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A study to assess the effectiveness of module on palliative care in terms of knowledge and attitude among nursing students in a selected college of nursing, New Delhi

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Abstract

A holistic approach for caring for terminally ill is an integral part of health care delivery system, hence it's very important for health care workers including nurses to have good knowledge, attitude and practice about palliative care to provide quality care at the end of life or for chronically ill patients. Palliative care concept is new and very little is known in India. The aim of study was to assess the effectiveness of module on palliative care in terms of knowledge and attitude of among nursing students. Pre-experimental research study, one group pre-test post-test design was used to assess the knowledge and attitude of 68 nursing students on palliative care from a selected college of nursing in Delhi. The study setting was Holy Family College of nursing and sample has nursing students from B.Sc. Nursing 2nd year & GNM 2nd year. The data collected were analysed and interpreted using descriptive and inferential statistics. Majority (98.5%) of the nursing students had poor knowledge about palliative care in the pre-test whereas, in the post-test, three fourths of the students (75%) had good level of knowledge and 22% had very good knowledge level. Majority of the participants had positive attitude towards palliative care in both pre-test (94.1%) and post-test 98.5%. Significant increase in knowledge score between pre-test and post-test ($t=23.29, p<0.001$) was seen which can be attributed to the intervention, but there was no significant difference in attitude between pre-test and post-test ($t=0.297, p=0.767$). The attitude was positive before the implementation of module as evidential by high pre-test attitude score. There is a significant positive correlation ($r=0.25; p=0.04$) between knowledge score and attitude score at the pre-test level. There was no significant association between knowledge, attitude and demographic variable. It can be concluded that the Palliative care module is effective in increasing the knowledge, but had no effect on attitude. This study can be replicated in other health care providers to prove the effectiveness in enhancing attitude, as nursing students are already exposed & have positive attitude as evidenced in pre-test.

Keywords: Effectiveness, module, palliative care, knowledge, attitude, nursing students, college of nursing

Introduction

Palliative care is a term derived from Latin word Palliare, "to cloak". Palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with life threatening illness, through prevention and relief of suffering by means of early identification, assessment and treatment of pain, and other problems- physical, psychological, and spiritual [1]. Palliative care is primarily directed at providing relief to a terminally-ill person through symptom management and pain management. The goal is not to cure, but to provide comfort and maintain the highest possible quality of life for as long as life remains. Palliative care programs also address mental health and spiritual needs along with the physical needs [2, 3]. Even though palliative care has been present in India since the mid-1980s, provision of services has not kept pace with demand: coverage is poor as evidenced by per capita morphine consumption (A proxy indicator for access to palliative care [4, 5]). There have been very few studies in the literature which systematically examine the knowledge, attitudes and practices (KAP) of palliative care providers in India [6-10]. SS Kar, L Subitha, S Iswarya (2015) from the department of Preventive and Social Medicine, Jawaharlal Institute of Postgraduate Medical Education and Research, Puducherry reported

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that the total number of people who need palliative care is likely to be 5.4 million people a year. Palliative care is the active total care of patient in advanced and incurable stages of cancer. More than 70% of all cancer patients in India require palliative care for relief of pain, other symptoms and psychosocial distress. The need for education and training in palliative care has been emphasized by the World Health Organization [11]. The limited availability of palliative care services structures within a hospital or outside make it difficult for a patient and their families to go through the terminal phase of disease and dying. This is further compounded by the lack of an adequate number of health professionals trained to deliver the palliative and end of life care [1].

World Health Organization (2015) estimated that the Non-Communicable Diseases (NCDs) will be as prevalent as communicable diseases, which have been the main cause of high morbidity and mortality among the world population [12]. It is a major undertaking for health systems worldwide to deliver appropriate palliative care. Many countries have experienced dramatic improvements in population life expectancy. The proportion of elderly people, and particularly those over 80, has increased significantly in recent decades. As populations age, people die in greater numbers after long illnesses from heart disease, cerebrovascular disease including stroke, chronic respiratory disease and respiratory infections, and cancer. Palliative care is concerned both with patients and their families and with the enhancement of quality of life from an early stage in a life-threatening illness [13]. A holistic approach for caring for the terminally ill at the end of life is an integral part of health care delivery system. It is very important for nurses to have knowledge about end of life care to recognize their unique response to illness and support their values and goals. Education, clinical practice and research concerning end of life care are evolving and the need to prepare nurses to care for the dying has emerged as a priority. The attitude of nurses towards death and dying patients may influence the care nurses are able to provide to the client. Historically, nurses have been involved in the provision of palliative care. Nurses have played various roles in the development of palliative care, offering leadership, support and focus for the movement [14, 15]. However, despite this type of support for palliative care, nursing and a continued involvement in palliative care, nursing has lagged behind other disciplines in the development of palliative care nursing education curricula. This underdeveloped educational foundation has contributed to difficulties in defining the role of nurses in palliative care. To provide quality care at the end of life or for chronically sick patients, Nurses must have good knowledge, attitude and practice about palliative care [16].

Palliative care is an approach that improves the quality of life of patients and their families who are facing problems associated with life-threatening illnesses. It prevents and relieves suffering through the early identification, correct assessment and treatment of pain and other problems, whether physical, psychosocial or spiritual. Though it is perceived as care for the dying it should begin when the patient is diagnosed with a chronic illness. Forty million people are in need of palliative care globally but 14% of

them receive it at present. Access to adequate pain relief among the patients suffering from cancer is less than 3% in our country. In India 10 million patients require palliative care [14]. Growing demand for palliative care shows that health professionals are expected to provide palliative care as a part of their practice. Several initiatives are under way to promote palliative care principles and practice in healthcare training. The challenge is how to develop these skills in the face of increasing demand on our time. There should be capacity building in palliative care for the existing medical workforce of our country through continued medical education. Worldwide there are studies about assessing palliative care awareness among health care providers including impact about its educational interventions, however there is limited published evidence about similar literature from India [15-20]. This study benefit to the policy makers by identifying the gaps of nurses on palliative care that helps to influence the higher education to revise nursing curriculum in order to incorporate palliative care content in nursing course. This will help for nurse educators to give great emphasis on palliative care nursing education for nursing students that improve palliative care services in the hospitals. Secondly it benefits the community as good knowledge and positive attitude of nurses can address the patients of all ages and a broad range of diagnostic categories that needs palliative care from life threatening to chronically ill patients. Thirdly it will benefit to the nursing personnel to see themselves and respond accordingly. So that nurses can put their effort on updating the existed knowledge of palliative care through reading or taking short term training. This benefits the individual patients in terms of improving the quality of life as nurses' knowledge and attitude gaps identified and corrected. Lastly the findings of this study will serve as a base for other researchers who want to study about palliative care in advance.

Materials and Methods

Quantitative research approach was considered appropriate as the knowledge and attitude are quantified to evaluate the effectiveness of module of palliative care in terms of knowledge and attitude among nursing students studying in Holy Family College of Nursing, New Delhi. The research design adopted for study was pre-Experimental design in particular one group pre-test and post-test design. The Independent variable in this study is "Module on palliative care". The Dependent variable in this study is "Knowledge and attitude on palliative care among the Nursing students". The research setting selected for the pilot study was Holy Family College of Nursing, New Delhi. The population comprised of the B.Sc. Nursing and GNM Nursing students studying in Holy Family College of Nursing, Hospital, New Delhi. In present study convenient sampling technique used with sample size of 68 nursing students.

Observation and Results

The results of the analysis of the data were organized and presented under different sections.

Section I: Description of demographic characteristics of nursing students

Table 1: Frequency and percentage of Demographic characteristics of nursing students (N=68)

S. No.	Variable	Frequency	Percentage
1.	Age		
	18-20 years	63	92.6
	21-22 years	5	7.4
2.	Course		
	B.Sc. Nursing	33	48.5
	GNM Nursing	35	51.5
3.	Religion		
	Hindu	18	26.5
	Christian	45	66.2
	Muslim	1	1.5
	Buddhism	4	5.9
4	Personal experience in taking care of any family member diagnosed with		
	Cancer	11	16.2
	Immunodeficiency	8	11.8
	Renal disease	8	11.8
	COPD	10	14.7
	Other chronic diseases	8	11.8
5.	Previous knowledge about palliative care		
	Yes	27	39.7
	No	41	60.3

Section II: Description of knowledge level of nursing students regarding palliative care at pre-test and post-test level.

Table 2: Frequency and percentage distribution of Pre-test and Post-test knowledge scores among the nursing students (N=68)

Interpretation	Pre-Test		Post-test	
	Frequency	Percentage	Frequency	Percentage
Poor knowledge (Less than 20)	67	98.5%	02	2.94%
Good knowledge (21-30)	01	1.46%	51	75%
Very Good knowledge (More than 30)	00	00%	15	22%

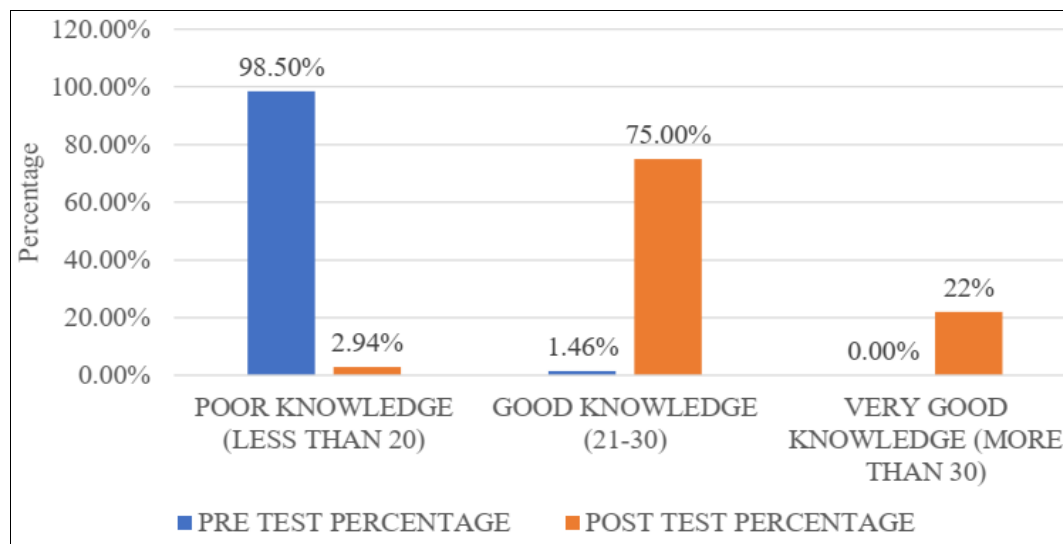


Fig 1: Comparison of pre-test and post-test knowledge level regarding palliative care

The present study found out that majority (98.5%) of the nursing students had poor knowledge about palliative care in the pre-test. In the post-test assessment, three fourths of the students (75%) had good level of knowledge and 22%

had very good knowledge level.

Section III: Description of attitude level of nursing students regarding palliative care at pre-test and post-test level

Table 3: Frequency and percentage distribution of Pre-test and Post-test in Attitude score among nursing students (N=68)

Interpretation	Pre-Test		Post-Test	
	Frequency	Percentage	Frequency	Percentage
Favorable (36 & above)	64	94.11%	67	98.5%
Uncertain (18-35)	03	4.41%	01	1.46%
Unfavourable (Less Than 17)	01	1.46%	00	00%

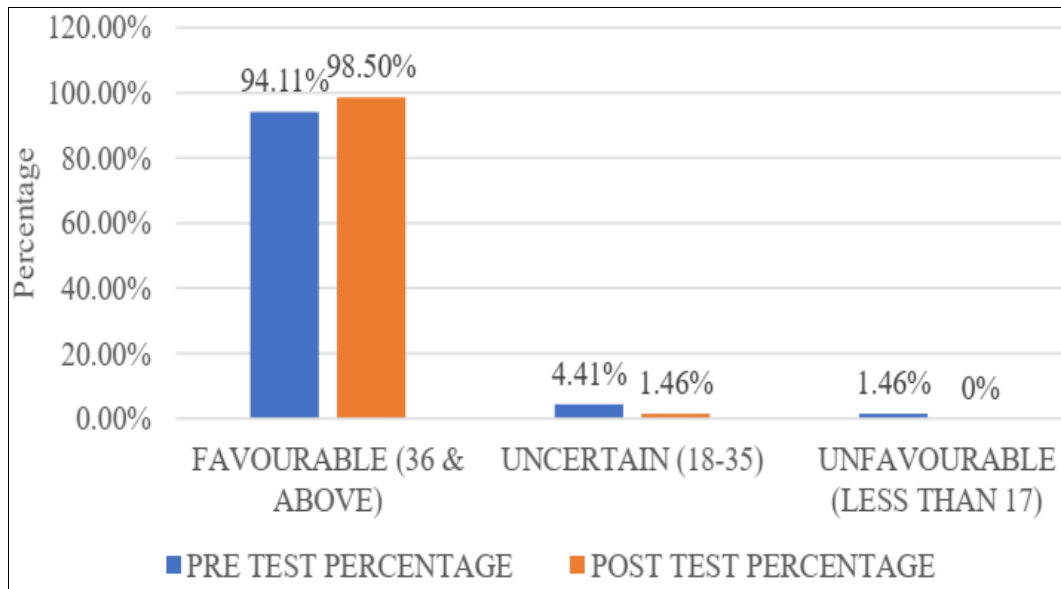


Fig 2: Comparison of pre-test and post-test attitude level regarding palliative care

As shown in the Figure 2, most of the study participants had favourable attitude towards palliative care in both pre-test (94.1%) and post-test (98.5%). Less than two percent (1.46%) of the students had unfavourable attitude in the pre-test while none of them had unfavourable attitude in the post-test.

Section IV: Analysis according to objectives

Objective 1: to assess the effectiveness of module on palliative care in terms of knowledge among nursing students

Table 4: Comparison between pre-test and post-test score of knowledge (N=68)

Variable	Pre-test (Mean ± SD)	Post-test (Mean 1 SD)	Mean Difference	t value	p value
Knowledge Score	20.43±3.45	35.41±3.77	14.98	23.29	<0.001

Table 4 compares the pre-test and post-test scores of knowledge of study participants. The mean difference between pre-test and post-test knowledge score was 14.98. Since the calculated t value (23.29) was greater than that the table value (1.99; df=66 at p=0.05 level of significance), the null hypothesis (H01) is rejected and research hypothesis (H1) is accepted. Hence, there is a significant increase in knowledge score between pre-test and post-test. The

significant increase in knowledge score can be attributed to the intervention. Hence, this can be interpreted that the module on palliative care was effective in increasing the knowledge among nursing students.

Objective 2: to assess the effectiveness of module on palliative care in terms of attitude among nursing students

Table 5: Comparison between pre-test and post-test score of attitude (N=68)

Variable	Pre-test (Mean ± SD)	Post-test (Mean 1 SD)	Mean Difference	t value	p value
Attitude score	41.50±4.65	41.26±6.18	0.235	0.297	0.967

Table 5 compares the pre-test and post-test scores of attitude of study participants. The mean difference between pre-test and post-test attitude score was 0.235. Since the calculated t value (0.299) was lesser than the table value (1.99; df=66 at p=0.05 level of significance), the null hypothesis (H02) is not rejected. Hence, there is no significant increase in attitude between pre-test and post-test. Hence, this can be interpreted that the module on palliative care was not

effective in increasing the attitude level among nursing the students. There is no significant difference in attitude between pre-test and post-test (t=0.297, p=0.767).

Objective 3: To find out correlation between knowledge score and attitude score regarding palliative care among Nursing students in a selected college of nursing in New Delhi

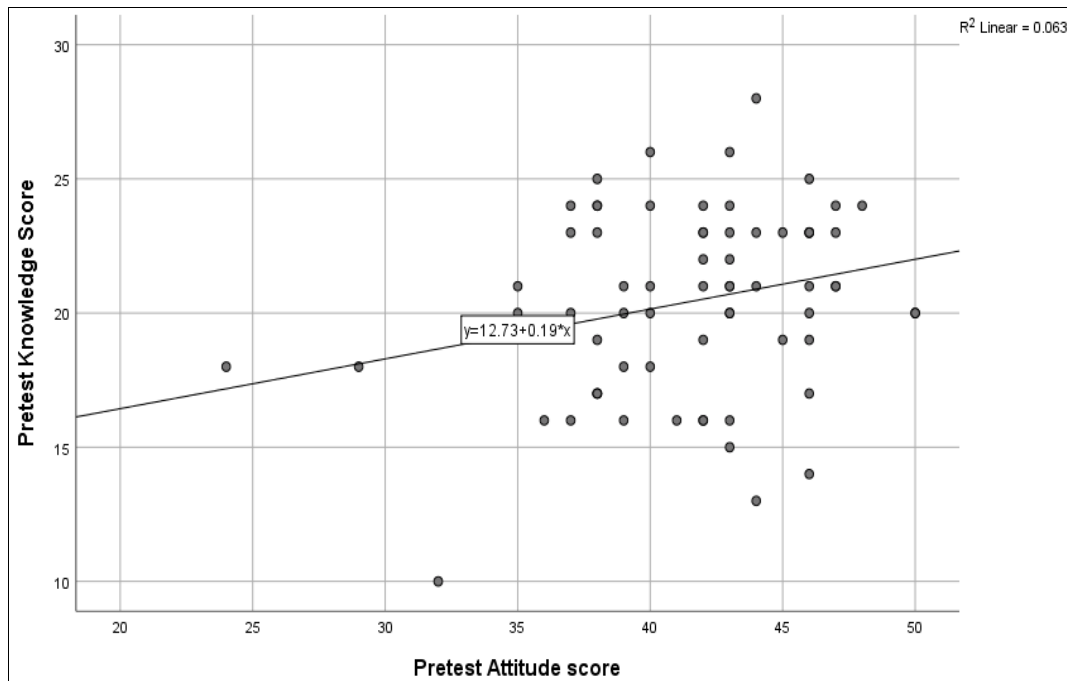


Fig 3: Scatter plot diagram shows the correlation between pre-test knowledge and attitude score

Figure 3 depicts the correlation between pre-test knowledge and attitude score. The calculated r value is 0.25 and the p value is 0.04 for the corresponding r value (0.25). Hence, the null hypothesis (H03) is rejected and the research hypothesis (H3) is accepted. This shows that there is a significant positive correlation between knowledge score

and practice score at pre-test level.

Objective 4: To associate the level of knowledge and attitude regarding palliative care with the selected demographic variables among Nursing students in a selected college of nursing in New Delhi

Table 6: Association between pre-test knowledge score and selected demographic variables

Variable		Knowledge Score (Mean ± SD)	t value	p value
Age	18-20 years (n=63)	20.49±3.50	0.56	0.582
	21-22 years (n=5)	19.60±2.97		
Religion	Christian (n=45)	20.56±3.18	0.50	0.669
	Hindu & others (n=23)	20.17±3.99		
Course	B.Sc Nursing (n=33)	21.36±3.15	2.24	0.028*
	GNM Nursing (n=35)	19.54±3.53		
Presence of Cancer in family member	Yes (n=11)	19.18±2.96	1.32	0.193
	No (n=57)	20.67±3.51		
Presence of immunodeficiency in family member	Yes (n=8)	20.58±3.47	1.03	0.30S
	No (n=60)	19.25±3.24		
Renal disease in family member	Yes (n=8)	20.58±3.47	1.03	0.308
	No (n=60)	19.25±3.24		
COPD in family member	Yes (n=10)	19.70±3.23	0.72	0.475
	No (n=58)	20.55±3.50		
Other chronic diseases in family member	Yes (n=8)	18.88±3.04	1.36	0.1
	No (n=60)	20.63±3.47		
Previous knowledge about palliative care	Yes (n=27)	20.74±3.36	0.61	0.546
	No (n=41)	20.22±3.53		

Table 6 compares the mean knowledge score of the study participants based on their demographic characteristics to find association between knowledge score and demographic characteristics. Independent sample t test was used to compare the mean knowledge score of subgroups divided based on their demographic characteristics. The mean knowledge score of B.Sc. Nursing students (21.36±3.15) is significantly (p=0.028) higher than that of GNM students (19.54±3.53). Hence, there is an association between knowledge score and the course (i.e. B.Sc. or GNM). There

is no significant association between knowledge score and other demographic variables. The mean knowledge score of B. Sc. Nursing students (21.36±3.15) is (p=0.028) higher than that of GNM students (19.54±3.53). The mean difference was 1.82. The calculated t value (2.24) is greater than that the table value (1.99; df=66 at p=0.05 level of significance), the null hypothesis (H04) is partially rejected, i.e. only for the association between knowledge score and the course.

Table 7: Association between pre-test attitude score and selected demographic variables

Variable		Attitude Score (Mean ± SD)	t value	p value
Age	18-20 years (n=63)	41.57±4.69	0.45	0.656
	21-22 years (n=5)	40.60±4.39		
Religion	Christian (n=45)	41.80±3.43	0.74	0.461
	Hindu & others (n=23)	40.91±6.46		
Course	B.Sc. Nursing (n=33)	42.27±4.51	1.34	0.185
	GNM Nursing (n=35)	40.77±4.72		
Presence of Cancer in family member	Yes (n=11)	40.73±3.74	0.60	0.551
	No (n=57)	41.65±4.82		
Presence of immunodeficiency in family member	Yes (n=8)	40.50±3.96	0.65	0.521
	No (n=60)	41.63±4.74		
Renal disease in family member	Yes (n=8)	40.50±3.96	0.65	0.521
	No (n=60)	41.63 ±4.74		
COPD in family member	Yes (n=10)	41.00±4.35	0.37	0.716
	No (n=58)	41.59±4.73		
Other chronic diseases in family member	Yes (n=8)	40.00±4.00	0.97	0.335
	No (n=60)	41.70±4.72		
Previous knowledge about palliative care	Yes (n=27)	41.56±4.19	0.08	0.937
	No (n=41)	41.46±4.98		

Table 7 compares the mean attitude score of the study participants based on their demographic characteristics to find association between attitude score and demographic characteristics. Independent sample t test was used to compare the mean attitude score of subgroups divided based on their demographic characteristics. Analysis found that there is no significant association between the attitude score and demographic characteristics of study participants. Hence the null hypothesis (H05) was not rejected.

Summary and Conclusion

The present study was undertaken by the researcher with the aim to assess the effectiveness of module on palliative care in terms of Knowledge and Attitude among Nursing Students in a Selected College of Nursing, New Delhi. A study to assess the effectiveness of module on palliative care in terms of Knowledge and Attitude among Nursing Students in a Selected College of Nursing, New Delhi.

Objectives of the study

- To assess the effectiveness of module on palliative care in terms of knowledge among Nursing students in a selected College of Nursing in New Delhi.
- To assess the effectiveness of module on palliative care in terms of attitude among nursing students in a selected college of nursing in New Delhi.
- To find out correlation between knowledge score and attitude score regarding palliative care among nursing students in a selected college of nursing in New Delhi.
- To associate the knowledge score and attitude score regarding palliative care with the selected demographic variables among nursing students in a selected college of nursing in New Delhi.

Major findings of the study

- A total of 68 students, 33 students from B.Sc. Nursing (48.5%) and 35 students from GNM nursing course (51.5%), were enrolled in the study.
- Majority (92.6%) of the students are aged between 18 and 20 years.
- Majority of the participants are Christians (66.2%). Majority of the nursing students had no personal experience in taking care of any family member

diagnosed with diseases such as cancer, AIDS, End stage renal diseases, COPD and other chronic diseases.

- Eleven students (16.2%) had personal experience in taking care of a family member with cancer followed by 10 students (14.7%) with experience of taking of COPD patients.
- Majority (98.5%) of the nursing students had poor knowledge about palliative care in the pre-test. In the post-test assessment, three fourths of the students (75%) had good level of knowledge and 22% had very good knowledge level.
- Most of the study participants had favourable attitude towards palliative care in both pretest (94.1%) and post-test (98.5%). Less than two percent (1.46%) of the students had unfavourable attitude in the pre-test while none of them had unfavourable attitude in the post-test.
- There is a significant increase in knowledge score between pre-test and post-test ($t=23.29$, $p<0.001$). The significant increase can be attributed to the intervention.
- There is no significant difference in attitude between pre-test and post-test ($t=0.297$, $p=0.767$).
- There is a significant positive correlation ($r=0.25$; $p=0.04$) between knowledge score and attitude score at the pre-test level.
- There is no significant correlation between post-test knowledge score and post-test attitude score ($r=-0.102$; $p=0.40$).
- The mean knowledges score of B.Sc. Nursing students (21.36 ± 3.15) is significantly ($p=0.028$) higher than that of GNM students (19.54 ± 3.53). Hence, there is an association between knowledge score and the course (i.e. B.Sc. or GNM).
- There is no significant association between the attitude score and demographic characteristics of study participants.

The present study findings showed that before intervention, 67 nursing students (98.5%) had poor knowledge of Palliative care, one had good knowledge, and no one had very good knowledge. During the post-test, 51 nursing students (75%) had very good knowledge level of Palliative care, 15 nursing students (22%) had good knowledge, and only 2 (2.94%) had poor knowledge.

The present study concludes that most of the nursing

students had poor knowledge regarding palliative care but many of the nursing students showed good attitude level regarding palliative care. The lack of knowledge and experience as well as professional limitations may have contributed to insufficient knowledge about palliative care in this study. Nevertheless, the nature of nursing curriculum and training inculcated in nursing students to be empathetic towards patients may have positive influence in nursing students to have better attitude towards palliative care even before the introduction of the module on palliative care. This study

depicts the deficiencies in understanding resuscitation in palliative care setting, palliative care and its philosophy, pain and non-pain symptom assessment and management, communication, interdisciplinary care for patients. Thus, it shows that inclusion of this knowledge into the curriculum by workshops or training sessions have been found to improve the knowledge of the undergraduate students to attain a better palliative and effective quality care starting from the time of diagnosis in healthcare setting. It is pertinent to note that the Palliative nurses learn from colleagues with clinical expertise, not from the books or lecture alone. The administrators or nurse educator should encourage the nursing students or the registered nurses to conduct

research related to assessment of knowledge and attitude regarding palliative care among nursing students. Thus, it's the responsibility of each individual of nursing profession to provide the utmost care to the patient, not at the end of life but at the initial stages of diagnosis of any disease whether it may be chronic or any terminal illness so as to provide a hope for the patient to live a peaceful life until death. An empathetic approach could have therapeutic effect on nursing care rather than simple theoretical care. In our study, out of 68 nursing students approached, there was 100% response rate indicating their interest in knowing about palliative care. The study would provide a baseline information to build on and develop a culturally competent intervention to enhance nurse's knowledge and attitude and enhance the quality of end-of-life care.

Ethical Clearance: Taken From Research Committee

Source of Funding: Self

Conflict of Interest: Nil

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