



A STUDY TO ASSESS THE KNOWLEDGE REGARDING PERCEPTION AND SPIRITUAL CARE AMONG NURSING STUDENTS AT SELECTED NURSING COLLEGE OF SUNDARNAGAR DISTT. MANDI (H.P)

Mental Health Nursing

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ABSTRACT

Spiritual care is an important aspect of holistic care in nursing. The connection between Spirituality and wellbeing including its benefits for physical and mental health help to decrease suffering. The concept of spirituality encompasses a wide range of value-based attitudes, religion beliefs and opinions. **Aims And Objectives:-** The Study was to assess the knowledge and perception regarding spiritual care among nursing students in selected nursing college of Sundarnagar distt. Mandi (H.P) **Methodology:-** A descriptive research design was used to collect data from nursing students. Total 100 nursing students were enrolled into the study by using convenient sampling technique the self structured knowledge questionnaire and modified spirituality and spiritual care likert scale were used to assess the knowledge and perception regarding spiritual care among nursing students. **Results:-** The study results showed that 73% nursing students had good knowledge, 27% nursing students had Average knowledge, 0% nursing students had poor knowledge regarding spiritual care And, 35% nursing students had good perception, 65% nursing students had Average perception and 0% nursing students had poor perception regarding spiritual care. **Conclusion:-** It was conducted that most of students had good knowledge and perception regarding spiritual care. This will help them to provide comprehensive care to the patients in the hospital.

KEYWORDS

INTRODUCTION

Spiritual care is an important component of holistic nursing care. To implement spiritual care, the nurse must assess, diagnose and responds to the needs of each patient and her or his significant others. Meeting the spiritual care needs of the patient can lead to physical, healing, reduction of pain, and personal growth. Nurses providing spiritual care experience lower stress and less burnout.³

Addressing the holistic needs of patients requires the nurses to address emotional as well as physical needs. Spiritual care is one aspect of emotional care, is an important component of holistic care, and is often included in most textbooks introducing into the patients personal beliefs.³

According to the American Nurses Association and Health Minister Association (2017),

“Spiritual care is the practical expression of presence, guidance, and interventions, individual or communal, to support, nurture, or encourage an individual's or group ability to achieve wholeness, health, personal, spiritual and social well-being, integration of body, mind and spirit and a sense of connection to self, others, and a higher power”.³

The International Council of Nurse's code (1973) identifies the spiritual aspect of nursing care and recognizes the provision of spiritual care as an essential responsibility for nurses. Every nurse has the responsibility to be vigilant about patient's spiritual needs as an aspect of holistic patient care. Spiritual needs are less tangible than physical needs as they are multifaceted and hard to measure. Frequently, these identifiable needs to have been given less importance than more obvious needs. Outside of a religious context, spiritual needs are very likely to go unobserved. Thus, to recognize spiritual needs and provide spiritual care, it is necessary to understand the nature of spirituality and how different individual may express it.

NEED OF STUDY

Maslow's Hierarches of needs theory (Maslow, 1943) Spirituality plays a crucial role in holistic care, affecting how patient reach a balance in life and sustain well-being and health (Lalani and Chen, 2021) According to holistic model, the body mind and spirit are interrelated. Thus, Health care providers need to deliver physical, psychological, socio cultural and spiritual care to patients (Lalani, 2020) However, as an integral part of holistic care, spiritual care is often neglected in practice (Batstone et al, 2020) resulting in patient in additional suffering. With an increased demand for spiritual care,

Researcher have focused on studying spirituality, spiritual needs, and spiritual care.

Spiritual wellbeing has important implication for an individual's health and wellbeing. Whilst the provision of spiritual care and assessment of spiritual need is a vital part of nurse's role, and also assess their spiritual needs. This Review aims to ascertain wider reason for this inconsistent spiritual care delivery by nurses to their patients.

International Council of nurses (ICN 2000) also specified the rate of promoting and environment in which the human rights, values, customs and spiritual beliefs of the individual, family and community are respected.

METHODOLOGY

Research Approach:

The selection of research approach is the basic procedure to conduct the research study. A research Approach tells us from whom the data is collected and how to analyze and interpret the results. It also suggests possible conclusion helps the researcher in answering specific research question in the most accurate and efficient way possible (Ce-lia E Wiils 2004).

A quantitative research approach was adopted to conduct a study.

Research Design:

Research design is a blue print for conducting a study that maximize control over factors that could interfere with the validity of findings, guide the planning, implementation of study in a way that is most likely to achieve the intended goal. (Nancy and groove 2007).

The type of design directs the selection of population, procedure of sampling method, measurement and plan for data collection and analysis.

A descriptive research design was used to assess the knowledge and perception regarding spiritual care and among nursing students.

Research Setting:

The Research setting is the physical location in which the data collection takes place for the study. (Polit and Beck 2004).

The present study was conducted at Sri Sai College of nursing Dadoh, Sundarnagar Distt. Mandi.

Population:-

Population is the entire set of individual housing some common characteristics and living in same geographical area. (Polit and Hungler 1987).

Target Population:

The population of study was the nursing students in Sri Sai college of Nursing Dadoh.

Assessible Population:-

The nursing students of B.Sc. and GNM at Sri Sai college of nursing

Sample:-

Sample is the subset of a population selected to participate in the study.

Sampling Technique:-

Convenient sampling technique was used for the nursing students.

Sample Size:-

The total sample size 100 nursing students at Sri Sai College of nursing Dadoh

Criteria For Sample Selection:-**Inclusion Criteria:-**

Nursing students who will be;

- Present at a time of data collection
- Willing to participate
- The nursing students of B.Sc. , GNM courses in Sri Sai college of nursing Dadoh Sundarnagar Distt. Mandi (H.P).

Exclusive Criteria:-

- Sick/ill at the time of data collection.

Data Collection Instrument:-

Research Instrument are also called research tool, are the device used to collect data which facilitate the observation and measurement of variables (Rose Murie neiswaradomy 1993).

The tool used for data collection comprised of three sections described as follow:-

Part-1:

The socio demographic profile information related to age, marital status, courses, Dietary pattern area of residence, type of family, religion.

Part-2:

Self structured knowledge questionnaires were used to assess the knowledge regarding spiritual care among nursing students. The tool consisted of 30 questions to assess the knowledge regarding spirituality and perception among nursing students.

Scoring Interpretation

Level of knowledge	Score
Good	17-25
Average	9-16
Poor	0-8

Maximum score= 25

Minimum score = 0

Part –C:

Modified spirituality and spiritual care likert scale was used to assess the perception regarding spiritual care among nursing students .the tool consist of 15 statements to assess the perception The maximum score was 75 and Minimum score was 15.

Positive Statements (12): 1, 2, 3, 5, 6, 7, 8, 9, 10, 11, 13, 14

- Positive score will be like this: strongly disagree=2, Disagree=2, uncertain=3, Agree=4, strongly agree=5.

Negative Statements (3):- 4, 12, 15

- Negative statement scores will be like this: Strongly disagree=5, disagree=4, uncertain=3, Agree=2, Strongly Agree=1

Each statement was on five points with a view to getting more exact responses from B.Sc. and GNM nursing students. The five points are:

1. Strongly Disagree
2. Disagree

3. Uncertain

4. Agree

5. Strongly Agree

Scoring Interpretation

Category score	Score
Good	56-75
Average	36-55
Poor	15-35

Maximum score = 75

Minimum score=15

ETHICAL CLEARANCE

Ethical clearance for the study was obtained from the institutional ethical committee.

FINDINGS

Frequency and percentage of nursing students in terms of selected demographic variables out of 100 nursing students 81%) of nursing students were from age group up to 21 to 25 years. Out of 100 nursing students (98%) was single .out of 100 nursing students (46%) were GNM students, (54%) were B.Sc. nursing students. Out of 100 nursing students Dietary pattern (57%) were Vegetarian, (38%) were Non vegetarian, (3%) were Eggetarian, (2%) were Vegan. Out of 100 nursing Area of Residence (16%) were from urban area, (73%) from rural area, (11%) students were from Semi-Urban Area .Out of 100 nursing students Family type (57%) belongs to Nuclear family(43%) belongs to joint family . Out of 100 nursing students (100%) were from Hindu religion.

DISCUSSION

The Findings of the study have been discussed in accordance with the objectives of the study and previously reviewed literature. A study was conducted to assess the knowledge and perception regarding spiritual care among nursing students at selected nursing college of sundarnagar Distt. Mandi (H.P) The aim of the study was to assess the knowledge and perception regarding spiritual care among nursing student. The result of the study showed that 73% nursing students had good knowledge, 27% nursing students had Average knowledge, 0% nursing students had poor knowledge regarding spiritual care and, 35% nursing students had good perception, 65% nursing students had Average perception and 0% nursing students had poor perception regarding spiritual care. There is no Significance association between the knowledge and perception and socio demographic variables.

CONCLUSION

After assessing the knowledge of nursing students in selected nursing college of distt. Mandi (H.P). The study concluded that out of 100 nursing students (73%) have good knowledge, (27%) have Average knowledge, (0%) have poor Knowledge And (35%) nursing student had Good perception, (65%) had Average perception, (0%) had poor perception regarding Spiritual care .So it is important to provide knowledge and perception regarding spiritual care among nursing students.

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