursing curricula in Australia (Fetherstonhaugh et al., 2022) and elsewhere (Garbrah et al., 2017) also influences nursing students' career choices. Students value nursing that involves more technical skills, so their career preferences are for highly technical health care settings such as emergency departments (EDs) and intensive care units (ICUs) (Neville et al., 2014). Academics in this study reported that students come into nursing with an expectation and desire to work in technical areas of health care which may reflect their exposure to images of nurses in popular culture and inherent ageism. Ageism is 'pervasive, widely accepted, and normative in many societies and is a form of prejudice that goes unchallenged' (Sargent-Cox, 2017, p. 5). Ageist attitudes are most common among younger people (Australian Human Rights Commission, 2021), including among student nurses internationally (Sarabia-Cobo & Pfeiffer, 2015; Koskinen et al., 2015; Kydd et al., 2014) and in Australia (Frost, Ranse, & Grealish, 2016; McKenzie & Brown, 2014). Neville et al. (2014) argue that this valuing of technical health care reflects the pervasive ageism inherent in societies.

Attitudes to nursing older people are reinforced by popular culture, particularly portrayals of nurses working and the people they are nursing, which is commonly set in highly technical acute care settings with younger people (van Iersel, Latour, de Vos, Kirschner, & Scholte op Reimer, 2016). These portrayals influence understandings of nursing in particular contexts and in turn, students career choices (Albudaiwi, 2018; Terry & Peck, 2020) because nursing students start their degree with a 'predominantly lay-informed conceptualisation of nursing' (McCann, Clark, & Lu, 2010, p. 34), reinforced through popular culture. (Terry and Peck, 2020) found that medical television programs such as *Grey's Anatomy* and *Offspring* were strong motivators for close to a third of students to commence a nursing degree (p.354).

Ageist attitudes held by nursing students not only influence their career choice but may affect their behaviour toward the care of older people, so identification of negative attitudes towards older people should be a concern for nurse academics (Little, 2017). However, as this study found, nursing academics and clinical supervisors have also been found to have negative attitudes toward the care of older people, which reinforce and support students' ageist attitudes (Garbrah, Kankkunen, & Valimaki, 2020; Simpkins-Gibbs & Kulig, 2017). The literature highlights the importance of having positive role models and enthusiastic academic teaching staff with sufficient knowledge and experience in

older person care. Further, gerontological nursing education has been shown to foster the development of positive attitudes towards nursing older people (Hovey, Dyck, Reese, & Kim, 2017). To moderate the effects of inaccurate portrayals of nursing, academics, and accrediting and professional bodies must actively work to promote what nursing involves. SoN can address this issue by including images of nurses working with older people on their websites advertising the Bachelor of Nursing programs, which are currently missing.

Australian nurses will encounter older people in acute care settings, community care, home care, and residential aged care. Recognition of the importance of gerontological competencies and incorporating care of the older person content into educational programs for health care professionals, including nurses, has been a major priority for the Hartford Consortium in the United States for the last thirty years (Isaacs et al., 2019). In Australia, competency in gerontological nursing is required now in all health care settings and is going to become even more essential as the Australian population ages (Aged Care Workforce Strategy Taskforce, 2018). As Australian undergraduate nursing programs undergo curricula review and revision, SoN need to consider a more comprehensive approach to including gerontological content to prepare work-ready graduates.

6. Limitations

Sampling bias limits the findings, as nurse academics who participated may have had different knowledge and experiences from others teaching Australian undergraduate nursing degrees. The group interview structure for a small number of respondents may also have limited disclosure of opinions. However, the research design, including the selection of respondents, the response rate (100%), and rigorous data analysis, contributed to the reliability of the findings and increased the likelihood that the findings accurately represented the respondents' information.

7. Conclusion

Comprehensive undergraduate nurse education should provide nursing students with the tools they will need to adapt to future health care changes. Including more content on older person care in undergraduate nursing curricula may be challenging but it is necessary to produce work-ready graduates who are capable and confident to work with older people in any health care setting. Curricula changes may include increasing the degree length to four years and removing clinical placements from the first year. Ensuring that SoN staff assigned to teach older adult care are well prepared for the role is a critical consideration.

Authorship contribution statement

All authors were involved in survey design, discussion of findings and drafts of paper writing. JR wrote and submitted the ethics application and any modifications. DF and JR were involved in recruitment and data collection. JR and DF undertook the qualitative data analysis.

Ethical statement

This manuscript reports findings from research project involving human subjects. The project was fully reviewed by La Trobe University Research Ethics Committee. Approval was obtained on 18 December 2018; approval number: HEC18492. Reciprocal ethics approval was obtained from Curtin University on 15th February 2019, approval number: HRE2019-0061; and from Griffith University on 11th March 2019, protocol approval number: 2019/149.

Conflict of interest

None.

References

- Aged Care Workforce Strategy Taskforce. A matter of care. Australia's aged care workforce strategy. Report of the aged care workforce strategy taskforce, (2018). Accessed 2 September 2021. Available at: <https://www.health.gov.au/sites/default/files/a-matter-of-care-australia-s-aged-care-workforce-strategy.pdf>.
- Albudaiwi, D. (2018). Survey: Open-Ended Questions. In M. Allen (Ed.), *The SAGE Encyclopedia of Communication Research Methods* (pp. 1716–1717). Thousand Oaks: SAGE Publications, Inc.
- Australian Government, DoH. (2020). *Nurses and Midwives in Australia*. Canberra: DoH Accessed 2 September 2021 Available at: <https://hwd.health.gov.au/resources/publications/factsheet-nrmw-2019.html>.
- Australian Human Rights Commission. (2021). *What's age got to do with it. A snapshot of ageism across the lifespan*. Sydney: Australian Human Rights Commission Accessed 2 November 2021 Available at: <https://humanrights.gov.au/our-work/publications>.
- Australian Institute of Health and Welfare. (2019). Admitted patient care 2017–18: Australian hospital statistics. *Health services series no. 90, Cat. no. HSE 225*. Canberra: AIHW Accessed 2 September 2021 Available at: <https://www.aihw.gov.au/getmedia/df0abd15-5dd8-4a56-94fa-c9ab68690e18/aihw-hse-225.pdf>.
- Australian Institute of Health and Welfare. (2021). *Older Australians*. Canberra: AIHW Accessed 2 September 2021 Available at: <https://www.aihw.gov.au/reports/older-people/older-australians/contents/about>.
- Australian Nursing and Midwifery Accreditation Council (ANMAC). (2019). *Registered Nurse Accreditation Standards 2019*. Canberra: ANMAC Accessed 2 September 2021 Available at: <https://www.anmac.org.au/document/registered-nurse-accreditation-standards-2019>.
- Babad, E. (2001). Student course selection: Differential consideration for first and last course. *Research in Higher Education*, 42(4), 469–492.
- Calder, R., Dunkin, R., Rochford, C., & Nichols, T. (2019). *Australian health services: Too complex to navigate. A review of the national reviews of Australia's health service arrangements*. Melbourne: Melbourne: Australian Health Policy Collaboration, Mitchell Institute, Victoria University. Policy Paper No. 1-2019 <https://www.vu.edu.au/sites/default/files/australian-health-services-too-complex-to-navigate.pdf>. (Accessed 2 September 2021).
- Calma, K. R. B., Halcomb, E., & Stephens, M. (2019). The impact of curriculum on nursing students' attitudes, perceptions and preparedness to work in primary health care: An integrative review. *Nurse Education in Practice*, 39, 1–10.
- Dahlke, S., Davidson, S., Kalogirou, M. R., et al., (2020). Nursing faculty and students' perspectives of how students learn to work with older people. *Nurse Education Today*, 93, Article 104537.
- Dahlke, S., Kalogirou, M. R., & Swoboda, N. L. (2021). Registered nurses' reflections on their educational preparation to work with older people. *International Journal of Nursing Older People*, 16, e12363.
- Deschodt, M., Dierckx de castelle, B., & Milisen, K. (2010). Gerontological care in nursing education programmes. *Journal of Advanced Nursing*, 66(1), 139–148.
- Fetherstonhaugh, D., Rayner, J., Solly, K., Beattie, E., Harrington, A., Jeon, Y-H., et al., (2022). Teaching the care of older people in Australian nursing schools: Survey findings. *Collegian*, 1–7. <https://doi.org/10.1016/j.colegn.2022.02.007>.
- Forber, J., DiGiacomo, M., Carter, B., Davidson, P., Phillips, J., & Jackson, D. (2016). In pursuit of an optimal model of undergraduate nurse clinical education: An integrative review. *Nurse Education in Practice*, 21, 83–92.
- Frost, J., Ranse, K., & Grealish, L. (2016). Brief report assessing ageist behaviours in undergraduate nursing students using the Relating to Older People Evaluation (ROPE) survey. *Australasian Journal on Ageing*, 35(1), 58–61.
- Fulmer, T. (2020). A retrospective/prospective on the future of geriatric nursing. *Geriatric Nursing*, 41, 29–31.
- Garbrah, W., Kankkunen, P., & Valimaki, T. (2020). Gerontological nurse teachers' abilities and influence on students' willingness in older people nursing: A cross-sectional, correlational survey. *Nurse Education Today*, 90, Article 104461.
- Garbrah, W., Valimaki, T., Palovaara, M., & Kankkunen, P. (2017). Nursing curriculums may hinder a career in gerontological nursing: An integrative review. *International Journal of Older People Nursing*, 12(3), e12152.
- Grocki, J. H., & Bert Fox, G. E. (2004). Gerontological coursework in undergraduate nursing programs in the United States: A regional study. *Journal of Gerontological Nursing*, 30(3), 46–51.
- Health Workforce Australia. (2014). *Australia's Future Health Workforce – Nurses Overview*. DoH, Canberra. Accessed 2 September 2021. Available at: <https://www.health.gov.au/sites/default/files/documents/2021/03/nurses-australia-s-future-health-workforce-reports-overview-report.pdf>.
- Hebditch, M., Daley, S., Wright, J., Sherlock, G., Scott, J., & Banerjee, S. (2020). Preferences of nursing and medical students for working with older adults and people with dementia: A systematic review. *BMC Medical Education*, 20, 92.
- Hovey, S., Dyck, M., Reese, C., & Kim, M. (2017). Nursing students' attitudes toward persons who are aged: An integrative review. *Nurse Education Today*, 49, 145–152.
- Hunt, G., Verstappen, A., Stewart, L., Kool, B., & Slark, J. (2020). Career interest of undergraduate nursing students: A ten-year longitudinal study. *Nurse Education in Practice*, 43, Article 102702.
- Isaacs, S., Jelinek, P., & Fulmer, T. (2019). In *The John A. Hartford Foundation and the growth of geriatrics*: 38 (pp. 164–168). Health Affairs-Grantwatch.
- Keeping-Burke, L., McCoskey, R., Donovan, C., Yetman, L., & Goudreau, A. (2020). Nursing students' experiences with clinical placement in residential aged care facilities: A systematic review of qualitative evidence. *JBI Database of Systematic Reviews & Implementation Reports*, 18(5), 986–1018.
- Khait, A. A., Menger, A., Hamaideh, S. H., Al-Modallal, H., & Abdalrahim, A. (2022). Nursing students' knowledge about behavioral and biopsychosocial domains of dementia: A cross-sectional survey design. *International Journal of Nursing Knowledge*, 33(2), 116–127.
- Koskinen, S., Salminen, L., Stolt, M., & Leino-Kilpi, H. (2015). The education received by nursing students regarding nursing older people: A scoping literature review. *Scandinavian Journal of Caring Sciences*, 29(1), 15–29.
- Krippendorff, K. (2013). *Content analysis. An introduction to its methodology* (3rd ed.). London: Sage Publications.
- Kydd, A., Engström, G., Touhy, T. A., Newman, D., Skela-Savič, B., Touzery, S. H., et al., (2014). Attitudes of nurses, and student nurses towards working with older people and to gerontological nursing as a career in Germany, Scotland, Slovenia, Sweden, Japan, and the United States. *International Journal of Nursing Education*, 6(2), 182–190.
- Little, E. (2017). *PhD Dissertation*. USA: Indiana University of Pennsylvania.
- Liu, Y., Norman, I. J., & While, A. E. (2013). Nurses' attitudes towards older people: A systematic review. *International Journal of Nursing Studies*, 50(9), 1271–1282.
- McCann, T. V., Clark, E., & Lu, S. (2010). Bachelor of nursing students career choices: A three-year longitudinal study. *Nurse Education Today*, 30(1), 31–36.
- McKenzie, E., & Brown, P. (2014). Nursing students' intentions to work in dementia care: Influence of age, ageism, and perceived barriers. *Educational Gerontology*, 40, 618–633.
- Missen, K., McKenna, L., & Beauchamp, A. (2015). Work readiness of nursing graduates: Current perspectives of graduate nurse program coordinators. *Contemporary Nurse*, 51(1), 27–38.
- Naughton, C., O'Shea, K. L., & Hayes, N. (2019). Incentivising a career in older adult nursing: The views of student nurses. *International Journal of Older People Nursing*, 14(4), e12256.
- Nay, R., Garratt, S., & Koch, S. (1999). Challenges for Australian nursing in the International Year of Older Persons. *Geriatric Nursing*, 20(1), 14–17.
- Neville, C., Dickie, R., & Goetz, S. (2014). What's stopping a career in gerontological nursing? *Literature Review. Journal of Gerontological Nursing*, 40, 18–27.
- Parker, C. N., Harvey, T., Johnston, S., & MacAndrew, M. (2021). An exploration of knowledge of students and staff at residential aged care facilities and implications for nursing education. *Nurse Education Today*, 96, Article 104639.
- Poulos, R. G., Boon, M. Y., George, A., Lui, K. P. Y., Mak, M., Maurice, C., et al., (2020). Preparing for an aging Australia: The development of multidisciplinary core competencies for the Australian health and aged care workforce. *Gerontological & Geriatrics Education*, 42(3), 399–422.
- Rayner, J., Fetherstonhaugh, D., Beattie, E., Harrington, A., Jeon, Y-H., Moyle, W., et al., (2022). Australian nursing students' clinical experiences in residential aged care: Reports from nurse academics. *Collegian* Accepted for publication 17 June. In press.
- Rogers, S., Redley, B., & Rawson, H. (2021). Developing work readiness in graduate nurses undertaking transition to practice programs: An integrative review. *Nurse Education Today*, 105, Article 105034.
- Sarabia-Cobo, C., & Pfeiffer, C. C. (2015). Changing negative stereotypes regarding aging in undergraduate nursing students. *Nurse Education Today*, 35(9), e60–e64.
- Sargent-Cox, K. (2017). Ageism: We are our own worst enemy. *International Psychogeriatrics*, 29(1), 1–8.
- Schwartz, S. (2019). *Educating the Nurse of the Future—Report of the Independent Review into Nursing Education*. Canberra: Department of Health Accessed 2 September 2021 Available at: <https://www.health.gov.au/resources/publications/educating-the-nurse-of-the-future>.
- Simpkins-Gibbs, S., & Kulig, J. C. (2017). “We definitely are role models”: Exploring how clinical instructors influence nursing students, attitudes towards older adults. *Nurse Education in Practice*, 26, 74–81.
- Terry, D., & Peck, B. (2020). Television as a career motivator and education tool: A final-year nursing student cohort study. *European Journal of Investigation in Health, Psychology and Education*, 10(1), 346–357.
- Tong, A., Sainsbury, P., & Craig, J. (2007). Consolidated criteria for reporting qualitative research (COREQ): A 32-item checklist for interviews and focus groups. *International Journal for Quality in Health Care*, 19(6), 349–357.
- van Iersel, M., Latour, C. H., de Vos, R., Kirschner, P. A., & Scholte op Reimer, W. J. (2016). Nursing students' perceptions of community care and other areas of nursing practice – A review of the literature. *International Journal of Nursing Studies*, 61, 1–19.