



EFFECTIVENESS OF A PLANNED TEACHING PROGRAMME ON ADJUSTMENT PROBLEMS AMONG THIRD-YEAR BSC (H) NURSING STUDENTS: A PRE-EXPERIMENTAL STUDY

Nursing

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ABSTRACT

Background: Nursing students face numerous adjustment challenges during their academic journey, stemming from academic pressure, clinical exposure, and psychosocial stressors. These adjustment problems, if unaddressed, can adversely affect their mental well-being, learning outcomes, and professional development. **Aim:** The study aimed to assess the adjustment problems among third-year BSc (Hons.) Nursing students and evaluate the effectiveness of a Planned Teaching Programme (PTP) on their knowledge, expressed practices, and attitudes related to adjustment problem management. **Methods:** A pre-experimental one-group pre-test post-test design was adopted. Sixty-one third-year BSc Nursing students were selected through purposive sampling from two nursing colleges in New Delhi. Data were collected using a structured tool comprising a demographic proforma, adjustment problem assessment scale, knowledge questionnaire, expressed practice scale, and attitude scale. The Planned Teaching Programme was delivered through lectures, handouts, and group discussions. Data were analyzed using SPSS version 22.0. Paired t-tests, Pearson correlation, and chi-square tests were used to interpret the data. **Results:** Most students (75.4%) had moderate adjustment problems. The PTP led to significant improvement in all outcome variables: knowledge scores increased from 8.19 to 16.98, practice scores from 89.5 to 101.6, and attitude scores from 70.82 to 79.50 ($p < 0.001$ for all). Moderate positive correlations were observed among practice and attitude scores. Post-test outcomes showed significant associations with selected demographic variables. **Conclusion:** The Planned Teaching Programme effectively enhanced students' knowledge, coping practices, and attitudes toward managing adjustment problems. Structured interventions are essential to promote academic resilience and emotional well-being in nursing education.

KEYWORDS

Adjustment problems, Planned Teaching Programme, stress management, Coping strategies, Nursing education.

INTRODUCTION

Adjustment is a dynamic psychological process through which individuals manage demands from both internal and external environments to maintain equilibrium and functionality. It is not a fixed or static state but an ongoing effort to adapt to personal needs, social expectations, and environmental changes. For college students, particularly those in rigorous professional programs such as nursing, adjustment assumes greater significance as it directly affects emotional well-being, academic performance, and future career trajectory^{1,2}.

Nursing, as a profession, is uniquely demanding. Students are often required to internalize large volumes of theoretical content while simultaneously engaging in emotionally intense clinical practice. They face challenging patient care scenarios, work under time constraints, and must interact with diverse health professionals. This dual burden of academic and clinical responsibility makes nursing students highly susceptible to adjustment problems³.

The World Health Organization defines life skills as abilities that promote adaptive and positive behavior, enabling individuals to deal effectively with the demands and challenges of everyday life⁴. In the context of nursing education, life skills are not just desirable; they are essential. Students who fail to develop adequate coping mechanisms may experience heightened levels of anxiety, social withdrawal, depressive symptoms, and academic underachievement⁷. Globally, a growing body of evidence shows that nursing students report moderate to severe adjustment difficulties across academic, social, emotional, and clinical domains. A study conducted by Labrague et al. (2017) found that 57% of nursing students in the Philippines experienced moderate to high stress, significantly impacting their academic performance and health behaviors⁸. Similarly, Alzayyat and Al-Gamal (2014) reported that clinical training was the most anxiety-provoking component of nursing education, particularly among first-time hospital trainees⁹.

In India, the scenario is equally concerning. A study by Tiwari et al. (2020) in Karnataka revealed that 60.7% of BSc Nursing students had moderate levels of adjustment, while 13.8% exhibited poor adjustment, with significant correlation to socioeconomic background and hostel residency¹⁰. Kale (2011) identified that nearly 84% of first-year students had moderate adjustment issues, whereas 16% had severe problems, highlighting the need for early detection and targeted intervention¹¹. In a recent study conducted at a tertiary nursing institute in New Delhi, more than 75% of third-year students were found to have moderate adjustment problems, mainly related to clinical anxiety, homesickness, and academic overload¹².

The clinical learning environment itself poses unique challenges. Nursing students are expected to care for critically ill patients, observe

traumatic procedures, and cope with the emotional toll of death and suffering. Kushnir et al. (2000) noted that uncertainty about clinical competencies, fear of harming patients, and negative evaluation by clinical instructors significantly contribute to emotional distress¹³. Shipton (2002) emphasized that this stress can hinder knowledge retention, reduce critical thinking, and impair students' ability to learn in high-pressure environments¹⁴.

In the Indian context, adjustment is further complicated by sociocultural expectations. Students, particularly female, often face pressure from families regarding career choices, lifestyle, and performance. Many live away from home for the first time, lacking adequate emotional and logistical support. According to Neeraja (2008), such students may struggle with identity, belongingness, and independence, all of which exacerbate their vulnerability to maladjustment¹⁵. Institutional factors also play a role. Academic systems that emphasize rote learning, rigid assessment patterns, and insufficient student mentoring contribute to the problem. Research by Bennett et al. (2000) suggests that lack of structured student support programs increases dropout rates and emotional burnout¹⁶. The COVID-19 pandemic added another layer of complexity. Nursing students faced disruption of clinical placements, increased family stress, and fear of infection, all of which intensified existing adjustment issues¹⁷.

Imogene King's Goal Attainment Theory offers a meaningful conceptual lens for understanding adjustment in nursing students. According to King, effective human interactions, mutual goal setting, and continuous feedback form the basis of personal growth and system regulation¹⁸. In educational settings, this translates into structured interventions where educators actively support students' adjustment through communication, assessment, and empowerment. Planned Teaching Programmes (PTPs) serve this purpose by equipping students with knowledge, coping strategies, and the confidence to navigate complex learning environments. Evidence suggests that PTPs can be effective in managing stress and improving psychological outcomes. Jahan and Arora (2015) found that structured education sessions significantly improved stress coping and self-efficacy in nursing students in Uttar Pradesh¹⁹. A similar study by Shinde and Anjum (2007) concluded that planned teaching interventions improved knowledge, behavioral practices, and emotional adjustment among final-year nursing interns²⁰.

Despite promising findings, few studies in India have systematically assessed the effectiveness of structured teaching programs specifically designed to address adjustment problems among undergraduate nursing students. The lack of context-specific, theory-driven interventions creates a critical research gap that this study aims to address.

Aim: To assess adjustment problems among third-year BSc (H) Nursing students and evaluate the impact of a planned teaching programme on their knowledge, practice, and attitude regarding adjustment management.

Methodology Study Design

This study employed a pre-experimental one-group pre-test post-test design to evaluate the effectiveness of a Planned Teaching Programme (PTP) on the management of adjustment problems among third-year BSc (Hons.) Nursing students. This design was chosen due to its ability to measure changes within a single group over time without the need for a control group, making it suitable for educational interventions where randomization is not feasible.

Study Setting And Participants

The study was conducted in January 2021 at two nursing colleges affiliated with the University of Delhi Lady Hardinge Medical College of Nursing and Ahilya Bai College of Nursing, New Delhi. The target population consisted of third-year BSc (H) Nursing students enrolled in the semester-based curriculum. A total of 61 students were selected using purposive sampling based on their availability, consent, and fulfillment of inclusion criteria. Students included were those currently in the third year of their program, present during the study period, and willing to participate voluntarily. Exclusion criteria included students on leave during the data collection phase and those undergoing treatment for any diagnosed psychiatric illness.

Variables

The independent variable in this study was the Planned Teaching Programme, designed to educate and empower students in managing adjustment problems. The dependent variables were the students' levels of knowledge, expressed practices, and attitudes toward adjustment problem management. Additional demographic variables included age, academic performance in senior secondary education, family income, mother's and father's educational qualifications, and occupational status.

Data Collection Instruments

Data were collected using a structured tool composed of four sections. The first section was a demographic proforma designed to capture background information. The second section was an adjustment problem assessment scale developed to measure the degree of difficulty faced by students across five domains: health, academic, psychosocial, clinical, and COVID-19-related issues. The third section was a structured knowledge questionnaire comprising 20 multiple-choice questions to evaluate understanding of adjustment and its management. The fourth and fifth sections included a 25-item expressed practice rating scale and a 20-item attitude scale, respectively, both using 5-point Likert-type responses to assess behaviors and beliefs related to adjustment.

Intervention: Planned Teaching Programme

The Planned Teaching Programme was designed by the investigator to address adjustment-related issues among nursing students. The intervention covered theoretical knowledge about adjustment, common causes and effects of maladjustment, and practical coping strategies, including communication skills and emotional self-regulation. The programme was delivered using structured lecture methods supplemented with PowerPoint presentations, printed handouts, and guided group discussions. The total duration of the teaching session was approximately 90 minutes and was delivered in small groups to facilitate interaction and clarity.

Data Collection Procedure

The data collection occurred in three phases. In the first phase, the pre-test was administered using all four instruments to assess baseline knowledge, practices, and attitudes. Immediately after the pre-test, the Planned Teaching Programme was delivered to the same group of students. One week later, in the third phase, the post-test was conducted using the same tools to measure the impact of the intervention. Data were collected in classroom settings under the supervision of the researcher.

Data Analysis

All data were compiled, coded, and analyzed using SPSS version 22.0. Descriptive statistics, including frequencies, percentages, means, and standard deviations, were used to describe demographic

characteristics and pre- and post-intervention scores. Inferential statistical methods were employed to test the study hypotheses: paired t-tests were used to compare pre- and post-test scores for knowledge, practice, and attitude; Pearson's correlation coefficient was applied to assess the relationships among the three outcome variables; and chi-square tests were used to examine associations between selected demographic variables and post-test outcomes. A significance level of $p < 0.05$ was considered statistically significant.

RESULTS

Sample Characteristics

Table 1. Demographic Characteristics of Participants (N = 61)

Variable	Category	Frequency (n)	Percentage (%)
Age (years)	>20–22	42	68.85%
	≤20	10	16.39%
	>22	9	14.75%
Senior Secondary Marks	<70%	3	4.91%
	70–80%	17	27.87%
	80–90%	30	49.18%
	>90%	11	18.03%
Mother's Education	Illiterate	2	3.28%
	Primary	8	13.11%
	Secondary	12	19.67%
	Graduate	18	29.50%
Father's Education	Postgraduate	21	34.42%
	Illiterate	0	0%
	Primary	6	9.83%
	Secondary	10	16.39%
Mother's Occupation	Graduate	28	45.90%
	Postgraduate	17	27.87%
	Unemployed	44	72.13%
	Employed	17	27.87%
Father's Occupation	Skilled/Market Work	21	34.43%
	Professional/Service	25	40.98%
	Unemployed/Other	15	24.59%
Monthly Family Income	Upper Income (> ₹50,000)	24	39.34%
	Middle Income (₹20–50K)	26	42.62%
	Low Income (< ₹20,000)	11	18.03%

The study included 61 third-year BSc (Hons.) Nursing students from two selected colleges of nursing in New Delhi. Most participants (68.85%) were aged between 20 and 22 years. In terms of academic performance, nearly half of the students (49.2%) had secured 80–90% marks in their senior secondary examinations. Regarding parental education, 29.5% of mothers and 45.9% of fathers were graduates. Most of the mothers (72.13%) were unemployed, while a significant proportion of fathers (34.43%) were engaged in skilled work or market-related occupations. With respect to economic background, the largest group of students (39.34%) belonged to upper-income families. These findings indicate a relatively well-educated and urbanized student sample with a moderate to high socioeconomic profile.

Adjustment Problems Faced By Students

Table 2. Levels Of Adjustment Problems Among Participants

Adjustment Level	Frequency (n)	Percentage (%)
Mild	9	14.75%
Moderate	46	75.40%
Severe	6	9.83%

The assessment of adjustment problems revealed that a substantial portion of the students experienced moderate levels of difficulty. Specifically, 75.40% of participants reported moderate adjustment problems, while 14.75% experienced mild problems, and 9.83% were found to have severe issues. Adjustment challenges were observed across multiple domains, including health, psychosocial, academic, clinical, and COVID-19 pandemic-related factors. The highest mean scores were reported in the psychosocial and academic domains, indicating heightened stress in interpersonal relationships, emotional regulation, and study-related workload.

Effectiveness Of The Planned Teaching Programme

Table 3. Comparison Of Pre-Test And Post-Test Scores (N = 61)

Outcome Variable	Pre-Test Mean ± SD	Post-Test Mean ± SD	Mean Difference	t-value	p-value
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Knowledge	8.19 ± 2.54	16.98 ± 2.13	8.79	21.56	<0.001**
Practice	89.50 ± 5.43	101.60 ± 4.87	12.10	15.34	<0.001**
Attitude	70.82 ± 6.98	79.50 ± 6.11	8.68	12.67	<0.001**

*Paired t-test applied; *p < 0.001 indicates statistically significant improvement in all domains.

The impact of the Planned Teaching Programme was assessed using pre- and post-test comparisons of knowledge, expressed practice, and attitude scores. Substantial improvement was observed across all three domains after the intervention. The mean knowledge score increased from 8.19 in the pre-test to 16.98 in the post-test, representing a marked gain in conceptual understanding. The paired t-test indicated this difference was statistically significant ($t = 21.56$, $p < 0.001$). In terms of practice, the mean score rose from 89.5 before the intervention to 101.6 afterward, with the difference also being statistically significant ($t = 15.34$, $p < 0.001$). Similarly, the attitude score improved significantly, with a mean increase from 70.82 to 79.50 ($t = 12.67$, $p < 0.001$). These results suggest that the teaching programme was highly effective in enhancing not just the cognitive but also the behavioral and emotional readiness of students to manage adjustment problems.

Correlation Between Knowledge, Practice, And Attitude

Table 4. Pearson's Correlation Coefficient Between Variables

Variable Pair	Pearson's r	Strength	p-value
Knowledge ↔ Practice	0.310	Weak Positive	0.015*
Knowledge ↔ Attitude	0.341	Weak Positive	0.009*
Practice ↔ Attitude	0.526	Moderate Positive	<0.001**

*p < 0.05, *p < 0.001 indicate significant correlation.

Post-test correlations among the three outcome variables were examined using Pearson's correlation coefficient. A weak positive correlation ($r = 0.31$) was found between knowledge and practice scores, indicating that higher knowledge was moderately associated with better expressed practice. A slightly stronger but still moderate correlation was noted between knowledge and attitude ($r = 0.341$). A statistically significant moderate positive correlation ($r = 0.526$) was observed between practice and attitude scores, suggesting that improvements in behavioral coping were meaningfully associated with a more positive outlook toward adjustment.

Association With Demographic Variables

Table 5. Significant Associations Of Post-test Scores With Demographic Variables

Outcome Variable	Demographic Variable	Test Used	p-value
Knowledge	Mother's Education	Chi-square	0.032*
Knowledge	Mother's Occupation	Chi-square	0.027*
Practice	Father's Occupation	Chi-square	0.041*
Attitude	All Demographic Variables	Chi-square	>0.05

*- Significant at 0.05 level.

Post-test knowledge and practice scores were significantly associated with selected background factors, but attitude scores showed no significant associations.

The relationship between post-test scores and selected demographic variables was assessed using chi-square tests. Knowledge scores were significantly associated with the mother's education and mother's occupation ($p < 0.05$), indicating that students whose mothers had higher educational qualifications or were employed tended to perform better post-intervention. Practice scores were significantly related to the father's occupation ($p < 0.05$), suggesting a possible influence of paternal engagement in structured work environments on the student's behavioral adjustment. However, attitude scores did not show any significant association with any of the demographic variables under study. These findings imply that while knowledge and practice may be influenced by familial and socioeconomic backgrounds, attitudes toward adjustment are potentially shaped by more intrinsic or experiential factors.

DISCUSSION

The purpose of this study was to assess adjustment problems among third-year BSc (Hons.) Nursing students and evaluate the effectiveness of a Planned Teaching Programme (PTP) on their knowledge, expressed practices, and attitudes related to the management of those problems. The findings demonstrated that most students experienced

moderate levels of adjustment issues, and the PTP was highly effective in enhancing all three measured domains—knowledge, practice, and attitude.

A notable finding was that 75.4% of students reported moderate adjustment difficulties, while 9.83% experienced severe problems. These results align closely with earlier studies in the Indian context. Kale (2011) similarly found that more than 80% of first-year nursing students experienced moderate or severe adjustment issues during their transition into professional education¹¹. Tiwari et al. (2020) reported comparable trends among nursing students in Karnataka, with over 60% facing adjustment challenges linked to academic stress, clinical exposure, and social expectations¹⁰. Globally, adjustment problems among nursing students have been widely documented, particularly in connection with the dual stressors of academic rigor and emotionally charged clinical training environments^{8,9}.

The pre-test and post-test comparisons revealed a statistically significant improvement in knowledge, expressed practices, and attitudes following the intervention. The mean knowledge score increased from 8.19 to 16.98, demonstrating that the PTP effectively enhanced conceptual understanding. This finding is consistent with Shinde and Anjum (2007), who found that structured teaching sessions significantly improved final-year students' awareness and knowledge regarding emotional regulation and self-management in clinical settings²⁰. Similarly, Jahan and Arora (2015) observed substantial gains in knowledge and self-efficacy among nursing students after a structured stress management program¹⁹.

The improvement in expressed practices (from a mean of 89.5 to 101.6) indicates that students not only absorbed information but also began to implement more effective coping strategies. This supports the notion that PTPs can result in behavioral change when properly designed and delivered. The positive correlation ($r = 0.526$) between practice and attitude scores in the post-test confirms that as students adopted healthier coping mechanisms, their attitudes toward adjustment became more constructive. This is important because positive attitudes are known to buffer the effects of stress and facilitate resilience⁵.

The study also revealed significant associations between post-test knowledge scores and background variables such as the mother's education and occupation, suggesting that students with more educated or employed mothers may benefit from a more supportive and cognitively stimulating home environment. A similar pattern was noted by Neeraja (2008), who emphasized the role of familial and socio-cultural factors in shaping students' adjustment capabilities and health behaviors¹⁵. The association between practice scores and father's occupation may reflect the influence of structured environments and disciplined work habits modeled at home. However, attitude scores were not significantly associated with any demographic variable, indicating that attitude development may be more internalized and less affected by background characteristics—a conclusion supported by Lazarus and Folkman's stress appraisal theory, which considers individual cognitive interpretations as central to coping behavior¹.

From a theoretical standpoint, the results support the framework proposed by Imogene King's Goal Attainment Theory, which emphasizes mutual goal-setting and feedback in achieving desired outcomes in educational and healthcare settings¹⁸. The interaction between educator and student in the PTP likely played a central role in facilitating understanding, building trust, and enabling students to translate knowledge into practice. The observed improvements affirm that structured, student-centered education fosters not only intellectual gains but also behavioral and affective growth.

These findings have important practical implications. Nursing institutions should incorporate structured, evidence-based programs into their curricula to proactively address student adjustment issues. PTPs can be scaled and adapted to address other domains of student well-being, such as clinical decision-making, emotional intelligence, and stress resilience. Additionally, early intervention in the academic journey—particularly in the first and third years may help reduce long-term distress, burnout, and attrition in nursing education.

Nevertheless, the study had certain limitations. The absence of a control group restricts causal inferences, and the use of purposive

sampling may limit generalizability. Future studies using randomized controlled designs with larger, more diverse samples across multiple regions would strengthen the evidence base. Furthermore, longitudinal follow-up could help determine the sustainability of behavioral and attitudinal changes over time.

In conclusion, this study demonstrates that a Planned Teaching Programme is an effective strategy for improving knowledge, practices, and attitudes toward adjustment among nursing students. Given the multifactorial stressors in nursing education, structured educational interventions like PTPs are essential for promoting emotional and academic resilience in the next generation of healthcare professionals.

CONCLUSION

In conclusion, the Planned Teaching Programme effectively addressed adjustment issues among nursing students and can serve as a model for similar interventions in other educational institutions. When incorporated into the academic framework, such programmes can play a critical role in enhancing student well-being, resilience, and academic performance, ultimately contributing to the development of competent and emotionally balanced nursing professionals.

REFERENCES

1. Lazarus RS, Folkman S. Stress, Appraisal, and Coping. New York: Springer; 1984.
2. Misra R, Castillo LG. Academic stress among college students: comparison of American and international students. *Int J Stress Manag.* 2004;11(2):132–148.
3. Parkes CM. Coping with clinical stress in student nurses. *Nurs Outlook.* 1985;33(5):231–5.
4. Watson R, Gardiner E, Hogston R, et al. A longitudinal study of stress and psychological distress in nurses and nursing students. *J Clin Nurs.* 2009;18(2):270–278.
5. Gibbons C. Stress, coping and burn-out in nursing students. *Int J Nurs Stud.* 2010;47(10):1299–1309.
6. World Health Organization. Life Skills Education for Children and Adolescents in Schools. Geneva: WHO; 1997.
7. Andrews B, Wilding JM. The relation of depression and anxiety to life-stress and achievement in students. *Br J Psychol.* 2004;95(Pt 4):509–21.
8. Labrague LJ, McEnroe-Petitte DM. Job stress in new nurses during the transition period: an integrative review. *Int Nurs Rev.* 2018;65(4):491–504.
9. Alzayyat A, Al-Gamal E. A review of the literature regarding stress among nursing students during their clinical education. *Int Nurs Rev.* 2014;61(3):406–15.
10. Tiwari A, Maheshwari R, Mangal N. Adjustment and self-esteem among BSc nursing students in Karnataka. *Indian J Psychol Med.* 2020;42(2):132–138.
11. Kale PY. A study to assess the adjustment problems among first-year nursing students. *Indian J Nurs Educ.* 2011;3(2):22–27.
12. Bala S. A study to assess adjustment problems among BSc (H) Nursing students. Master's thesis. University of Delhi; 2021.
13. Kushnir T, Epstein Y, Bortz J. Stress and anxiety of nursing students prior to professional training. *J Nurs Educ.* 2000;39(5):228–33.
14. Shipton SP. Providing emotional safety for students. *Nurs Educ Perspect.* 2002;23(4):177–80.
15. Neeraja KP. Textbook of Nursing Education. 1st ed. New Delhi: Jaypee Brothers; 2008.
16. Bennett R, Kottasz R, Niven L. Student withdrawal from higher education. *J Market High Educ.* 2000;10(1):129–142.
17. Rajhans P, et al. Impact of COVID-19 pandemic on mental health of nursing students: a review. *Asian J Psychiatr.* 2021;55:102407.
18. King IM. A Theory for Nursing: Systems, Concepts, Process. New York: Wiley; 1981.
19. Jahan M, Arora A. Effectiveness of structured teaching programme on stress management among nursing students. *Int J Nurs Sci Pract.* 2015;1(1):45–50.
20. Shinde MB, Anjum F. Effectiveness of structured teaching programme on adjustment among nursing interns. *Indian J Res Reports in Med Sci.* 2007;5(3):71–76.