



EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME REGARDING SPIRITUAL HEALTH AND ITS IMPACT ON QUALITY PATIENT CARE AMONG NURSING STUDENTS

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ABSTRACT

Background: "We are not human beings having a spiritual experience. We are spiritual beings having a human experience." *Teilhard de Chardin*. Every citizen in the country has a right to receive safe and quality medical treatment achieving universal health coverage is a target (3.8) under the sustainable development goal (SDG3). Spiritual care is a recognized field in nursing (Baldacchino 2006) and an element of quality nursing care (McEven 2005). The aim of the study is to evaluate the effectiveness of structure teaching program in spiritual health among the nursing student in terms of knowledge and attitude as compare to control group. **Method:** The method of this study was pre post interventional research. Nursing student fresher were chosen as the study sample. Study intervention was the implementation of structured teaching program based on spiritual health, mindful breathing exercise and focusing in providing the spiritual care for patient. Two sets of instruments were used to collect quantitative data from nursing students. Structured questionnaires were administered pre & post to assess the knowledge on spiritual health and second tool was spiritual assessment scale by O'Brien (2014) 21 items scale to evaluate the attitude of nursing students regarding spiritual health. **Result:** The study findings revealed that in Experimental Group (knowledge Score) mean and standard deviation of pre intervention score is 74.82 and 9.39 and Post intervention score were 88.80 and 9.52 and Experimental Group (Attitude Score) mean and standard deviation of pre is 82.50 and 9.06 and Post Intervention Mean and Standard Deviation is 78.01 and 12.76. In control group the pre & post intervention score 74.82 and 9.39 and Post intervention score were 76.79 and 12.62. The study concluded that structured teaching program on spiritual health was an effective method to increase the knowledge and towards spiritual health.

KEYWORDS : Spiritual Health, Knowledge, Attitude, Structured Teaching Program, Evaluate and Effectiveness.

INTRODUCTION

"Science gets impact on physical health. 'Science gets us physical comforts, spirituality brings us mental calm'. *Dalai Lama 2006*. Spirituality is a term rich in connotation. For still others it is a set of concrete beliefs and dogma that represent an ultimate truth that is the basis of everything in this world. The term "spirituality" will be used to mean "a set of beliefs that function to provide meaning to life. (Manghan T.A). Spirituality has been defined as a concept which: encompasses all of an individual's aspects (Strang et al 2002; Read 1992); is more comprehensive than religion (Rennick 2005; Baker 2003); involves both interpersonal relationships and those about the meaning of life, particularly at times of crisis and illness (Baldacchino 2006). There is need to train nurses to provide spiritual care, as one of the basic competencies of nursing, based on patient's perception and culture has been considered highly important. Quality of patient care is the main purpose of nursing education. It can be attained by many means. Early medical and nursing experts were not aware with responsible factors of patient care but so and so efforts had been taken in improvement of quality nursing care. Spirituality has its own role in improving the clinical practice. This study is conducted with the aim of introducing structure teaching program in spiritual health and determining its effectiveness on nursing students in terms of knowledge and attitude. The American Medical Association (AMA 1991) has defined quality as the degree to which care services influence the probability of optimal patient outcome".

STATEMENT OF THE PROBLEM

A study to evaluate the effectiveness of structured teaching programme regarding spiritual health and its impact on quality patient care among nursing students studying in selected nursing college.

MATERIAL & METHOD:

The method of this study was pre post interventional research. GNM student's novice to profession, fresher were chosen as the study sample. Total enumeration method was used in sampling process. Setting: Study was conducted on nursing student fresher batch studying in three nursing colleges of

Meerut. Instrument: Two sets of instruments were used to collect quantitative data from nursing students. Structured questionnaires were administered pre & post to assess the knowledge on spiritual health and second tool was spiritual assessment scale by O'Brien (2014) 21 items scale to evaluate the attitude of nursing students. Study intervention was the implementation of structured teaching program based on based on spiritual health, mindful breathing exercise. The dependent variable of the study is knowledge & attitude of the nursing students. Independent variable is the structured teaching programme. By means of statistical package for the social science software data were analyzed and the level of significance was considered at $p < 0.05$.

Findings of the study

Experimental Group (Knowledge Score): The study findings revealed that in Experimental Group (knowledge Score) mean and standard deviation of pre intervention score is 74.82 and 9.39 respectively and Mean & Standard deviation of Post intervention score were 88.80 and 9.52.

TABLE - I(A) n=100

Category	Pre test	Post test I	x ² value	p value
Highly Spiritual	22	49	18.21	0.0001
Average	72	49		
Low spiritual	06	1		

Control Group (Knowledge Score)

The study findings revealed that in Control Group (Knowledge Score) mean and standard deviation of pre intervention score is 77.15 and 9.20 respectively and Mean & Standard deviation of Post intervention score were 79.86 and 8.50.

TABLE - I(B)

Category	Pre test	Post test I	x ² value	p value
Highly spiritual	77	62	0.970	0.62
Average	16	15		
Low spiritual	1	0		

Experimental group (Attitude score)

The study findings revealed that in Experimental Group (Attitude Score) mean and standard deviation of pre intervention score is 82.50 and 9.06 respectively and Mean & Standard deviation of Post intervention score were 78.01 and 12.76.

TABLE – II(A)

n= 100

Category	Pre test	Post test I	x ² value	p value
Positive Attitude	92	96	2.35	0.125
Uncertain	8	3		NS
Negative attitude	0	0		

Control group (Attitude score)

The study findings revealed that in Control Group (Attitude Score) mean and standard deviation of pre intervention score is 74.82 and 9.39 respectively and Mean & Standard deviation of Post intervention score were 76.79 and 12.62.

TABLE – II (B)

n= 100

Category	Pre test	Post test I	x ² value	p value
Positive Attitude	91	76	0.664	0.415
Uncertain	3	01		NS
Negative attitude	0	0		

Mean, Mean difference, standard deviation of differences, standard error of mean difference and 't' value of post-test knowledge scores of nursing students in experimental group and control group.

TABLE – III

Post Test Knowledge Score	Mean ± SD	t Value	p-value
Experimental Group (n=99)	80.80 ± 9.52	2.72	0.001 Significant
Control Group (n=77)	76.86 ± 9.46		

Mean, Mean difference, standard deviation of differences, standard error of mean difference and 't' value of post-test attitude scores of nursing students in experimental group and control group.

TABLE – IV

Post test Attitude Score	Mean ± SD	t-value	p-value
Experimental Group (n=99)	78.01 ± 12.62	1.85	>0.05 (NS)
Control Group (n=77)	79.86 ± 8.50		

DISCUSSION:

1. Findings related to selected age group of samples:

Present study was done on nursing students who were doing nursing course (novice in profession) in age group 17-28 years studying in nursing colleges.

2. Findings of the comparison of pre and post intervention of knowledge scores with experimental and control group

The study findings revealed that in Experimental Group (knowledge Score) mean and standard deviation of pre intervention score is 74.82 and 9.39 respectively and Mean & Standard deviation of Post intervention score were 88.80 and 9.52. The study findings revealed that in Control Group (Knowledge Score) mean and standard deviation of pre intervention score is 77.15 and 9.20 respectively and Mean & Standard deviation of Post intervention score were 79.86 and 8.50.

The Table III depicts the mean difference of 3.93 between post test knowledge score of experimental group and control of group of nursing students were found to be statistically significant as calculated value of 't' (2.7237) for df (174) at 0.05 level of significance. This shows the obtained mean difference was true difference and not by chance. It can be inferred from the finding that structured teaching program on spiritual

health was effective method for increasing knowledge in experimental group.

The Table IV depicts the mean difference of 1.85 between post test attitude score of experimental group and control of group of nursing students were found to be not statistically significant as maximum number of attitude score of nursing students were positive during pre test which remain unchanged after the intervention in experimental group.

3. Findings of the comparison of pre and post intervention of attitude scores with experimental and control group:

The study findings revealed that in Experimental Group (Attitude Score) mean and standard deviation of pre intervention score is 82.50 and 9.06 respectively and Mean & Standard deviation of Post intervention score were 78.01 and 12.76. The study findings revealed that in Control Group (Attitude Score) mean and standard deviation of pre intervention score is 74.82 and 9.39 respectively and Mean & Standard deviation of Post intervention score were 76.79 and 12.62.

CONCLUSION:

The result showed that structure teaching program on spiritual health was an effective method to increase the knowledge towards spiritual health. It can be concluded that based on this designated course students are enriching with more education and guidance upon spiritual care and able to meet the needs of patients and they have the opportunity to evaluate their performance in real clinical environment.

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