

See discussions, stats, and author profiles for this publication at: <https://www.researchgate.net/publication/384759841>

# A Study to Assess the Effectiveness of Educational Intervention on Knowledge Regarding Palliative Care Among Nursing Students in Selected Nursing College of Kashmir

Article · October 2024

CITATIONS

0

READS

40

8 authors, including:



[Ms Asmat Parveen](#)

Islamic University of Science and Technology

39 PUBLICATIONS 99 CITATIONS

[SEE PROFILE](#)



[Mohammad Azam Dar](#)

Islamic University of Science and Technology

5 PUBLICATIONS 10 CITATIONS

[SEE PROFILE](#)

# A Study to Assess the Effectiveness of Educational Intervention on Knowledge Regarding Palliative Care Among Nursing Students in Selected Nursing College of Kashmir

Asmat Parveen<sup>1</sup>, Mohammad Azam Dar<sup>2\*</sup>, Wajhat Ramzan<sup>3</sup>, Mumtaza Yaqoob<sup>3</sup>, Syed Heena<sup>3</sup>, Suhaib Muzafar<sup>3</sup>, Muzamil Mohi ud din<sup>3</sup>, Bisma Farooq<sup>3</sup>

## Abstract

*Palliative care is a relatively new specialization, having been reintroduced in 1967. Palliative care, according to the World Health Organization (WHO), is a method that improves patients' and their families' quality of life by concentrating on symptom avoidance and relief. Suffering is alleviated via early detection, precise evaluation, and treatment of physical, psychological, and spiritual pain and associated disorders. While cancer patients continue to be the most common recipients of palliative care, people with chronic, progressive illnesses that will eventually lead to death are increasingly recognizing the need for the same type of palliative care. A quantitative evaluative research approach with non-experimental research design, one group pre-test and post-test study was carried out on 60 students of the second and third years of the Bachelor of Science in nursing programme at Syed Mantaqui Memorial College of Nursing and Medical Technology in Awantipora, Kashmir. Students who declined to participate or were absent throughout the data collecting period were omitted. The convenience sampling method was used to choose the sample for the current inquiry. The knowledge of palliative care was evaluated using a standardised questionnaire, "The Palliative Care Knowledge Test", as part of a pre-test assessment followed by a structured instruction programme and a post-test evaluation. The gathered data were examined and interpreted in light of the study's goals. This pre-test scores shows that 47(78.3%) had inadequate knowledge score ranging from (0–7) while 13(21.7%) had intermediate knowledge while 0(0%) had little knowledge. Post-test scores revealed that 4(6.7%) of students had inadequate knowledge, 14(23.3%) demonstrated intermediate knowledge, whereas 42(70%) demonstrated sufficient understanding. The study revealed that the structured teaching programme given to the study subjects was very informative and that helped the study subjects in improving their knowledge related to palliative care.*

### \*Author for Correspondence

Mohammad Azam Dar  
E-mail: [daraazam777@gmail.com](mailto:daraazam777@gmail.com)

<sup>1</sup>Associate Professor/Principal, Department of Nursing, Islamic University of Science and Technology Awantipora, Kashmir, India

<sup>2</sup>Tutor, Department of Nursing, Islamic University of Science and Technology Awantipora, Kashmir, India

<sup>3</sup>Student, Department of Nursing, Islamic University of Science and Technology Awantipora, Kashmir, India

Received Date: February 27, 2023

Accepted Date: April 11, 2023

Published Date: April 19, 2023

**Citation:** Asmat Parveen, Mohammad Azam Dar, Wajhat Ramzan, Mumtaza Yaqoob, Syed Heena, Suhaib Muzafar, Muzamil Mohi ud din, Bisma Farooq. A Study to Assess the Effectiveness of Educational Intervention on Knowledge Regarding Palliative Care Among Nursing Students in Selected Nursing College of Kashmir. Journal of Nursing Science & Practice. 2023; 13(1): 31–38p.

**Keywords:** Effectiveness, educational intervention, knowledge, palliative care, nursing students

## INTRODUCTION

Palliative care is a relatively new specialization, having been reintroduced in 1967. Palliative care, according to the World Health Organization (WHO), is an approach that enhances the quality of life for patients and their families who are dealing with issues related to life-threatening illnesses by preventing and relieving suffering through the accurate assessment and treatment of pain and other

physical, psychosocial, and spiritual issues. Palliative care is explicitly acknowledged under the human right to health. Treatment for many illnesses must be palliative. The majority of patients in need of palliative care have long-term illnesses such as diabetes (4.5%), chronic respiratory disease (10.3%), AIDS (5.7%), cardiovascular disease (38.5%), and cancer (34%). Palliative care may be required for a number of different illnesses, including drug-resistant TB, multiple sclerosis, Parkinson's disease, chronic liver disease, multiple sclerosis, Parkinson's disease, rheumatoid arthritis, neurological disorders, and congenital malformations [1].

Palliative care is becoming more important in today's health system. The primary objective of palliative care is to manage patients' symptoms, alleviate their discomfort, and enhance their quality of life. As they spend the most time with patients, nurses are a crucial component of the palliative care team in delivering high quality care. Yet, inadequate awareness about palliative-care is seen as one of the primary obstacles to the development and practice of palliative care [2].

Palliative care enhances the quality of life for patients suffering physical, psychological, social, or spiritual obstacles associated with life threatening disease. Every year, some 40 million people require palliative care, with 78% of them living in low- and middle-income countries. The worldwide need for palliative care will continue to increase due to the ageing of populations, the increased prevalence of non-communicable illnesses, and some communicable diseases [3].

The need of the study is to improve the knowledge of students about the impact of palliative care besides usual care, to offer a support system to help the serious and to enable patients to live as actively as possible, to alleviate pain, shortness of breath, nausea, and other uncomfortable symptoms, and to integrate the emotional and spiritual components of patients' care. Develop new methods to identify and fix common and uncommon symptoms like chronic pain, dyspnea and malignant ascites and to offer a support system to help the family cope [4].

## **RESEARCH METHODOLOGY**

### **Research Approach and Design**

A quantitative, one-group, pre- and post-experimental design.

### **Population and Sample**

The population for this study comprised of the students in their second and third years of B.Sc. in Nursing at Syed Mantaqui Memorial College of Nursing and Medical Technology in Awantipora. The sample size of the study was 60 students of SMMCON&MT of IUST, Awantipora and the samples were selected by consecutive sampling technique.

### **Criteria for Sample Selection**

#### **Inclusion Criteria**

B.Sc. nursing students of SMMCN&MT who were willing to participate.

#### **Exclusion Criteria**

Nursing students who weren't around when the data were being collected.

### **Data Collection Process**

This experimental study approved by Institutional Ethical committee of (No. IUST /IEC-/22/56) by Islamic University of Science and Technology, Awantipora, Kashmir was conducted from 5th August to 8th August 2022 on B.Sc. nursing 2nd and 3rd year students of Syed Mantaqui Memorial College of Nursing and Medical Technology, Awantipora.

## **DATA ANALYSIS AND INTERPRETATIONS**

### **Scoring Pattern**

The level of knowledge among study subjects was assessed using a standard questionnaire tool (Palliative Care Knowledge Test). In the questionnaire every question was given a score of 1 (correct),

2 (incorrect) and 3 (unsure), further these scores were changed into 0 (incorrect) and 1 (correct). Add the scores of each question to get a total of 0 (minimum) and 20 (maximum) (Table 1).

**Table 1.** To interpret the knowledge, scores were categorized.

Level of knowledge	Range
Inadequate	0–7
Moderate	8–14
Adequate	15–20

## RESULTS

The analyzed data were organized and presented in the form of tables which are as under:

### Section 1: Frequency and percentage distribution of socio demographic variables

Table 2 reveals that 58(96.7%) subjects are in the age group of 21–23 and 2(3.3%) are in the age group of <20 majority of subjects 55(91.7%) resides in rural areas where as 5(8.3%) resides in urban area. Monthly income of 11(18.3%) is less than 10000, 24 subjects (40%) have income between 10000–20000 and 25(41.4%) subjects have monthly income more than 20000. Most of the subject 41(68.3%) were female and the rest 19(31.7%) were males. Majority of the subjects 45(75.0%) were from the nuclear family and the rest 15(25%) were from the joint family.

**Table 2.** Distribution of socio demographic variables.

Variables	Opts	Percentage	Frequency
Age	One	3.3%	2
	Two	96.7%	58
	Three	0.0%	0
	Four	0.0%	0
Gender	Male	31.7%	19
	Female	68.3%	41
	Other	0.0%	0
Family Type	Joint family	25.0%	15
	Nuclear family	75.0%	45
Monthly Income	Less than Rs 10000	18.3%	11
	10000 to Rs 20000	40.0%	24
	More than Rs 20000	41.7%	25
Residence	Rural	91.7%	55
	Urban	8.3%	5
Religion	Muslim	100.0%	60
	Hindu	0.0%	0
	Christian	0.0%	0
	Others	0.0%	0

### Section 2: Pre-test and post-test knowledge score overall level of knowledge regarding palliative care

Pre-test and post-test knowledge score overall level of knowledge regarding palliative care is observed and score is mentioned in Tables 3–8.

**Table 3.** Table showing level of scores (pre-test score).

Criteria Measure of Pre-test Knowledge Score	
Score Level (N= 60)	PRE-TEST f (%)
Inadequate Knowledge (0–7)	47(78.3%)
Moderate Knowledge (8–14)	13(21.7%)
Adequate Knowledge (15–20)	0(0%)

Maximum Score=20, Minimum Score=0

**Table 4.** Mean, SD, median, maximum, minimum and range.

Descriptive Statistics	Mean	S.D.	Median Score	Maximum	Minimum	Range
Pre-test Knowledge	5.10	3.139	5	12	0	12

**Table 5.** Table showing level of scores (post-test score).

Criteria Measure of Post-test Knowledge Score	
Score Level (N= 60)	Post-Test f(%)
Inadequate Knowledge (0–7)	4(6.7%)
Moderate Knowledge (8–14)	14(23.3%)
Adequate Knowledge (15–20)	42(70%)

Maximum Score=20 Minimum Score=0

**Table 6.** Descriptive statistics table (N=60).

Descriptive Statistics	Mean	S.D.	Median Score	Maximum	Minimum	Range
Post-test Knowledge	15.07	3.454	16	20	7	13

**Table 7.** Table showing level of scores (pre/post-test).

Criteria Measure of Knowledge Score		
Score Level (N= 60)	Pre-test f(%)	Post-test f(%)
Inadequate Knowledge (0–7)	47(78.3%)	4(6.7%)
Moderate Knowledge (8–14)	13(21.7%)	14(23.3%)
Adequate Knowledge (15–20)	0(0%)	42(70%)

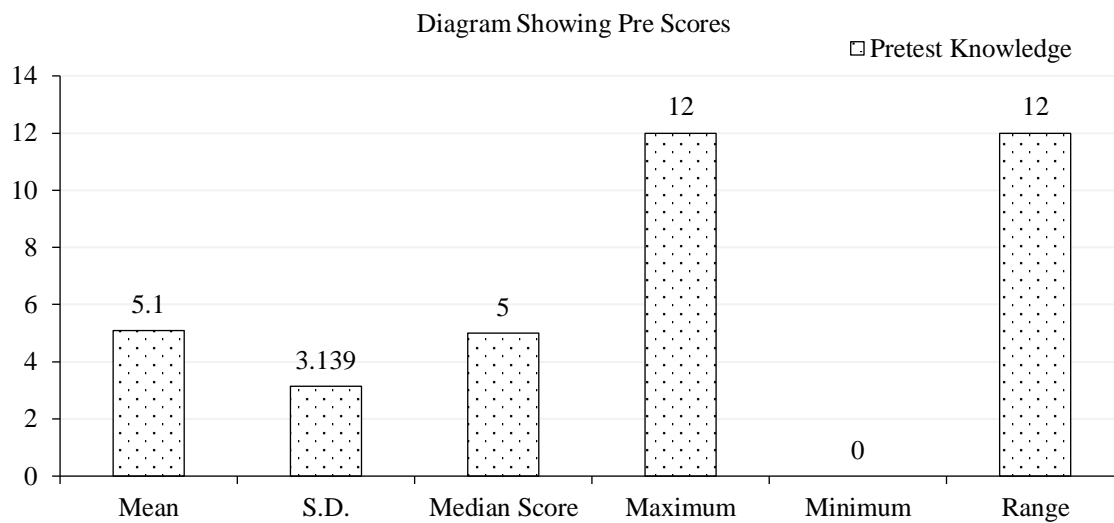
**Table 8.** Comparison of pre and post-scores.

Paired T Test	Mean±S.D.	Range	Mean Diff.	Paired T Test	P value
Pre-test Knowledge	5.1±3.139	0-12	9.970	19.702 *Sig	<0.001
Post-test Knowledge	15.07±3.454	7-20			

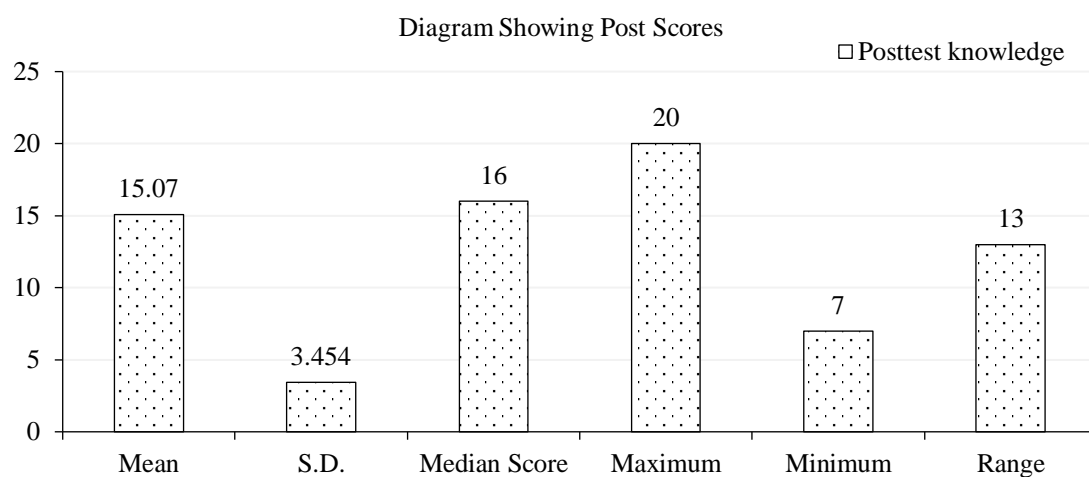
Figure 1 shows that mean pre-test score was 5.10 with SD of 3.139, the highest score obtained was 12 and lowest score obtained was 0 (range = 12).

Figure 2 shows, that overall post-test mean was 15.07 with SD 3.454 and median 16. Maximum score obtained was 20 and minimum was 7.

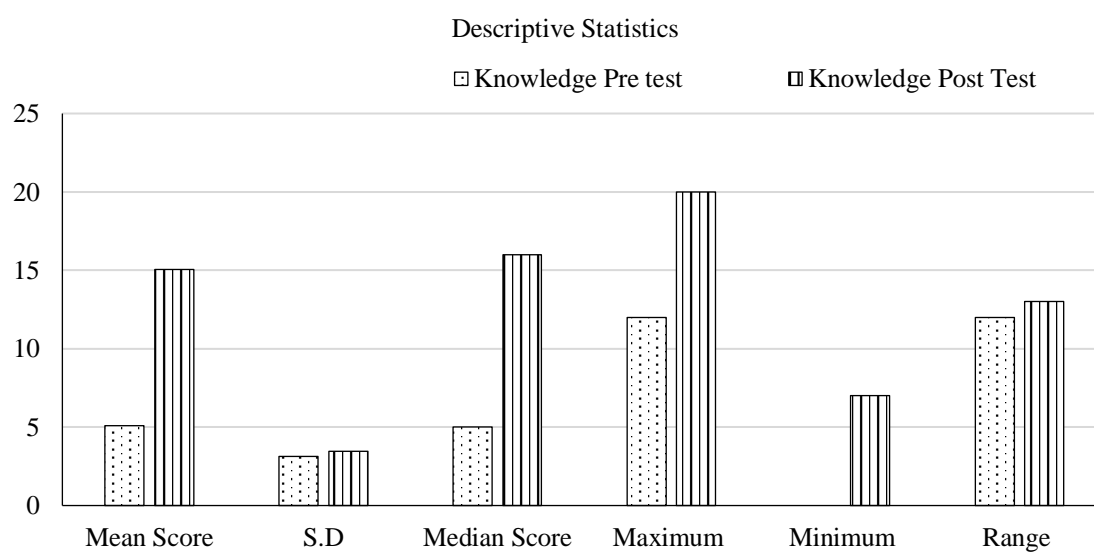
Figure 3 shows the post-test mean  $\pm$  SD  $15.07 \pm 3.454$  is greater than pre-test mean  $\pm$  SD of  $5.1 \pm 3.139$ . Median score improved from 05 in pre-test to 16 in post-test. Maximum score improved to 20 and minimum score to 07.



**Figure 1.** Pre-score tests.

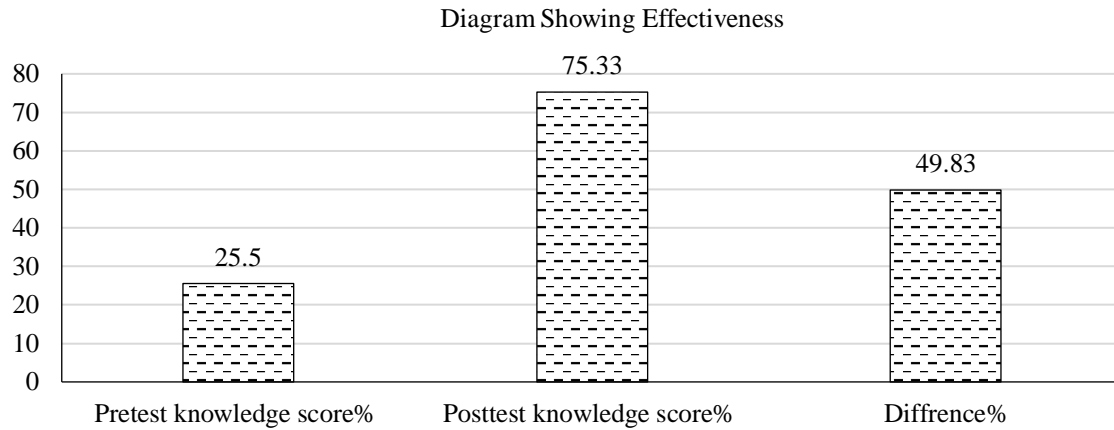


**Figure 2.** Post-score tests.



**Figure 3.** Descriptive statistics.

Figure 4 shows enhancement of knowledge after giving educational intervention. The mean percentage was enhanced to 75.33% from 25.50% in pre-test and overall knowledge improvement was 49.83% which shows that educational intervention was effective.



**Figure 4.** Knowledge after giving educational intervention.

### Section 3: Association of demographic variables with level of knowledge

Association of demographic variables with level of knowledge is observed and mentioned in Table 9.

**Table 9.** Association of pre-test knowledge scores with selected socio-demographic variables.

Variables	Opts	Adequate Knowledge	Moderate knowledge	Inadequate Knowledge	Chi Test	P Value	df	Table Value	Result
Age	One	0	1	1	0.979	0.323	1	3.841	Not Significant
	Two	0	12	46					
	Three	0	0	0					
	Four	0	0	0					
Gender	Male	0	3	16	0.566	0.452	1	3.841	Not Significant
	Female	0	10	31					
	other	0	0	0					
Family Type	Joint family	0	2	13	0.818	0.366	1	3.841	Not Significant
	Nuclear family	0	11	34					
Monthly Income	Less than Rs 10000	0	4	7	1.794	0.408	2	5.991	Not Significant
	10000 to Rs 20000	0	4	20					
	More than Rs 20000	0	5	20					
Residence	Rural	0	11	44	1.080	0.299	1	3.841	Not Significant
	Urban	0	2	3					
Religion	Muslim	0	13	47		N.A		N.A	
	Hindu	0	0	0					
	Christian	0	0	0					
	Others	0	0	0					

## DISCUSSION

In the current research, the replies of the participants to the standard instrument indicated that the majority of nursing students, 78.3%, were female (47) had inadequate knowledge, 21.7% (13) had moderate knowledge and no student had adequate knowledge. The overall pre-test knowledge mean was 5.10 with mean % of 25.50% and standard deviation of 3.14. The highest score obtained was 12 and lowest score was 0. A similar study was conducted by Ahmad E Aboshaiqah (2020) on predictors of palliative care knowledge among 409 nursing students from two academic institutions in Saudi Arabia. Palliative Care Quiz for Nursing (PCQN) which is a 20-item standardized questionnaire was used to collect data. The mean PCQN score of the participants was 5.23 (SD = 3.24, range = 0–12), indicating inadequate understanding of palliative care among students [5].

Four students (6.7%) had insufficient post-test knowledge, fourteen (23.3%) had moderate knowledge, and forty-two (70%) had acceptable knowledge. The overall post-test knowledge mean was 15.07 with mean % of 75.30% and standard deviation of 3.454. The highest score obtained was 20 and lowest score was 07. El-Nagar and Lawend (2013) conducted a similar study and came to the conclusion that nurses' knowledge and confidence in the care of children with chronic illnesses are increased by palliative care education [6]. The findings show that there is improvement of 49.83% in mean % between pre-test and post-test knowledge scores which depicts the effectiveness of educational interventions. Based on the results it accepts the hypothesis  $H_1$  which states that "there is significant difference between pre-test and post-test knowledge scores". Therefore, the hypothesis  $H_0$  that "there is no substantial change between pre and post-test knowledge scores" is rejected. DNP, MS, Balicas et al. (2018) did a similar research and found that a short palliative care nursing education improved nurses' understanding of palliative care [7].

There was no significant correlation between the pre-test level of knowledge and the demographic characteristics examined (age, gender, family type, income, residence and religion) ( $P > 0.05$ ).

In 2017, SE Elsaman performed a similar research on the knowledge and attitudes of undergraduate critical care nursing students on the treatment of dying patients. According to the results of the chi square test, there is no statistically significant correlation between knowledge and demographic factors ( $P > 0.05$ ) [8–15].

## CONCLUSION

The findings of the study revealed that overall pre-test knowledge score shows 13(21.7%) of study subjects had moderate knowledge and 47(78.3%) of the research participants had poor understanding of palliative care, while none had excellent knowledge. After the pre-test, educational intervention was given to the study subjects in order to enhance their knowledge related palliative care. The post-test knowledge score revealed that 42(70%) of study subjects had adequate knowledge, 14(23.3%) of the participants had intermediate knowledge, whereas 4(6.7%) had poor knowledge. Above results revealed that the educational intervention given to the study subjects was very informative and that would help the study subjects to improve their knowledge related to palliative care.

## Acknowledgement

The researcher's acknowledgments given to all study participants, Syed Mantaqui Memorial College of Nursing and Medical Technology, Awantipora, Kashmir for their support from the beginning to the end of the research process.

## REFERENCES

1. Viewed on: WHO | WHO Definition of Palliative Care. WHO. Archived from the original on 4 October 2003. Retrieved 4 December 2019. <https://www.who.int/health-topics/palliative-care>
2. Viewed on: Youttam Laudari, Slide share (online), Palliative care and End of life care, 4 January 2018. <https://www.slideshare.net/ooooottam/palliative-care-and-end-of-life-care>



3. Al Qadire M. Knowledge of palliative care: An online survey. *Nurse Educ Today*. 2014 May 1; 34(5): 714–8.
4. Prem V, Karvannan H, Kumar SP, Karthikbabu S, Syed N, Sisodia V, Jaykumar S. Study of nurses' knowledge about palliative care: a quantitative cross-sectional survey. *Indian J Palliat Care*. 2012 May; 18(2): 122.
5. Kirkpatrick AJ, Cantrell MA, Smeltzer SC. Relationships among nursing student palliative care knowledge, experience, self-awareness, and performance: An end-of-life simulation study. *Nurse Educ Today*. 2019 Feb 1; 73: 23–30.
6. Zhou Y, Li Q, Zhang W. Undergraduate nursing students' knowledge, attitudes and self-efficacy regarding palliative care in China: A descriptive correlational study. *Nursing Open*. 2021 Jan; 8(1): 343–53.
7. Al-Azri M, Al-Saidi S, Al-Musilhi J, Al-Mandhari Z, Panchatcharam SM. Knowledge and experiences of final year medical and nursing students with regard to palliative care at Government University in Oman: a questionnaire based study. *J Cancer Educ*. 2021 Aug; 36(4): 747–54.
8. Gelegjants D, Yong Yoo J, Kim J, Sun Kim J. Undergraduate nursing students' palliative care knowledge and attitudes towards end-of-life care: a cross-sectional descriptive study. *Contemp Nurse*. 2020 Nov 1; 56(5-6): 477–90.
9. Eleke C, Azuonwu G, Agu IS, Nnorom RM, Ogini AN, Eleke-Bempong E, Uzoma RA. Knowledge of palliative care among professional nurses in south east Nigeria: A needs assessment for continuing education. *Int J Afr Nurs Sci*. 2020 Jan 1; 13: 100237.
10. Aboshaiqah AE. Predictors of palliative care knowledge among nursing students in Saudi Arabia: A cross-sectional study. *J Nurs Res*. 2020 Feb 1; 28(1): e60.
11. Jiang Q, Lu Y, Ying Y, Zhao H. Attitudes and knowledge of undergraduate nursing students about palliative care: An analysis of influencing factors. *Nurse Educ Today*. 2019 Sep 1; 80: 15–21.
12. Paknejadi F, Hasavari F, Khaleghdoost Mohammadi T, Kazemnejad Leili E. Nurses' knowledge of palliative care and its related factors. *J Holist Nurs Midwifery*. 2019 Sep 10; 29(4): 236–42.
13. Dimoula M, Kotronoulas G, Katsaragakis S, Christou M, Sgourou S, Patiraki E. Undergraduate nursing students' knowledge about palliative care and attitudes towards end-of-life care: a three-cohort, cross-sectional survey. *Nurse Educ Today*. 2019 Mar 1; 74: 7–14.
14. Polat Ü, Karataş T. Nursing students' knowledge of palliative care at a university in Turkey. *Res Theory Nurs Pract*. 2018 Aug 1; 32(3): 276–95.
15. Bilal M. The knowledge of palliative care and the attitude toward it among the nurses at Sabia General Hospital 2018. *Sudan J Med Sci*. 2018; 13(4): 301–10.