



## Teaching Gerontology to the Millennium Generation

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Older adults are the largest consumers of health care in the U.S. and their numbers are growing. According to the U.S. Census Bureau, they are defined as persons who are those individuals 65 years of age or older. This population will more than double between now and 2050. Individuals reaching the age of 65 can anticipate living another 17 years. As a result, the specialty of gerontological nursing is more important than ever.

Nursing faculty are faced with the challenge of educating the next generation of nurses to care for this ever growing population. In fact, in 2001, researchers Deirdre Thornlow and colleagues cite that the American Association of Colleges of Nursing awarded monies to schools of nursing across the country to support their efforts to improve their schools' Gerontological nursing curricula. The question is: how do educators accomplish this challenging task?

First and most importantly for the nurse educator, is to recognize the demographics of his/her classroom. For 2016, most students in baccalaureate nursing programs are identified as millennials. Richard Fry, a senior researcher at the Pew Research Center, describes millennial boomers as the demographic population between generations x and y, typically representative of adults born between 1980s and early 2000s, and now numbering 75.4 million people. Their childhood has been shaped by technology; therefore, it seems logical to incorporate educational tools used daily by this population into the curriculum. Geriatric nurse educators need to take advantage of technology to engage these learners. As a nurse educator, it is up to us to exude the enthusiasm and passion for course content, but we also need to be cognizant of the best tools to foster the learning style for these students. The use of an andragogic approach to integrating technology into classroom instruction, where the instructor is the facilitator and the students are engaged learners, will prove successful for the classroom comprised of millennial students.

Short audiocasts and videos allow students to use technology to learn. Done prior to class, they help generate discussions in lecture and invite dialogue between students and the instructor. Guest speakers, role playing, case studies, movies depicting the older adult and the use of simulation all stimulate learning and engagement. Online chat rooms and discussion boards encourage participation of the more reserved millennial. Another important aspect for the millennial nursing student is their role in the community. Select community partnerships that provide opportunities for hands-on experiences for nursing students to interact with both the active older adult, and the senior with more complex needs. Examples include religious centers, retirement communities, long term care facilities, veterans' homes, local home health agencies, and elder outpatient clinics. All will provide students a greater appreciation of the needs of this population.

Integration of experiential learning through the use of simulation engages the millennial nursing student raised on technology. Linda Johanson, writing in the journal *Nurse Educator* in 2012, found



that millennials work well in groups but typically struggle with prioritization and conflict resolution. Structured simulation scenarios assist the millennial to develop critical thinking skills through assessment, analysis, and reflection. Simulation provides a safe environment for skill development, engaging millennials in teamwork while providing the immediate feedback they desire. The debriefing session allows for reflection along with individual and group feedback.

The gerontology nursing course may be taught from two perspectives — as a stand-alone course, or within an established course. A stand-alone course stresses the importance of its ideology, and permits the faculty and students to focus on one specific population, while a combined curriculum allows the nurse educator to expand upon learning through incorporating different aspects of various courses. For example, in a pharmacology course, the instructor can provide a focus of common medications used by the older population. A discussion of wound care could include abrasions and lacerations common to the geriatric client. Whether the former or later choice of presentation is chosen, it is important to build upon

the principles learned in each nursing course and reinforce them toward the older adult. Perhaps the answer is a blend of courses — a stand-alone course and an infusion of geriatric content among other courses. Both will then demonstrate that the care of older adults is foundational to nursing and will help make the specialty of gerontology an interactive, positive experience one for millennial nursing students.