Knowledge and Attitude towards Palliative Care among Nursing Students in Imphal West

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Abstract

Context: Palliative care increases comfort by lessening pain, controlling symptoms and lessening stress for the patient and family. Having adequate knowledge with proper attitude and practice among nurses is crucial to establish a good palliative care service.

Aims: Hence the study has been contemplated which aims at identifying the level of knowledge and attitude of nursing students.

Methods: A self-administered questionnaire containing a validated instrument ‘Palliative care quiz for nursing (PCQN)’ was use. A stratified two-stage cluster sampling design with a probability proportionate to size was used. Data was collected from 430 students and entered in IBM SPSS version 21. Results were summarised using descriptive statistics. Chi-square test was used to see the significant difference between proportions.

Results: Knowledge was inadequate in 60.2% of the nursing students while 82.1% showed favourable attitude. There was significant association between academic year and knowledge for BSc nursing and FHW/ANM students. Knowledge was significantly associated with training received and attitude.

Conclusion: Knowledge was inadequate in three-fifth of the nursing students while majority of them more than four-fifth showed favourable attitude. There was significant association between academic year and knowledge for BSc nursing and FHW/ANM students. Knowledge was significantly associated with training received and attitude.

Keywords: Palliative care, Nursing students, Knowledge, Attitude,

Introduction

WHO defines palliative care as an approach that improves the quality of life of patients and their families facing the problem associated with life threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.¹ Palliative care can be provided across multiple settings including in hospitals, at home, as part of community palliative care programmes and in skilled nursing facilities. Interdisciplinary palliative care teams work with people and their
families to clarify goals of care and provide symptom management, psycho-social, and spiritual support.\(^2\) Palliative care increases comfort by lessening pain, controlling symptoms and lessening stress for the patient and family and should not be delayed when it is indicated.\(^3\) As disease progresses, continuity of care becomes increasingly important, coordination between services is required and information must be transferred promptly between professionals in the community, in hospitals and in hospices.\(^4\) Palliative care provides relief from pain and other distressing symptoms and will enhance quality of life and may also positively influence the course of illness.\(^5\)

Having adequate knowledge with proper attitude and practice among nurses is crucial to establish a good palliative care service. Even though there are studies on palliative care knowledge in different population and settings in India, only few have been conducted among nursing students. With this background the present study has been contemplated which aims at identifying the level of knowledge and attitude of nursing students.

**Methods**

**Study Design:** Cross-sectional study

**Study Setting:**

Nursing colleges in Imphal West district, Manipur. Total number of students studying in these nine nursing colleges was one thousand forty.

**Study Population:**

Students of Bachelor of Science (BSc) in Nursing, General Nursing and Midwifery (GNM) and Female Health Worker/Auxillary Nursing Midwifery (FHW/ANM) nursing colleges of Imphal West district.

**Exclusion Criteria:**

- Those who were absent during data collection
- Those who refused to participate

**Sample Size:**

Sample size was calculated based on the formula:

\[N = \frac{4PQ}{L^2}\]

Taking a prevalence of adequate knowledge on palliative care among nursing students as 20.5% [Karkadas et al\(^6\)], 5% absolute allowable error at 95% confidence interval, design effect of 1.5 and estimating a non-response rate of 10%, final sample size was 430.

**Sampling Design:**

A stratified two stage cluster sampling design was used to select a representative sample. There were nine nursing colleges in Imphal West district, Manipur. The colleges were stratified based on the different nursing courses namely - (1) GNM colleges (2) BSc nursing colleges and (3) FHW/ANM colleges. Twenty nine percent of the students from GNM colleges, fifty percent from BSc nursing colleges and twenty one percent from FHW/ANM with almost equal representation from all academic years were selected by simple random sampling based on probability proportionate to size using computer generated random numbers.

**Study Variables**

**Outcome variable**

1. Knowledge of palliative care
2. Attitude towards palliative care

**Independent variable**

1. Age , Sex , type of course- B.Sc. nursing, academic year, experience in caring for terminally ill, training in palliative care

**Study Tool:**

A self-administered, pretested questionnaire was used for data collection which consist of three sections.

**Part A:** Background characteristics

**Part B:** Statements to assess knowledge of palliative care using validated instrument ‘Palliative care quiz for nursing’ (PCQN). PCQN is a 20 item questionnaire with three subscales including: (1) philosophy and principles of palliative care (2) management of pain and symptoms and (3) psychosocial and spiritual care Each item has the choices of “true”, “false”, and “I do not know”. The internal consistency of the questionnaire was 0.78 as
measured using Kuder Richardson formula 20 (KR-20).7

Part C: Ten statements to assess the attitude of the participants by using a five point-Likert scale

Operational Definition:
Knowledge scoring

The knowledge item answers were scored as one for correct and zero for wrong or do not know responses. The score ranged from 0-20 and the mean obtainable score was 10. Participants were said to have adequate knowledge when they scored more than the mean obtainable score of 10.

Attitude scoring

Each attitude statement was given a scale of 1-5 against their option (strongly disagree/disagree/uncertain/agree/strongly agree).

Favourable attitude: Score ≥ 35 (70% of maximum obtainable score)

Unfavourable attitude: Score < 35

Data Collection

A written permission was sought from the nursing college principals prior to the initiation of the study. The participants were approached in their respective colleges. Data was collected using the questionnaire.

Data Analysis

Data were entered in IBM SPSS version 21 and was summarized using descriptive statistics like mean, standard deviation and percentages. Chi-square test and Independent t test was used. A p value of less than 0.05 was considered significant.

Results

Out of the total 430 students, there were 125 GNM students, 215 BSc Nursing and 90 FHW/ANM students. Mean age of the participants was 20.10 ± 1.57 years with minimum age of 18 years and maximum age of 25 years. Majority of participants were females (98.6%). Only 28.6% of participants had experience in caring for terminally ill. Only 21.4% of the participants had received training in palliative care. It was found that knowledge was inadequate in three-fifth (60.2%) of the nursing students. There was significant association between academic year and knowledge for BSc nursing students and FHW/ANM students which suggested that knowledge increased with academic year.

Table 1: Association between academic year and knowledge for different types of courses

<table>
<thead>
<tr>
<th>Academic year</th>
<th>Knowledge of palliative care</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Adequate n (%)</td>
<td>Inadequate n (%)</td>
</tr>
<tr>
<td>A. GNM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1&lt;sup&gt;st&lt;/sup&gt; year</td>
<td>8 (23.5)</td>
<td>26 (76.5)</td>
</tr>
<tr>
<td>2&lt;sup&gt;nd&lt;/sup&gt; year</td>
<td>15 (33.3)</td>
<td>30 (66.7)</td>
</tr>
<tr>
<td>3&lt;sup&gt;rd&lt;/sup&gt; year</td>
<td>20 (43.5)</td>
<td>26 (56.5)</td>
</tr>
<tr>
<td>B. Bsc Nursing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1&lt;sup&gt;st&lt;/sup&gt; year</td>
<td>9 (18.8)</td>
<td>39 (81.3)</td>
</tr>
<tr>
<td>2&lt;sup&gt;nd&lt;/sup&gt; year</td>
<td>5 (8.9)</td>
<td>51 (91.1)</td>
</tr>
<tr>
<td>3&lt;sup&gt;rd&lt;/sup&gt; year</td>
<td>35 (62.5)</td>
<td>21 (37.5)</td>
</tr>
<tr>
<td>4&lt;sup&gt;th&lt;/sup&gt; year</td>
<td>43 (78.2)</td>
<td>12 (21.8)</td>
</tr>
<tr>
<td>C. FHW/ANM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First</td>
<td>13 (27.1)</td>
<td>35 (72.9)</td>
</tr>
<tr>
<td>Second</td>
<td>23 (54.8)</td>
<td>19 (45.2)</td>
</tr>
</tbody>
</table>

There was significant association of training received in palliative care with knowledge (Table 2). There was no significant association of knowledge with gender, age or experience in caring for terminally ill.

Table 2: Association between any training received in palliative care and knowledge

<table>
<thead>
<tr>
<th>Any training received in palliative care</th>
<th>Knowledge of palliative care</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Adequate n (%)</td>
<td>Inadequate n (%)</td>
</tr>
<tr>
<td>Yes</td>
<td>63 (68.5)</td>
<td>29 (31.5)</td>
</tr>
<tr>
<td>No</td>
<td>108 (32)</td>
<td>230 (68)</td>
</tr>
</tbody>
</table>
Majority of them (82.1%) showed favourable attitude towards palliative care. There was significant association of attitude with experience in caring for terminally (Table 3). Association of knowledge and attitude was also found to be significant (Table 4).

Table 3: Association between experience in caring for terminally ill and attitude towards palliative care

<table>
<thead>
<tr>
<th>Experience in caring for terminally ill</th>
<th>Attitude towards palliative care</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Favourable n (%)</td>
<td>Unfavourable n (%)</td>
</tr>
<tr>
<td>Yes</td>
<td>109 (88.6)</td>
<td>14 (11.4)</td>
</tr>
<tr>
<td>No</td>
<td>244 (79.5)</td>
<td>63 (20.5)</td>
</tr>
</tbody>
</table>

Table 4: Association between knowledge and attitude towards palliative care

<table>
<thead>
<tr>
<th>Attitude</th>
<th>Knowledge of palliative care</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Adequate n (%)</td>
<td>Inadequate n (%)</td>
</tr>
<tr>
<td>Favourable</td>
<td>164 (46.5)</td>
<td>189 (53.5)</td>
</tr>
<tr>
<td>Unfavourable</td>
<td>7 (9.1)</td>
<td>70 (90.9)</td>
</tr>
</tbody>
</table>

Discussion

In the present study majority of the participants were females (98.6%) and was found to be comparable to the study by KarkadaS et al.6 conducted among nursing students in Karnataka where 92% were females. The study addressed overall palliative care knowledge of nursing students. More than half of the participants (60.2%) had inadequate knowledge regarding palliative care. Studies conducted by KarkadaS et al.6, Mukemo et al.9 and Kassa H et al.10 found a higher proportion of participants (79.5%, 70.5% and 70% respectively) with inadequate knowledge regarding palliative care. The mean knowledge score in this study was 8.6±2.85 while a study by Aboshaiqah AE8 in Saudi Arabia reported a lower mean score of 5.23 while Brajtmamenet al.11 found a higher mean knowledge score of 12 among Canadian nursing students. There was significant association between academic year and knowledge of palliative care for BSc nursing students ($\chi^2$ = 74.589, p<0.001) and FHW/ANM students ($\chi^2$=7.150, p<0.007).

Knowledge and attitude towards palliative care were found to be significantly associated. Training received on palliative care and academic year were found to be significantly associated with knowledge. The need of a structured approach and an integrated curriculum involving principles of palliative care to improve the efficiency of undergraduate nursing education should be emphasized. A comprehensive education covering the basic principles of palliative care and pain and symptom management need to be validated and emphasised through various methods like theoretical teachings, practical training and workshops.

Conclusion

The present study found that six out of every ten nursing students did not have adequate knowledge of palliative care. The students scored the lowest on palliative care knowledge subscale of management of pain and symptoms. Majority, that is eight in ten, however, had positive attitude towards palliative care. Experience in care for terminally ill persons favours positive attitude among the students. Knowledge and attitude towards palliative care were found to be significantly associated. Training received on palliative care and academic year were found to be significantly associated with knowledge. The need of a structured approach and an integrated curriculum involving principles of palliative care to improve the efficiency of undergraduate nursing education should be emphasized. A comprehensive education covering the basic principles of palliative care and pain and symptom management need to be validated and emphasised through various methods like theoretical teachings, practical training and workshops.

Conflict Of Interest: Nil

Source Of Funding: Self

Ethical Clearance

Ethical approval was obtained from the Research Ethics Board, RIMS, Imphal (NoA/206/REB-
Comm(SP)/RIMS/ before beginning of the study. Informed written consent was obtained from the respondents.

References