## CHAPTER III

### Methodology

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CHAPTER III

METHODOLOGY

3.1. SIGNIFICANCE OF THE STUDY

Nursing services are the major part of health care system. It plays major role in the delivery of healthcare. Today’s Indian population scenario as changes in present life-styles like sedentary work, no physical exercise or lack of exercises, Junk foods, all the time with mobile phones on what’s up, Stress due to various reasons like job stress due to severe competitions, or no jobs. This all leads to high incidence of non communicable health related problems such as obesity, diabetes and heart diseases, cerebral vascular accidents. Addictions like tobacco, Gutkha, alcohol and drugs leading to cancer incidences, liver cirrhosis and new communicable diseases like swine flu, Zinka viruses etc.

On the other side major problem of India is Population explosion which is adding in poverty, sanitary problems and nutritional deficiency disorders. Communicable diseases like tuberculosis, malaria, dengue fever are uncontrolled. Life span is increased and thereby increase in population of senior citizens. Old age homes are full and nursing and medical services are essential to them. In addition to that natural and manmade calamities, accidents etc. hospitals are overflowed.

Different health projects are implemented in the hospitals like Rajiv Gandhi schemes of free surgeries. In Primary health centers maternity and child health services are expanded. These health centers are becoming industries. Many corporate, private and multinational hospitals are coming up The industry of healthcare is rapidly moving forward in technological advances that will allow patients to be monitored at home by the trained registered nurses. For example: A patient with chest pain can request a mobile unit nurse, who can reach to home, takes an ECG, sends photo to the cardiologist and start life saving treatment immediately either at home or reach to the hospital with emergency care till cardiologist arrives.
These all factors are resulting into demand for nurses. Nursing can be defined as the most, and certainly not less than one of the most, valuable pieces in the puzzle of healthcare. Consequently, it must be assured that we have an adequate nurse work force, both now and in the future, if we are to continue to provide quality healthcare for everyone.

It was observed that students, who take admission to the nursing from low or lower middle class group, many times either or both the parents are in nursing profession. Nowadays boys are turning to nursing profession though it was said that nursing is famine profession. As per history more Christian students were seen in this profession but now other region /caste students are also seen.

At a time when India and state of Maharashtra facing a critical professional nursing shortage and the numbers of students entering the B.Sc. nursing program have steadily declined. Given the impact that student perceptions can have on career choice, it is a challenge to nursing educators and recruiters to provide informed career decision-making opportunities essential to students in formulating both accurate and positive perceptions about nursing profession. This research is also important because it could provide information related to current perceptions about the nursing profession that senior student nurses could address in the workplace as they mentor students. Students observe their seniors. If outgoing batches are recruited in Government or private sector, drawing good salaries, earned stability in life, then their followers, junior students also develop good perception. In such a way profession gets good publicity.

Knowing their perception, would help nursing authorities.ies to strengthen their positivity towards nursing profession, would help to encourage them to improve their knowledge and skills. It would help to build their capacities. we can avoid the incidences that would foster their negative perceptions. All the health authorities should be made „to handle them with care“. They are like delicate glass. Their potentials should be brought out and could be developed.

An understanding of students” perception and its evolvement during the course of the baccalaureate programme”s 4 years can assist nurse educators in evaluating the educational programme”s strengths and weaknesses. This understanding can
enhance curricular development towards a caring and holistic paradigm of nursing. Moreover, it will add to the body of knowledge of nursing education, especially in relation to admission processes, by examining specific personal factors that influence. The understanding of the perception about profession, career development and critical issues, many strategies can be added by nursing organizations, administrators, Educators, and the government to address these issues of this profession with the goal of reducing the nursing shortage through increased recruitment and retention of practicing nurses. Ultimately it would helpful for health care delivery system. One who had greater satisfaction in the profession can be a role model for others. Therefore, research is needed to determine if students’ perceptions of nursing can change once they are in nursing programs, and if adequate informed career decisions making skills about nursing prior to entering nursing programs can improve nursing student retention rates, increase the admissions in degree programme and career satisfaction

3.2 RESEARCH QUESTIONS:

1. What is the perception towards the nursing profession among B.Sc. Nursing students enrolled at selected nursing colleges of western Maharashtra?

2. What are the main influencing factors/reasons for enrolment to the B.Sc. nursing at selected nursing colleges of western Maharashtra?

3. Is there any association of students between enrolment to B.Sc .Nursing and selected demographical variables?

4. Is there any relationship between perception towards nursing profession and influencing factors/ reasons for enrolment in nursing?

3.3 SPECIFIC OBJECTIVES:

1. To find out socio-demographic characteristics of B.Sc.Nursing students enrolled in B.Sc.Nursing students at selected nursing colleges of western Maharashtra

2. To assess the perception towards the nursing profession among B.Sc. Nursing students enrolled at selected nursing colleges of western Maharashtra.
3. To determine if relationships existed between perceptions of the B.Sc. nursing students and selected demographical variables as admission year age, gender, religion/caste Place of residence, Percentage of marks in 12th PCBE, and Family income.

4. To identify the factors / reasons influencing for enrollment to B.Sc nursing programme at selected nursing colleges of western Maharashtra.

5. To identify if there is correlation between perceptions of B.Sc. nursing students towards nursing profession and factors influencing to enroll at selected nursing

3.4. ASSUMPTIONS:

1. The students enrolling to the nursing colleges are from weaker section of the society.

2. The students enrolling to the nursing colleges are due to job opportunities in regional, national and international level.

3. The Students perceive that being a nurse is not only taking care of patients, but it also requires critical thinking.

4. To prevent illnesses and conservation as well as promotion of health of self and others, it is necessary to acquire the latest introduction of technological advances.

3.5. HYPOTHESIS

H1- There is significant association between perception and selected demographical variables of B.Sc. nursing students

H2 - There is significant correlation between perceptions and influencing factors /reasons among B.Sc.nursing students enrolled in western Maharashtra.
36. RESEARCH DESIGN

The primary purpose of this study was to assess the perceptions towards nursing profession among B.Sc. Nursing students, who were enrolled in six nursing colleges of western Maharashtra.

To find out these factors research design considered an explorative and descriptive method as the best method to assess the perception towards nursing profession among B. Sc. Nursing Students enrolled in the academic year from 2011 to 2014. No studies found in Maharashtra. Therefore in present study the researcher aimed at describing the facts and getting insight into various factors which were affecting their perceptions and thereby enrolment to B.Sc. Nursing programme.

3.7. POPULATION AND SAMPLE

The target population was defined as students enrolled in private, unaided nursing colleges in western Maharashtra for a baccalaureate nursing program and currently studying in first, second, third and fourth year for the academic year 2014-2015. Districts selected were Kolhapur, Sangli, Satara and Pune. These districts were representing Western part of the Maharashtra where urban as well as rural students were enrolling to B.Sc. Nursing degree program. These districts were having nursing colleges affiliated to Deemed University except two colleges of Nursing, to Government University MUHS. There was No government college of Nursing in above districts except Pune. All selected colleges are private unaided nursing colleges. The accessible population was identified about 1000 students. Taking into consideration of non-responsive, not willing to participate in a study and non-availability on the day of data collection, approximately 440 sample size was determined.

3.8. AREA OF THE STUDY

The study was conducted at six selected private unaided nursing colleges of western Maharashtra at Kolhapur, Sangli, Satara and Pune districts. These colleges were constituent colleges of Deemed University or affiliated to Government University (MUHS).
3.9. **INCLUSIVE CRITERIA**

1. Students studying in all six institutions at Kolhapur (2 institutions), Miraj, Sangli, Karad and Pune for B.Sc. nursing programme in the academic year of 2014-15 for first, second, third and fourth year.
2. Those who were present at the time of data collection. Those shown willingness to participate in the study.

3.10. **EXCLUSIVE CRITERIA**

1. Those who were not willing to participate in the study.
2. Those students who were not available at the time of data collection.
3. Those who had left the course in between for any reason.

3.11. **SAMPLE SIZE**

Sample size consisted of 440 students. The total 50% sample of available candidates on the day of data collection will be selected from each college by systematic random method among available candidates.

3.12. **SAMPLING TECHNIQUE**

The method of sampling was the systematic random sampling method. As per attendance registers even numbers were selected. If student is not available on a day of data collection, she/he was excluded. All students selected to participate in study were willing enthusiastically.

All students selected for data collection were fulfilling the criteria for inclusion and available at the time of data collection.

3.13. **STUDY PERIOD**

The data was conducted from January 2015 to February 2015.

3.14. **DEVELOPMENT OF THE INSTRUMENTATION/ TOOL**

Once objectives and hypothesis were clearly laid do the needed informant was done.
3.14.1. Personal experience

The investigator had huge experience of working in hospital and community as well as in teaching in school/college of nursing. Due to which ideas, beliefs, understanding of nurses and students regarding perceptions of nursing profession, and influencing factors to them to enter in nursing and background of many students, nurses as well as co-workers were known to the investigator. In addition to personal experience, review of literature helped the investigator to prepare the tool.

3.14.2. Discussion with the experts.

Various experts in teaching and in the clinical field like Professors, tutors, nursing Superintendents and in charges of recruiting departments were consulted. By virtue of their experiences, they were able to identify some of the areas of perception and influencing factors or reasons regarding entrance in nursing programme.

3.14.3. Informal discussion with the subjects

Having the criteria laid down for the study was great help to develop a tool. After sufficient “feel of the problem” major areas regarding perception and factors influencing were categorized as shown in conceptual framework.

3.15. DISCRIPTION OF THE TOOL

A questionnaire was developed in three parts.

Part-I –Socio-Demographic data of students This was designed to elicit the demographic information from respondents consisting 12 items. It contained Age, Gender, Religion and caste, Nationality, Place of residence marital status, Education, Percentage of marks in 12th PCBE or equivalent exam, Socio-Economic status including Father’s occupation, Income of the family, and any financial aid for nursing education by any agency.
Part II - Perception Scale - To assess the student’s perceptions towards nursing profession which was designed as five point Likert scale Instrument. A series of 20 statements of responses were prepared regarding perceptions towards the nursing profession. For each of the statements, the available responses and score given for statistical analysis were as follows; for each item range from Strongly Disagree “Score =1,” “Disagree Score=-2 “, “Not Sure score= 3 “, “Agree score= 4” and “Strongly Agree score = 5”. Not sure term was added as many students may not have knowledge regarding some responses. Questionnaire was prepared in English as medium of the B.Sc Nursing programme is English.

Part III - Stem responses to identify the factors influencing for enrollment to nursing. The questionnaire contains fourteen stem responses (Yes, No and Not sure) to identify the influencing factors for enrolment to nursing. Last one answer was not structured and kept open ended if respondent wished to add her/his own reason other than in structured questionnaire.

3.16. TESTING OF THE TOOL

3.16.1 Validity:

The investigator casually administered the tool to forty students, apart from those included in the pilot study and sample, to see the feasibility of the tool and extend to which it could cover the area to obtain the information sought. To evaluate content validity of the tool was given to five experts who were PhD in respective areas. Dr. Asha Pratinidhi, research director of Krishna Institute of Medical Sciences, Karad., Dr. Pitre Sneha and Dr. Bhattacharji, from Bharti Vidyapth, Pune, Dr. Nilima Bhore, principal from Sangli and Dr. Sudha Reddy, principal KLE, College of Nursing, Belgaum. They validated the tool for adequacy of the content area and inclusion of adequate items, they also validated the tool for maintaining sequence of responses as per psychological order. Construct validity was confirmed by the Registrar of the D.Y. Patil University who is Ph.D in education after examining the linkage with conceptual framework. All the experts
shared positive agreement except minor modification in construction and organizations of the responses. Questionnaire was modified accordingly.

3.16.2. Reliability:

In order to test the reliability, relevance’s to the objectives and to refine the tool and technique, a pilot study was conducted on 22nd December, 2014

3.16.3. Pilot Survey:

Total 40 students from same setting of D.Y. Patil College of Nursing were administered. Ten students from each batch of first, second third and fourth year of B.Sc. Nursing were systematic randomly selected as per inclusive criteria. Willingness of them was sought. Explanation about the self-administered questionnaire was given to them. Data was collected as per the plan of data collection. It was found that subjects could understand the statements well, they were able to comprehend the questionnaire and supply the information. Responses in the structured questionnaire were checked through phrasing and counter phrasing statements. For example- “Nursing is well-respected career path.”, after some gap the rephrase statement was “Nursing is not prestigious job” and the answers were consistent. It was observed that two statements were difficult to understand due to unknown words to them. i.e. Nurses are more angelic and sympathetic. This statement was changed to “Nurses are kind and sympathetic” one statement in part III was made short to” parental and peer encouragement” Accordingly the necessary modifications were made in the tool. The technique was found to be adequate and feasible. These subjects were excluded from the actual study. It was observed that to complete the structured questionnaire 20 minutes time was needed. To ensure achievements of the objectives of the study, data analysis of the pilot study was done.

3.17. ETHICAL CONSIDERATION

Ethical approval from the authority in written form of the Faculty of Nursing was obtained before attaining the participants’ voluntary involvement in research study. Principal’s written permission was sought. They were assured anonymity and confidentiality of the institution as well as students information.
At individual level after explaining the purpose of the study, informed verbal consent was obtained from all participants prior to their participation in this study. Participants were informed that privacy and confidentiality will be maintained. The study subjects were also informed that the study process will have no intended harm to them. Any study participants who were not willing to be included in the study was not forced to be included in the study. All were igoure to participate in the study. Schedule of data collection for each institution was well planned as per conveniences of the institution which was followed strictly

3.19. DATA COLLECTION TECHNIQUE

The principle investigator, herself had been to all the six selected institutions, with prior permission of the authority of the colleges. Accordingly schedule was prepared as per the connivances of the institutions. Institutions had arranged all four batches in four classrooms. There was best co-operation from all six institution. Plan was implemented as per scheduled programme. Four supervisors having minimum B.Sc.nursing degree qualification from each college were assigned to follow the whole procedure of data collection. It was discussed and instructions were given to them regarding focusing on the objectives of the study and ways of data collection and data handling after collection. Students were explained the purpose of the study by the principle investigator and were told that they had the right to withdraw at any time without adverse impact on their studies. Anonymity was assured by issuing code numbers. Upon verbal agreement, the questionnaire was distributed to the students. They were explained the nature of questionnaire and they were told that there is no right or wrong answer hence they should feel free to write correct information in part I as well as tick the options in part II and III. Last one response was open ended, which to be written by students. After all clarification they were given full privacy to fill in questionnaire. Students were asked to return it to the supervisors after completion. Supervisors were asked to check the completeness of the filled in questionnaire. It was completed in approximately 20 minutes. The data which was collected was packed in a sealed envelope and submitted to the principal investigator every day. It was kept in a locked and sealed cabine
3.20 DATA PROCESSING AND ANALYSIS

Data was fed in computer using code numbers in office excel. It was computed and analysis was done using SPSS version 20 in mean, median mode standard deviation and chi square for association and karl pears test of co-relation is used for co-efficient –co relation. Results are reported in tables and graphs.

Reference: