Short Communication

Nursing students’ willingness to care for older adults in Turkey in 2020

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ABSTRACT

Background & Aim: The population of older adults is dramatically increasing in the world. This increase results in more demand for health care services from older adults. So, nurses’ and nursing students’ willingness to care for older adults gain importance. The aim of the study was to determine the willingness of nursing students to care for older adults and the factors affecting this in Turkey.

Methods & Materials: This descriptive cross-sectional study was conducted between November-December 2019 in the nursing faculty of a public university. 299 students were randomly selected and data were collected by using a demographic student form and the Willingness to Care for Older People scale. Data were analyzed via the SPSS version 25 program.

Results: The great majority (90.3%) of the students were female and the mean age was 21.3±1.2 years. The mean score of the students’ willingness to care for the elderly was 36.82±5.96. The willingness to care for the older adults was found to be affected by caring for the older adults in clinical practice (B=2.136, β=0.174, p=0.008) and wanting to live with an elderly relative (B=2.022, β=0.168, p=0.016).

Conclusion: The experience of caring for an older adult in clinical practice and to be willing to live with an older relative in the same house is positively associated with the willingness of student nurses to consider geriatric nursing as an option.

Introduction

The population of older adults is dramatically increasing in Turkey and Worldwide. Along with a decrease in birth rates, the portion of older adults in the population is increasing in advanced economies. The World Health Organization (WHO) reports that older adults constitute 8% of the global population with 524 million in 2018. This is estimated to be 16% of the population with 1.5 billion in 2050 respectively (1). In Turkey, older adults constitute 8.5% of the population and this rate has increased by 17% in the last 5 years (2).

It is known that as the population age, the prevalence of chronic diseases increases. By 2025, researchers predict that the demand for adult primary care services will grow by 14% (3). In another study, it is estimated that chronic diseases will be represented more than half of the additional demands for healthcare due to the aging population (4). This predicted demand for health care services will require a more professional workforce. An important part of this increasing demand will be by the older adults. So, it will gain the importance to care for older adults. There are various professions involved in the care of older adults. One of the main professions involved in the care of older adults in nursing. With the steady increase in demand for health care by older adults, elderly care will make a greater workload for nurses. Thus, the attitudes of nurses towards the elderly and their degree of willingness and commitment to care for older adults become of focal importance.

As reported in the international literature, nurses and nursing students’ attitudes towards older adults are generally positive. Also, stereotyping and ageism have been
reported low, especially among nursing students (5). Yet, nursing students’ willingness to care for older adults has been reported moderate or low. The factors that affect the willingness to care for older adults vary between cultures and societies (6-8). In a study conducted in Taiwan, it was reported that nursing students have moderately positive attitudes toward older people but they show little interest in working with older people (8). In another study conducted in the United States, it was reported that the year of a nursing program, anxiety of aging and empathy towards older adults are influencing nursing students’ willingness to care for older adults (7). There are limited studies on nursing students’ willingness to care for older adults and affecting factors in Turkey. 

The purpose of this study is to evaluate the willingness of nursing students to care for older adults and to explore the factors that affect this phenomenon in Turkey in 2020.

Methods

This descriptive study was conducted in a public university’s nursing faculty between October and December 2019. Participating students had to complete at least one clinical practice in their education to participate in the study. Thus, students who were in their first year of nursing education were excluded from the study.

The population of the study was 834 students who are studying in the 2nd, 3rd, and 4th years in nursing education. The minimum required sample size is calculated via G-power software regarding the results of the study conducted by Jang et al. in the United States (9). Accordingly, the minimum required sample size calculated 255 (α=0.05, f=0.25, and power=0.95). The study was terminated after 299 students were randomly selected and participated successfully.

Data were collected from the students face-to-face in the classroom. Student identification form and willingness to care for older people scale were used to collect data.

Student Identification Form: This form consisted of 11 items including student’s age, gender, year in nursing education, marital status, family structure, where he/she living in, the experience of care for older adults in clinical practice, and views on older adults. This form was developed by the researchers.

Willingness to Care for Older People Scale (WCOPS): This scale was developed by Aday and Campbell in 1995. The scale consists of 12 items and one dimension. The answers to the questions are on a 5-point Likert scale i.e. ‘completely agree’ to ‘completely disagree’. The lowest score on the scale is 12 and the highest is 60. There is no cutoff for willingness score. Higher scores represent a higher willingness to care for older adults (10). An adaptation study of the scale for use in Turkey was undertaken by Hançerlioğlu and Karadakovan in 2016. The scale was found to be valid and reliable for Turkish society. Cronbach’s alpha value for the Turkish version was 0.862. Cronbach’s alpha value of the scale in this study was 0.931 (11).

Data Analysis

Data analysis was performed using SPSS version 25.0. The descriptive data in the study are presented as numbers (n) and percentages (%). Kolmogorov-Smirnov (KS) analysis was used to determine normal distribution. A Chi-square test was used for categorical variables. One-way ANOVA and independent t-tests were used to compare mean attitudes scores between groups. After confirming the data’s normal distribution, linear regression analysis was used to estimate the strength of the association between variables on the willingness to care for older adults. The p-value < 0.05 was set as statistical significance.

Ethics and Deontology

Written approval to conduct the study was obtained from Ege University Scientific Research and Publication Ethics Committee (Protocol No: 02/06) after the study protocol.
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was submitted accordingly. Permission was also obtained from Ege University Nursing Faculty and all participants who signed an informed consent form. Anonymity and confidentiality were secured throughout the study.

Results

All participants (n=299) completed the forms and the response rate was 100%. Most of the students who participated in the study were female (90.3%) and 40.5% were in their 2nd year of nursing education. The mean age of the students was 21.3±1.2 years (Table 1). It was found that more than half of the students had cared for an older adult in their clinical practice and 50.7% of the students had lived with an older relative in the same house. Of the total sample, 58.2% reported they were happy to live with an older relative in the same house and 60% reported they want to live with younger family members when they get old (Table 2). Of those who did not want to live with an older relative, 28.0% stated that they would prefer to live with younger family members when they get old.

Table 1. Distribution of students’ sociodemographic characteristics

| N   | %   |
|-----|-----|
| Gender |     |
| Female | 270  | 90.3 |
| Male   | 29   | 9.7  |
| Marital Status |     |
| Single  | 297  | 99.3 |
| Married | 2    | 0.7  |
| Year in Nursing Education |     |
| 2nd year | 121  | 40.5 |
| 3rd year | 88   | 29.4 |
| 4th year | 90   | 30.1 |
| Family Structure |     |
| Nuclear  | 266  | 89.0 |
| Extended | 28   | 9.4  |
| Other    | 5    | 1.6  |
| Sibling(s) |     |
| Yes     | 283  | 94.6 |
| No      | 16   | 5.4  |
| Living in |     |
| Metropolitan | 95   | 31.8 |
| City    | 39   | 13.0 |
| Town    | 104  | 34.8 |
| Village | 61   | 20.4 |
| Mean±SD |     |
| Age     | 21.29±1.19 |

Table 2. Distribution of students’ experiences and views on older adults

| N   | %   |
|-----|-----|
| Experience of caring for older adults in clinical practice |     |
| Yes  | 157  | 52.5 |
| No   | 142  | 47.5 |
| Lived with an older relative in the same house |     |
| Yes  | 151  | 50.7 |
| No   | 147  | 49.3 |
| Want to live with and elderly relatives |     |
| Yes  | 174  | 58.2 |
| No   | 125  | 41.8 |
| Want to live with younger family members when you get old |     |
| Yes  | 180  | 60.2 |
| No   | 119  | 39.8 |
There were no significant differences between willingness to care for older adults and variables such as gender (p=0.339), years in nursing education (p=0.401), family structure (p=0.601), having a sibling (p=0.213), type of dwelling (p=0.327) and experiences of living with an elderly relative (p=0.873).

Yet, statistically significant differences were found in the willingness to care for older adults and variables such as experiences of caring for an older adult in clinical practice (p=0.003), content to live with an older relative (p=0.002) and wanting to live with younger family members when they get old (p=0.047). There weren’t statistically significant differences between the willingness to care for older adults and the years in nursing education (p=0.401) (Table 3).

Table 3: WCOPS total mean points according to groups

|                          | Mean±SD   | P-value | Effect size |
|--------------------------|-----------|---------|-------------|
| Gender                   |           |         |             |
| Female                   | 36.71±5.92| 0.339   | g*=0.014    |
| Male                     | 37.82±6.29|         |             |
| Year in nursing education|           |         |             |
| 2nd year                 | 36.84±6.01| 0.401   | f**=0.120   |
| 3rd year                 | 36.15±6.18|         |             |
| 4th year                 | 37.40±5.62|         |             |
| Family structure         |           |         |             |
| Nuclear                  | 36.69±5.92| 0.601   | f=0.151     |
| Extended                 | 37.86±6.43|         |             |
| Other                    | 37.00±4.55|         |             |
| Sibling(s)               |           |         |             |
| Yes                      | 36.70±5.79| 0.213   | g=0.325     |
| No                       | 38.63±8.26|         |             |
| Living in                |           |         |             |
| Metropolitan             | 36.73±5.80| 0.327   | f = 0.382   |
| City                     | 38.01±7.03|         |             |
| Town                     | 36.16±5.75|         |             |
| Village                  | 37.24±5.76|         |             |
| Lived with an older relative in the same house | Yes | 36.82±5.63 | 0.873 | g=0.007 |
|                          | No        | 36.78±6.27 |         |             |
| Experience of caring for older adults in clinical practice | Yes | 37.75±5.58 | 0.003 | g=0.323 |
|                          | No        | 35.83±6.32 |         |             |
| Want to live with and elderly relatives | Yes | 37.71±5.29 | 0.002 | g=0.375 |
|                          | No        | 35.51±6.59 |         |             |
| Want to live with younger family members when you get old | Yes | 37.31±5.67 | 0.047 | g=0.216 |
|                          | No        | 36.03±6.29 |         |             |
| Total                    | 36.82±5.96|         |             |

* Hedges’s g  ** Cohen’s f

Table 4: Results of multiple linear regression

|                          | B       | β       | t       | % 95 CI          | P value |
|--------------------------|---------|---------|---------|-----------------|---------|
| Constant                 | 33.26   | -       | 25.868  | 30.72 to 35.81  | 0.000   |
| Experience of caring for older adults in clinical practice | 2.136 | 0.174 | 2.647 | 0.43 to 3.97 | 0.008 |
| Want to live with and elderly relatives | 2.022 | 0.168 | 2.433 | 0.39 to 3.66 | 0.016 |
| Want to live with younger family members when you get old | 0.221 | 0.018 | 0.264 | -1.43 to 1.87 | 0.792 |
| Year in nursing education | 0.455   | 0.058   | 0.754   | -0.73 to 1.64   | 0.452   |

Model Summary: R=0.155, R²=0.024, Adjusted R²=0.024, F=2.501, p=0.035
Willingness to care for older adults

Linear regression analysis was used to estimate the effects of association between the experiences of caring for an older adult in clinical practice, were happy to live with an older relative, and wanting to live younger family members when they get old, and the willingness to care for older adults. A statistically significant, positive-way association between the experiences of caring for an older adult in clinical practice on willingness to care for older adults were found. The association between the wanting to live with younger family members when they get old and willingness to care for older adults was also positive but not statistically significant (Table 4).

Discussion

In this study that we conducted to determine the nursing students’ willingness to care for older adults and related factors, we found that the experience of caring for an older adult in clinical practice and to be willing to live with an older relative in the same house is positively associated with the willingness of student nurses to consider geriatric nursing as an option.

Nursing students’ willingness to care for older adults were reported at different levels regarding the country. In China, the nursing students’ willingness to care for older adults was reported at medium-high levels (6). In Taiwan, it was reported that nursing students had neutral to slightly favorable attitudes toward working with older adults (7). In Sri Lanka, researchers reported that the nursing student's willingness to care for older adults was at a low level (8). In the United States, nursing students’ willingness to care for older adults was reported 3.87 out of 5 (9). In Turkey, it was reported that 26.52% of nursing students were willing to work in centers that only care for older adults (5). However, it is hard to compare this aspect of our findings with literature, because the tools and scores are different and there are no cutoff points in WCOPS for willingness.

Our study showed no statistically significant difference between males and females concerning willingness to care for older adults. Yet, as suggested in the international literature, the attitudes of females and their willingness to care for older adults are generally more positive than males (12-14). On the other hand, some studies report similar findings with our study (7). We consider that these differences between our study and the literature may be due to the unequal distribution of gender in studies.

In a study conducted in the same country, it was reported that negative attitudes toward older adults were lower in students who care for older adults in clinical practice (15). In Taiwan, researchers reported that the willingness to care for older adults by students who are exposed to older people’s care during their practice is higher than others (7). In China, it was reported that the experience of caring for the elderly could lead to a positive impact on care willingness (4). Yet, in the United States, it was reported that nursing students’ willingness to care for older adults was not affecting by older adult related clinical practice (9). We suggested that the detail of the clinical practice should be evaluated to determine its effect on nursing students’ willingness to care for older adults.

In this study, we found that the willingness of the students who would prefer to live with an older relative in the same house was higher than others. In general, informal caregivers take responsibility for the care of older adults out of the hospital. These informal caregivers are mostly a spouse, offspring, or other family members who are living with an older adults (16,17). So, in the community, to live with an older adult would often be related to care for him/her. We also postulate that this result in our study reconfirms this phenomenon.

Limitations

Willingness to care for older adults would not only be affected by attitudes and views. Salary, social facilities, and job opportunities could also affect this willingness. The scale used in our study did not evaluate these conditions. So, this is a
limitation of the study. Another limitation is the sample size. Also, as data were collected only in one nursing faculty, generalization cannot be extrapolated to Turkey as a whole.

Implications for Education, Practice, and Research

The factors that affecting nursing students’ willingness to care for older adults such as the experience of caring for an older adult in clinical practice and to be willing to live with an older relative in the same house should be considered to improve the willingness. We recommend that nursing curricula should be revised so that all students have firsthand experience of continuum caring for at least one older adult during clinical placements.

To improve nurses’ willingness to care for older adults these factors should also be considered and should take part in in-service training.

Future researches are recommended with larger groups and adjusting some variables. The researches that are evaluating the effect of older adults’ related clinical practice on nursing students’ willingness to care for older adults are also recommended.

Conclusion

The willingness of students to care for older adults was affecting by some variables. The experience of caring for an older adult in clinical practice and to be willing to live with an older relative in the same house is positively associated with the willingness of student nurses to consider geriatric nursing as an option.

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Conflict of Interest

The authors declare that there are no conflicts of interest in the publication of this study.

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