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The Use of Physician Assistants for Health and Wellness in Aging Populations

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Introduction

Abstract

The purpose of this project is to discover if the demographics of the physician assistant (PA) profession is significantly adequate to provide efficient quality care as it contributes to the Health and Wellness of the Aging Population. It is necessary to explore what Physician Assistant Programs offer gerontology courses within the curriculum to help increase the shortage of health professionals within that specialty area.

Description of Research

I conducted a study to expand my research of the demographics of PA programs and how the programs can benefit from having gerontology in their curriculum. I was able to record data on an excel spreadsheet on the demographics and pass rate scores to determine the significance of the use of PAs in the health care industry for the aging population.

Methods

Background

Physician Assistant is a relatively new profession. In 1965, the profession of PA was formed in North Carolina to advance the health care system by being a "physician substitute"; thus, their obligation of their profession of being under the doctor was due to a scarcity of physicians during the mid-1960s (AAPA, 2019). Because of the shortage of physicians during the Vietnam War, Dr. Eugene Stead, Chairman of Duke University’s Medical Center, tackled this deficit by creating a two-year program (Duke University, 2019). This program was accelerated to enable physician assistants to address the distribution of health care at the time. As of 2019, there are 238 PA programs of which 181 have full accreditation. There are concerns, however, that this area of medicine is still considered an emerging profession that is still evolving in the health field and therefore could be taken more seriously.

Objectives

My main objectives to achieve with this project are the following:

1. Review the 238 Physician Assistant Programs (PAP) available in the United States and determine how many have curriculums that include the field of Gerontology.
2. Review the 238 PAP and determine the demographics of the students and the extent of diversity on the given campus.
3. Explore if statistics are available to show how many students from varied backgrounds complete the PAP.

Objective One

According to the conducted research, percentages are based on 181 PA programs since those are the only programs considered due to full accreditation status. Due to this change, out of the 181 PA programs, only 24 percent have gerontology programs and/or gerontology courses in the curriculum. Most of the PA schools with gerontology programs were located on the east coast or in the southern part of the United States. This data is consistent with southern practices of caring for elders and demographic information showing that older Americans tend to relocate to warmer climates.

Objective Two

Again, according to the conducted research, percentages are based on 181 PA programs. Although most are predominantly Caucasian, only 21 percent clearly state this demographic on their websites. The information was ascertained by more general descriptions as predominantly white programs, omitted information not stating specifically but indicated by phone calls. It is stated repetitively that focus was on the objective means of scores rather than race and ethnicity. However, research supports that underrepresented students tend not to meet required scores which maintains homogenous populations. The PA programs with the most diverse campuses were located on the west coast and in the southern states which have higher concentration of minority populations. All of the PA programs with predominantly female enrollment, which is much more than the anticipated male enrollment initially expected for these programs. The reporting was similar to that of race/ethnicity in that only 22.7 percent actually posted this information on the website.

Objective Three

Statistics were available to support to what extent varied backgrounds completed the PA programs and passed the required Physician Assistants National Certification Exam (PANCE). The highest percentages passing the exam with 70 percent or more were programs in New England. Scores diminished more in PA programs located on the west coast and in the south. States in the mid-west have the lowest scores yet also had a low level of diversity. Unfortunately, more diverse PA programs did not produce the expected number of minority providers due to the inability to pass the PANCE as required by the profession.

Results

Descriptive Statistics

- Schools Accredited: - 70.5%
- Schools not Accredited: 29.5%
- Schools Studied Gerontology: 38%

Majority of the study population:
- 30 years or older -16%
- 29 years or younger -74%
- Non-Hispanic White - 88%
- Minority - 12%
- Women – 72%
- Men - 28%
- PANCE Pass Rate Above 90%-

Figure 1 shows the relationship of PA programs that offer a Gerontology course during didactic or clinical years and how effective it helps students pass the required certified test score more than 70%.

Conclusion

Summary

After investigating the diversity of the PA profession and exploring the study and curriculum, I found that there is a lack of adequate programs providing gerontology courses in the curriculum which may limit the number of PAs prepared to provide care for the aging population. Those PAs who have cultural expectations of caring for the elderly may be accepted to PA programs but ultimately may not be added to the profession due to the inability to pass the PANCE as required by the field. The project helped increase the knowledge of the diversity of students and the likelihood of diverse students within the PA profession. Informing students of this profession will allow our future health care professionals increase the shortage of PAs’s and increase the knowledge of the health care industry. Furthermore, based on my research, it was found that the majority of the schools are predominately white and there are more women enrolled than men.

Limitations

In doing this research project, I faced some difficulties in finding some of the information. It required a significant amount of phone engagement. It seems extensive amounts of information were intentionally not available online which I learned when speaking with graduate admission offices and PA administrators directly to gain necessary data. In the beginning, I felt the expectant anticipation of gaining the knowledge of something new. At times, it became overwhelming, mainly because I was not familiar on how to appropriately do research, and not sure if I was gaining enough information about my project to complete the objectives I planned to conduct for this study. Due to a personal circumstance and setback of witnessing my grandfather’s illness, studying the health care of aging populations became even more relevant.

Aspect of Project that is Rewarding

The most rewarding thing I have found about this project is learning the responsibility behind doing this profession. I learned that by doing this project I was able to fully explore Physician Assistant programs that I have not known to exist and was able to explore their academic and social attributes as I continue to search for a program for graduate school. Researching various PA programs, I have applied myself to increase my chances academically, so I can choose the school best fit for me to pursue a career in health and wellness needs for the aging population. Lastly, this opportunity provided me professional development skills that will help me excel in my career.