



The “New” Life Span: Implications for Clinical Educators

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Editorial

As I move through “midlife”, I am increasingly a fan of the popularized notion that, “Today’s Sixty is Yesterday’s Forty”. Such pop culture phrases beg the question that if today’s sixty was yesterday’s forty, and then is today’s eighteen yesterday’s ten? Is today’s twenty-nine yesterday’s nineteen? Do such phrases suggest an actual shift as to how we move through the lifespan? Are such changes culturally-specific or more global in nature?

A few years ago I began to have frequent discussions with my colleagues regarding our students. To us, it appeared that the students had changed in some manner. This notion was agreed upon by all. However, upon further discussion, some issues emerged: (1) Had they really changed? (2) If so, what changes had taken place? (3) Why? What brought about the changes? (4) Could the observations made by myself and my colleagues be generalized to other age groups in our community? If there are in fact generational changes, should educators be adopting new strategies to improve the quality of education for the current generation of students? Given the impact of ever-advancing IT, and the capacity to conduct large scale global trials via internet technology by the most junior of trainees, is the old case study method of teaching still a valid, and effective teaching technique?

In an effort to answer these questions it seemed necessary to observe populations beyond my students. I spent one summer in an educational program with local students ranging from third grade to graduate students. Additionally, I continued to mentor students and young faculty at our college. Feedback from students concerning single case studies to teach clinical didactics was solicited, as part of the end of the term/rotation evaluations.

If there were changes in attitudes and opinions, what might explain it? Please consider the following:

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Biological changes

As we all know, the age of onset for puberty consistently dropped during the twentieth century. Where once upon a time one was not likely to be completely through this transition until fifteen years of age, we now see a growing majority of young Americans post-pubescent at age eleven. Such changes have led to a growing number of Americans having their first, actual sexual experience at age twelve.

Psycho-Social changes

Significantly driven by the Traffic Safety Board and the auto insurers, there has been suggestion for over ten years that the legal driving age in the U.S. should be pushed from sixteen years old to eighteen years old (recently there has even been suggestion that it be raised to over eighteen years old). Why? It is due to the number of accidents amongst young drivers. Like many age driven changes the transition is based upon “readiness”. As we shift the transition points, is it possible that we are no longer ready for the responsibility that goes along with driving at age sixteen?

What is a doll? Who was the target audience when they were invented? The doll was produced to provide for what sociologists would call anticipatory socialization. Certainly up until the early 1900s in the United States, a girl was born knowing she would become a wife and mother by her early twenties. As such, the doll was her first training tool.

What was the purpose of the traditional high school dance in the U.S.? To a large extent the dances were part of the early courting process: a chance to mingle socially with possible future mates. Upon discussing this phenomenon with my present students, it was absurdly obvious that they did not see their high school dances as serving such a purpose. In the United States today the average age of first marriage has gone from nineteen years old to twenty-seven years old. In accordance with this change, we are now also having children later in the lifespan.

Sociologists have long suggested that the educational system in the U.S. serves as a “gate keeper to the world of work”. Thus the level of education required for a given job has consistently risen. For example, in the past to be a salesman one needed barely more than an elementary school education. The same job would then require a high school diploma, and today, a college degree.

As a generation which literally grew up with instant access to information, and social media dominated interpersonal relationships, do experienced clinical educators need to modify their teaching techniques to more effectively teach a new generation of learners expecting high tech instruction?

It seems reasonable that across all S.E.S. groups and subcultures to consider an actual shift is taking place regarding the manner in which the lifespan is affecting teaching styles. It seems possible that the changes observed truly suggest a broad, historically-based change is taking place. Such changes would certainly have important ramifications for clinical practice. Perhaps we need to shift the paradigms we operate off of regarding patients’ ages? Perhaps we need to revisit what we consider to be “normal” during any point in the lifespan?