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Geriatric Health

AWARENESS OF SUBJECT OF GERIATRICS AND GERIATRIC CARE AMONGST THE FACULTY OF A MEDICAL COLLEGE

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ABSTRACT **Introduction:** The increasing demand for trained geriatric healthcare professionals is a pressing concern in the era of the "silver tsunami," marked by the rapid aging of populations globally. In India, medical colleges play an important role in preparing healthcare providers who are equipped to meet the unique needs of the elderly. Since the medical faculty plays a critical role in shaping future healthcare providers, this research focuses on assessing the awareness of geriatrics and geriatric care among the faculty of a medical college. By evaluating their knowledge and attitudes, this study aims to identify gaps and opportunities to enhance the training and preparedness of medical professionals to address the growing needs of an aging population. **Aims & Objectives:** This research aims at finding out the knowledge, attitude, and practices (KAP) of – Awareness of the subject of geriatrics and geriatric care among the faculty of a medical college. **Materials & Methods:** A pre-designed e-questionnaire having 28 questions, developed using the Delphi method, was employed among the faculty of a medical college to assess their awareness, perceptions, and acknowledgment of geriatrics, as well as their sensitisation to the subject. **Result:** Faculty members were found to have limited knowledge and awareness of geriatrics, highlighting a significant gap in the current medical education framework. Geriatrics has been missing from postgraduate and faculty curriculum for years, leaving a gap. To address this, a structured training module should be developed to guide faculty in understanding and teaching geriatrics effectively. This module will empower faculty to integrate geriatrics into undergraduate education. Therefore, this step is crucial for preparing future healthcare professionals to care for an aging population with confidence and compassion.

KEYWORDS : Geriatrics, Medical Faculty, Awareness, Sensitisation, Faculty training.

INTRODUCTION

Geriatrics is a medical specialty that focuses on the unique healthcare needs of older adults. It is a comprehensive approach to managing the physical, mental, and social challenges associated with aging. Medical research often categorises individuals as elderly at 65 years of age or older [1]. However, defining elderliness by age alone has its drawbacks, as it overlooks the wide variation in health, functionality, and how people experience aging. Factors like lifestyle, genetics, and healthcare access play a huge role in shaping how someone ages. To truly understand and meet the needs of older adults, we need to look beyond just numbers and consider the full picture of their physical and social realities. Raising awareness about geriatrics emphasises its importance in improving the quality of life for the elderly and ensuring that they receive appropriate care tailored to their needs.

The world is experiencing an unprecedented increase in the number of older adults, with many countries seeing a rise in life expectancy. The United Nations predicts that by 2050, over 2 billion people will be aged 60 or older. This trend has created an urgent need to address the health and social care requirements of seniors [2]. Awareness about the growing aging population can prompt governments, healthcare systems, and communities to allocate more resources toward geriatric care and prepare for the challenges of an aging society.

The global population is projected to grow significantly, rising from 7.7 billion in 2019 to 8.5 billion by 2030 (a 10% increase), 9.7 billion by 2050 (26%), and 10.9 billion by 2100 (42%). Sub-Saharan Africa is expected to experience the most dramatic growth, with its population nearly doubling by 2050 (99%). Other regions will see varying growth rates between 2019 and 2050, including Oceania (56%), Northern Africa and Western Asia (46%), Australia/New Zealand (28%), Central and Southern Asia (25%), Latin America and the Caribbean (18%), Eastern and South-Eastern Asia (3%), and Europe and Northern America (2%). According to the World Population Prospects 2019: Highlights, published by the UN Department of Economic and Social Affairs, the global population is expected to peak near the end of the century at approximately 11 billion.

The report underscores significant demographic shifts, particularly the aging of populations due to longer life expectancy and declining fertility rates. A growing number of countries are experiencing population declines. These changes in population size, composition, and distribution have profound implications for achieving the Sustainable Development Goals (SDGs), which aim to enhance economic prosperity, social well-being, and environmental sustainability.

Notably, nine countries are projected to account for over half of the global population growth by 2050: India, Nigeria, Pakistan, the Democratic Republic of the Congo, Ethiopia, Tanzania, Indonesia, Egypt, and the United States. By 2027, India is expected to surpass China as the world's most populous country. By 2050, one in six people globally will be aged 65 or older (16%), compared to one in eleven in 2019 (9%). Regions such as Northern Africa, Western Asia, Central and Southern Asia, Eastern and South-Eastern Asia, and Latin America and the Caribbean are expected to see their share of older populations double. In Europe and Northern America, one in four people could be aged 65 or older by 2050. Notably, for the first time in history, people aged 65 and older outnumbered children under five in 2018. Furthermore, the number of individuals aged 80 or older is projected to triple, rising from 143 million in 2019 to 426 million by 2050.[3]

The population aged over 60 years in India is rapidly increasing due to advancements in healthcare, improved living conditions, and declining birth rates[4]. As of 2022, individuals aged 60 and above constituted approximately 10.5% of India's total population. This figure is projected to rise significantly, reaching 20.8% by 2025. This demographic shift reflects India's transition into an aging society, similar to trends seen in developed countries [5,6]. The increasing proportion of elderly individuals presents several challenges and opportunities for healthcare, social security, and economic systems.

A study conducted across 22 countries highlighted significant perceptions regarding geriatric care. Over half of the respondents (55%) indicated that geriatric care was not recognised as a primary specialty in their respective countries, underscoring a potential gap in its formal integration into healthcare systems. Nearly half of the participants expressed the view that older patients, particularly those who were acutely ill, undergoing subacute rehabilitation, or living with dementia, should be under the care of geriatricians. Furthermore, an equal proportion of respondents believed that geriatricians should also take on responsibilities for managing nursing home residents and orthogeriatric patients. These findings emphasise the need for a broader acknowledgment of geriatric care as a vital specialty, alongside an expanded role for geriatricians in various settings to address the complexities of aging population [16].

Key Implications Include:

1. **Healthcare Demand:** With the elderly population doubling, there will be a sharp rise in demand for geriatric care services, chronic disease management, and age-related medical interventions. [7][8]
2. **Long-term Care Needs:** The rise in life expectancy also means a growing need for long-term care facilities and home-based care systems for elderly individuals.[9][10]
3. **Workforce And Economy:** With a larger proportion of the population retiring, the dependency ratio will increase, potentially straining pension systems and impacting economic growth. [11][12]
4. **Social Support Systems:** Family structures in India are changing, with nuclear families becoming more common, which may reduce traditional caregiving roles for the elderly, necessitating government-supported programs.

In the Western world, the process of aging is supported by a robust healthcare infrastructure and a comprehensive social support system that addresses both the medical and non-medical needs of older adults.

These countries have developed well-organized welfare mechanisms that aim to ensure dignity, independence, and a reasonable quality of life for the elderly population. One of the key features of this system is the provision of financial support to individuals and families who care for older or disabled persons. Social welfare payments, such as dependency benefits and caregiver's allowances, offer essential monetary assistance that helps ease the economic burden of caregiving. These structured benefits not only recognize the significant role of informal caregivers in society but also encourage a shared responsibility between the state and its citizens in elder care. By integrating health services with social welfare measures, Western societies demonstrate a holistic approach to aging, wherein the physical, emotional, and financial well-being of the elderly is prioritized within public policy frameworks [18].

Awareness of geriatrics among medical college faculty is essential to address the healthcare needs of an aging population and provide comprehensive medical education to future doctors.

Two Key Reasons Underscore Its Importance:

1. Aging Population

With the global population aged 60+ expected to double by 2050 and India's elderly population projected to reach 20.8% by 2025, healthcare systems face increasing demand for geriatric care. Older adults often have multiple chronic comorbidities, such as diabetes, cardiovascular diseases, and cognitive decline, as well as unique syndromes like frailty, delirium, and polypharmacy. Faculty awareness ensures students are trained to manage these complexities, promote healthy aging, and address societal challenges like elder abuse and healthcare costs.

2. Comprehensive Medical Education

Geriatrics is often underrepresented in medical curricula. Faculty must advocate for its inclusion, focusing on interdisciplinary care, communication skills, ethical decision-making, and addressing ageism. Teaching advances in geriatric medicine, such as telemedicine and personalised care, prepares students for future innovations. Faculty awareness also ensures students develop a holistic, patient cantered approach to elderly care, equipping them to meet the challenges of a rapidly aging society. By understanding geriatrics, medical faculty can train students to provide competent, compassionate care, improving the quality of life for older adults and strengthening the healthcare system.

MATERIALS & METHODS

Study Design: Exploratory cross-sectional study
Study Setting: Private Medical College of Northern India
Study Population: Faculties of Medical College of Northern India

Study Size: The study population is about 50 including Assistant Professors, Associate Professors, and Professors attending a medical college of Northern India.

Sampling Technique: In view of this being an exploratory cross-sectional study, a Google form based on a structured toolkit approved from the experts in the field of geriatrics by Delphi method was sent to the respective facilities' social media platforms.

Data Collection: Data collection was conducted via pre-validated questionnaire containing relevant questions regarding awareness of geriatrics and geriatric care. The questionnaire was sent to the faculty via email as well as social media apps.

The data collection form contained details on demographics, knowledge attitudes, practices, and barriers & facilitators.

Data Analysis: Descriptive statistics such as percentages will then be calculated to summarise the data. The insights will provide rich insights into participants' KAP about awareness of geriatrics and of geriatric care.

Inclusion Criteria: Assistant Professors, Associate Professors and Professors attending medical college of Northern India.

Exclusion Criteria:

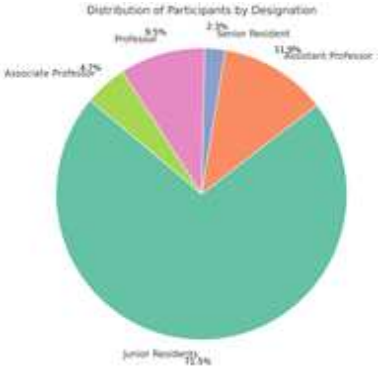
1. Undergraduate students of the medical college.
2. The non-medical faculties of the medical college.

RESULT

This section presents the findings of the cross-sectional survey conducted to assess the knowledge, attitudes, and practices (KAP) regarding Geriatrics and Geriatric care provision among faculty and postgraduate students of a medical college in Haryana. The results are organized into key subsections: demographic characteristics of the respondents, awareness levels about Geriatrics as a medical specialty, attitudes toward Geriatric care, knowledge of existing policies and provisions, current practices in managing elderly patients, and perceived barriers to effective Geriatric care. Quantitative data is summarised with descriptive and inferential statistics, highlighting significant trends and differences between faculty and postgraduate students.

Demographic Information

The majority of respondents were Junior Residents, comprising over half of the total participants (71.5%), followed by Assistant Professor 11.9% to the participant pool, while Professors accounted for 9.5%. Senior Residents represented the smallest groups constituting 2.3% of the sample.



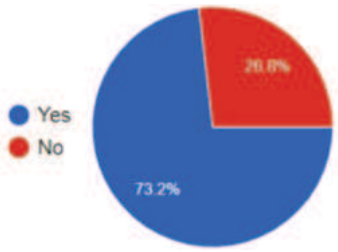
Knowledge

To assess the participants' knowledge of Geriatrics, a series of targeted questions were posed. These questions aimed to evaluate their understanding of key concepts, policies, and practices associated with Geriatric care.

The Inquiries Included:

1) Geriatric Syndrome

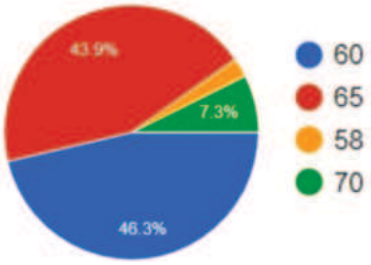
The survey found that 73.2% respondents were aware of geriatric syndromes, while 26.8% were not. And out of the people who said yes most named geriatric syndrome were dementia. Impairment and urinary incontinence.



2) Cut Off Age For The Elderly Population In A Developing Country

In developing countries, the cutoff age for defining the older population is often 60 years and above.

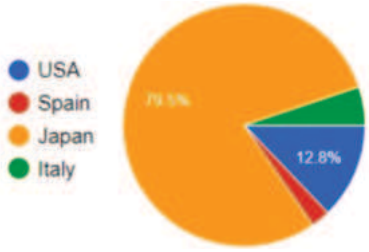
Only 46.3% of the people could answer correctly while the second most common was 65 years of age at 43.9%.



3) Country With The Highest Percentage Of Older Population In The World

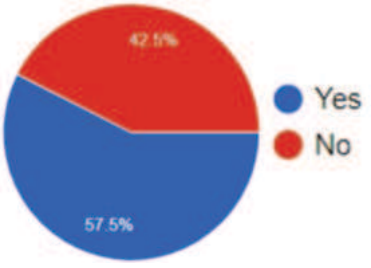
In developing countries, the cutoff age for defining the older population is often 60 years and above.

79.5% people selected Japan as the correct option. While the rest, opted as USA, Italy or Spain.



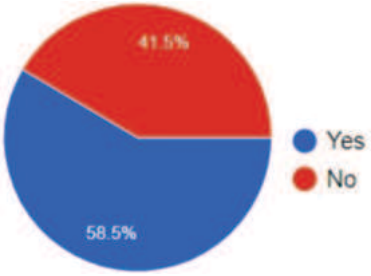
4) National Program For The Elderly

57.5% of respondents were aware of national programs or welfare benefits for older people provided by the Indian government. The most mentioned program was the National Programme for Health Care of the Elderly (NPHCE), while the most cited welfare benefit was the Indira Gandhi Old Age Pension Scheme (IGNOAPS).



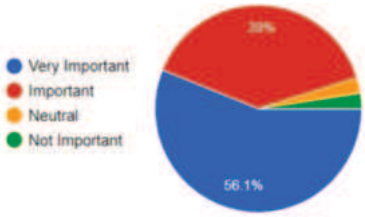
5) Awareness About Post Graduate Training In Geriatrics In India

The survey found that 58.5% respondents were aware of Geriatrics, while 41.5% were not. While some faculty members and postgraduate students recognised the importance of specialised education in geriatrics, only a small percentage were aware of formal PG training programs dedicated to geriatrics. This highlights a significant gap in awareness regarding the availability and structure of PG training in the field, pointing to the need for greater visibility and promotion of geriatrics as a specialised career path within medical education.



Attitude

This section examines the attitudes of medical faculty and postgraduate students towards geriatrics and elderly care in India. With an aging population, understanding these attitudes is vital for improving geriatric care. The survey highlights how faculty and students perceive the importance of geriatrics in medical education, the challenges in providing elderly care, and their interest in pursuing careers in the field.



1) Importance Of Geriatrics

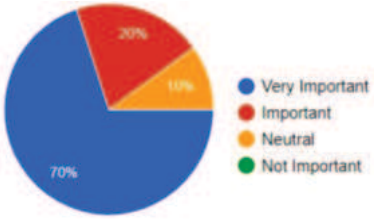
The survey determined that 56.1% of respondents considered Geriatrics to be “very important”, while 39% deemed it “important” emphasising a strong recognition of the field's relevance in today's healthcare landscape. This highlights a growing awareness among medical professionals of the critical need for specialised care for the aging population, reflecting the increasing acknowledgment of geriatrics as a vital component of medical education and healthcare practice in contemporary times.

2) Necessity Of Basic Training In Field Of Geriatrics At UG Level

The survey determined the necessity of basic training in geriatrics at the undergraduate (UG) level, the majority of respondents emphasised its importance. A significant 39% rated it as "most important" (1), while 36.6% placed it at a close second (2). Only a small percentage, 14.4%, rated it as moderately important (3), and even fewer considered it less essential, with 7.3% rating it as a 4 and 2.4% as a 5. These responses strongly indicate a widespread consensus on the need for foundational training in geriatrics at the UG level, underlining its relevance in preparing medical students to address the needs of an aging population.

3) Presence Of The Elderly In Society

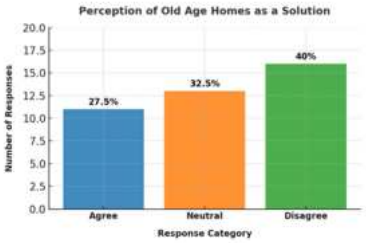
The responses reveal a strong societal value placed on the elderly, with 70% of respondents considering older individuals as "very important" and 20% deeming them "important." Only 10% remained neutral, and notably, no one disagreed with the notion that the elderly are important in society. This highlights a widespread recognition of the significance of the elderly, reflecting a positive societal attitude towards aging populations and suggesting a strong foundation for promoting geriatrics as a crucial area of healthcare.



The strong support for the importance of older individuals in society likely stems from several factors. Firstly, there is a growing awareness of the aging population in India and the essential role that elderly people play in families and communities. Many respondents may recognise the wisdom, experience, and cultural significance that older adults bring to society. Additionally, as the population ages, there is an increasing understanding of the need to address their healthcare and social needs, which could further influence the positive responses. Moreover, the rising importance of geriatric care in healthcare discussions might have shaped these responses, as people are

becoming more conscious of the challenges faced by the elderly, including healthcare, social isolation, and financial insecurity. The absence of negative responses ("not important") could reflect a societal respect for the elderly and a general sense of responsibility toward their well-being, particularly within a medical or healthcare context.

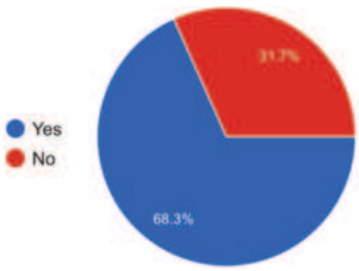
4) Provision Of Old Age Homes Or Assisted Living As The Solution For Managing The Elderly In Society



The most common response (32.5%) is a neutral stance (rating 3), suggesting that many people see both pros and cons to this approach.A significant number of people (22.5%) strongly agree (rating 5) that old age homes and assisted living are necessary solutions. On the other hand, 17.5% of respondents strongly disagree (rating 1), indicating that a portion of people believe alternative solutions, such as family care or community support, may be better.The split opinions suggest that a one-size-fits-all approach may not work. A combination of family support, community involvement, and assisted living options should be considered. The neutral responses indicate that people may not be fully aware of the benefits and drawbacks of old age homes. Educating the public on different elderly care models can help in forming informed opinions. Governments and organizations working on elderly care should focus on creating flexible policies that cater to both groups—those who prefer institutional care and those who advocate for alternative solutions.

Practices

1) Personal Experience: Riding For A Sick Elderly Family Member

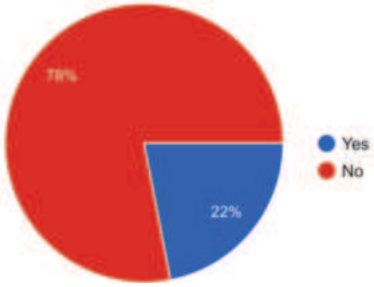


68.3% of respondents have been personally involved in riding for a sick elderly family member, while 31.7% have not.A large percentage of individuals take an active role in elderly care, highlighting the importance of family support in elder healthcare. The 31.7% who have not been involved may indicate a need for alternative support systems, such as professional caregivers or community services. Encouraging awareness and accessibility of caregiving resources could benefit families, particularly those who struggle with balancing responsibilities.

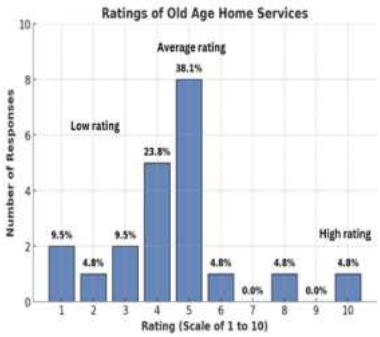
Most of the respondents had the aiding activity going on for a few years. The main challenges they faced during assisting in such activities were taking a leave from work as well as lack of communication. The respondents' views on how these challenges can be addressed were with patience and by increasing the awareness amongst doctors, hospital staff as well as the generalised public.

2) Visiting An Old Age Home In The Vicinity

The survey found that only 22% of respondents have visited an old age home in their vicinity, while the majority 78% have not.The high percentage of people who haven't visited suggests that many individuals may not be actively involved in elderly care outside their families.Various factors, such as lack of awareness, interest, or accessibility, might contribute to the low visitation rate.Since a majority of people have not visited old age homes, initiatives to increase awareness and encourage community engagement could be beneficial. Encouraging more visits through school programs, volunteer groups, and community outreach can help bridge the gap between the elderly and the younger generation.



3) Rating Of Old Age Home Services



The highest percentage of respondents (38.1%) rated the services at the old age home as a 5 on a scale of 1 to 10.The fact that most ratings cluster around 5 or lower implies that the old age home might not be meeting expectations effectively. With nearly half of the respondents giving low ratings (1-4), there may be concerns regarding facilities, staff behaviour, or overall care.The lack of high ratings (9-10) suggests that while some services are adequate, there is no overwhelming positive feedback indicating exceptional service. The feedback indicates a need for enhancements in care, amenities, and engagement activities to improve overall satisfaction.

The most frequently mentioned suggestions revolve around improving medical care and staffing. Many respondents emphasised the need for:

- Trained doctors and nurses for regular checkups
- Better infrastructure and sanitation
- Proper diet and physiotherapy
- Increased funding and financial support

There is a clear need to assign trained medical staff for regular checkups and ensure access to proper nutrition and physiotherapy. Many believe financial aid from the government and donations are necessary to improve overall conditions. Issues like sanitation, housing, and infrastructure must be addressed to provide a safer and more comfortable environment for the elderly. Encouraging youth participation and creating an inclusive environment for elderly engagement could enhance their mental and emotional well-being.

DISCUSSION

Our study provided valuable insights into doctors' knowledge, attitudes, and practices concerning geriatric care. It highlighted variations in their understanding of aging-related issues, their perceptions of elderly patients, and the approaches they adopt in providing care. These findings underscore the importance of targeted training and education to enhance the quality of care for the aging population.The attitude amongst the faculty of the medical college in Haryana ranges from low to moderate. Supporting this finding, research by Abdullah Al Ghailani et al. (2024) revealed that attitudes toward the elderly scored an average of 2.93 out of 5 among medical students and 2.92 out of 5 among doctors across four measured domains. The study also highlighted that overall knowledge in both groups was relatively low, aligning with trends reported in the existing literature.[13]

Our study found that approximately 68.3% of participants had personal experience caring for or accompanying sick elderly family members. This aligns with research by Rajvinder Samar et al., which highlights a connection between the quality of previous relationships

with older individuals and attitudes toward them. Positive relationships with older adults, such as grandparents or family friends, were associated with more favorable attitudes [14]. Similarly, intervention studies have shown that mentorship programs pairing community-dwelling healthy older adults with medical students can foster significant improvements in attitudes toward the elderly [15].

In our study, 70% of participants rated the presence of older individuals in society as very important, 20% considered it important, and 10% remained neutral. This highlights a strong acknowledgment from most participants about the value older people bring to society, although some respondents were indifferent. Supporting this observation, a study conducted by Abdullah Al Ghailani et al. (2024) revealed that 19.6% (n=27) of medical students surveyed believed older individuals do not contribute to society. This is an important insight, as it points to ageist perceptions within a group that plays a vital role in shaping societal attitudes toward aging. Such beliefs can perpetuate biases and stereotypes, making it clear that there's a need for more awareness and education about the contributions of older individuals. These findings collectively highlight the importance of promoting a more inclusive mindset across all areas of society [13].

Our study highlights a strong societal appreciation for the elderly, with 70% of respondents considering older individuals to be very important and 20% regarding them as important. Only 10% remained neutral, and notably, no respondents disagreed with the significance of older adults in society. These findings align with research by Evans et al. (2011), which emphasizes the meaningful contributions of India's elderly population, aged 60 and above, across multiple aspects of society—including agriculture, intergenerational caregiving, volunteering, and community engagement. Older adults also serve as vital sources of wisdom, cultural preservation, and moral guidance. Although the present study focuses on medical faculty rather than students, the relevance of these findings remains significant. Medical students, as future healthcare providers, are in the formative stages of developing their clinical attitudes and professional values. Their understanding and perception of geriatrics are therefore critical to the delivery of compassionate and competent care to the aging population. Given that faculty members play a central role in shaping the educational environment and influencing student perspectives, assessing faculty awareness and attitudes becomes essential. By ensuring that positive and informed views on older adults are integrated into medical training, faculty can contribute to cultivating a generation of physicians who are better equipped to address the unique needs of an increasingly elderly population, thereby promoting a more age-inclusive healthcare system [17].

CONCLUSION

This study highlights a significant gap in the awareness and understanding of geriatrics among medical faculty members, despite a strong societal recognition of the value and importance of older adults. While the majority of participants acknowledged the relevance of geriatrics and expressed positive attitudes toward the elderly, the findings also revealed a lack of structured knowledge, familiarity with national geriatric programs, and awareness of specialised postgraduate training in the field. This disconnect points to a critical need for greater sensitisation and education among faculty members—especially considering their vital role in shaping the perspectives and priorities of medical students.

Medical faculty are not just teachers; they are mentors and role models. Their attitudes and areas of emphasis influence how future doctors view different aspects of healthcare—including the care of older adults. In a country like India, where the elderly population is projected to double in the coming decades, it becomes increasingly important that those responsible for educating the next generation of healthcare professionals are themselves well-informed and attuned to the complexities of aging.

By investing in faculty development programs that include geriatrics as a core component, we can begin to close the gap. Structured training modules, interdisciplinary discussions, and practical exposure to geriatric care can equip faculty with the tools they need to integrate geriatrics meaningfully into medical education. This not only enhances the quality of education for students but also ensures that the evolving healthcare needs of India's elderly population are met with empathy, competence, and respect.

Ultimately, raising awareness and building capacity among medical faculty is not just an academic exercise—it's a crucial step toward creating a healthcare system that values its older citizens and is prepared to care for them with the dignity they deserve.

REFERENCES

1. Sabharwal S, et al. Heterogeneity of the definition of elderly age in current orthopaedic research. Springerplus. 2015;4:516.
2. United Nations, Department of Economic and Social Affairs, Population Division et al. World Population Prospects 2019: Highlights (ST/ESA/SER.A/423). United Nations; 2019.
3. Dey, S., et al. (2012). Health of the elderly in India: Challenges of access and affordability. In J. P. Smith & M. Majmundar (Eds.), Aging in Asia: Findings from new and emerging data initiatives (p. 15). National Research Council.
4. James, K. S., et al. (2011). India's demographic change: Opportunities and challenges. Science, 333(6042), 576-580
5. Upadhyay R, Shakya S, Pahari DP et al. Attitude of nurses towards care of elderly people in TU affiliated teaching hospitals of Kathmandu Valley. Health Prospect. 2020;19:7-12.
6. Vatal, et al. (2024). Navigating the demographic shift – A comparative analysis of India and Japan's aging populations. IJRESM, 7(4), 149–161. Accessed December 23, 2024.
7. Mirshahvaladi, S., et al. (2024). Quantitative proteomics reveal region-specific alterations in neuroserpin-deficient mouse brain and retina: Insights into Serpini1 function. Proteomes, 12(1), 7.
8. Choi, M., et al. (2024). Living longer but in poor health: Healthcare system responses to ageing populations in industrialised countries based on the findings from the Global Burden of Disease Study 2019. BMC Public Health, 24(1), Article 18049.
9. Lindgren, B., et al. (2016). The rise in life expectancy. In Health trends among the elderly, and the demand for care: A selected literature review (NBER Working Paper No. 22521).
10. Nagae, M., et al. (2025). FI-lab in the emergency department and adverse outcomes among acutely hospitalized older adults. Archives of Gerontology and Geriatrics, 129, 105649.
11. Leff, N. H., et al. (1969). Dependency rates and savings rates. The American Economic Review, 59(5), 886–896.
12. Börsch-Supan, A., et al. (1992). Population aging, social security design, and early retirement. Journal of Institutional and Theoretical Economics (JITE) / Zeitschrift Für Die Gesamte Staatswissenschaft, 148(4), 533–557.
13. Al Ghailani A, Al Lawati A, Al Kharusi F et al. Knowledge and Attitude Towards the Elderly Among Doctors and Medical Students: A Questionnaire-Based Study. Cureus. 2024;16(3):e56732.
14. Samra R, Cox T, Gordon AL et al. Factors related to medical students' and doctors' attitudes towards older patients: a systematic review. Age Ageing. 2017;46(6):911–919.
15. Samra R, Griffiths A, Cox T et al. Changes in medical student and doctor attitudes toward older adults after an intervention: a systematic review. J Am Geriatr Soc. 2013; 61:1188–1196.
16. Pitkälä KH, Martin F, Maggi S et al. Status of geriatrics in 22 countries. J Nutr Health Aging. 2018;22(5):627–631.
17. Evans, J. M., et al. (2011). Activating the knowledge-to-action cycle for geriatric care in India. Health Research Policy and Systems, 9(42).
18. Manjaly SP, et al. A study of the knowledge, attitude, practices, and burden of full-time family caregivers in the care of older adults in Bengaluru, India. J Indian Acad Geriatr. 2024;20(3):107–111.