



Turkish Journal of Geriatrics  
DOI: 10.31086/tjgeri.2020.128  
2019;22 (4):494-503

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Received: 27/04/2019  
Accepted: 28/08/2019

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#### RESEARCH

## ATTITUDES OF PROFESSIONALS IN NURSING HOMES AND SOCIAL SERVICE CENTERS TO THE ELDERLY: THE ANKARA EXAMPLE

### ABSTRACT

**Introduction:** Positive or negative attitudes on the part of people working in the domain of elderly care are especially influential with regard to the benefits offered by the social services to the elderly. In this context, the attitudes of professionals in nursing homes, social service centers, and in the elderly care and rehabilitation centers are examined in this paper, which used the city of Ankara for its sample.

**Materials and Method:** The descriptive research model was utilized for this study. 100 professionals in Ankara were reached. Interview form prepared by researchers and Kogan's Attitudes Toward Older People Scale were used as the data collection tool. Number, mean, percentage frequency distribution, correlation, t-test, ANOVA, and Pearson correlation were used in the analysis of the data.

**Results:** The mean score of attitudes of professionals toward the elderly was calculated as 133,16 (sd=20.16). A statistically significant difference was found in the attitude scores toward the elderly between those professionals who had earned a graduate degree and those who lived with a dependent family member.

**Conclusion:** The results of the field research revealed that sociologists, social workers, and psychologists expressed a more positive attitude toward the elderly. The study also found that caring for a dependent family member and the duration of work negatively affected the attitudes of professionals toward their aging clientele.

**Keywords:** Aged; Attitude; Social work; Social workers.

#### ARAŞTIRMA

## HUZUREVİ VE SOSYAL HİZMET MERKEZLERİNDE ÇALIŞAN MESLEK ELEMANLARININ YAŞLILARA YÖNELİK TUTUMLARI: ANKARA ÖRNEĞİ

### Öz

**Giriş:** Yaşlılık alanında çalışanların yaşlılara yönelik olumlu ya da olumsuz tutumları yaşlıların sosyal hizmetlerden yararlanma süreçlerine etki etmektedir. Bu bağlamda bu çalışmada sosyal hizmet merkezleri ile huzurevi ve yaşlı bakım ve rehabilitasyon merkezlerinde çalışan meslek elemanlarının yaşlılara yönelik tutumları Ankara örnekleminde incelenmiştir.

**Gereç ve Yöntem:** Araştırmada betimleyici araştırma modeli kullanılmıştır. Araştırma kapsamında Ankara'da 100 meslek elemanına ulaşılmıştır. Veri toplama aracı olarak araştırmacılar tarafından oluşturulan Görüşme Formu ile Kogan Yaşlılara Karşı Tutum Ölçeği kullanılmıştır. Verilerin analizinde sayı, ortalama, yüzde frekans dağılımı, korelasyon, t testi, ANOVA ve Pearson korelasyon kullanılmıştır.

**Bulgular:** Meslek elemanlarının yaşlılara yönelik tutum puan ortalamaları 133.16 (sd=20.16) olarak hesaplanmıştır. Mezun olunan bölüm ve ailede bakmakla yükümlü olunan birinin varlığı ile yaşlılara yönelik tutum puanları arasında istatistiksel olarak anlamlı bir farklılık olduğu görülmüştür.

**Sonuç:** Araştırmada sosyolog, sosyal hizmet uzmanı ve psikologların yaşlılara yönelik daha fazla olumlu tutum puanına sahip oldukları görülmüştür. Katılımcıların bakmakla yükümlü olduğu bir yakınının olması ve meslek elemanı olarak çalışma sürelerinin yaşlılara yönelik tutumları olumsuz yönde etkilediği sonucuna ulaşılmıştır.

**Anahtar Sözcükler:** Yaşlı; Tutum; Sosyal hizmet; Sosyal çalışmacı.



## INTRODUCTION

Aging is the process of psychological and social change which is also accompanied by biological transformations. Phenomena such as, technological developments, progress in basic health services, prolonged life-spans, decreasing fertility rates (1, 2) have significantly increased the numbers of the elderly in the population of many nations. In 2025, this population segment is expected to reach 1,100 million (3). Turkey is transforming into an aging country in terms of its population structure. According to TUIK data, the ratio of the total number of elderly citizens to the nation's population was 7.7% in 2013 and 8.5% in 2017. It is estimated that this ration will become 10.2% in 2023 (4).

At the same time, negative attitudes and prejudices toward the elderly are being noted in many societies (5,6) because of reasons such as changes in the traditional functions and social status of older people; the general deterioration of social relations because of rapid urbanization; and the elderly population's decrease in productivity, their income inadequacy, health problems, and need for care. This situation has led to the emergence of the concept of "age discrimination". The concept of age discrimination was first used in 1969 by Robert Butler, the Director of the United States' National Institute on Aging (7). Butler defined age discrimination as the systematic stereotyping of and discrimination against people because of their age in a manner similar to prejudices against skin color in racism (8). Age discrimination may also be described as the practice of prejudice, biased action, negative attitude and legal arrangements toward individuals. Some acknowledgments direct the actions and form the basis of age discrimination: the recognition that the elderly are useless, child-like, constantly ill, lonely, asexual, poor, incapable, and not percipient (7). These and similar assumptions based on age discrimination can easily be adopted and can lead to the development of discriminatory and repressive

attitudes toward the elderly (7). Attitude includes cognitive, behavioral, and emotional components based on individual behaviors and values (9). Attitudes are often shaped by social values, and may thus vary from culture to culture. Positive attitudes toward the elderly include compassion, wisdom, credibility, political power, freedom, and happiness. Conversely, negative attitudes include perceptions of disease, impotence, ugliness, decline in mental functions, mental illness, uselessness, isolation, poverty, and depression (5).

Interpretations with regard to the conception of the aged and aging have differed through history and across societies. The notion of elderly care emerged from the paternalist point of view along with the concept of the social state. It has acquired a corporate identity within the scope of rights-based social services (10). The services provided by the social welfare regimes to the elderly are shaped within the framework of demographic, economic, social, and humanitarian reasons, and also through the principle of a social state (11). The southern European welfare regime dominates in Turkey. Thus, the services offered to the elderly in need of care and protection are executed largely by the public. The central public institution providing such services in this area is the Ministry of Family, Labor and Social Services, and the municipalities form the local public institutions (10). The service models offered in this area can be classified into residential care services offered by nursing homes and elderly care and rehabilitation centers, home care services, elderly day care services, and elderly service centers (12, 11).

The attitudes of professional practitioners working with individual, family, and community resources for the well-being of the elderly exert a major impact on the quality of the service that is rendered because the negative perceptions and behaviors related to aging can lead to low self-esteem and can disrupt the status of elderly citizens. Beginning with this point, the attitudes of the professionals of nursing homes, social service

centers, and the elderly care and rehabilitation centers operated by the Ministry of Family, Labor and Social Services were determined to be the subject of the present study which was conducted in Ankara.

## **MATERIALS AND METHODS**

This investigation utilized the quantitative research method to accomplish a descriptive research initiative. It was undertaken to examine the attitudes of professionals toward the elderly. Descriptive research aims to respond to the questions of what and how to illuminate a situation and to reveal the possible relationships between facts by effecting an in-depth evaluation of events and situations.

### **Study Group**

The study group was achieved through the total population sampling method. The total population sampling is a type of purposive sampling technique that involves examining the entire population (i.e., the total population) that have a particular set of characteristics (e.g., specific attributes/traits, experience, knowledge, skills, exposure to an event, etc.). 84 professionals (social worker, sociologist, psychologist, graduates of child development and family and consumer sciences) of social service centers in the province of Ankara and serving under the Ministry of Family, Labor and Social Services and 16 professionals of nursing homes and elderly care and rehabilitation centers were interviewed between 15.02.2018 and 15.05.2018. Previous research has evinced that the elderly population of the province of Ankara is increasing and that aging is a significant problem in the peripheries of the city (Gudul, Camlidere, Evren) (13). Thus, studies in the field of aging are needed (13). The province of Ankara was selected as sample in consideration of accessibility and in view of the research results. The social service center (SSC) is a service model in which the applications of the elderly people are received

and are directed to services appropriate to their needs. Nursing homes and elderly care and rehabilitation centers (NHECRC) were preferred because they represent the primary institutions that provide care to the elderly. A total of 100 professionals were encompassed by the scope of this study. One interview was not included in the final analysis because the information obtained from it was incomplete. The distribution of the professionals participating in this research project is provided in the table below, which is organized by the names of institutions.

### **Data collection tools**

The research data were collected by using the Interview Form developed by the researchers and through the Kogan's Attitude Toward Older People Scale (14).

### **Interview form**

The interview form comprised eighteen questions including variables (age, gender, education, marital status, graduated department, etc.) that could affect the socio-demographic information of the participants and could influence their attitudes toward the elderly. The interview form was applied to five professionals to accomplish a preliminary trial. After the pilot study, the interview form took its final form.

### **Attitude toward Older People Scale**

Kogan developed the Attitude toward Older People Scale to measure the attitudes of individuals toward older people. The Attitude toward Older People Scale comprises 34 items. 17 items of the scale test negative attitudes and the other 17 examine positive attitudes on a 6-point, Likert-type (Strongly Disagree, Disagree, Neither Agree nor Disagree, Agree, Strongly Agree) scale. For this instrument, high scores on the positive attitude items and low scores on the negative attitude items indicate an affirmative outlook toward the elderly. Expressions showing negative attitudes are coded and calculated as reverse items. The possible scores that can be



obtained from the negative and positive attitude dimensions toward the elderly range between 17-119 and total scores that may be obtained from the scale extend between 34 and 238.

The validity and reliability study of the scale in Turkish was performed by Duyan and Gelbal and the Cronbach's alpha value was calculated as 0.789 for positive attitudes and 0.794 for negative attitudes (6). The overall reliability coefficient of the scale was estimated as 0.840.

### Ethical issues

Necessary permission was taken from the Hacettepe University Ethics Committee, the Ministry of Family and Social Policies (repealed-new name Ministry of Family, Labor and Social Services), the Directorate General of Family and Community Services, and the Directorate General of Services for Persons with Disabilities and the Elderly.

### Data analysis

Data analysis was conducted using the SPSS 22 program and the 95% reliability level was applied. Since the scale's positive, negative, and total score skewness and kurtosis values were

between +3 and -3, the parametric tests were applied in the analyses. The variance of the scale scores was analyzed using the t-test and ANOVA. The relationship between the scale's positive, negative, and total scores and age, profession, and years of experience in the field of elderly care was examined through the Pearson correlation analysis, a parametric test technique.

## RESULTS

The mean age of the participants was 31.54 (sd=9.39); their years of professional experience was 6.03 years (sd=8.75); and their mean work experience in the domain of elderly care was 3.36 years (sd=4.49). 74.7% of the participants were female; 55.6% of the participants were single, and; 87.9% were undergraduates. Around half the participants (42.2%) lived with their family members. In addition, almost all participants (88.5%) asserted that they did not have to care for a dependent family member.

Nearly half of the participants (42.4%) were sociology graduates. 68.8% did not receive any education training with regard to aged people.

**Table 1.** Socio-demographic characteristics and mean scores of professionals (n=99).

Socio-demographic characteristics	Mean	Standard deviation
<b>Age</b>	31.54	9.39
Number of years worked as professional	6.03	8.75
Number of years worked in the field of elderly care	3.36	4.49
<b>Gender</b>		
Female	74	74.7
Male	24	24.2
Homosexual	1	1.0
<b>Marital status</b>		
Married	44	44.4
Single	55	55.6

Socio-demographic characteristics	Mean	Standard deviation
<b>Education</b>		
Undergraduate	87	87.9
Graduate	10	10.1
Postgraduate	2	2.0
<b>Graduated department</b>		
Sociology	42	42.4
Child Development	7	7.1
Social Work	35	35.4
Psychology	9	9.1
Psychological Counseling and Guidance	1	1.0
Family and Consumer Sciences	1	1.0
Teaching	4	4.0
<b>Any education on the field of elderly welfare</b>		
No	66	68.8
Yes	30	31.3
<b>Any study on the field of elderly welfare</b>		
No	72	75.8
Yes	23	24.2
<b>Existence of a dependent person</b>		
n/a	88.5	85
Available	11	11.3

The positive attitude scores of the participants ranged between 34 and 91 and the mean score was 65.55 (sd=14.22). The negative attitude scores of the participants extended between 45 and 99, and the mean score of the participants was 67.62 (sd=9.18). The mean of the total scores of the participants was computed to be 133.16 (sd=20.16) and the scale total scores were between 96 and 190.

**Table 2.** Scale mean scores of professionals (n =99).+,

Scale	Min-Max	Mean	Standard deviation	Skewness	Kurtosis
Positive scale	34-91	65.55	14.22	-.231	-.399
Negative scale	45-99	67.62	9.80	.855	1.691
Scale total	96-190	133.16	20.16	.606	.162



No statistically significant difference was found with regard to age, gender, marital status and education level (undergraduate, graduate, and post graduate) between the scale's positive, negative, and total mean scores.

A statistically significant difference was found between the scale's positive mean score and the graduation major ( $p=0.002$ ;  $p<0.05$ ): the highest positive mean scores were obtained by the sociology, social work, and psychology departments respectively; the lowest positive mean score was obtained by graduates of the child development department. There was no statistically significant difference between the negative mean subscale score ( $p=0.348$ ;  $p>0.05$ ) and the total mean subscale score ( $p=0.058$ ;  $p>0.05$ ).

There was also no statistically significant difference between the positive mean scores ( $p=0.621$ ;  $p>0.05$ ) with respect to the existence or

nonexistence of a dependent person in the family. However, a statistically significant difference was found between the negative mean scores according to the existence or nonexistence of a dependent person ( $p=0.029$ ;  $p<0.05$ ).

The negative mean score of the professionals who cared for a dependent person was higher at 73.64. No statistically significant difference was found between the total mean subscale score pertaining to the existence or nonexistence of a dependent person ( $p=0.159$ ;  $p>0.05$ ). A negative correlation was found between years of work experience as professional and the positive mean scores ( $r=-0.204$ ;  $p=0.05$ ).

No significant relationship was found between the years of experience in the field of elderly care and the positive mean ( $p=0.246$ ;  $p>0.05$ ); the negative mean ( $p=0.364$ ;  $p>0.05$ ); or the total mean ( $p=0.183$ ;  $p>0.05$ ).

**Table 1.** Socio-demographic characteristics and mean scores of professionals (n=99).

Socio-demographic characteristics	Scale positive mean(±sd)	Scale negative mean(±sd)	Scale total mean(±sd)
<b>Gender</b>			
Female	66.96 (±13.41)	66.82 (±9.88)	133.78 (±19.86)
Male	61.67 (±16.20)	70.29 (±9.41)	131.96 (±21.55)
	t=1.595	t=-1.511	t=.383
	p=.114	p=.134	p=.702
<b>Marital status</b>			
Married	65.73 (±15.51)	66.18 (±10.35)	133.91 (±21.82)
Single	65.40 (±13.23)	67.16 (±9.40)	132.56 (±18.91)
	t=.113	t=.512	t=.329
	p=.910	p=.610	p=.743
<b>Education</b>			
Undergraduate	65.66 (±14.01)	67.76 (±9.92)	133.41 (±20.79)
Graduate/Postgraduate	64.75 (±16.27)	66.58 (±9.19)	131.33 (±15.41)

Socio-demographic characteristics	Scale positive mean( $\pm$ sd)	Scale negative mean( $\pm$ sd)	Scale total mean( $\pm$ sd)
	t=.206	t=.388	t=.334
	p=.837	p=.699	p=.739
<b>Graduated department</b>			
Sociology	66.69 ( $\pm$ 12.53)	66.79 ( $\pm$ 9.58)	133.48 ( $\pm$ 18.61)
Child Development	45.71 ( $\pm$ 11.61)	68.29 ( $\pm$ 4.11)	114.00 ( $\pm$ 13.30)
Social Work	66.37 ( $\pm$ 14.74)	69.26 ( $\pm$ 9.82)	135.63 ( $\pm$ 20.81)
Psychology	66.56 ( $\pm$ 11.56)	63.22 ( $\pm$ 10.03)	129.78 ( $\pm$ 18.45)
	F=5.310	F=1.114	F=2.581
	p=.002**	p=.348	p=.058
<b>Any education on the field of elderly welfare</b>			
No	65.44 ( $\pm$ 13.52)	66.80 ( $\pm$ 9.82)	132.24 ( $\pm$ 19.60)
Yes	67.07 ( $\pm$ 15.34)	69.37 ( $\pm$ 9.82)	136.43 ( $\pm$ 21.32)
	t=-.524	t=-1.185	t=-.945
	p=.602	p=.241	p=.347
<b>Existence of a dependent person</b>			
n/a	65.76 ( $\pm$ 14.16)	66.72 ( $\pm$ 9.46)	132.48 ( $\pm$ 19.66)
Available	68.00 ( $\pm$ 13.21)	73.64 ( $\pm$ 11.67)	141.64 ( $\pm$ 23.44)
	t=-.496	t=-2.221	t=-1.421
	p=.621	p=.029*	p=.159
<b>Age</b>	-.102	.039	-.053
	.316	.700	.604
<b>Years worked as a professional</b>	-.204*	-.063	-.172
	.050	.551	.099
<b>Years worked in the field of elderly care</b>	-.145	-.114	-.162
	.246	.364	.194

## DISCUSSION

The majority of the participants of this study were women and sociologists. The results of the analysis revealed that the overall attitude scale scores of the professionals working in the domain of elderly care were positive toward the aged

population even though they were very close to the average values. The negative attitudes toward the elderly were found to be closely related to the prejudices resulting from detrimental ideas that are attributed to old age (the need for care, limitations, etc.) These amendments are thought



to affect the attitude scale scores with regard to the elderly.

Graduates of different undergraduate departments participated in this investigation, and the most positive attitude scores toward the elderly were obtained by participants who were graduates of sociology, social work, and psychology respectively; the lowest positive attitude score was obtained by graduates with degrees in child development.

A study on the attitudes toward the elderly conducted at the University of Salamanca in Spain with students of medicine, occupational therapy, nursing, psychotherapy, psychology, social work, and dentistry similarly evidenced that the highest positive attitude score was obtained by students of social work and psychology, and nursing students formed the highest ratio of graduates considering elderly care as their field of specialization. (15).

In this study, it was found that attitude scores toward older people did not differ according to gender. The results of Doherty et al. (15) in the study conducted with the participation of 190 people, did not find a significant relationship between gender and attitude toward the older people. However, a study have shown that women receive more positive attitude scores than men (1).

The majority of the participants in this study had earned undergraduate degrees but more than half of them had not received any formal education in elderly care. However, the results exhibited that the level of education did not matter to the attitude scores toward older people. Study by Stewart et al. (16) obtained outcomes that were in opposition to the present study and found that positive attitudes toward the elderly are liable to increase with rising education levels.

It discovered that professionals who have to care for a dependent are more likely to exhibit higher negative attitude scores toward the elderly. The findings of another studies on this subject (17) contradict the outcomes of the present

investigation; they evince that living with and caring for elderly individuals exerts a positive effect on people's attitudes toward the aged. Danis et al. (1), observed that living with and providing care to an elderly individual did not affect attitudes toward the elderly. A similar study conducted with 472 people in Spain also found no significant relationship between care-giving and attitudes toward the elderly (18). Although different studies have obtained differing results, the present analysis suggests that burnout may be a factor on the correlation this study found between care-giving for a dependent family member and negative attitudes toward the aged population. As a matter of fact, Kalinkara and Kalayci's study (19) with 209 randomly selected people providing homecare to elderly people over 65 who found it physically and mentally difficult to sustain the activities of daily life, found that the care burden caused emotional exhaustion and desensitization and that the exhaustion of the care-givers increased as the care burden grew.

The present study found no significant relationship between the age of the professionals and their attitudes toward the elderly. An examination of studies conducted in different countries yielded results that evinced a significant relationship between age and attitude. For example, an investigation in Germany concluded that negative attitude scores increased with advancing age and positive attitude scores decreased (17). Another scrutiny of professionals in Sweden noted that professional care-givers older than 51 years exhibited a more positive attitude toward the elderly (20). These differences between the findings demonstrate that attitudes with regard to aging change from culture to culture.

This study conducted on graduates of different departments found that negative attitudes toward older people increased with years of work experience. This outcome supports the results obtained by Engstrom and Fagerberg (20), who

reported that professional care-givers who had worked in the field for over 21 years demonstrated negative attitude scale scores toward the elderly.

Consequently, the following recommendations are tendered:

- Organizing vocational training for professionals would help to augment and strengthen knowledge related elderly care. Such training

programs should incorporate informative content about the rights and needs of the elderly, highlight positive examples, and aim at raising awareness and consciousness about aging.

- Policies that generally support the professionals who have to care for a dependent to prevent burnout related to the burden of providing care should be established.

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