



Investigating the relationship between ageism and some demographic aspects in offering nursing care to elder patients of Al-zahra hospital, Isfahan

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ABSTRACT

Objective and domain: patient care quality is influenced by many factors one of which can be nurse's attitude toward the elderly. The present study conducted aiming at specifying the relationship between ageism and some demographic aspects of nursing care toward elder patients hospitalized at Alzahra hospital. Method: the present study is a correlational descriptive research. The statistical population includes all nurses who work in different units of Alzahra hospital of Isfahan (except those working in pediatric and NICU units, as they have no contact with elder patients) in 2015. Through availability sampling 275 nurses were selected; 93 male and 182 female nurses. Instrument of this study was a questionnaire on ageism designed by researcher. In order for analyzing the data, the researcher used independent T test, variance analysis test and Cross call Valise test. Findings: in investigating knowledge related to elder people, findings of this study shows that this knowledge was in a low level in 11.6 % of nurses and high in 32.7% of them. Attitudes toward elder patients were in 8.4% of nurses negative in 81.8% of them neuter and 9.8% of nurses have got positive attitudes toward the elderly. Also results demonstrated that this attitude was meaningfully more negative in male nurses than females. But in other aspects like age, educational level, income, educational time, ethnicity, living with elderly people and presence of an elder person in their family or relatives, no meaningful difference was seen. Discussion and conclusion: In general, this study showed that sex, occupational record, having passed educational term time are factors influencing ageism. But other demographic characteristics played no meaningful role in nurses' ageism and these are to be paid more attention in order to decrease ageism.

Keywords: Ageism, Demographical aspects, Old age

INTRODUCTION

Human beings face an step of old age during the biological process which is obtained in a natural growth; as this process is ingrained in human's destiny and is an inevitable necessity[1]. Old age process is gradual decrease of Body's system function such as cardiovascular, respiratory, urogenital, endocrine glands and immune systems [2]. As time passes, population of world goes toward old age, as this century has been named old age century. In developed world, elder people (80 year old people or more) are those who will have the quickest growth [3]. By 2050, number of 65-year old people will reach from 524 million in 2010 to 1.5 milliard. In other words, it is expected that by 2050, the population of elder people reach from 8% to 16 % [4].

The elderly are a vulnerable group of community who need to be paid attention socially and healthily [5]. According to demographers and epidemiologists, we are in state of epidemic passing. By which they mean, we are facing a decreasing process of infectious and acute disease and advent of chronic and degenerative diseases. This is true for the elderly [4].

Many elderly people are hospitalized one or several times during their life time [6]. Today taking nurse healthcare becomes a new advert phenomenon [7]. And this increases the necessity to employ skillful and expert nurses in the field of elderly healthcare [8]. Nurses are respondent to prepare health and personal care such as emotional supports for elder patients [9].

Regarding the significance role of nurse in elderly healthcare, their attitude influences their work preference concerning working with elderly patients and the recommended healthcare for them as well [10]. Studies demonstrated that various factors may play role in healthcare's workers concerning elderly patients [10, 11]. Healthcare workers are especially subject to negative attitudes toward the elderly and ageism [11]. Ageism and negative attitudes are assigned by visualization of the elderly as breakers, patient suffering from dementia, poor and dependant [12].

Nursing is a dynamic and supportive occupation whose main role is to take care of patients [1]. State that absence of well trained and expert nurses may be due to negative attitudes toward the elderly, and this may play a pivotal role in quality of healthcare of patients. Age discrimination leads to poor healthcare services to the elderly. Some believe that a limited healthcare is a kind of age discrimination or ageism and some other pose high expenses for limited outcome [13]. Many elderly persons are hospitalized one or several times in hospital during their life time [6]. And almost 90% of nursing services are offered to the elderly [14]. And also individuals' attitude is formed or change under the influence of different factors. So it is essential to first, study steps to know the factors which play role in cultivation of these attitudes so that we can play more attention order to enhance quality of healthcare services of elder patients. This study conducted in order to reach the same goal (i.e. to study ageism) in nursing healthcare to hospitalized elder patients.

MATERIALS AND METHODS

The present study is a correlational research sought to specify the relation between ageism and some demographical aspects in offering nursing healthcare to the elderly hospitalized at Alzahra hospital of Isfahan.

Statistical population of this study is all nurses working in different units of Alzahra hospital of Isfahan (except those working in pediatric and NICU unit as they have no contact to elderly patients) in 2014. Through an availability sampling, 275 (93 male and 182 female) nurses were selected as statistical sample. Research environment was Alzahra hospital of Isfahan. This hospital has got different units of internal medicine, surgery, tocology, pediatric, Emergency, plasma freeze, neurology, skin, hemo dialysis, nephrology, graft, blood & oncology, rheumatology, digestion, CCU, NICU, and ICU. All of these units were selected as research environment. Research participating criterion: nurses should work in one of this hospital's unit and should have BA or MA certificate and be willing to cooperate. Research cancelling criterion: if a nurse did not have fill the form due to disinclination to take part in the study. Instrument used in this study was researcher designed questionnaires including 38 questions with likert scale design from quietly agree to quietly disagree. This questionnaire was designed to study the knowledge concerning the elderly and attitudes toward them. Grading method was on the basis of 5-item likert scale (quietly agree to quietly disagree) from 5 to 1.

Justifiability of questionnaire was confirmed by 6 reverent members of faculty of nursing and midwifery at Islamic Azad University of Khorasgan. Stability of that was also obtained through Cronbach's Alpha coefficient. Data analysis was used at descriptive statistical level (frequencies, percentage, mean and diagrams) and at inferential statistic (independent t tests, variance cross call valise, Pierson correlational coefficient)

RESULTS

Table 1. Absolute and relative Frequency distribution of research units according to level of knowledge related to old age

Level of knowledge	Number	Percentage	Mean	Standard deviation
Low	32	11.6		
Mid	153	55.6	3.38	.61
High	90	32.7		
Total	275	100.0		

According to findings concerning knowledge related to old age, this knowledge was in 11.6% of nurses in a low level, middle level in 55.6% of nurses and 32.7% of nurses have got high level knowledge in this respect. Also as far as 5-item likert continuum is concerned, the mean and standard deviation of this knowledge were 3.38 and 0.61 respectively.

Table 2. Absolute and relative Frequency distribution of research units according to level of attitude toward old age

Level of attitude	Number	Percentage	Mean	Standard deviation
Negative	23	8.4		
Neuter	225	81.8	3.06	.41
Positive	27	9.8		
Total	275	100.0		

As shown in the table above, attitude toward old age and elder patients was 81.8% neuter. According to 5-item likert continuum is concerned, the mean and standard deviation of this attitude were 3.06 and 0.41, respectively.

Table 3. Mean of attitude in research units as far as field variables are concerned

Variables	Category	Mean	Standard deviation	statistic	p-amount
Sex	male	3.14	.38	t=2.406	.017
	female	3.02	.42		
Age	Under 30years old	3.11	.46	F=1.202	.302
	31-40	3.02	.41		
	more than 40 years old	3.08	.30		
Educational level	B.A	3.05	.42	t=1.694	.091
	M.A	3.18	.31		
Marital status	single	3.07	.40	t=.051	.959
	married	3.07	.42		
Occupational record	lower than 10 years	3.09	.46	F=1.284	.279
	11-20 years	3.00	.29		
	21-30 years	3.04	.19		
Income	1-1.5 million	3.07	.41	F=2.941	.055
	1.5-2 million	3.02	.31		
	more than 2 million	3.19	.49		
Ethnicity	Turkish	3.12	.54	$\chi^2=.743$.690
	Bakhtiyari	3.10	.37		
	Persian	3.06	.39		
Passing old age training term	yes	3.04	.42	t=1.468	.143
	no	3.12	.39		
Living with elder people	yes	3.05	.41	t=0.650	.516
	no	3.09	.42		
Presence of the elderly in family or relatives	yes	2.97	.37	t=1.792	.074
	no	3.08	.42		

According to results of the study, attitudes in male nurses were meaningfully more negative than females ($p<0.05$) but as far as attitudes toward the elderly was concerned, there seen no meaningful difference in different age groups. Also according to results of independent t test, there has seen no meaningful difference in attitudes toward elder patients of nurses with BA and MA educational degree, single or married ones, and this attitude of nurses as far as their income level was concerned($p>0.05$).

Attitudes toward elder patients was a bit more positive in nurses who participated in old age training terms and those who live with elder persons or have got an elder person in their family or relatives. But there was seen no meaningful difference between these two groups according to the results of independent t test ($p<0.05$).

DISCUSSION

The present study aimed at specifying the relation between ageism and some demographical aspects in offering nurses care to elder patients hospitalized at Alzahra hospital of Isfahan. Obtained results concerning knowledge related to the elderly show that this knowledge is in 11.6% of nurses in a low level in 55.6% in a mid level and in 32.7% of them in a high level. Also according to 5-item likert continuum, the mean of knowledge score related to elder patients for nurses was 3.38 with a standard deviation of 0.41. In different studies, the knowledge of nurses concerning elder persons was studied and different results were reported.

In a study conducted by Tabiee et al (2010) which aimed at specifying the knowledge related to care of elder patients suffering from cardiovascular diseases, on 81 nurses, the mean of knowledge score was 8.65 ± 3.37 , the rank of 21% of nurses was good & 53.1 of them were weak in ranking. Asgari zade mahani et al (2007) show that nurses participated in their research allocated 54% of total score of knowledge to themselves. Findings of this study confirm loss of nurse' knowledge related to old age process.

Welford (2014), in investigating the knowledge of nursing students and nurses who works related to elder patient's care, demonstrates that not nursing students nor nurses have got sufficient knowledge in this respect. But in Modupe et al (2013) it was showed that nurses have got a good knowledge concerning old age process and old patient's care. Topaz & Doron (2013) state that that nurses have good amount of knowledge and show that knowledge concerning old age is a strong predicator to make attitudes toward the elderly people. Findings of this study concerning attitudes toward the old age show that this attitude is in 8.4% of nurse as negative, in 81.8% neuter and in 9.8% of them positive. Also according to 5-itemlikert continuum mean of attitude score related to old age was for sample nurses 30.6 with a standard deviation of 0.41. Concerning the attitude toward the elderly, there conducted various studies which present different results. Artishedar et al (2014) evaluate this attitude toward the elderly as positive.

Pourfarzad et al(2014) , in specifying attitudes of nursing students and instructors related to elder patients' care, show that instructors (3.69 ± 0.42) have got a more compatible attitudes than students (3.45 ± 0.34) which is a meaningful statistical difference ($p=0.01$).

Most nursing students (23.6%) and instructors (7.72%) have a mid level of attitude toward old patients' care. Also Tabiee et al (2009) show that mean of attitude score toward the elderly was 41.44 ± 3.81 ; 5.23% of nurses has a good rank and 55.6% has weak rank. And in Hamedani et al (2008) which was conducted in order to specify nurses attitude toward physical care of elder patients, it was indicated that nurses has got a neuter attitude in this respect. In Asgari zade mahani et al (2003), the attitude of nurses towards elder persons was investigated and result showed that nurses took 88.7% of is a field study and investigated attitudes of nurses showed that it was a neuter attitude in research units.

In turkey, Polat et al (2004) conducted a research onto perception and attitudes of nurses and physicians toward elder patients and demonstrated that the total score was 80.02 ± 2.64 for nurses and 83.17 ± 9.09 for doctors which had a meaningful difference. In general, this attitude and perception of nurses and doctors was positive towards elder patients. Modupe et al (2003) also indicates a positive attitude toward old patient's care.

Also in Nigeria, and Mellor et al (2003) in Australia showed that nursing students and nurses have got a positive attitudes toward elder patients. While Welford (2014) demonstrates that nursing students and nurses have not got a sufficient positive attitude. Topaz et al (2013), in investigating nurses' attitude toward elder hospitalized patients, showed that most of research samples have a negative attitude toward the elder patients. It seems that this difference in nurses' attitude toward elder patients can also be come from nurses' knowledge and can be due to temporal, geographical, cultural and social variable which govern the research environments or be under the influence of difference of questions evaluating attitudes in different studies.

Mousavi et al (2014) and Hosseini Seresht et al (2006) showed that females have got a more positive attitude in offering old patient's care. This issue can somehow be come from our community's social criteria which know care as women's task. To be woman, child's birth and be mother has an apropos impact in forming a positive attitude among female healthcare takers [23]. Also sex difference can also play role in specifying the results.

Comparison concerning attitudes of nurses toward elder patients indicated no meaningful difference among different age group. But in Hamedani et al (2003) and Hosseini seresht et al (2006), there exists a meaningful relation between age and kind of attitude toward elder patients. The more age gets, the more attitudes become positive. Also there was seen no meaningful difference between attitudes of MA and BA nurses which is in agreement with other previous studies' results [15, 22, 21, 19]. No meaningful difference was seen between attitudes of single and married nurses. While in Mousavi et al (2014), there was a meaningful difference between attitudes of nurses and their marital status in physical domain. As married individuals has got a more positive attitudes than single ones. in Tabiee et al (2010), married nurses have got a higher level of knowledge concerning the physical, social and educational care of elder patients , as in this research getting married and having family lead to more attention to the elderly. There was seen no meaningful difference between attitudes of nurses toward elder patients with different income level. In several studies, results confirm the fact that this attitude has no meaningful relation with educational level [12, 15, 21, 19].

One of the reasons of inexistence of a meaningful relation between educational level & type of nurse's attitude in the present and previous studies may be the absence of a considerable difference in educational level of participated nurses in research. But in Sanagu et al (2011), education had a meaningful relation with attitudes toward the elderly and individuals with higher educational level had more negative attitude toward them.

This research was conducted with all community members and may be the absence of moral commitment of individuals in Sanagu et al (2011), has influenced the results. In comparison of attitudes toward the elderly, there

was seen no meaningful difference in ageism between nurses of different ethnicities (whether Persian, Turkish or Bakhtiyari). But in Topaz & Doron (2013), there was a difference toward the elder people in different ethnic groups. This fact that in our country, ethnicity has not much influence on attitudes toward the elderly, maybe because in all ethnic groups of Iran elder people have got a good place and this cultural thought is influential in individuals' function. In some ethnic groups, they may pay more attention to this fact but in general, all ethnic groups attitude is positive on the basis of formed cultural beliefs to this issue. Attitudes toward the elder patients was more positive in nurses who passed educational old age training term, although there was seen no meaningful difference. This is may be due to the fact that there is no sufficient education and these educations should be more expanded and continuous. Also attitudes toward nurses who lived with an elder person were a bit more positive but no meaningful difference was seen between these two groups. Results of Hamedani et al (2008) confirmed results of the present study. But Hossein Seresht et al (2006) demonstrates a meaningful relation between positive attitudes toward care of elder patients and presence of elder people in family.

CONCLUSION

Presence of an elder person in family is regarded as a value of that family and has a positive impact on attitudes of that family's children. Presence of an elder person and feelings of individuals to her/him can be effective on individual attitude toward other elderly persons and grew the feeling of communion in individuals. Attitude toward the elderly was a bit more positive in nurses who had an elder person in their relative but no meaningful difference was seen between these two groups. Interaction with an old person can influence the attitude. Results of this study can be effective in decreasing ageism and increasing healthcare of elder patients because through identification of effective factors of this phenomenon, we can pay attention to the mentioned factors in our programs.

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