NURSING STUDENTS' KNOWLEDGE AND

PERCEPTION REGARDING SELF-NEGLECT IN

ELDERLY AT SCHOOL OF HEALTH SCIENCES,

UNIVERSITI SAINS MALAYSIA

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by

MUHAMMAD ARRASYID BIN DIN

Dissertation submitted in partial fulfilment of the

requirements for the degree

of Bachelor of Nursing (Honours)

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CERTIFICATE

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This is to certify that the dissertation entitled "Nursing Students' Knowledge And Perception Regarding Self-Neglect in Elderly at School of Health Sciences, Universiti Sains Malaysia" is the bona fide record of research work done by Mr Muhammad Arrasyid Bin Din during the period from November 2020 to July 2021 under my supervision. I have read this dissertation and that in my opinion it conforms to acceptable standards of scholarly presentation and is fully adequate, in scope and quality, as a dissertation to be submitted in partial fulfilment for the degree of Bachelor of Nursing (Honours).

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DECLARATION

I hereby declare that this dissertation is the result of my own investigations, except where otherwise stated and duly acknowledge. I also declare that it has not been previously or concurrently submitted as a whole for any other degrees at Universiti Sains Malaysia or other institution. I grant Universiti Sains Malaysia the right to use the dissertation for teaching, research, and promotional purposes.

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Muhammad Arrasyid Bin Din (138476)

Date: ……………………………

ACKNOWLEDGEMENT

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LIST OF ABBREVIATION

ADLs   Activity Daily Livings

APS   Adult Protective Service

EAS   Elder Abuse Services

HREC   Human Research Ethics Committee

HUSM   Hospital Universiti Sains Malaysia

UPM   Universiti Putra Malaysia

SPSS   Statistical Package Social Sciences

WHO   World Health Organization

Pengetahuan dan Persepsi Pelajar Kejururawatan di Pusat Pengajian Sains Kesihatan, Universiti Sains Malaysia (USM) Mengenai Pengabaian Diri dalam Kalangan Warga Emas

ABSTRAK

Pengabaian diri adalah fenomena yang membimbangkan terutamanya berlaku pada golongan tua. Kajian mendapati bahawa penghalang yang paling ketara untuk mengambil berat tentang pengabaian diri pada orang tua adalah pemahaman yang tidak lengkap mengenai fenomena yang berlanjutan walaupun terdapat konsistensi penyelidikan pengabaian diri. Oleh kerana pelajar kejururawatan adalah penyedia penjagaan kesihatan masa depan bagi golongan tua, keperluan pelajar kejururawatan dengan persepsi positif, pengetahuan dan kemahiran yang mencukupi sangat penting dalam melindungi dan meningkatkan kesihatan golongan yang rentan ini. Oleh itu, kajian keratan rentas dilakukan untuk mengkaji pengetahuan dan persepsi pelajar kejururawatan di Pusat Pengajian Sains Kesihatan, USM mengenai pengabaian diri dalam kalangan orang tua. Soal selidik yang digunakan dalam kajian ini adalah soal selidik yang dikendalikan sendiri yang terdiri daripada 9 pertanyaan mengenai pengetahuan dan 16 soalan mengenai persepsi mengenai pengabaian diri pada orang tua. Seramai 111 pelajar kejururawatan di Pusat Pengajian Sains Kesihatan, USM yang memenuhi kriteria kemasukan dan pengecualian dipilih secara bertujuan. Data yang dikumpulkan dianalisis secara statistik menggunakan perisian SPSS versi 25.0. Ujian Pearson Chi-Square telah digunakan untuk analisis data. Hasil kajian menunjukkan bahawa pelajar kejururawatan di Pusat Pengajian Sains Kesihatan, USM mempunyai tahap pengetahuan yang tinggi (n = 87, 77.7%) dan persepsi positif (n = 84, 75.7%) terhadap warga tua. Walaupun secara statistik tidak signifikan antara jenis keluarga dan

pengalaman hidup dengan anggota tua, majoriti pelajar kejururawatan yang tinggal dalam keluarga nuklear dan mereka yang mempunyai pengalaman hidup dengan anggota tua melaporkan diri mereka mempunyai persepsi positif terhadap warga tua. Begitu juga, walaupun terdapat hubungan yang tidak signifikan antara tahap pengetahuan dan tahap persepsi, pelajar kejururawatan yang menganggap diri mereka mempunyai persepsi positif adalah antara mereka yang mempunyai tahap pengetahuan yang lebih tinggi mengenai pengabaian diri pada orang tua. Walau bagaimanapun, masih ada keperluan untuk meningkatkan kesedaran pelajar kejururawatan dan meningkatkan pengetahuan dan persepsi mereka mengenai isu ini kerana mereka akan lebih berpengetahuan dan mahir dalam memberikan penjagaan yang baik dan berkualiti kepada orang tua.

Kata kunci: Pengabaian diri, Warga Emas, Pelajar Kejururawatan, Tahap Pengetahuan, Tahap Persepsi

Nursing Students' Knowledge and Perception Regarding Self-Neglect in Elderly at School of Health Sciences, Universiti Sains Malaysia (USM)

ABSTRACT

Self-neglect is a worrying phenomenon that mainly occurs in elderly population. Study found that the most significant barrier to intervene self-neglect in elderly is the incomplete understanding of the phenomenon that continues despite the consistency of self-neglect research. Since nursing students are the future healthcare providers for the elderly population, the need of nursing students with the positive perception, adequate knowledge and skill are crucial in protecting and enhancing the health of this vulnerable population. Thus, a cross-sectional study was carried out to study the nursing students' knowledge and perception regarding self-neglect in elderly at School of Health Sciences, USM. The questionnaire used in this study was a self-administered questionnaire consist of 9 questions on knowledge and 16 questions on perception regarding self-neglect in elderly. A total of 111 nursing students in School of Health Sciences, USM who fulfilled the inclusion and exclusion criteria were selected purposively. Data collected were statistically analyzed using the SPSS software version 25.0. Pearson Chi-Square test has been used for data analysis. The finding revealed that nursing students at School of Health Sciences, USM have a high level of knowledge (n= 87, 77.7%) and positive perception (n= 84, 75.7%) toward elderly. Despite a statistically insignificant between family type and living experience with an elderly member, majority of the nursing students who lived in nuclear family and those who had living experience with an elderly member reported themselves to have positive perception toward elderly. Similarly, although there is an insignificant association between level of knowledge and level of perception, those nursing students

who regarded themselves with a positive perception were among those who have a higher knowledge level about self-neglect in elderly. However, there still a need to increase the nursing students' awareness and improve their knowledge and perception regarding this issue as they will be more knowledgeable and skilful in delivering a good and quality care towards the elderly.

Keywords: Self-neglect, Elderly, Nursing Students, Knowledge Level, Perception Level

CHAPTER 1 INTRODUCTION

1.1   Background of the Study

In this era of globalization, Malaysia's population is ageing and is accompanied by the increase in the elderly population itself. By the years 2020, it was estimated that population aged 65 years and above will reach to about 8% of the total population (Hamid, 2015). Either in developing countries or developed countries, elder abuse is an issue which typically under-reported globally and ignored by the society around the world. Because of people unwilling to report the abuse, thus the rate of abuse is probably underestimated (Cooper, Selwood, & Livingston, 2008; Mardan, 2018). The National Centre on Elder Abuse (NCEA, 2005) described physical, emotional, sexual, financial/material exploitation, neglect, abandonment and self-neglect as types of elder abuse.

The action of an elder person who endangered his/her own health or safety is described as self-neglect. Self-neglect normally manifests itself as a refusal or failure to provide himself/herself with sufficient food, water, clothing, housing, personal hygiene, medicines and safety precaution in an elderly individual (Lee & Kim, 2014). Prevalence in Asian countries generally higher than Western nations with population estimates of elder abuse and neglect varies from as low as 1.1% to as high as 44.6% (Sooryanarayana, Choo, & Hairi, 2013). However, empirical data on self-neglect in elderly is not available as the prevalence rate of the problem is still unknown in Malaysia (Mardan, 2018).

Self-neglect is a worrying phenomenon that mainly occurs in the elderly population (Ballard, 2010; Braye, Orr, & Preston-Shoot, 2011) and has significant consequences for elders who self-neglect (Braye et al., 2011; Dong, Simon, Beck, & Evans, 2010; Ernst & Smith, 2012). Most frequently issue that reported to Adult

Protective Services (APS) nationally is an issue on elder self-neglect (Braye et al., 2011). However, according to Dong, Simon, Mendes de Leon et al. (2009) stated that the ability to quantify the number of non-reported cases is not feasible since the understanding on this phenomenon is incomplete.

Additionally, this also happens in Malaysia, there is no regulation clearly aimed at addressing elder abuse and neglect (Bidin & Yusoff, 2015). Also, no clear official data on elder abuse and neglect currently exists in the country to assess the scope of the issue. Poor public awareness, lack of knowledge and the lack of mandatory reporting by healthcare providers are often cited as common reasons why elder abuse and neglect remain undetected and underreported (Bidin & Yusoff, 2015).

Nurses play an important role as caregivers for the older person and are able to affect the quality of care in a unique position. Various functions of nurses include supportive, restorative, educative, life-enhancing and managerial that can contribute to the optimum health and overall wellbeing of the older people. Also, it is expected that almost all nursing students will have to work predominately with older people after their primary education is completed. Therefore, it is critical that nursing students are well enough prepared for taking care of this growing population (Kaur et al., 2014). But, there is scarcity of data regarding the topic under study in Malaysia. So, the current study was undertaken with the objective to assess the knowledge and perception of nursing students regarding self-neglect in elderly.

In summary, self-neglect is very little understood and less is known about how to recognise self-neglect and the steps that can be taken when self-neglect is suspected. Since nursing students are the future care providers for the aged population, understanding their knowledge and perception regarding elderly people who neglect

themselves is crucial for further development of the science of self-neglect and the design processes to successfully intervene with self-neglect.

1.2   Problem Statement

Self-neglect is an increasingly common public health issue among older people and has expensive implications in terms of the medical and social care that will affect the family, community and the government that commonly goes underreported and under-recognized (Day, Mulcahy, Leahy-Warren, & Downey, 2015). The issue of elder abuse and neglect has become widely recognized, according to a recent survey conducted among 291 urban poor elderly that living in the capital city of Kuala Lumpur. Around 1 out of 10 of the surveyed elders reported in the last 12 months that there have been some violence or neglect (Sooryanarayana, Choo, Hairi, Chinna, & Bulgiba, 2015). Further study to gain an understanding of self-neglect is crucial in protecting and enhancing the health of this vulnerable population due to the health consequences of self-neglect among the elderly population and the lack of consistent concept for self-neglect used by healthcare professionals. Combined with the lack of understanding of self-neglect, there is an inadequacy of research on this phenomenon (Johnson, 2014).

According to previous study, many health professionals like nurses have little knowledge known about self-neglect and do not aware of elder mistreatment (Johnson, 2014). Thus, they just focused more on assessment and intervention for individuals with health issue (Ernst & Smith, 2012). Also, some studies were conducted in Egypt and Arab Saudi which to identify the level of knowledge regarding elder self-neglect among nursing students and found that most nursing students have poor knowledge and interest regarding elderly care (Celik, Kapucu, Tuna, & Akkus, 2010; Kaur et al., 2014; Mohammed, Abdel, & Omar, 2019; Shen & Xiao, 2012; Zakari, 2005).

Nursing students who had poor level of knowledge also showed a negative attitude toward the elder people based on a few studies in Egypt and Spain (Mohammed et al., 2019; Zambrini, Moraru, Hanna, Kalache, & Nuñez, 2008). However, it was against with the results of a study conducted by Oyetunde et al (2013) who indicated that nurses had a negative attitude towards the care of the elderly even though they displayed a fairly good knowledge of geriatric care. Hence, identifying the level of knowledge and perception and the association between these two aspects regarding self-neglect in elderly among nursing students is crucial to prevent any consequences toward the care of elderly.

In terms of the type of family and living with an elderly person in the family also play an essential role in the attitude toward elderly people. It can be seen from the previous study conducted in Turkey, and they found that a person who was living in a nuclear or a fragmented family have different perspectives toward elderly (Şentürk, Güzel, Ergün, & Çetinkaya, 2020) while other studies by Boz et al. (2017) and Şahin and Erkal (2018) stated that a person who was having an elderly person in the family and living with them at home had a positive attitude towards older adults.

In Malaysia, there is a study on knowledge and perception towards elder abuse and neglect conducted both among nurses and doctor but no study has been done on nursing students so far (Ahmed, Choo, & Othman, 2016). Another study also conducted in Universiti Putra Malaysia (UPM) which to identify risk factors of self-neglect among older persons in Selangor (Mardan, 2018). Thus, there is no specific study done to test the knowledge level and perception regarding self-neglect in elderly among nursing students in Malaysia, especially in USM. This study is crucial to assess the knowledge and perception regarding self-neglect in elderly among nursing student at School of Health Science, USM because it is believed that students who are better informed with

knowledge of older people can be better able to provide health education in their clinical practice, and they are also the future care providers for the aged population (Kaur et al., 2014).

1.3 Research Questions

I. What is the level of knowledge regarding self-neglect in elderly among nursing students at School of Health Sciences, USM?

II. What is the level of perception regarding self-neglect in elderly among nursing students at School of Health Sciences, USM?

III. Is there an association between knowledge and perception regarding self-neglect in elderly among nursing students at School of Health Sciences, USM?

IV. Is there an association between selected demographic variables (family type and living with an elderly family member) and the perception regarding self-neglect in elderly among nursing students at School of Health Sciences, USM?

1.4 Research Objectives

1.4.1 General Objective

The general objective of this research is to determine the nursing students' knowledge and perception regarding self-neglect in elderly at School of Health Sciences, Universiti Sains Malaysia

1.4.2 Specific Objectives

I. To identify the level of knowledge regarding self-neglect in elderly among nursing students at School of Health Sciences, USM

II. To identify the level of perception regarding self-neglect in elderly among nursing students at School of Health Sciences, USM

III. To determine the association between knowledge and perception self-neglect in elderly among nursing students at School of Health Sciences, USM

IV. To determine the association between selected demographic variables (family type and living with an elderly family member) and perception regarding self-neglect in elderly among nursing students at School of Health Sciences, USM

1.5   Research Hypothesis

H$_{O1}$: There is no significant correlation between knowledge and perception regarding self-neglect in elderly among nursing students at School of Health Sciences, USM

H$_{A1}$: There is a significant correlation between knowledge and perception self-neglect in elderly among nursing students at School of Health Sciences, USM

H$_{O2}$: There is no significant association between selected demographic variables (family type and living with an elderly family member) and perception regarding self-neglect in elderly among nursing students at School of Health Sciences, USM

H$_{A2}$: There is a significant association between selected demographic variables (family type and living with an elderly family member) and perception regarding self-neglect in elderly among nursing students at School of Health Sciences, USM

1.6   Significance of the Study

The significance of this study to the society, the country, the government, the community and the institution is that it bring benefit as it will reduce the complication of self-neglect among elderly which can cause higher in mortality rate in Malaysia. Few studies of self-neglect have been undertaken, and those studies have centered on describing behaviors seen in those who self-neglect and on correlates of self-neglect. There remains no consensus definition, no tested theories, and no targeted interventions or treatment for self-neglect (Braye et al., 2011). Insufficient information on this phenomenon translates into a lack of evidence on which to build best healthcare practices and policies to protect these vulnerable older adults from negative health consequences while protecting their autonomy.

In the provision of acute and chronic care, nurses play an essential role in giving health education, and health promotion for these older people. Nursing students who intend to be healthcare providers may have a lack of knowledge of ageing or hold negative attitudes toward working with elderly people that might influence their willingness to care for or intention to work with them. Significantly, in the past 30 years, student nurses have formed stereotypes and misconceptions about older people, and nurses be likely to have little interest in caring for older people at nursing home, as they more preferred to work with children and adult patients. The number of nurses who would like to deal with elderly has dropped (Hassan & Elhameed, 2013).

This also been proved by several related works of literature stated that there is a lack of educational training programs focusing on Gerontological nursing for all categories of nurses who were dealing with an elderly patient and 63% of older adults expressing an unmet health need as they have been badly threatened by the negative stereotypic attitudes and misunderstanding of nurses (Mohammed et al., 2019). Therefore, nursing

students need gerontological knowledge and experience in order to be able to meet the health care demands of the 21st century (Sheena & Simpkins, 2013).

1.7 Conceptual and Operational Definitions

The terms used in this research proposal is referring to the definition below:

1) **Knowledge**

   The understanding of information acquired through experience or education (Wilson, 2015). In this research, the knowledge is related to nursing students' knowledge regarding self-neglect in elderly to measure basic knowledge of physical, mental, and social facts about old age and ageing as well as common misconceptions.

2) **Perception**

   Perception defines as organization, identification and interpretation of sensory information which to understand the presented information or environment (Schacter, 2011). Context of personal living experience, culture, and beliefs will determine the perception of self-neglect in elderly results in a different judgement of elder self-neglect with different individuals (Wu et al., 2020).

3) **Elderly**

   According to the World Health Organization (2009), a person aged 60 years and above is defined as the elderly or ageing population. However, in each country itself, the age of the elder people differently depending on the policies. Thus, Malaysia approved the aged 60 years old as an elderly person as recommended by the Ministry of Health Malaysia as well as agreed in the World Assembly on Ageing at Vienna in 1982.

4) Self-neglect

The behavior of an elder person that threatens his/her own health or safety. Self-neglect generally manifests itself in an older person as a refusal or failure to provide himself/herself with adequate food, water, clothing, shelter, personal hygiene, medication, and safety precaution (Dong, 2017).

CHAPTER 2 LITERATURE REVIEW

2.1   Introduction

This literature review is to summarize research that has been done on the subject. The aim is to achieve an understanding of the level of knowledge and perception regarding self-neglect in elderly among nursing students. This chapter explains a comprehensive review of the literature includes an overview of self-neglect, nursing students' knowledge and perception on self-neglect in elderly, association between knowledge and perception regarding self-neglect in elderly and theoretical framework are present in this chapter.

2.2   Overview of elderly

The overview of self-neglect in elderly comprises of definition and prevalence of self-neglect in elderly and nurses and self-neglect in elderly.

2.2.1   Definition of self-neglect in elderly

World Health Organization is defined elderly as those who aged 60 or above that equivalent to retirement ages in most of the developed countries (WHO, 2018). Elder abuse and neglect is defined by the World Health Organization as "a single or repeated act, or lack of suitable action, occurring within any relationship where there is a trust expectation which causes an elderly person in harm or distress"(WHO, 2008). Whereas, self-neglect is defined as an inability either intentional or non-intentional to maintain accepted standards of self-care for severe consequences to the health and well-being of the self-neglecters and also to the community (Day, Leahy-Warren, & McCarthy, 2013; Susanne, William, & Ruth, 2006). Self-neglect may be caused by an expansion of seriousness, including declining of self-care, inability to comply with treatment regimes, not consuming foods or drinking, denial of service with proof of

self-neglect, living in disruptive homes and surroundings, and storing of waste and squalor (Day et al., 2013; Gunstone, 2003).

According to the Korea National Center on Elder Abuse (2013), self-neglect is defined as personal behaviours of an older adult that threatens his or her health and safety and is considered a subcategory of elder abuse. Self-neglect usually means rejection or inability to provide oneself with adequate food, water, clothing, shelter, personal hygiene, medication, and safety precautions Also, self-neglect has been mentioned as the failure to perform activities of daily living (ADLs) such as clothing, bathing and basic grooming, which can lead to poor hygiene, living in squalor, lack of food and services, and an excessive number of pets (Lee & Kim, 2014)

Self-neglect is most noticeable in the individual's environment, and healthcare providers are ideally suited to evaluate individuals for self- neglect and to act as the liaison between the individual and other professionals. Although home healthcare nurses are specialists in recognising and intervening in cases of self-neglect, the nursing discipline in self-neglect research has been mostly silent. Fixing the gap in the science of self-neglect in elderly will lead to a greater understanding of the phenomenon, better timeliness of intervening and potentially to better outcomes for people who are affected by self-neglect.

2.2.2 Prevalence of self-neglect in elderly

In Malaysia, empirical data on self-neglect in elderly is not available as the prevalence rate of the problem is still unknown. The prevalence rate of self-neglect in elderly is still not precise, and there is a dearth of research to determine factors that affect elder self-neglect in Malaysia (Mardan, 2018). Elder abuse and neglect can be broadly categorized into physical, psychological or emotional, financial, sexual abuse, and neglect which are most committed by people known to the victims. Prevalence in Asian countries generally higher than Western nations with population estimates of elder abuse and neglect varies from as low as 1.1% to as high as 44.6% (Sooryanarayana et al., 2013).

While, Dong, Simon, and Evans (2010) noted that there were 1.2 million elder self-neglect cases each year in the United States, and form of elder abuse was the most commonly reported to the Agency on Ageing (Dyer, Goodwin, Pickens-Pace, Burnett, & Kelly, 2007). In the United States, the prevalence of self-neglect reported to Adult Protective Services (APS) ranges from 37% to 65% of all elder abuse and neglect cases. The estimated incidence of self-neglect in the United Kingdom is 0.05% per 1,000 in a population of over 60 years. Self-neglect accounts for about 20–25% of cases referred to Elder Abuse Services (EAS) in Ireland (Day et al., 2013).

A cohort study on US population identified a prevalence rate for self-neglect is 9%. Prevalence was significantly showed men aged over 85 years (10.1%) is higher compared to women (7.5%) (Day & McCarthy, 2015). Other than that, a national study conducted in 2004, found that self-neglect referrals accounted for 37.2% of all elder abuse and neglect cases reported to APS. This same study found there to be a 44% increase in reported cases over a 4-year period (2000 to 2004) costing states an average of $8.2 million in APS program funding (Day et al., 2013).

2.2.3   Nurses and self-neglect in elderly

Health care professionals like nurses are an external point of contact for the elderly who may detect neglect and intervene in an ideal role (Capezuti, 2011; Phelan, 2009). This critical position played by nurses can be used by elderly protection policies. It remains to be seen unless they are aware and are prepared to handle this obstacle (Ahmed et al., 2016). Since nurses are always around with elderly patients, they have an essential role in identifying real cases of neglect and suspicious situations. The elderly need nursing care which should be provided by a nurse who is knowledgeable, competent, proactive, respectful and positively motivated about caring for the older persons.

The main aims of providing nursing care to older adults are to promote and maintain an optimum level of health and function and to identify early-stage of health problems. Then, prevent the present disease condition from worsening and prevent further complications. While caring for the elderly, nurses should know what the illness is and how the treatment may be complicated. They must assess the physical, mental and cognitive skills of the patient, understand their acute and chronic health conditions and common medical problems like falls, incontinence and changes in sleep patterns.

2.3   Nursing students' knowledge on self-neglect in elderly

The most significant barrier to intervene self-neglect in elderly is the incomplete understanding of the phenomenon that continues despite the consistency of self-neglect research. Constructing this knowledge could lead to the development of methods to prevent and intervene in this phenomenon that results in enormous individual and social consequences. With the resultant severe consequences from self-neglect coupled with the rising numbers of elderly, development of knowledge of this phenomenon will contribute to lower healthcare spending, the development of important public policy that aimed for the care of elders, and enhanced quality of life for seniors by preventing self- neglect.

In a study conducted by Johnson (2014) stated that many health professionals having frustrating and difficulty to intervene with self-neglect in older people because of little knowledge known about self-neglect. Health professionals like nurses frequently do not aware of elder mistreatment, including self-neglect and the steps that need to take when it is suspected (Johnson, 2014). Also, nurses are more focused on and practised at assessment and intervention for individuals with health issues (Ernst & Smith, 2012). Nurses in general, more than other disciplines are less knowledgeable about the laws that govern reporting and care of elder self-neglect (Schmeidel, Daly, Rosenbaum, Schmuch, & Jogerst, 2012) which may contribute to nurses not taking steps to report behaviours that may indicate self-neglect. The education and scope of practice of a nurse may lead the nurse to describe elderly signs of self-neglect, report their findings, and leave the determination to get a name of this phenomenon to the physician (Schmeidel et al., 2012).

Additionally, there also some studies were conducted to identify the level of knowledge among nursing students about elderly self-neglect. From a review in Egypt,

it was founded that more than 70% of answers that answered by nursing students were incorrectly and the most of respondents (72.8%) had an unsatisfactory level of knowledge regarding care of older adults (Mohammed et al., 2019). This finding was supported by a study conducted by Zakari (2005), who indicated an insufficient level of knowledge among Saudi nursing students (Zakari, 2005). Also, it was in agreement with the results from others study stated that nursing students in the three major universities in Saudi Arabia who had insufficient knowledge regarding ageing and care of the elderly. The majority of these studies also have concluded that most nursing students have little knowledge and interest in working with older people (Celik et al., 2010; Kaur et al., 2014; Shen & Xiao, 2012).

However, it was inconsistent with the findings of a study reported that the fourth-grade students' knowledge and attitudes towards elder people are more positive than the first-grade ones (Merve & İnce, 2017). This finding may be related to several factors such as there is no separate Gerontological nursing speciality, and the geriatric course is not independently separated from general medical-surgical courses and little of clinical training areas in geriatric. Also, other factors that affect nursing judgments in self-neglect can be seen in a 2005 study found that ten widely used textbooks for nursing education were reviewed and found to be lacking information on self-neglect (Lauder, Anderson, & Barclay, 2005). Consistent with Lauder and colleagues (2006) findings, only three of the 21 texts had included any information on self-neglect, and the little information found included only a cursory mention of what self-neglect might look like and a mention of reporting. Thus, many nurses are not sure of who they should report potential of self-neglect to or what to report even though reporting problems include in nursing education (Schmeidel et al., 2012).

2.4   Nursing students' perception towards self-neglect in elderly

Perception is defined as a combination of organization, identification and interpretation of sensory information in which to understand the presented information or environment (Schacter, 2011). Perception on self-neglect in elderly results in a different judgement of elder self-neglect with other individuals was determined by the context of personal living experience, culture, and beliefs (Wu et al., 2020). The awareness of self-neglect in elderly among the community depends on the individual perception on this matter. Individual perceptions of the self-neglect in older people or to any phenomenon differ depending on their learning memory and expectations. Particularly, the perception of self-neglect in elderly may vary by ethnic and cultural groups (Jango, 2013).

Based on the present study in Egypt conducted by Mohammed et al. (2019), it was reported that nursing students have a negative attitude toward older people. This finding may be related to lack of knowledge and education about ageing, hard-living conditions, and changing in family structure that causes loss of value towards the elderly and considers they as a burden on the family to care for them. While this finding was in line with a study demonstrated that nursing students had lower total scores for ageism attitude scale (AAS) and held a negative attitude toward aged persons (Köse et al., 2015). Also, it was supported by a study in Spain which conducted on nursing students at seven different healthcare settings and found that they had less positive attitudes towards the elderly (Zambrini et al., 2008).

However, this finding was against the results of previous studies conducted by (Banister, 2018; Özer & Terkeş, 2014) who found that positive attitude and low negative discrimination toward elderly among the nursing students. Also, it was unlike to a study which compared between medical and nursing students regarding interest

levels and attitudes towards geriatrics in Taiwan and found that nursing students had more positive attitudes than medical students toward elderly people (Wang et al., 2009). Other studies have also reported a positive attitude among nursing students toward older people (Hweidi & Al-Hassan, 2005).

Development of positive attitudes towards older adults and advanced knowledge about ageing and the health care needs of older adults is of utmost importance for nurses. It has been documented that attitudes can influence an individual's behaviour and people with a positive attitude towards anyone who has more positive thoughts about them (Kaur et al., 2014). The attitude towards older people is considered as an important element in providing care to them.

2.4.1 Type of family and living with an elderly family member and perception regarding elderly

Based on the previous study conducted in Turkey, found that young people who grow up in a nuclear family or a fragmented family have lack of knowledge about elderly people, are absence tolerant of them and have a different perspective towards older adults. Also, studies by Boz et al. (2017) and Şahin & Erkal (2018) stated that a person who was having an elderly person in the family, living with an elderly person at home, and frequently meet elderly individuals made positive attitudes of the students towards older adults increased. Many things learned in the family, from the repair of a simple item to the care of a patient or an older adult, from the habit of cleaning to important information about health. However, this finding was against to a study conducted by Altay and Aydin (2015) who determined that there is no relationship between the students' family type and their attitudes towards elderly individuals.

2.5   Association between knowledge and perception regarding self-neglect in elderly among nursing students

Due to the health consequences of self-neglect, the connection between self-neglect and the elderly population, the growing population of elderly people, and the absence of a clear definition for self-neglect used by healthcare professionals, further research to gain an understanding of self-neglect is crucial in protecting and improving the health of this vulnerable population. Coupled with the lack of understanding of self-neglect, there is a paucity of research on this phenomenon. This is especially true regarding the impact that perspectives of healthcare professionals have on outcomes for the self-neglecting individual (Johnson, 2014).

Based on the previous study conducted in India, there was a significant association between knowledge and attitude regarding the care of the elderly among the nursing students. As the knowledge about the care of elderly increases, the attitude towards elderly people became more positive (Kaur et al., 2014). These findings were same to a study by Chan, Chun and Chung (2008), they found that there are existed a good correlation between perception of abuse and tendency to report and that reporting behaviour was influenced by the higher level of knowledge about elder abuse. However, it was against with the findings of the study conducted by Oyetunde et al. (2013), they stated that nurses had a negative attitude towards the care of the elderly even though they displayed a fairly good knowledge of geriatric care. Thus, special training, provision of the geriatric ward, and adequate staffing were required for effective care of the elderly to reduce stress and improve quality care. There is a need for continuing education on quality care to improve nursing practice in the care of the elderly (Oyetunde, Ojo, & Ojewale, 2013).

Other than that, there was also a current study conducted by Mohammed et al., (2019) who found that a significant positive association between knowledge level and attitude regarding elderly care among nursing students in Egypt. The attitudes become more positive as the level of knowledge about elderly people increase. This finding was supported by the results of other studies which found that increased level of knowledge regarding elderly care affects the negative attitudes scores of nursing students became decrease (Hassan & Elhameed, 2013; Y.-S. Lee, Shin, & Greiner, 2015).

2.6   Theoretical Framework

The biopsychosocial model is an interdisciplinary model that explores the interconnection between biology, psychology, and socio-environmental factors. This model was first proposed by George L. Engel and Jon Romano of the University of Rochester (Engel & Romano, 1980). Biological factors (genetic, biochemical, etc.), psychological factors (mood, personality, behaviour, etc.) and social factors (cultural, socioeconomic, medical) and their complex interactions in understanding health, illness, and health care delivery are systematically considered in the biopsychosocial approach.

This biopsychosocial model's purpose of having a better understanding health and illness. The model is relevant to topics such as health, medicine, and development. It also helps physicians better understand their whole patient. They are considering not only physiological and medical aspects but also psychological and sociological well-being (Epstein, Borrell-Carrio, & Suchman, 2004).
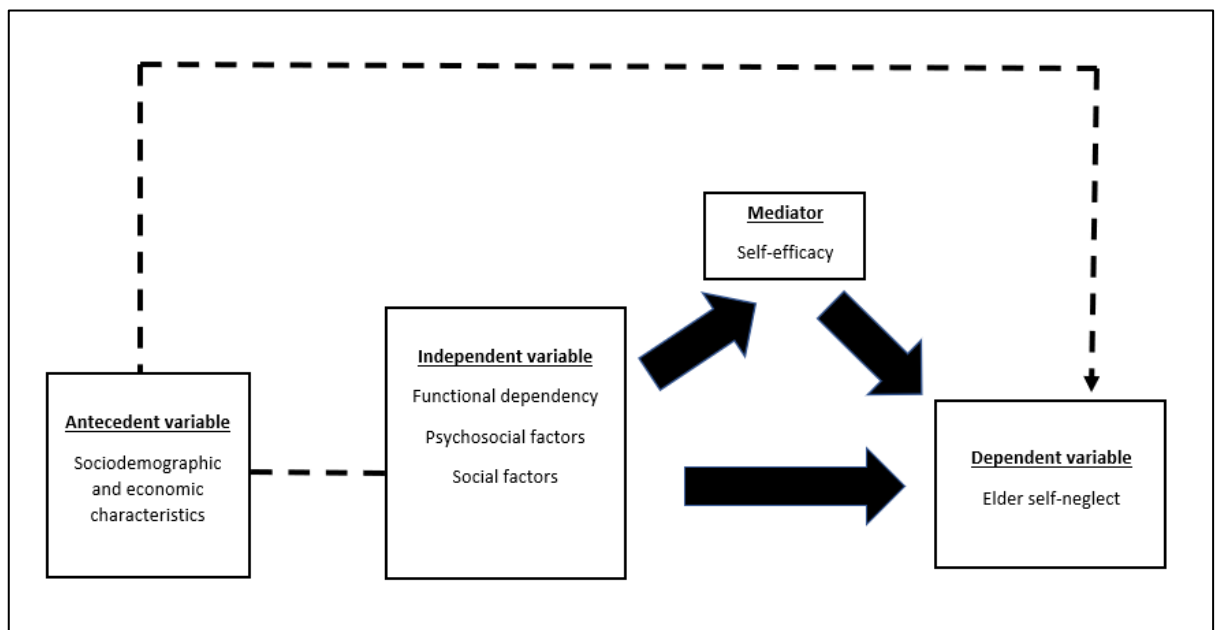

Figure 2.1   Biopsychosocial model (Adapted from Mardan, 2018)

Based on the biopsychosocial model, a conceptual framework was developed as in Figure 2.2 to explain the relationships between the bio-psychosocial variables and knowledge and perception regarding self-neglect in elderly. Antecedent variables include sociodemographic and academic status (age, gender, race, and level of education). The independent variable comprises of biological factors (physical health, gender), psychosocial and social factor (family relationship). The conceptual framework shows the relationship between biopsychosocial factors with knowledge and perception regarding self-neglect in elderly among nursing students.
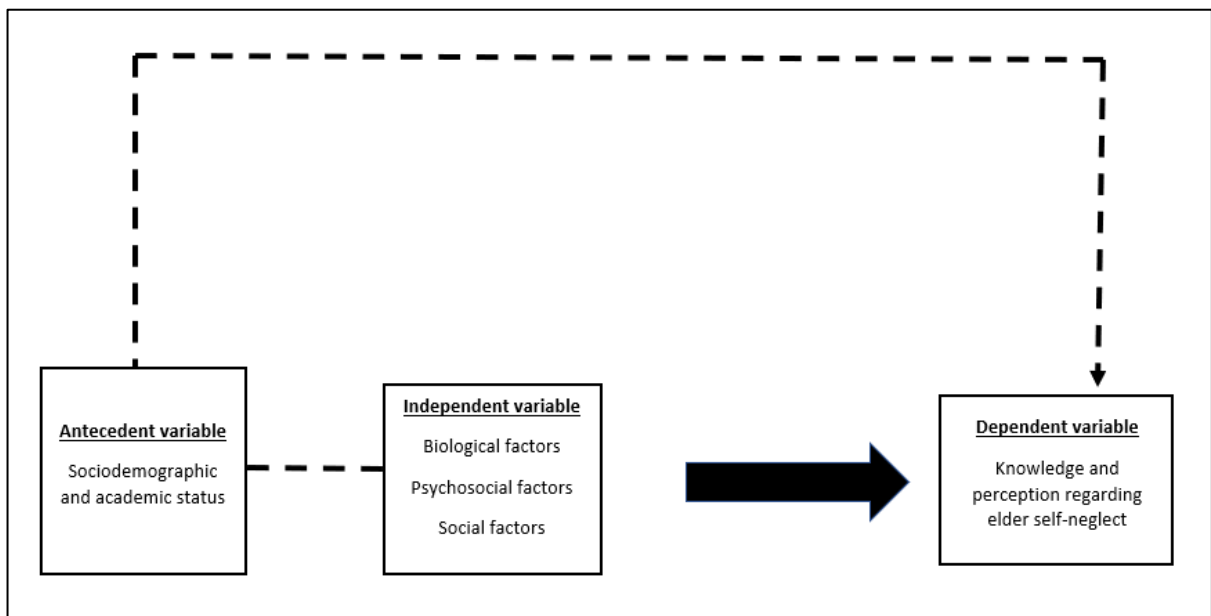

Figure 2.2   Modified from biopsychosocial model (Adapted from Mardan, 2018)

CHAPTER 3 METHODOLOGY & METHODS

3.1 Introduction

This chapter outlines how the study had been carried out, including the methodology and methods used. A flow chart of the course was provided within this report. Along with the procedures and approach used, the actual process of carrying out the study had also been described, such as research design, population and study setting, sample and sample selection. It also detailed ethical consideration and the method used in the analysis.

3.2 Research Design

The research design selected for this study was a cross-sectional study using a questionnaire to assess the level of knowledge and perception regarding self-neglect in elderly among nursing students at School of Health Sciences, Universiti Sains Malaysia (USM).

3.3 Study Setting and Population

To propose the objective of the study, the research location was at the School of Health Sciences, Universiti Sains Malaysia (USM). The research duration of this study was from October 2020 until July 2021. The target population were students that study in nursing at the School of Health Sciences, Universiti Sains Malaysia (USM). The total number of students was 165. The population meets the inclusion and exclusion criteria.

3.4 Sampling Plan

3.4.1 Sample criteria- Inclusion and exclusion criteria

The inclusion criteria

1) Nursing students from year two and year three in diploma of nursing and from year three and year four in a degree of

nursing at School of Health Sciences, Universiti Sains Malaysia

(USM)

2)   Able to understand in the English language

The exclusion criteria

1) Students who have poor internet access

For inclusion criteria, nursing student from year two and year three in diploma of nursing and from year three and year four in a degree of nursing had been chosen because they had learned Gerontological nursing. Also, they had been exposed to the clinical training areas in geriatric at Hospital Universiti Sains Malaysia (HUSM) and had working with elder people.

3.4.2   Sampling Size Estimation

The sample size was calculated based on comparing two means using a power and sample size calculation by Raosoft Calculator software and Select Statistical Services web tools. The sample size was an integral feature of any empirical study in which a sample seeks to draw inferences about a population. A random sample needs to be of sufficient size to generalise from a random sample and avoid sampling errors or biases (Taherdoost, 2017).

Objective 1: To identify the level of knowledge on regarding self-neglect in elderly among nursing students at School of Health Sciences, USM.

The sample size was calculated using Raosoft Calculator Software (2004) to get the sample size (n) needed in this study. With a confidence level of 95% and the margin

sampling error 5% (significance level =0.05), the sample size obtained is 116 students (n=116). Considering that 10% drop out of the respondents from the calculated sample size of the study, hence the minimum sample size required is

n = 116 + 10% drop out

= 116 + 10

= 126

Objective 2: To identify the level of perception on regarding self-neglect in elderly among nursing students at School of Health Sciences, USM

The sample size was calculated using Raosoft Calculator Software (2004) to get the sample size (n) needed in this study. With a confidence level of 95% and the margin sampling error 5% (significance level =0.05), the sample size obtained is 116 students (n=116). Considering that 10% drop out of the respondents from the calculated sample size of the study, hence the minimum sample size required is

n = 116 + 10% drop out

= 116 + 10

= 126

Objective 3: To determine the association between knowledge and perception on regarding self-neglect in elderly among nursing students at School of Health Sciences, USM

This objective uses the association sample size. The sample size was calculated using web tool from http://www.sample-size.net/correlation-sample-size/ with a = 0.050, ß = 0.2 and r = 0.3. The minimum sample size required is 85.