

A study of assess the knowledge on geriatrics care among III year B.Sc Nursing student at Narayana College of Nursing Nellore, Andra Pradesh



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Abstract: Geriatrics refers to medical care for older adults. The care is the process of planning and coordinating psychological care and it's focus on elderly people with mental and physical impairments. The geriatrics care it improve the quality of life. **Objectives:** To assess the level of knowledge regarding geriatric care among III year B.Sc Nursing student. To find out the association between the level of knowledge regarding geriatric care among III year B.Sc Nursing student with their socio-demographic variables. **Materials and methods:** A Non experimental descriptive approach. 100 samples selected with a non probability convenience sampling technique and structured questionnaire was used to determine the knowledge on palliative care. The data was analyzed by using descriptive and inferential statistics. **Result:** The level of knowledge 9(9%) had acquired A+ grade, 5(5%) had acquired A grade, 32(32%) had acquired B+ grade, 19(19%) had acquired B grade, 30(30%) had acquired C grade and 5(5%) had acquired D grade. **Key words: Geriatrics care, Nursing student.**

Introduction: Geriatrics refers to medical care for older adults. The care is the process of planning and coordinating psychological care and it's focus on elderly people with mental and physical impairments. The geriatrics care it improve the quality of life. The professional care Management needed survives such as nutritional survives, assistance with activities of daily living, housing and home care services. These services /care help to identify family care giving needs and ways to meet them.

The geriatrics medicine focus on geriatrics health care, treating disease and minimizing the disabilities in older people. The older population mainly suffers from Alzheimer's disease and other disorders like dementia, arthritis, high cholesterol, high blood pressure, palliative care, Parkinson's disease, osteoporosis, osteoarthritis, heart disease, and rheumatoid arthritis The geriatrics management is holistic it provide care given physical and mental challenges people and assessment, care coordination and advocacy.

The elder population suffered from social, economic, and health (which includes physical) related problems. Thus, these problems are complex and interrelated, thereby requiring specific knowledge and expertise to meet them. However, there were limited researches previously done to explore nurse's knowledge towards geriatric care. The findings will



be helpful to develop strategies that would promote nurses' knowledge, which in turn improves the quality of patient care and consequently, the health of older people.

Background of the Study

The World Health Organization (WHO) estimates that about 75% of deaths in people over the age of 65 in industrialized countries are from heart diseases, cancer and cerebrovascular disease. Millions of senior citizen across the globe are not getting proper healthcare they need because government and the society are not aware enough of the problem by 2026, there will be about 1200 million people aged 65 years according to unestimates. 7% of the 1.1 million Indian population is today over the age of 60.

The lifespan for both male (>65 years) and female (75 years) has raised significantly and it is estimated that by the turn of this century, numerically the highest number of old people will be in India .Nurses and health professionals therefore have to be aware of the complexity of the care of elder people.

In India, the elderly suffer from dual burden of communicable and non-communicable diseases besides impairment of special sensory functions like vision and hearing and other degenerative diseases. Poor geographical access and high cost of treatment also lead to poor utilization of health care especially among the elderly. The elderly are also prone to abuse in their families or in institutional settings. A study in Chennai among 400 community-dwelling elderly aged 65 years and above found the prevalence rate of mistreatment to be 14%. Chronic verbal abuse was the most common followed by financial abuse, physical abuse and neglect.

North India reported 43% of the elderly to be suffering from one or other mental health problem

against 47% adults. 17% urban and 23% rural adults aged 60 years and above suffering from syndromal mental health problem. 4.2 when and 2.5% of rural older adults suffer from sub- syndromal mental health problem.

Prevalence of dementia in India has been reported to be variable from 1.4% to 9.1%. Depression was thrice more common than mania, occurring for the first time after 60 years. Prevalence of neurotic depression in the rural elderly was found to be 13.5% a recent. Report indicates that 5.8% of the urban and 7.2% of the rural older adults primarily suffer from mood disorders.

Andhra Pradesh (76%) stands third in terms of using a private health facility for outpatient care after Telangana (82%) and Maharashtra (83%). Compared to 11% of women aged 45 and above reported having undergone hysterectomy in India, it is 23% in AP. The treatment rate for all chronic health conditions is higher among the elderly in urban areas, particularly those with higher education than their counterparts.

Problem statement

A study of assess the knowledge on geriatrics care among III year B.Sc Nursing student at Narayana College of Nursing Nellore Andhra Pradesh.

Objectives

- To assess the level of knowledge regarding geriatric care among III year BSC nursing student.
- To find out the association between the level of knowledge regarding geriatric care among III year B.Sc Nursing student with their socio-demographic variables.

Operational Definition

Knowledge: knowledge refers to the facts knowledge and skills acquired by 3rd year B.Sc Nursing student regarding geriatric care.



Geriatric Care: geriatrics or geriatric medicine is a specialty of internal medicine and family medicine that focus on health care of elderly people.

Student: A student reefers to a person who is studying 3rd year B.Sc Nursing at Narayana College of Nursing, Nellore.

Materials and Methods:

Research Approach:

Quantitative research approach.

Research Design:

The cross sectional descriptive research design

Setting of the study:

The study was conducted in Narayana College of Nursing, Nellore A.P. It is one of the best Nursing Colleges in South India. It is affiliated with Dr.NTR University of Health Sciences and recognized by Indian Nursing Council, New Delhi. It provides high academic standards to its students. It offers GNM, B.Sc. Nursing, M.Sc. (N), Post (B.Sc. N) and Ph.D scholar programmes for Nursing. The college has 200 students annual intake with excellent infrastructure and all the facilities like well equipped laboratory, library and skilled faculties to nurture the students.

Population:

Target population: The target population for the study includes all III year B.Sc Nursing students.

Accessible Population: The accessible population includes the III year B.Sc Nursing students studying in Narayana College of Nursing, Nellore.

Sample: The sample for the present study includes the III Year B.Sc(N) Nursing students.

Sampling Technique: Non probability convenience sampling technique was adopted to select samples.

Sample size: The sample size for the present study was 100 III year B.Sc nursing students who fulfils the inclusion criteria.

Criteria for sampling:

Inclusion Criteria: The nursing students who are

- Willing to participate the study.
- Available at the time of data collection.

Exclusion Criteria: The nursing students

• Who are sick at the time of data collection.

Variables of the study: Variables of the study was research variables and dependent variables.

Research variables: The knowledge regarding Geriatric care among III year B.Sc Nursing students. **Demographic variables:** The socio demographic variables includes age, religion, Source of information.

Description of Tool:

Part - A:

It deals with socio demographic data of III year B.Sc (N) students. It includes age, source of information and attended any CNE programme.

Part - B:

This consist of 25 items of structured questionnaire to assess the knowledge regarding Geriatric care among III Year Nursing students in Narayana College of Nursing, Nellore.

Score Interpretation: The structured questionnaire consist of 25 questions, each correct answer was awarded 'one' mark and each wrong answer was awarded 'zero' mark.

Grade	Percentage	Score			
A+	91-100%	20-25			
A	81-90%	18-19			
B+	71-80%	16-17			
В	61-70%	14-15			
С	50-60%	11-13			
D	<50%	<11			

Data collection procedure:

The data collection procedure was done for a period of 2 weeks after obtaining Permission from



the Institutional Ethics Committee, principal, Narayana college of Nursing Nellore. Investigator visits the each participant and introduced herself and explained the nature and purpose of the study. Confidentiality of the information was assured by taking informed consent from the participants. 100 participants was selected by using non probability convenience sampling technique who fulfilled the inclusion criteria. The data collected by administering the two parts of the tool. The investigator distributed the tool for filling the socio demographic data and the structured questionnaire which consists of various items related to Geriatric care. The total two week duration required by the investigator to get the required number of study participants. Then the collected data was coded, tabulated and organized for statistical analysis. Further the data was analyzed by using descriptive and inferential statistics based on the objectives of the study.

Plan for data analysis:

The data was analysed in the terms of objective of pilot study using the descriptive statistics. The plan for data analysis as follows

Results and Discussion:

Table-1: The frequency and percentage distribution based on age. (N = 100)

Age	Frequency	Percentage
18-20 years	23	23%
21-23 years	55	55%
24-56 years	22	22%
Total	100	100%

Table-1: Shows the frequency and the percentage distribution of age, where 23(23%) belong to 18-20 years, 55(55%) belong to 21-23 years, 22(22%) belong to 24-26 years.

Table-2: The frequency and percentage distribution based on religion (N -100)

Religion	Frequency	Percentage
Hindu	44	44%
Christian	32	32%
Muslim	24	24%
Total	100	100

Table-2: Refers to frequency and percentage distribution of religion where 44(44%) belong to Hindu 32(32%) belong to Christian, 24(24%)belong to Muslim.

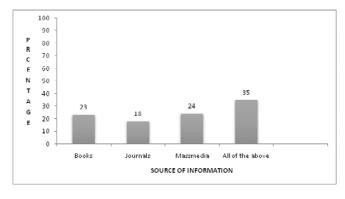


Fig no.1: Percentage distribution based on source of information.

Table-3: frequency and percentage distribution of level of knowledge on geriatric care (N-100)

Level of knowledge	Frequency	Percentage			
A+	9	9%			
A	5	5%			
B+	32	32%			
В	19	19%			
С	30	30%			
D	5	5%			

The above the table shows that with regard to level of knowledge 9(9%) had acquired A+ grade, 5(5%) had acquired A grade, 32(32%) had acquired B+ grade, 19(19%) had acquired B grade, 30(30%) had acquired C grade and 5(5%) had acquired D grade.



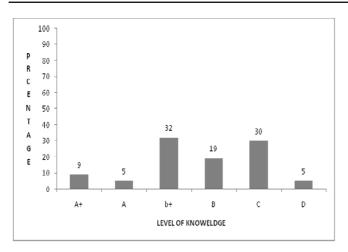


Fig no.2: Percentage distribution based on level of knowledge.

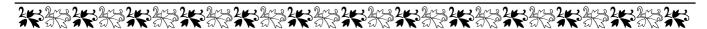
Table 4: mean and standard deviation on level of knowledge on geriartic care

Category	Mean	SD		
Level of knowledge				
on geriatric care	16.81	2.24		

The above table shows that with regard to knowledge score on geriatric care. Mean value was 16.81 with standard deviation of 2.24.

Table 5: Association between the level of knowledge on Geriatric care among III rd year B.Sc nursing students with their selected socio demographic variables. (N=100)

S. No	Demographic Variables		A +		A]	B +		В	(C		D	Chi-Square (X²)
		F	%	F	%	F	%	F	%	F	%	F	%	
1	Age										•	CV=5.42		
	18-20 years	3	3	2	2	8	8	4	4	5	5	1	1	TV=18.31 Df=10
	21-23 years	4	4	2	2	14	14	13	13	19	19	3	3	P=0.05 NS
	24-26 years	2	2	1	1	10	10	2	2	6	6	1	1	
	>26 years	1	I	-	-	-	-	-	-	-	-	-	-	
2	Religion				•					•				CV=23.15 TV=18.31 Df=10
	Hindu	6	6	3	3	14	14	13	13	7	7	1	1	
	Christian	2	2	1	1	14	14	5	5	8	8	2	2	P=0.05 S
	Muslim	1	1	1	1	4	4	1	1	15	15	2	2	
	Buddhism	-	Ī	-	-	-	-	-		-	-	-	-	
3	Source of infor	mat	ion		•	•		•	•	•	1		•	CV_1 00
	Books	2	2	1	1	8	8	5	5	6	6	1	1	CV=1.80 TV=24.99
	Journals	2	2	1	1	6	6	4	4	4	4	1	1	Df=15 P=0.05
	Mass media	2	2	1	1	8	8	4	4	8	8	1	1	NS
	All of the above	3	3	2	2	10	10	6	6	12	12	2	2	



- **Table 5:** shows that association between the level of knowledge on geriatric care among III year B.Sc Nursing students with their selected socio demographic variables.
- With reference to age, calculated value is 5.42 and table value is 18.31 at p=>0.05 the calculated value is less than the table value. So there is non-significant between the age level of knowledge on geriatric care.
- \bullet With regard to religion, calculated value is 23.15 and table value is 18.31 at p=>0.05. the calculated value is more than the table value. So there is significant between religion and level of knowledge on geriatric care
- With context to source of information, calculated value is 1.80 and table value is 24.99 at p: >0.05 level. The calculated value is less than the table value. So there is non-significant between the source of information and level of knowledge on geriatric care. **Conclusion:** The present study concluded that among 100 III year B.Sc (N) students with regard to assess the knowledge on geriatric care, 9(9%) had acquired A+ grade, 5(5%) had acquired A grade, 32(32%) had acquired B+ grade, 19(19%) had acquired B grade 30(30%) had acquired C grade and 5(5%) had acquired D grade of knowledge on geriatric care. Hence there is a significant association between the level of knowledge on geriatric care among III year B.Sc (N) students with their selected socio demographic variables such as age, religion, source of information. The results indicate that the health professionals need to educate the nursing students on geriatric care. So it is important to create awareness on geriatric care among nursing students.

Reference:

1. Bulter (1983), aging and mental health, 3rd edition published by St Louis; moshy, p No. 58

- 2. Ableslinda(2000) Gerontological nursing-principles and practice; 5th edition, published by St Louis CV mosy, p No.222- 245.
- 3. Burren H Beck, Dinner Hopper (1999), aging and behavioral changes, 6th edition; p No 32-42
- 4. Eliopoulous Charlotte (1999), manual of Gerontologic nursing 2^{nd} edition, published by Missouri moshy.
- 5. Larsen and hochil (2003), aging and renal problem.
- 6. Locnerj.1 (2002), Effect of aging, Gerontological nursing, p No 15-21
- 7. Meriden L mass (2001), Nursing care of older adults, diagnosis, outcomes, intervention 1st edition Missouri; moshy.
- 8. K park text book of preventive and social medicine 18th edition, BanarsidasBhanot. Publication, P No. 434-435.
- 9. Charlotte E liopouls, Gerontological nursing, 5th edition; published by Lippincott.
- 10. Dunlop (1997) teaching advance derivatives journal of Gerontological nursing p.no 11-12.
- 11. Kamalesh Joshi, Rajesh Kumar (2003), morbidity profile of elder people, international journal of epidemiology p.no32,67,73.
- 12. Shendram and matike (2003) changing trends in disease of order, journal ofgeriartic medicine p.no45,63,67.
- 13. Roheredw Giffth (2000) the epidemiology, age and healthy injury p.no 25.
- 14. The nursing journal of India, may -2007. Published by Dean, k k Gulani pity.
- 15. The nursing journal of India January 2008
- 16. www.truth.com
- 17. www.pubmed.com
- 18. www.Sandiego.com
- 19. www.google.com
- 20. www.gahoo.com