Factors Affecting Newly Graduated Nurses' Expectations About Aging in Turkey: A Descriptive, Cross-Sectional Study

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ABSTRACT

Purpose: Nurses are the group with which the elderly interact the most during the health care services process. Therefore, nurses' expectations about aging are extremely important as they are reflected in the way nurses interact with older individuals and how they provide nursing care. This study aimed to examine the expectations of newly graduated nurses about aging.

Methods: The study was designed as a descriptive and cross-sectional research. The study population consisted of 300 newly employed bachelor's-degree nurses who started working at the institution between July 2019 and January 2022. Nurses who had been employed for a minimum of six months and a maximum of two years and who voluntarily agreed to participate were included in the sample. Data were collected between May 2022 and July 2022. Nurses who were on annual or sick leave during this period, as well as those who declined to participate, were excluded from the study. Although reaching the entire population was targeted, the final sample consisted of 260 nurses who met the inclusion criteria. Participants were asked to complete the "Personal Information Form" and the "Expectations Regarding Aging Scale."

Results: It was worked out that the total mean score of the nurses' expectations about aging scale was 39.00±15.78. The difference between the genders, living with the elderly, the experience of caring for the elderly and willingness to care for the elderly of the nurses and the mean score of the scale was found to be statistically significant (p< 0.05).

Conclusion: Expectations about aging can change nurses' approach to the elderly. It will be possible to get away from the prejudices against aging by gaining a positive perspective towards this period.

Keywords: Nursing, graduate, aging, expectations.

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Introduction

The global aging of the population has become one of the most significant public health challenges of the 21st century. As the proportion of older adults continues to rise, health systems face growing demands for specialized and high-quality geriatric care. Nurses play a pivotal role in maintaining the health, independence, and well-being of older adults, and their beliefs about aging influence not only the quality of care but also their willingness to work in gerontological settings (1–3). "Expectations regarding aging" refer to beliefs and attitudes about physical, psychological, and social changes that occur with age (4). Positive expectations have been associated with healthy behaviors, psychological resilience, and better self-rated health, whereas negative expectations can perpetuate ageism and contribute to discriminatory or indifferent care (5–7). Therefore, assessing nurses' expectations regarding aging is essential to understanding how they perceive older adults and to identifying strategies that promote age-positive professional attitudes. Previous research has shown that attitudes and expectations toward aging among nurses and nursing students vary by factors such as gender, prior contact with older adults, caregiving experience, and the presence of gerontology-related education (8–11). Exposure to older adults through intergenerational contact or structured clinical placements has been shown to improve empathy and reduce ageism (12, 13). However, some studies suggest that caregiving experiences may also lead to fatigue or negative perceptions if not properly supported (14, 15). In Turkey, studies focusing on newly graduated nurses' expectations regarding aging are scarce. The Turkish adaptation and psychometric validation of the Expectations Regarding Aging Scale by Beşer et al. (2012) (16) provided a foundational tool for investigating this construct in the Turkish context. Building on that foundation, this study aims to examine newly graduated nurses' expectations regarding aging and to determine whether these expectations differ according to gender, marital status, prior caregiving experience, living with an older adult, or willingness to care for older adults. The study addressed the following research questions: What are newly graduated nurses' expectations about aging? Do these expectations differ according to gender, marital status, or geriatric education? Are expectations related to living with older adults,

previous caregiving experience, or willingness to care for them?

Hypotheses:
H1. Nurses who report greater contact with older adults (living with an older adult; willingness to care) will have more positive expectations.
H2. Nurses with prior caregiving experience will differ in expectations compared with those without such experience.
H3. Completing a geriatrics education will be associated with more positive expectations.

Material and Methods

1. Aims
To examine newly graduated nurses' expectations about aging and the associated factors.

2. Study Design
The research is a descriptive and cross-sectional study.

3. Setting and Participants
The study was designed as a descriptive and cross-sectional research. The study population consisted of 300 newly employed bachelor's-degree nurses who started working at the institution between July 2019 and January 2022. Nurses who had been employed for a minimum of six months and a maximum of two years and who voluntarily agreed to participate were included in the sample. Data were collected between May 2022 and July 2022. Nurses who were on annual or sick leave during this period, as well as those who declined to participate, were excluded from the study. Although reaching the entire population was targeted, the final sample consisted of 260 nurses who met the inclusion criteria. Participants were asked to complete the "Personal Information Form" and the "Expectations Regarding Aging Scale."

4. Data Collection
The purpose of the study was explained to the nurses included in the sample, and it was stated that participation in the study was completely voluntary. Participants were asked to complete the "Personal Information Form" and the "Expectations Regarding Aging Scale." The data collection process was carried out between May 2022 and July 2022. The forms were completed

in the nurses' rooms within their respective clinical units, and the administration of the data collection tools took approximately 10–15 minutes.

5. Instruments

5.1. Personal Information Form
It was prepared by the researchers in order to obtain data that may affect the sociodemographic information and expectations about aging of the newly graduated nurses included in the sample. In the form, there are questions about age, gender, taking lessons for the elderly, living with the elderly before, the experience of caring for the elderly, and whether they want to work with the elderly.

5.2. Expectations Regarding Ageing Scale
The scale of expectations about aging consists of 12 items. It is a Likert-type scale with items ranging from 1 (definitely true) to 4 (definitely false). The reliability and validity of the original version of the scale was made by Sarkisian et al. (2005). The Turkish validity and reliability of the scale was performed by Beşer et al. (2012) and its Cronbach alpha value was 0.76. In this study, Cronbach's alpha value was found to be 0.86.

6. Ethical considerations
To conduct the study, ethical approval was obtained from the Izmir Katip Celebi University Non-Invasive Clinical Research Ethics Committee (date: 21.04.2022, decision no: 0220, file no: 0214). After the permission of the ethics committee was given, institutional permission was obtained from Research and Education Hospital. After all patients who agreed to participate in the study were informed about the study, their written consent and permission to use the scale was obtained from the authors. The study conformed to the principles outlined in the Helsinki Declaration.

7. Statistical Analysis
Analyses were conducted in SPSS 22.0. Normality was assessed with Shapiro–Wilk tests and Q–Q plots. Continuous variables are presented as mean±SD; categorical variables as n (%). Between-group comparisons used independent-samples t-tests (or Mann–Whitney U when non-normal) for ERA-12 scores and Chi-square tests for categorical variables. Effect sizes are reported as Cohen's d (or r for non-parametric tests) with 95% confidence intervals (CI). Two-sided α=0.05. Where applicable, we also provide 95% CI for mean differences. No a priori sample-size calculation was performed; this is noted as a limitation.

Results

The data were analyzed for the sociodemographic data profiles of 260 participants of the study. Table 1 shows the sociodemographic characteristics of the studied participants.

Tablo 1. Sociodemographic Characteristics

Sociodemographic Characteristics		n	%
Gender	Female	207	79,6
	Male	53	20,4
Marital status	Married	56	21,5
	Single	204	78,5
Status of taking geriatrics courses in undergraduate education	Yes	189	72,7
	No	71	27,3
Status of living with the elderly	Yes	185	71,2
	No	75	28,8
Elderly care experience	Yes	196	75,4
	No	64	24,6
The state of wanting to work with the elderly	Yes	178	68,5
	No	82	31,5

The age of the participants the mean of 22.98 years (±2.94). 21.5 % of the participants are married and 81.9% are single. Most of the nurses (72.7%) took a geriatrics course in undergraduate

education and lived with the elderly before (71.2%). Almost all (75.4%) have experience of caring for the elderly. 68.5% of the participants want to care for the elderly, 31.5% do not want to care. 68.5% of the participants want to care for the elderly, 31.5% do not want to care.

The mean total score on the Expectations Regarding Aging Scale among newly graduated nurses was 39.00 ± 15.78. Statistically significant differences were observed for gender, living with an older adult, elderly care experience, and willingness to care for the elderly. Male nurses had higher expectations about aging compared with female nurses (t = –2.259, p = 0.027, Cohen's d = 0.38, 95% CI [–13.5, –0.9]). Participants who had lived with an older adult

scored significantly higher than those who had not (t = 4.104, p < 0.001, d = 0.64, 95% CI [3.8, 10.1]). In contrast, nurses without prior caregiving experience had higher Expectations Regarding Aging Scale scores than those who had cared for older adults (t = –3.850, p < 0.001, d = 0.55, 95% CI [–8.7, –2.5]). Finally, those willing to care for older adults demonstrated substantially higher expectations (t = 6.680, p < 0.001, d = 0.90, 95% CI [9.1, 18.2]). No significant differences were found for marital status (p = 0.061) or taking geriatric courses during undergraduate education (p = 0.127) (Table 2).

Tablo 2. ERA Scale Score Averages According to Sociodemographic Characteristics

Variable	n (%)	Mean ± SD	t	p	Cohen's d	95% CI for Mean Difference
Gender	Female 207 (79.6)	37.54 ± 13.41	-2.259	0.027*	0.38	[-13.5 ; -0.9]
	Male 53 (20.4)	44.70 ± 22.04				
Marital status	Married 56 (21.5)	42.54 ± 14.41	1.884	0.061	0.27	[-0.2 ; 8.9]
	Single 204 (78.5)	38.12 ± 15.93				
Whether a geriatrics course was taken during undergraduate education	Yes 189 (72.7)	39.94 ± 16.21	-1.533	0.127	0.21	[-7.3 ; 0.9]
	No 71 (27.3)	36.75 ± 14.19				
Living with an older adult	Yes 185 (71.2)	41.17 ± 16.70	4.104	<0.001**	0.64	[3.8 ; 10.1]
	No 75 (28.8)	33.66 ± 11.73				
Experience in caring for older adults	Yes 196 (75.4)	38.80 ± 15.79	-3.850	<0.001**	0.55	[-8.7 ; -2.5]
	No 64 (24.6)	40.20 ± 15.86				
	Yes 178 (68.5)	43.49 ± 12.84	6.680	<0.001**	0.90	[9.1 ; 18.2]

Willingness to care for older adults	No 82 (31.5)	29.26 ± 17.19	

Significance levels: *p* < 0.05 (*), *p* < 0.001 (**). CI = Confidence Interval; ERA= Expectations Regarding Aging Scale.

Discussion

The findings of this study revealed that newly graduated nurses had moderate expectations regarding aging, which aligns with prior studies indicating that both practicing nurses and nursing students often display mixed or ambivalent attitudes toward older adults (1, 8, 10, 11). This moderate level of expectations may reflect the gap between theoretical knowledge and practical experience in geriatric nursing education. Gender differences were evident, with male nurses showing higher ERA scores than females. This partially supports the results of multicenter studies across Europe and Asia, which found that gender may influence perceptions of aging through cultural norms, caregiving roles, and professional exposure (2, 9, 10). Some evidence suggests that male nurses, due to different role expectations and work assignments, may engage less in emotional caregiving but express higher confidence toward older patients (11). Living with an older adult was significantly associated with more positive expectations, consistent with the "contact hypothesis," which posits that meaningful and sustained contact with older adults reduces stereotypes and promotes empathy (12, 13). Such intergenerational interactions especially when occurring within family contexts may facilitate understanding of aging as a natural and valuable process rather than a decline. Conversely, nurses with prior caregiving experience demonstrated lower ERA scores, a finding also observed in studies indicating that caregiving under stressful or unsupported conditions may reinforce negative perceptions (14, 15). This highlights the need for structured mentorship and reflective supervision during clinical placements to transform emotionally challenging caregiving experiences into learning opportunities (17). The strong association between willingness to care for older adults and higher ERA scores is consistent with prior literature, suggesting that attitudes and expectations toward aging are important predictors of nurses' motivation to work in geriatric care (1, 8, 18). Educational interventions combining knowledge enhancement, empathy training, and positive role modeling have been shown to increase willingness and readiness to work with older populations (19, 20). Interestingly, taking a geriatrics course was not significantly related to higher expectations, implying that theoretical exposure alone may be insufficient to modify deeply held attitudes. Contemporary evidence supports integrating experiential learning approaches such as simulation, service learning, and intergenerational community projects to bridge the theory practice gap (7, 19, 20). Overall, these results underscore the need for comprehensive educational strategies that combine cognitive, emotional, and experiential components. Institutions should prioritize gerontology-focused orientation programs, mentorship systems for early-career nurses, and organizational policies that mitigate workload and emotional exhaustion in geriatric settings. Such interventions are vital to fostering positive expectations regarding aging and sustaining a competent and compassionate gerontological nursing workforce (3, 11, 13).

Conclusions

This study demonstrated that newly graduated nurses' expectations regarding aging were influenced by gender, living with an older adult, prior caregiving experience, and willingness to care for older individuals. These findings emphasize that expectations about aging are not only shaped by educational exposure but also by personal experiences and attitudes toward older adults. Developing positive expectations regarding aging is essential for promoting age-sensitive and person-centered nursing care. Therefore, integrating structured gerontology-focused in-service trainings, workshops, and seminars into nurses' early career development may contribute to enhancing their preparedness and confidence in caring for older adults. Educational programs that include experiential learning, intergenerational activities, and reflective practice may further help nurses challenge age-related biases and adopt a more holistic view of aging. It is also recommended

that health institutions strengthen mentorship systems and create supportive clinical environments where newly graduated nurses can develop competencies in geriatric care. Future studies should focus on evidence-based interventions that aim to improve aging-related perceptions, reduce ageism, and promote positive attitudes toward older adults. Such efforts will ultimately contribute to improving the quality of care provided to the older population.

Declerations

Ethical Comminite Approval

To conduct the study, ethical approval was obtained from the Izmir Katip Celebi University Non-Invasive Clinical Research Ethics Committee (date: 21.04.2022, decision no: 0220, file no: 0214).

Author Contributions Statement

All design, planning and writing belongs to AGT.

Fund Statement

This study has not been funded by any institution.

Conflicts of Interest

The authors declare that there is no conflict of interest.

Contribution to the Field

Determining the expectations of newly graduated nurses working in health care services regarding aging and making appropriate interventions will increase the quality of health care that elderly individuals will receive.

Limitations

The present study has several limitations. Research data is limited to newly graduated nurses working in only one education and research hospital in Turkey. Therefore, the result cannot be generalized to the entire population. In addition to quantitative research, additional qualitative research is needed to examine the factors affecting nurses' expectations.

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