

# Brief Report

## Reactions to ageing among Australian psychologists

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**Objective:** To assess attitudes towards personal ageing among Australian psychologists.

**Methods:** Six hundred and four practising psychologists were surveyed using the Reactions to Ageing Questionnaire (RAQ). Potential predictors of attitudes to ageing, such as age, gender and number of years in clinical practice were examined, together with the amount and quality of contact with older family members and older friends. Measures related to the training of psychologists were also of interest.

**Results:** The strongest significant predictors of attitudes to ageing were respondents' age and positive attitudes towards conducting therapy with older clients. Contact and training variables were not associated with scores on the RAQ.

**Conclusion:** These results highlight age as a contributing factor in attitude formation.

**Key words:** Ageism, attitudes, contact hypothesis, personal ageing, psychologists.

### Introduction

Increasing attention has been paid to identifying influences on attitudes towards older people held by health professionals, arising from an anticipated increase in the need to supply clinical services to the growing number of elderly Australians. While interest in working with older adults is associated with amount and quality of contact [1,2], training [3], age [4,5] and years of clinical experience [6], many health professionals have been found to hold negative attitudes towards older adults [6].

Little work has been carried out on this topic with Australian psychologists despite strong support for the efficacy of psychological interventions in aged care settings [7,8]. Few psychologists identify themselves as specialising in work with older adults in Australia compared to other disciplines such as old age psychiatry and other client groups, such as children and adolescents [9]. Research has identified biases among practising psychologists regarding the suitability of older clients for psychological treatment. Ageist attitudes and a lack of training are associated with the tendency to deny psychological treatment to older clients [10,11].

Ageism is frequently measured through knowledge of ageing [12] or attitudes towards older people, using statements in which aspects of 'being old', such as personality characteristics

or lifestyle, are judged [13]. Attitude towards one's own ageing using the Reactions to Ageing Questionnaire (RAQ) is an alternative measure of ageism that addresses the personal, rather than societal level, of measurement [14,15] and correlates with how the respondent rates older people [15]. One study of Australian psychologists [16] found that subjective ageing was unrelated to whether or not a psychologist specialised in aged care, but age, years spent working and interest in working with older adults emerged as predictors in classifying psychologists as specialists in aged care work. Age has been shown to strongly correlate with the age of the clinician across a number of professionals such as psychiatrists [4] and nurses [15]. Other factors of importance include gender and health (psychiatrists). Specific education in aged care and factual knowledge about ageing has also been associated with more positive attitudes to ageing in samples of nurses [17,18]. Amount of contact with older family members or older friends appears to be unrelated to RAQ scores in samples of nurses [14] or students [19].

By identifying predictors of positive attitudes towards ageing among Australian psychologists, the present study aims to identify possible strategies for increasing interest in working with the growing population of older people.

### Method

#### Participants and procedure

A survey questionnaire was mailed to psychologists listed in the Western Australian Registration Board published directory of registered psychologists. Use of this sampling frame maximised the representativeness of the sample, in comparison with other sampling methods biased towards psychologists in private practice.

Six hundred and four psychologists completed surveys, representing a 51.3% response rate. The average age of respondents was 47.8 years (standard deviation (SD) = 11.0, range 25–77 years, median 50 years). The majority of respondents were women (75.5%). These sample characteristics are comparable to those of another recent survey of Australian psychologists [16], suggesting adequate generalisability of the sample.

#### Materials

The survey included demographic items such as age, gender and years spent working as a psychologist. Training variables included highest qualification, the number of courses with content on ageing, whether a participant had done a clinical placement within an aged care setting, and evaluations of how well training had prepared respondents to work with older clients. Interest, confidence and perceived difficulty in working with older clients were assessed through Likert-type scales with

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scores ranging from 1 to 10. The percentage of current clients aged over 65 and the amount and quality of contact with older family members and friends were also assessed.

The RAQ, the measure of ageist attitudes utilised in the survey, has been validated in international samples and against several other measures of ageism [14,17,19]. It comprises 27 items, each a statement of expectations regarding older age. Responses indicate level of agreement along a six-point Likert-type scale. The RAQ demonstrated good internal consistency in the present study (Cronbach's  $\alpha = 0.9$ ). Higher scores on the RAQ indicate more positive attitudes towards one's own ageing.

## Results

Masters level (or higher) qualifications had been attained by 63.0% of participants: 53.0% had been exposed to ageing-related topics as part of their formal psychology training, and 10.6% had completed a training placement within an aged care setting. The average career duration was 16.7 years ( $SD = 9.63$ ). Although this level of clinical experience is comparable to that reported in previous surveys [16], the present sample yielded a very low rate of psychologists specialising in aged care psychology (2.2%), and 52% did not currently see any older clients. The mean RAQ score was 109.0 ( $SD = 19.4$ ), range 55–157, comparable with other studies [4,18].

A relatively high correlation was noted between age and years spent working (.64), influencing their relationship with RAQ scores in the subsequent regression equation (Table 1). Confidence in working with older clients correlated with interest (.59), positive evaluations of training (.46) and perceived difficulty in working with older adults (.46), suggesting the last of these need not necessarily be interpreted negatively. Similarly, interest and difficulty had 10% shared variance. The number of clients older than 65 years was not associated with other independent variables or RAQ scores.

The set of variables entered simultaneously into the standard multiple regression equation (following affirmative tests of

assumptions) accounted for only 13.3% of the variance in RAQ scores, although the model as a whole was significant ( $F(13, 507) = 5.96, P < 0.0001$ ). Variables independently associated with RAQ scores were age, difficulty and confidence in working with older clients, and number of years working in psychology. Gender, contact and training variables made no significant independent contributions to the variance in RAQ scores (Table 1).

## Discussion

The present study confirms previous findings regarding the effect of personal age on ageist attitudes [4]: positive expectations of ageing increase as we grow older. Hence, preconceived negative associations with old age may be dispelled by direct positive experiences of ageing. The participants in this sample were middle aged – older than those in previous studies that surveyed nurses [14,17].

Attitudes towards personal ageing were also linked to attitudes regarding working with older clients, in terms of both confidence and perceived difficulty. It appears that 'difficulty' was regarded as a positive aspect of working with this client group: it was seen as a stimulating challenge and was correlated with increased therapist confidence. Similar to a previous study examining psychologists' motivation to work with older clients [11], professional attitudes, rather than contact with older family and friends, were related to ageist attitudes. Subjective attitudes to ageing were not associated with either specialising in working with older clients or with training factors, such as formal knowledge or professional contact through clinical aged care placements. It is possible that training did not predict attitudes to ageing because the present sample was older than those of previous studies, and had more work experience.

This result raises the possibility that factors other than training or contact might influence RAQ scores. A limitation of this study was a lack of information regarding the respondents' own health and personal experiences of caring for older people. Including other variables that may impact on a respondent's experiences of ageing (such as socioeconomic status, marital status and retirement plans) would perhaps have accounted for more variance in RAQ scores than was achieved in the present study. The relationship between attitudes towards one's own ageing and actual behaviour towards older people also needs further examination. The present study suggests that attitudes in one area (here, professional attitudes) can relate to attitudes in another context.

The present study failed to find a relationship between training and attitudes towards ageing: however, nearly half of the sample had not been exposed to any ageing-related content during their training, which can represent up to 8 years of full-time study. Criticism has been levelled at the lack of age-related training within the clinical psychology profession [20]: only two universities currently offer specialist programs in geropsychology [21]. In a recent Australian survey, clinical psychology program directors indicated a need to increase course content

**Table 1: Summary of standard multiple regression: Variable coefficients with total Reactions to Ageing Questionnaire score as dependent variable (DV)**

	B	SE B	Beta
Age	0.270	0.101	0.153*
Gender	-2.890	1.952	-0.064
Aged course in degree	0.814	1.111	0.035
Placement with older clients	-0.381	2.747	-0.006
Years spent working	-0.257	0.113	-0.128*
% of clients aged over 65 years	-0.335	0.680	-0.022
Confidence	1.035	0.488	0.128*
Interest	-0.080	0.548	-0.008
Frequency of contact	-0.226	0.465	-0.023
Quality of contact	0.859	0.610	0.068
Highest qualification	0.842	0.822	0.044
Difficulty	1.761	0.435	0.190*

\* $P < 0.05$ .

B, unstandardized coefficients; SE B, standard error of B.

on ageing [21]. Based on the present findings, recruiting mature age trainees into psychology programs may also have a positive impact on psychology students' attitudes.

This study highlighted the importance of targeting attitudes in combating negative preconceptions regarding ageing. In preparing health professionals for the increasing number of older consumers, educators need to be mindful of the complexities in attitude formation. Courses should identify and address ageist attitudes, to complement theory and factual knowledge on ageing processes, and should continue to target attitudes through postgraduate professional development. Exposure to positive ageing experiences may also serve to influence attitudes and help provide much needed balance in service delivery to older Australians.

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### Key points

- Attitudes towards one's own ageing become more positive as we grow older.
- Training does not influence attitudes to ageing in a middle-aged sample.
- Amount and quality of contact with older adults, including older clients, do not influence attitudes towards personal ageing.
- Positive attitudes towards personal ageing are associated with high levels of confidence in, and positive attitudes towards, the use of therapy with older adults.

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