

“A QUASI EXPERIMENTAL STUDY TO ASSESS THE EFFECTIVENESS OF PLANNED RAJYOGA TRAINING PROGRAMME ON PERSONAL AND PROFESSIONAL PREPAREDNESS FOR PANDEMIC MANAGEMENT AMONG STAFF NURSES IN SELECTED HOSPITALS OF PUNJAB.”

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Abstract

The aim of this study was to assess the effectiveness of Planned Rajyoga Training programme on personal and professional preparedness for pandemic management among staff nurses. Health care professionals, particularly staff nurses, are frequently forced to go above and beyond their regular day-to-day roles and responsibilities in pandemic or pandemic-like scenarios. They may also have to do these jobs in a stressful atmosphere. Their efficiency and efficacy will increase, as well as the quality of their own care, if they are ready for such uncertain times in the future. The Rajyoga Training Program has demonstrated a significant impact on overcoming unconscious anxieties, fears, mental strains, etc., as well as on professional and personal readiness. As a result, the researcher intends to carry out a quasi-experimental study to evaluate the impact of the Planned Rajyoga Training Programme on staff nurses' level of personal and professional preparation. The sample size for the current study's sample was 60, and it was acquired using a non-probability convenient sampling technique. The effectiveness of the planned Rajyoga training programme on staff nurses' personal and professional preparedness was evaluated using a self-structured personal and professional preparedness scale instrument. Statistics for both inference and descriptive purposes will be used during the analysis. Findings showed that the posttest level of personal and professional preparedness for pandemic management in experimental group; 73.3% were having high preparedness and 26.7% were having moderate preparedness. On the other hand, in control group, 76.7% were having moderate preparedness and 23.3% were having low preparedness about pandemic management. The study concluded that as per their posttest, in experimental group, the mean score of preparedness was 66.83 ± 9.72 . In control group; the mean score of preparedness was 40.7 ± 8.30 . The mean difference was 26.13 Here independent t test was applied to find out statistically significant difference. As result found $t_{38} = 11.197$, $p = 0.001$ which indicate highly significant at 0.01 level. Hence The null hypothesis is rejected and alternate hypothesis is accepted. The study concluded that planned Rajyoga training programme is effective to enhance the personal and professional preparedness of pandemic management.

Key words: Effectiveness, Planned Rajyoga Training Programme, personal and professional preparedness.

INTRODUCTION AND BACKGROUND OF THE STUDY

The concept of "personal and professional preparedness for pandemic management" refers to a unique state of mind and a crucial element of a fulfilling work life. A person who is prepared for a given phenomenon can adjust more rapidly and do his tasks more successfully. It encourages professional development, aids in the development of a person's personality, and enables them to adjust to new situations more rapidly in order to properly carry out their professional obligations.

Many healthcare professionals, particularly staff nurses who provide care and services to patients directly or indirectly, say they frequently feel unprepared to handle a pandemic calamity. They express worries about their own safety and the safety of their families, care giving responsibilities, personal health issues, a lack of personal preparation, a lack of confidence, a lack of training, and a refusal to report to work out of dread and anxiety.

Rajyoga meditation can be understood as a health patterning modality in accordance with the power theory (Barrett, 1989). Because it is simple to learn, has noticeable therapeutic results, and can be used freely and autonomously by individuals, it is a safe psychosocial modality. By enhancing their understanding of the nature of life's transitions and engaging in them actively, nurses will be better able to manage their own stress reactions and increase both their personal and professional preparation scores.

Rajyoga meditation strengthens focus and awareness of current events or realities. One is better able to handle stress since it improves one's ability to focus and become more aware of their current feelings. In fact, meditation improves positive traits like happiness, empathy, and life satisfaction while reducing negative traits like stress, burnout, sadness, and anxiety.

The quality of work life is the level of subjective satisfaction at work while achieving organizational goals. Following rapid economic growth the interest in well-being and pursuing happiness in life has increased. As a result the workplace is recognized as a place for self-actualization that enables individual satisfaction and growth rather than simply serving an environment in which achieve economic aims . The quality of work life is not only related to work, but also to how organizations enable individual holistic well-being.

OBJECTIVES OF THE STUDY

- 1.To assess the pre test level of personal and professional preparedness for pandemic management among staff nurses in experimental and control group.
- 2.To prepare and provide the planned Rajyoga Training Programme to staff nurses in experimental group.

- 3 To assess the post test level of personal and professional preparedness for pandemic management among staff nurses in experimental and control group.
4. To compare the pretest and posttest level of personal and professional preparedness for pandemic management among staff nurses in experimental and control group.
5. To find out the association of posttest level of personal and professional preparedness for pandemic management with selected demographic variables.

DESCRIPTION OF TOOL

Self- Structured questionnaire consisted of two sections:

Section I: Demographic variables of study subjects included were age, gender , religion, area of residence, educational status, working area, professional experience, previous attended Rajyoga training programme, previous attended pandemic management programmes if any.

Section II: It consisted of Self-Structured personal and professional preparedness questionnaire 4 Likert scale for pandemic management.

ANALYSIS AND INTERPRETATION:

SECTION-I

Finding related to the socio-demographic of staff nurses in selected hospitals of Punjab.

Table 1: Socio-demographic profile of staff nurses in selected hospitals of Punjab.
N=60

S. No.	Variables	Exp. (n=30)		Ctrl. (n=30)		χ^2 value	df	P value
		F	%	F	%			
1.	Age (years)							
	25-30	12	40.0	21	70.0	13.705	2	.001*
	31-35	7	23.3	9	30.0			
>35	11	36.7						
2.	Gender							
	Female	24	80.0	25	83.3	.111	1	.739 ^{NS}
Male	6	20.0	5	16.7				
3.	Marital Status							
	Un- Married	13	43.3	16	53.3	.601	1	.438 ^{NS}
Married	17	56.7	14	46.7				
4.	Religion							
	Hindu	7	23.3	7	23.3	3.067	2	.252 ^{NS}
	Sikh	18	60.0	22	73.3			
Christian	5	16.7	1	3.3				
5.	Area of residence							
	Rural	10	33.3	17	56.7	3.300	1	.069 ^{NS}
Urban	20	66.7	13	43.3				
6.	Academic qualification							
	GNM	9	30.0	14	46.7	1.763	1	.184 ^{NS}
B.Sc Nursing (Basic or Post basic B.Sc nursing)	21	70.0	16	53.3				
7.	Job Experience (Years)							
	< 5	13	43.3	16	53.3	4.347	3	.320 ^{NS}
5 to 10	13	43.3	14	46.7				

	11 to 15	3	10.0					
	above 15	1	3.3					
8.	Area of working							
	General Ward	11	36.7	12	40.0	3.852	3	.278 ^{NS}
	Critical Care Unit	4	13.3	9	30.0			
	OPD	7	23.3	3	10.0			
	Emergency	8	26.7	6	20.0			
9.	attended any Raj yoga Meditation Training before.							
	Yes	1	3.3			1.017	1	.313 ^{NS}
	No	29	96.7	30	100.0			

SECTION-II

Finding related to assess the pretest level of personal and professional preparedness for pandemic management among staff nurses in experimental and control group.

Table 2: Pretest level of personal and professional preparedness for pandemic management among staff nurses in experimental and control group.

N=60

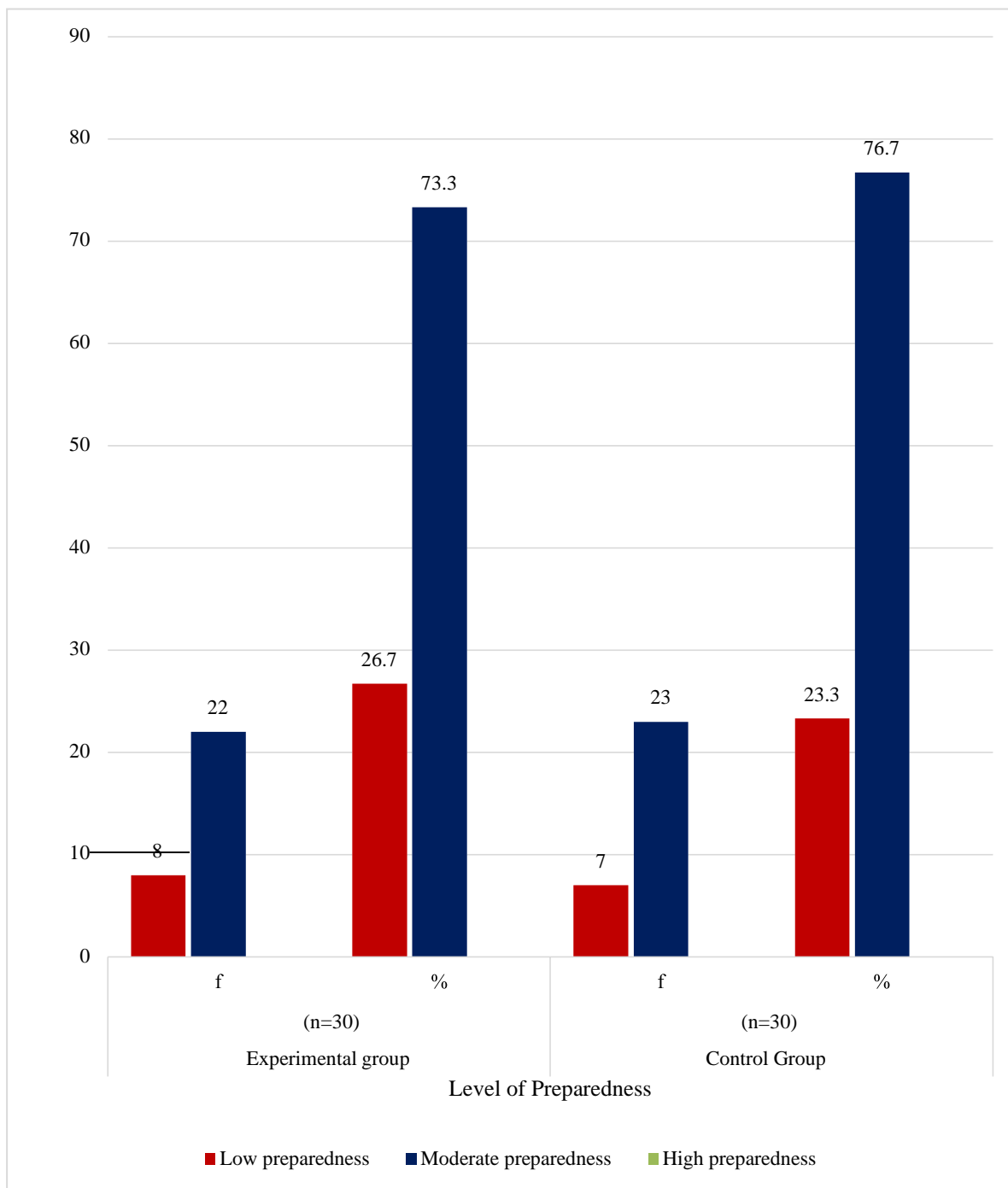
Level of personal and professional preparedness	Score	Experimental group (n=30)		Control Group (n=30)	
		F	%	F	%
Low preparedness	20-40	8	26.7	7	23.3
Moderate preparedness	41-60	22	73.3	23	76.7
High preparedness	61-80	-	-	-	-

Minimum Score=20
Score=80

Maximum

Table 3 and figure 4 depict that posttest level of personal and professional preparedness for pandemic management among staff nurses in experimental and control group. In experimental group; 73.3% were having high preparedness and 26.7% were having moderate preparedness. On the other hand, in control group, 76.7% were having moderate preparedness and 23.3% were having low preparedness about pandemic management.

GRAPH SHOWING PRETEST LEVEL OF PERSONAL AND PROFESSIONAL PREPAREDNESS FOR PANDEMIC MANAGEMENT AMONG STAFF NURSES IN EXPERIMENTAL AND CONTROL GROUP.



SECTION-III

Finding related to assess the posttest level of personal and professional preparedness for pandemic management among staff nurses in experimental and control group.

POSTTEST LEVEL OF PERSONAL AND PROFESSIONAL PREPAREDNESS FOR TABLE PANDEMIC

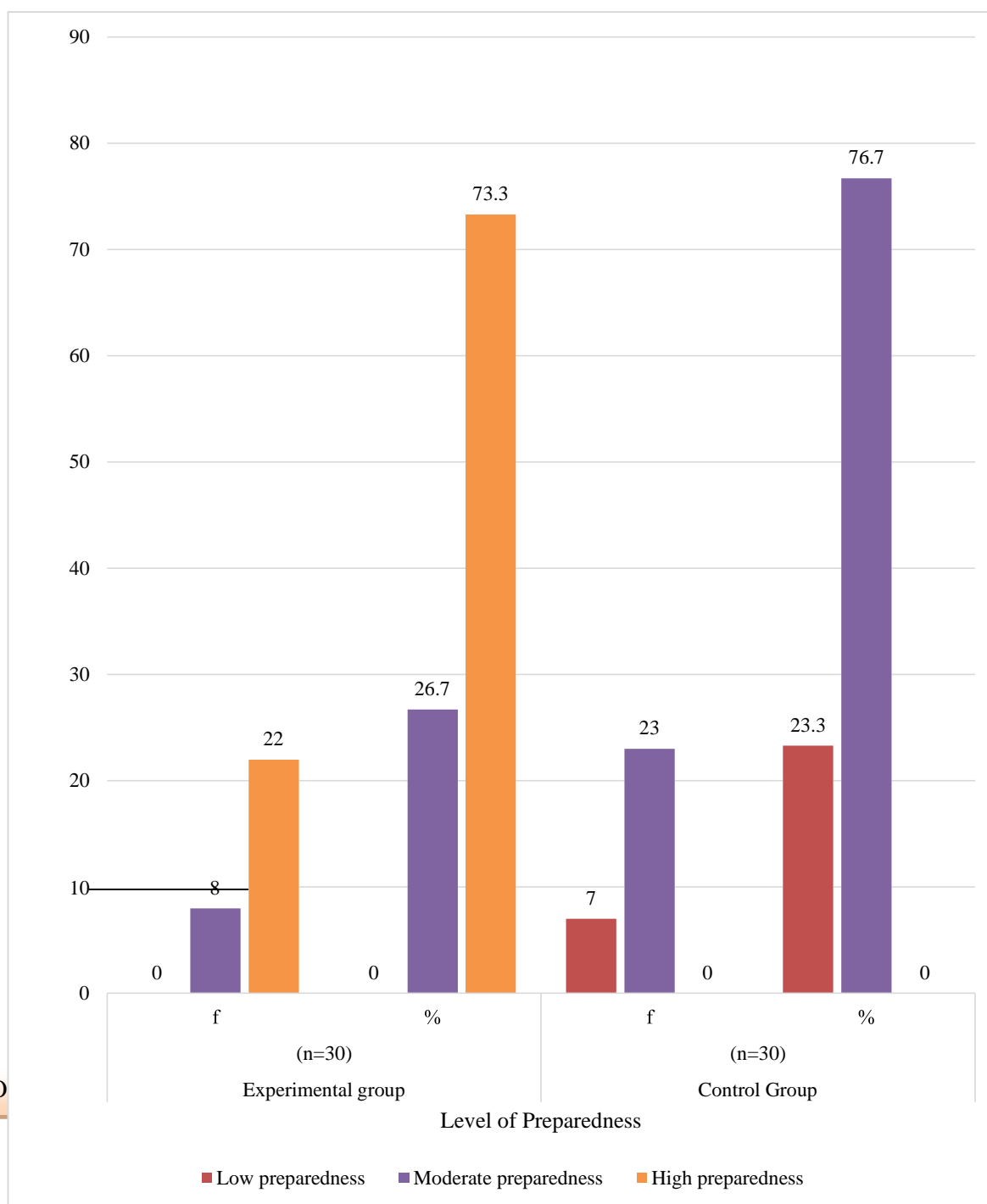
MANAGEMENT AMONG STAFF NURSES IN EXPERIMENTAL AND CONTROL GROUP
N=60

Level of personal and professional preparedness	Score	Experimental group (n=30)		Control Group (n=30)	
		f	%	f	%
Low preparedness	20-40	-	-	7	23.3
Moderate preparedness	41-60	8	26.7	23	76.7
High preparedness	61-80	22	73.3	-	-

Minimum Score=20
Score=80

Maximum

Table 3 and figure 4 depict that posttest level of personal and professional preparedness for pandemic management among staff nurses in experimental and control group. In experimental group; 73.3% were having high preparedness and 26.7% were having moderate preparedness. On the other hand, in control group, 76.7% were having moderate preparedness and 23.3% were having low preparedness about pandemic management.



GRAPH SHOWING POSTTEST LEVEL OF PERSONAL AND PROFESSIONAL PREPAREDNESS FOR PANDEMIC MANAGEMENT AMONG STAFF NURSES IN EXPERIMENTAL AND CONTROL GROUP (Above Page)

SECTION-IV

Finding related to compare the pretest and posttest level of personal and professional preparedness for pandemic management among staff nurses in experimental and control group.

Table 4: Comparison pretest and posttest level of personal and professional preparedness for pandemic management among staff nurses in experimental and control group.

N=60

S. No	Test	Experimental group(n=30)		Control group (n=30)		MD	t value	Df	P value
		Mean	SD	Mean	SD				
1	Pretest	39.93	7.89	40.33	7.78	0.4	0.197	58	0.844
2	Posttest	66.83	9.72	40.7	8.30	26.13	11.197	58	.001

SECTION-V

Finding related to find out the association of level of personal and professional preparedness for pandemic management with selected demographic variables.

Table 5: Association of level of personal and professional preparedness for pandemic management with selected demographic variables in experimental group.

N=30

S. No.	Variables	level of personal and professional preparedness		χ^2 value	df	P value
		Moderate Preparedness	High preparedness			
1.	Age (years)					
	25-30	4	8	2.949	2	.283 ^{NS}
	31-35	3	4			
	>35	1	10			
2.	Gender					
	Female	7	17	.384	1	.536 ^{NS}
	Male	1	5			
3.	Marital Status					
	Un- Married	5	8	1.632	1	.242 ^{NS}
	Married	3	14			
4.	Religion					
	Hindu	2	5	2.240	2	.432 ^{NS}
	Sikh	6	12			
	Christian	0	5			

5.	Area of residence					
	Rural	4	6	1.364	1	.384 ^{NS}
	Urban	4	16			
6.	Academic qualification					
	GNM	4	5	2.078	1	.195 ^{NS}
	B.Sc Nursing (Basic or Post basic B.Sc nursing)	4	17			
7.	Job Experience (Years)					
	< 5	5	8	2.203	3	.577 ^{NS}
	5 to 10	2	11			
	11 to 15	1	2			
	above 15	0	1			
8.	Area of working					
	General Ward	2	9	2.547	3	.506 ^{NS}
	Critical Care Unit	2	2			
	OPD	1	6			
	Emergency	3	5			
9.	Attended any Raj yoga Meditation Training before.					
	Yes	1	0	2.845	1	.267 ^{NS}
	No	7	22			
10.	Attended any special training for pandemic management					
	Yes	4	8	.455	1	.678 ^{NS}
	No	4	14			

NB: NS= Non-significant, Significant 0.05 level

CONCLUSIONS

The majority of the staff nurses in the experimental group had low and moderate personal and professional preparation scores on the pretest; however, once the planned Rajyoga Training Programme was implemented, the staff nurses' scores ranged from moderate to high. In the control group, the majority of the staff nurses scored poorly or moderately on tests of personal and professional preparation (before and posttest).

This study also showed that, in both the control and experimental groups, there is no correlation between the pretest score for personal and professional preparedness and a few specific socio demographic factors.

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