

## KNOWLEDGE AND ATTITUDES OF A GROUP OF UNIVERSITY STUDENTS TOWARD SEXUALITY IN AGED PEOPLE\*

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### Abstract:

The aim of this study was to evaluate students' knowledge and attitudes about ageing and sexuality. This cross-sectional study was conducted on 396 nursing and midwifery students in Adnan Menderes University Aydin Health School between 23 May 2011- 3 June 2011. Ageing sexuality knowledge and attitudes scale in elderly (ASKAS) was used in order to evaluate students' knowledge and attitudes. It was found that there wasn't a significant correlation between the students' acceptance of sexual intercourse and their knowledge about sexuality in elder people ( $t=1.63$ ;  $p=0.11$ ). On the other hand, students who thought that older people could have sexual intercourse, were found to be more tolerant attitudes towards elderly sexuality ( $t=3.90$ ;  $p=0.000$ ). It was observed that the more the students had knowledge about elder sexuality, the more they had tolerant attitudes; however there was a negative correlation between age and knowledge/attitudes ( $r=0.625$ ,  $p=0.000$ ;  $r=-0.365$ ,  $p=0.003$ ;  $r=-0.262$ ,  $p=0.09$ ). No significant relation was found between ASKAS and other variables.

**Key-words:** *universities, students, sexuality, aged people*

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### Introduction

In almost every country, the proportion of people aged over 60 years is growing faster than any other age group, as a result of both longer life expectancy, declining fertility rates, scientific and technological developments in the field of health, implementing methods of early diagnosis and treatment, increasing protective and preventive precautions for health, and factors such as supporting and adopting healthy life conditions [3, 16].

World Health Organization (WHO) describes the senility as „absence of the ability in adaptation to the environmental factors”. United Nations describes the age of 60 as old age, but WHO describes age of 65 and more as the old age. According to WHO, 390 millions of people who are over 65 since 1998 all over the world, are estimated to increase to 800 millions in 2025 and these people will compose 10% of the total population [1, 16].

While this is an important challenge for the developed world, 70 % of all older people now live in low or middle-income countries. In

our country, as a developing country the population of older people who are 65 or over has reached at 6.8% [18].

Senility is seen as the deprivation period in all life activities, productivity, individuality, adequacy and independence [2]. The socio-cultural framework of the society, differences in the behaviours and the attitudes, the societies and the person's perception of the senility have important roles on giving services to aged people

Sexuality is experienced as a result of the interaction among the biological, psychological, socioeconomic, cultural, ethical, and religious factors [7]. And sexuality and sexual experiences are part of everyone's life, and involve different needs and implications at different stages [5].

Religious rules, taboos, traditions mostly effect the people's sexual behaviours in many countries. This effect prevents the youth from having enough information about sexuality and reproduction health. In Turkish society, sexuality itself is seen as a “taboo”. Talking

about sexuality is seen as a “shame”, or as a “sin”, sexuality before marriage seen as an „a ban and shame”, sometimes sexual function seen as a symbol of the man’s power” [6, 10, 12].

According to the literature, the young have different attitudes about elderly sexuality. It is thought that not talking about it is good. Elderly sexuality is supposed to be inappropriate and if there is no sexual intercourse, this means there isn’t any intercourse. But sexuality continues in a lifetime, sometimes by touching sometimes by kissing [8, 9, 15].

The young think that the elderly don’t have sex. However, it is known that they have both sexual needs and sexual function. The young’s education levels, their knowledge about sexuality, their religious education and ideas related to marriage, affect their attitudes towards elderly sexuality [13, 14]. But students, who have grandparents, have positive opinions about elderly sexuality [9, 17].

It is important to evaluate the nursing students’ knowledge and attitudes towards elder sexuality because of their social roles in work life (they might be the caregivers of the future). The aim of this study was to evaluate students’ knowledge and attitudes about ageing and sexuality.

### Materials and Methods

This cross-sectional study was conducted on 396 nursing and midwifery students in Aydin Health School. A total of 90 students, 22.8 % of them agreed to participate in research by giving verbal consent. After a relevant literature study, a semi-structured questionnaire that included the factors which might affect elderly sexuality was prepared by the students. Aging sexuality knowledge and attitudes scale in elderly (ASKAS) was used in order to evaluate students’ knowledge and attitudes. This scale which was prepared by Doğan and his colleagues was composed of 61 items totally. 35 of the items were related with knowledge and 26 of the items were related with the attitudes. The participants can get 35-105 scores from knowledge part and 26-182 scores from the attitude part. The low scores show that the knowledge is high and the attitudes are tolerant [4]. Mean  $\pm$  standard deviation and the percentages were used in descriptive statistics; Student’s t test and Pearson correlation analysis was used in analytic evaluation.

### Findings

The mean age of the students was  $20.97 \pm 1.69$ ; 86.7 % of them were female; 37.5% of them was living in the Aegean Region for a long time; 85.4% of them had nuclear family. Almost half the students’ parents were graduated from primary schools; 62.9% of the students stated that their income were equal to their expenses. Half of the students said that there were no elder people at home. A total of 396 students, 95.6% of them said they didn’t have any formal education about elderly sexuality. 87.6% of them gave care to elder people during their clinical practices; and 64.7% of them said that they conceded sexual intercourse in elderly.

The students’ mean score and standard deviation were computed as  $65.90 \pm 8.2$  for the knowledge,  $118.81 \pm 21.98$  for the attitude. In this study, it was found that there wasn’t a significant correlation between the students’ acceptance of sexual intercourse and their knowledge about sexuality in elder people ( $t=1.63$ ,  $p=0.11$ ). On the other hand, students who thought that older people could have sexual intercourse, were found to be more tolerant attitudes towards elderly sexuality ( $t=3.90$ ;  $p=0.000$ ). It was observed that the more the students had knowledge about elder sexuality, the more they had tolerant attitudes; however there was a negative correlation between age and knowledge/attitudes ( $r=0.625$ ,  $p=0.000$ ;  $r=-0.365$ ,  $p=0.003$ ;  $r=-0.262$ ,  $p=0.09$ ). No other significant correlation was found between ASKAS and socio-demographic characteristics of the students.

### Conclusion

It was found that students have less information about elder sexuality although they had to give care to elder people in their clinical practices. Another important result from this study was; students, who had more knowledge, were more tolerant to elder sexuality.

Therefore, lessons about elder sexuality should be put on health schools’ universities curriculum and students should be educated on this topic.

### Limitation

Because of the topic we study, unfortunately participation to the study was limited.

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