Original Research Paper



Nursing

ASSESSMENTOF ATTITUDE TOWARDS AGING AMONG OLDER ADULTS

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ABSTRACT Aging is a process of getting older. As an individual embarks on the journey of life, he undergoes series of changes within himself; it can be physical, social, emotional and spiritual. The individuals who adjust themselves according to these changes are subjected to be less likely prone to develop negative perception towards aging process.

Objectives of the study- The objective of the study were to assess the attitude of older adults towards aging and to find out the association of attitude score with selected demographic variable.

Methods- Quantitative descriptive study was carried out in selected villages of District Sirmour, H.P among older adults of age group 50-75 years. Using non probability purposive sampling technique, 80 older adults between the age group 50-75 years were included in the study from the selected areas. Subjects were interviewed using self structured questionnaire for socio demographic variables and Modified rating scale for assessing Attitude towards aging. Data was analyzed using descriptive statistics to assess frequency and percentage distribution and inferential statistics (chi square) to assess association of demographic variable and attitude score.

Results- The results reveal that more than half (53.75%) of the older adults had neutral attitude towards aging while 43.75% had positive attitude and remaining 2.5% had negative attitude. There is a significant association found between attitude score with age, education, occupation, monthly income, religion, relationship with family, type of family and area of residence at the level of (p<0.05) and non significant relationship found between attitude and other socio demographic variables i.e. gender, marital status and any history of illness at the level of (p<0.05). **Conclusion-** We as nurses must continue to remind and update the community people about normal processes and changes related to aging.

KEYWORDS: Aging, attitude, rating scale, older adults

1. INTRODUCTION

Aging is a natural process. In the words of Seneca, "old age is an incurable disease" but more recently, Sir James Sterling Ross commented: "you do not heal old age. You protect it; you promote it; you extend it". Old age should be regarded as a normal, inevitable biological phenomenon. The number of elderly will continue to grow, and there will be increased number of older adults as compared to number who are alive today. This will pose challenges for a variety of system specially the healthcare system. The greater variety of health services to provide for the multiple types needs of older adults and creativity in devising and implementing novel ways of providing services will be given priority².

According to WHO, between 2015and 2050, the proportion of the world's population over 60 years will nearly double from 12% to 22%. By 2020 the number of people aged 60 years and older will outnumber children younger than 5 years. By 2050 the world's population aged 60 years and older is expected to total 2 billion up from 900 million in 2015. Today 125 million people are aged 80 years and above'. According to population census 2011 of India, there are nearly 104 million elderly persons aged 60 years or above in India, 53 million females and 51 million males. A qualitative study was conducted by Birkeland et al (2009) to know about coping in elderly with being sick and living alone. The finding reports that the elderly were able to adapt and perform different activities that did not require any physical strength, even if physical constraints put limits on their level of activity. Findings showed that to accept the situation was the main coping strategy used but the acceptance was colored by a resigned and passive acceptance8.

Need of the Study

A survey conducted by WHO showed that old aged people have negative attitude towards aging as they perceive themselves as a burden for society, leading to depression and social isolation. Also, it was reported that the people with negative attitude do not recover from disabilities and live an average of 7.5 years less than the people with positive attitude ¹³. In 2nd year when we were posted in community area, we concluded that some people had thinking that aging is a normal process of living and had a positive attitude towards aging as they considered that have higher maturity level that differentiates them from other age groups, whereas some neglected themselves, they have had negative perception towards aging as they believe that they have become older and so they are deprived of all the pleasures of life as in early adulthood life. Some elderly people were considered as burden by their family members and even some were suffering from certain

diseases which created a negative perspective in their mind towards aging. So, we have shown our interest in the topic for a research project to find out the attitude of elders towards aging in our community area.

Research Statement

A descriptive study to assess the attitude towards aging among older adults aged 50-75 years residing in selected villages of district Sirmour, Himachal Pradesh.

Objectives

- 1. To assess the attitude of older adults towards ageing.
- To find out the association of attitude score with selected demographic variable.

Assumption

1. All older people have negative attitude towards ageing.

Hypothesis

 \mathbf{H}_0 - There will be positive attitude of older adults towards ageing.

 \mathbf{H}_{i} -There will be negative attitude of older adults towards ageing.

Operational Definition

Attitude: To find out the perception of human regarding physical, psychological and psychosocial changes that results due to increase in age.

Aging: It is the normal process of maturation which results in certain physical and psychological changes, declining capacity to perform the task than before as in early adulthood life.

2. MATERIALS AND METHODS

This chapter describes how and under what conditions the empirical data underlying this thesis have been produced and utilized.

Research Approach: In this study, Quantitative approach will be applied.

 $\textbf{Research Design}: Non\,experimental, descriptive\,research\,design.$

Research Variables: Attitude towards aging

Demographic Variables: The demographic variables included in this study were age, gender, education, occupation, monthly income, religion, relationship with family members and others, type of family,

place of residence and any history of illness.

Research Setting: The research was conducted in the selected villages of District Sirmour, Baru Sahib.

Population: Older adults aged 50-75 years from selected villages of district Sirmour, Baru Sahib.

Sample: In study the sample are older adults aged 50-75 years from the selected villages of district Sirmour-Baru Sahib.

Criteria for Sample Selection

Inclusion criteria- Inclusion criteria for the current study consist of those:

- 1. Older adults aged (50-75) years.
- 2. Those who understands English and Hindi.

Exclusion criteria- Exclusion criteria for the current study consist of:

- (1) Those who are not present at the time of study.
- (2) Those who are not willing to participate in study.
- (3) Those who have mental illness.

Sampling Technique: Non-probability purposive sampling was chosen.

Sample Size: The sample size for our research study was 80.

Development And Description of Tool: The development of attitude to ageing questionnaire(AAQ) is done by K. Laidlaw et al is a self-report measure with which older people themselves can express their attitude to the process of ageing. The development of AAQ followed a coherent, logical, and empirical process taking full account of relevant gerontological knowledge, modern and classical, psychometric analytical methods.

Description of the Tool: The **Attitude towards aging questionnaire** consists of 24 items comprising 3 facet models based on psychosocial loss, physical changes and psychological growth which is modified into rating scale.

The following steps were carried out for modifying the tool.

- Review of Literature.
- Consultation and discussion with guide and nursing experts.
- Personal experience and discussion with the colleagues.

The tool consists of 2 sections:

SECTION A–This section consists of demographic variables of subjects which includes age, gender, education, occupation, monthly income, religion, relationship with family members and others, type of family, place of residence and any history of illness.

SECTION B- This section includes statements related to attitude towards ageing. This tool is divided into 3 domains:

- Physical changes
- · Psychological changes
- · Psychosocial loss

Physical changes- This domain consist of 8 statements that includes feeling old, identity not being defined by age, energy and health at present given their age, physical health problems not holding them back and exercise regularity and importance.

Psychological changes- This includes believing that one's life has made a difference, seeing age as a privilege and as pleasant, giving and being a good example to others and felt wisdom.

Psychosocial loss- This includes whether older adults equates old age with being lonely depressed, feeling currently disengaged from society and excluded from things as they get older, are losing their physical independence and having difficulty making friends and talking about things.

The subject being agree with the statements of physical and psychological domains were given 3 score, 2 for uncertain response and 1 for being disagree. The psychosocial loss domain consists of negative statements; therefore, each agree response was given 1 score, 2 for uncertain and 3 for disagreeing.

The total possible score of the all 3 domains was 72. The score were categorized using researcher on method as:

ATTITUDE	SCORE	PERCENTAGE
Positive attitude	57-72	79-100%
Neutral attitude	41-56	56-78%
Negative attitude	24-40	<56%

Reliability of Tool: -To ensure reliability the tool was pre-tested before the actual data collection began. It was evaluated by split half method by using Karl's Pearson's formula the value for attitude towards ageing rating scale was r=0.8. The value was reliable to conduct main study.

The significant association between the selected demographic variables and attitude scores will be analysed by using chi square.

Ethical Considerations:-

- Permission was obtained from the Research and Ethical Committee of the Eternal University, Baru Sahib, and H.P.
- Permission was obtained from the local government authorities of selected villages of District Sirmour- Baru Sahib.
- Before conducting the study, informed written consent was obtained from the study participants.

Pilot Study: The data has been obtained from 8 samples by using modified rating scale. The samples that were included in Pilot study were not included in main study. The investigator introduced self and took written consent from the respondents. The reliability was checked by split half method using Karl Pearson's formula. The reliability value was r=0.8.

Plans For Data Analysis: The data collected from older adults was to be grouped and analyzed by statistical measure in terms of objectives:

1. Assess the attitude towards ageing.

2. The significant association between the selected demographic variables and attitude scores will be analysed by using chi square.

Stastical Analysis: Data has been analysed manually using two methods of statistics i.e. descriptive and inferential statistics. In descriptive statistics we calculate frequency and percentage distribution. In inferential statistics we use Chi square method.

3. RESULT & ANALYSIS:

In current study data analysis is divided into three sections:

Section-1: Frequency and percentage distribution of socio demographic variables of older adults

Section-2: Frequency and percentage distribution of attitude scores

Section-3: Association of attitude score with socio demographic variables

Section-1: Frequency and percentage distribution of socio demographic variables of older adults

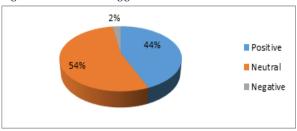
Table 1: Frequency and percentage distribution of socio demographic profile of study subject

Sr.no.	Demographic variables		f	%	
1	Age in years	50-55	31	38.75	
		56-60	14	17.5	
		61-65	7	8.75	
		66-70	14	17.5	
		71-75	14	17.5	
2	Gender	Male	46	57.5	
		Female	34	42.5	
3	Marital status	Married	61	76.25	
		Unmarried	0	0	
		Divorced	3	3.75	
		Widow	16	20	
4	Education	Non formal	21	26.25	
		Primary	25	31.25	
		Senior secondary	26	32.5	
		Graduation	8	10	
5	Occupation	Unemployed	28	35	
		Private	25	31.25	
		Government	14	17.5	
		Self employed	13	16.25	
		Retired	0	0	

6	Monthly income in Rs	< 5000	28	35
		5001-10000	21	26.3
		10001-15000	9	11.3
		>15001	22	27.5
7	Religion	Hinduism	61	76.3
		Sikhism	19	23.8
		Muslim	0	0
		Christian	0	0
8	Relationship with	Good	69	86.3
	family and other	Satisfactory	10	12.5
		Bad	1	1.3
9	Type of family	Nuclear	42	52.5
		Joint	38	47.5
		Extended	0	0
10	Place of residence	Urban	28	35
		Rural	52	65
11	Any history of illness	Yes	46	57.5
		No	34	42.5

Section-2: Frequency and percentage distribution of attitude score.

Figure 1: Pie chart showing gender distribution



The data presented in fig 4.2.1 shows that 43.75% had positive attitude towards aging and majority of the sample (53.75%) had neutral attitude while only 2.5% of negative attitude.

Section-3: Association of attitude score with socio demographic variables. Table 2: Association of attitude score with socio demographic variables.

Sr.No	Demographic variables		Attitude			X2	df	Sig.
			Positive	Neutral	Negative			
1	Age in years	50-55	17	15	0	9.444	8	0.306*
		56-60	6	7	0			
		61-65	4	4	0			
		66-70	5	7	1			
		71-75	2	11	1			
2	Gender	Male	27	19	0	13.08	2	0.0018
		Female	7	25	2			
	Marital status	Married	30	31	0	14.06	4	0.007
		Unmarried	0	0	0			
		Divorced	2	1	0			
		Widow	2	12	2			
ļ	Education	No formal	6	15	0	7.911	6	0.245*
		Primary	11	12	2	7		
		Senior sec.	12	14	0			
		Graduation or above	5	3	0			
5	Occupation	Un employed	7	19	2	11.61	6	0.071*
		Private	14	11	0			
		Government	9	5	0			
		Self employed	4	9	0			
		Retired	0	0	0			
<u> </u>	Monthly income in Rs.	<5000	9	17	2	5.901	6	0.434*
		5001-10000	11	10	0			
		10001-15000	5	4	0			
		>15001	9	13	0			
,	Religion	Hinduism	24	35	2	1.489	2	0.475*
		Sikhism	10	9	0			
		Muslim	0	0	0			
		Christian	0	0	0			
3	Relationship	Good	31	36	2	4.7	4	0.383*
		Satisfactory	2	8	0			
		Sad	1	0	0			
)	Type of family	Nuclear	20	21	1	0.952	2	0.621*
		Joint	14	23	1			
		Extended	0	0	0	1		
10	Place of residence	Urban	9	20	0	4.157	2	0.125*
		Rural	25	24	2	1		
1	Any history of illness	Yes	9	36	1	24.09	2	0.000
		No	25	8	1			

3. CONCLUSION:

In this study we calculated the attitude score of older adults towards aging shows that more than half (53.75%) older adults had neutral attitude towards aging while 43.75% had positive attitude and remaining 2.5% had negative attitude.

The present study shows that there is a significant association found between attitude score with age, education, occupation, monthly income, religion, relationship with family, type of family and area of residence at the level of (p<0.05) and non-significant relationship found between attitude and other socio demographic variables i.e. gender, marital status and any history of illness at the level of (p<0.05).

NURSING IMPLICATIONS

The finding of the study has implications in different branches of nursing practice, nursing education, nursing research and nursing administration

NURSING PRACTICE: Nurse should assess old age people having negative attitude towards aging residing in selected villages of district Sirmour. Nurses should create awareness regarding aging is a normal process of life and reduce negative perception of old age people towards aging.

- Findings of the study can be the platform for designing better prevention from the several conditions like depression and social isolation. These conditions further create complication like inability to recover from disabilities.
- Health care personals should take initiative in conducting awareness programmes, mass media, and campaigns regarding aging and changes during aging process.

NURSING EDUCATION: The study has an important place in nursing education and other fields. The step should be taken to reduce the negative attitude towards aging as they perceive themselves as a burden for society and for their family members. It is important to assess attitude of old aged people towards aging and its impact on their health and their life style. The nurses educate family members and society to adapt and accept the time related changes occurring in old age people so that they don't feel themselves as a burden on the family member and the society.

NURSING ADMINISTRATION: The nurse's manager has an opportunity to promote positive attitude towards aging and reduce the incidence of occurrence of depression, social isolation and further complications like inability to recover from disabilities. The nurse administrator should take active part in arranging awareness campaign for old age people toward aging as a normal process of life.

NURSING RESEARCH: Research study should be conducted on "attitude towards aging among older adult" on a large sample to validate and generalized its finding. This study requires attention on a larger scale because elderly population themselves and society as well stigmatize elderly population. And through this research project community will be able to de stigmatize negative perspective towards elderly population.

RECOMMENDATIONS: A similar study can be replicated on a wider sample to help validate and generalized the findings to the population unlike the present study which was conducted with the small sample. A study can be undertaken to increase our understanding regarding attitude of old aged people towards aging.

CONCLUSIONS: This chapter deals with the summary of the study, implication of nursing practice, nursing education, nursing practice, nursing administration, nursing research, limitation and recommendation for future research. This chapter deals with the conclusion drawn based on the findings of the study. The findings reveal that the attitude score of older adults towards aging shows that more than half (53.75%) of the older adults had neutral attitude towards aging while 43.75% had positive attitude and remaining 2.5% had negative attitude. There is a significant association found between attitude score with age, education, occupation, monthly income, religion, relationship with family, type of family and area of residence at the level of (p<0.05) and non-significant relationship found between attitude and other socio demographic variables i.e. gender, marital status and any history of illness at the level of (p<0.05).

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