

**EFFECT OF THE EDUCATIONAL INTERVENTION ON THE ATTITUDE AND PRACTICE OF  
FINALIST STUDENT NURSES TOWARDS THE CARE OF THE HOSPITALISED ELDERLY IN  
UGANDA**

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**DECLARATION**

I Margaret A. Wandabwa do hereby declare that this report has been my own initiative except for the literature that was reviewed from various sources and I sincerely acknowledge the authors. This report has never been submitted to any institution for any academic award. I also certify that this paper was prepared by me specifically in partial fulfilment for the degree of Master of Science in nursing at Uganda Christian University, Mukono.

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## **DEDICATION**

This research is dedicated to Almighty God for the life he has given me. My Dear family and those Dear friends and colleagues for their perseverance and support towards the completion of this work and my education throughout my life time.

## **ACKNOWLEDGEMENT**

I sincerely thank God Almighty for his faithfulness, love, care, protection and provisions that have enabled me to complete this course. I am very grateful to all who supported me in one way or the other spiritually, physically, emotionally, socially and financially. Special appreciation to those Dear friends Dr Keren and team who persistently provided counselling, financial and spiritual support during this graceful period. Comparable appreciation to my Dear husband Prof Wandabwa and the children for their continued counselling, support and care during this challenging period. It has not been easy but the God who created me has brought me thus far.

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## **OPERATIONAL DEFINITIONS OF TERMS**

**Katz tool:** Is the tool / instrument used for assessing the patient' activities of daily living for  
Functionality status (level of dependency / independency) as developed by Sidney  
Katz in 1950.

**Activities of daily living (ADLS):** In health care, are the activities performed daily for self-  
health care and are used as a practical measure for the patient's ability or inability to care for  
self. They are in two dimensions, basic ADL'S and instrumental ADL'S.

**Elderly:** In this context are the group of persons 65 years and above.

## **ABSTRACT**

### **Background to the study:**

Ugandan hospitals like most countries worldwide have a challenge with caring for elderly patients yet elderly population is increasing. Most of the patients admitted to hospitals are the elderly, (65 years and above) and majority are admitted with chronic conditions and are at high risk for functional decline (Brauer, Corrette, Boland, Verschuren, & Hoore, 2017). Seventeen percent of those admitted while independently mobile end up either requiring assistance to walk on discharge or with detrimental effects of hospitalization (Inderpal, 2016). Many of these patients are discharged with activities of daily living function worse than the baseline function indicating lack of attendance to activities of daily living (Edemekong, Bomgaars, Sukumaran, & Levy, 2020). Nurses are reported to have negative attitude towards care of the elderly and therefore not correctly providing care to this category of patients.

### **Objectives:**

The study aimed at determining the effect of the educational intervention on the attitude and practice of the finalist student nurses towards care of the hospitalised elderly in Uganda and compared their attitude and practice towards the care of the elderly with the basic information.

### **Methodology**

A quasi experimental design, using pretest and posttest single group method was used to determine the attitude and practice of the finalist student nurses towards care of the elderly in relation to activities of daily living. A sample size of seventy participants was selected through simple random sampling. The intervention involved training the finalist student nurses in the use of the Katz tool for assessing activities of daily living. Quantitative data was collected using self-administered questionnaires before and after the intervention. Data was analyzed in SPSS package Version 26.0 at both descriptive and inferential levels.

## **Results**

All the selected participants participated. They had some information on the care of the elderly 42 (60%) and most of them received it from the clinical area. All had ever nursed elderly patients. The attitude towards care of the elderly in relation to activities of daily living improved from negative to positive for most participants. They were positive that it was vital to correctly assess the patient's ADLS to determine the functional status and identify areas for intervention. They appreciated the Katz tool as a useful tool for the assessment.

After the intervention there was a significant change in the attitude towards the care of the elderly from 2.37 to 5.11 with  $p < 0.001$ . They strongly agreed that nurses must have positive attitude to be able to provide correct care to these patients. They appreciated the Katz tool as a useful tool for assessing the pts ADLS.

## **Conclusions and recommendations**

The study results revealed that care of the elderly is a very important area of nursing care and that it requires positive attitude and skills for quality of care. The participants had some information on the care of the elderly which most of them acquired from the clinical area. They realised the importance of positive attitude towards care of the elderly and that negative attitude affects care provision and patient recovery.

The study recommends that nurse leaders and policymakers address care of the elderly as a specialty and to formalize training of nurses in the care of the elderly. They should advocate training of care providers emphasizing on positive attitude for them to be able to provide quality care to elderly. They should device effective ways of providing quality care like developing tools that can guide care providers to identify areas of care.

## **CHAPTER ONE**

### **1.0 Introduction**

Globally it is reported that forty percent of the patients admitted to hospitals are the elderly, 65 years and above (Ojambo, Wander & Kwagala, 2015). Most of them are admitted with chronic conditions and are at high risk for functional decline (Brauwer, Corrette, Boland, Verschuren, & Hoore, 2017). Seventeen percent of those admitted while independently mobile end up either requiring assistance to walk on discharge or with detrimental effects of hospitalization (Inderpal, 2016). Many of these patients are discharged with activities of daily living function worse than the baseline function indicating lack of attendance to activities of daily living (Edemekong, Bomgaars, Sukumaran, & Levy, 2020). Therefore, it is important to correctly care for these patients during hospitalization, identify the gaps in the care, plan and provide specific individualized care. The study aims at training finalist student nurses in the use of the Katz tool for assessing activities of daily living for them to be able to correctly identify the patient's care needs, plan and provide the correct care. This shall improve on the care provided to the elderly patients and the quality of their health.

### **1.1 Background to the study**

An elderly person by WHO definition is one who is 65 years and above (World population Aging, 2019). This age was also adopted by USA. It is expected that at this age, one is incapable of adequately providing for his or her health and personal care. Statistics on World population Aging (2020) further reported that worldwide, by 2020 the total population of the elderly persons aged 65 years and above was estimated at 727 million.

Eastern and South Eastern Asia were leading with 260 million elderly, followed by Europe and North America with over 200 million. These numbers are expected to double to 1.5

billion by 2050 with rapid increase in northern Africa and from 29 million to 96million elderly. In Sub Saharan Africa the elderly population in 2015 was estimated at 46 million, and is projected to triple between 2015 and 2050. In Uganda, the elderly constituted 2.7 % of the total population. (World population Aging 2020). The proportion of persons joining the elderly people as per the age of 65 years and above is now increasing and this calls for special attention on their needs.

The persons counted in the elderly people need what is understood as elderly care which focuses on their emotional, mental and physical well-being to effectively meet daily living requirements like eating, bathing, dressing, toileting and transferring (i.e. getting out of bed or chair and sitting) (Abdi, *et al.*, 2019). Activities of daily living are the basic tasks of everyday life that are essential for the dignity, physical and emotional wellbeing of the elderly persons to ensure that their daily living requirements are met. The elderly have more problems in performing ADLS than any age groups because of their co morbidities. They are frequently hospitalized. Nurses are often the first to note the patient's functionality decline during hospitalization because they spend 80% of their time with the patients (Edemekong, Bomgaars & Levy, 2017). Assessing activities of daily living is an important area of monitoring the patient's functional health status. It enables the nurse to know the patient's general health, identify any gaps in the care and plan to provide the correct care.

Elderly care focuses on emotional, mental and physical well-being of elderly persons (Abdi, Spann, Borilovic, Luc de Witte & Hawley, 2019). Activities of daily living are the basic tasks of everyday life that are essential for the dignity, physical and emotional wellbeing of the elderly persons to ensure that their daily living requirements are effectively met like eating, bathing, dressing, toileting and transferring (i.e. getting out of bed or chair and sitting). The

elderly have more problems in performing ADLS than any age groups because of their co morbidities. They are frequently hospitalized. Nurses are often the first to note the patient's functionality decline during hospitalization because they spend 80% of their time with the patients (Edemekong, Bomgaars & Levy, 2017). Assessing activities of daily living is an important area of monitoring the patient's functional health status. It enables the nurse to know the patient's general health, identify any gaps in the care and plan to provide the correct care.

Worldwide, care of the elderly is not a well-developed area of nursing in most countries except the United States of America where the nurses assess activities of daily living as part of the geriatric assessment using the Katz tool. They correctly identify gaps in the patient's health, plan, and provide the correct individualized care (Inderpal, 2016).

In Sub-Saharan Africa, elderly care is not well developed, it is perceived as the responsibility of the girls and women. Oyetunde, Ojo, & Ojewale (2015) in their research reported that the nurses were not willing to care for the elderly. The nurses therefore were not able to correctly provide the care the patients needed. They recommended specialized training in elderly care and emphasizing on positive attitude towards elderly care.

In Uganda, health facilities do not provide adequate care to elderly patients. The elderly patients are often either forgotten or ignored. A cross sectional descriptive study carried out by Ssensamba, Mukuru, Nakafeero, Ssenyonga & Kiwanuka (2019) on the readiness in the health facilities in Uganda to provide care to elderly patients revealed that there was generally low readiness and that nurses were mainly providing treatment of conditions and less of the basic care like assessing activities of daily living. Hearsliip (2012) in his study on the elderly patients' outcomes after hospitalization found out that gaps existed in the nursing care provision resulting

to negative elderly patient outcomes like long stay in hospital or patients leaving hospital in a worse state than on admission.

## **1.2 Problem statement**

World Health report on aging & health (2018) emphasizes on improving the health of the elderly in all countries. It is reported that many hospitalized elderly patients were discharged with activities of daily living function (like bathing, toileting, and dressing, mobility, getting out of bed and feeding) in a worse state than the baseline function on admission (Edemekong, Bomgaars, & Levy, 2017, Wilhelmina, Quti, Jaako, Lauri, Maria 2017, Edemekong, Bomgaars, Sukumaran & Levy, 2020). This directly affects the health of the elderly patient. It was also revealed that nurses had negative attitude towards assessing patients' activities of daily living for functionality, therefore were not able to correctly assess patients, identify the gaps / care needs, provide the correct care and improve on the health of their patients. Sometimes they did not even attend to the elderly patients' activities of daily living during hospitalization but only to the treatment of diseases due to the negative attitude towards elderly patients (Ghislaine, 2018).

A study in Uganda revealed that health facilities lacked readiness to provide geriatric care services and this contributed to lack of care to the elderly patients (Ssensamba, Mukuru, Nakafeero, Ssenyonga, & Kiwanuka, 2019). It was further reported that nurses were just giving treatment and not attending to activities of daily living which could have been due to either negative attitude or lack of knowledge on the care of the elderly. Assessing activities of daily living is a mandatory health service to hospitalized patients because hospitalization has effect on the patient's ability to maintain ADLS. (Brauwer, Corrette, Boland, Verschuren, & Hoore, 2017). They emphasized that it's important for the nurses to have positive attitude towards the elderly patients to be able to correctly assess activities of daily living. Positive attitude enables

correct identification of the care needs in order to plan and provide individualized care. Nurses as key care providers play a very important role in helping patients to recover when they correctly assess activities of daily living, identify care needs, develop and provide individualized care (Inderpal, 2016). The finalist student nurses upon qualification are key providers of health care in these facilities. They need positive attitude and skills to be able to correctly assess patients, identify the care needs, plan and provide individualized care. This shall prevent functional decline, improve on the patient's health and the quality of care provided (Brauwer, Corrette, Boland, Verschuren, & Hoore, 2017, Moreira, Silva, Coutinho, Vasconcelos & Marques, 2017).

### **1.3 Purpose of the study:**

The study aimed at improving the care provided to elderly patients and the quality of health care. First it determined the attitude and practice of the finalist student nurses towards care of the elderly concerning activities of daily living. Then the finalist student nurses were trained in the use of the Katz tool for assessing activities of daily living and finally evaluated in assessing patients' activities of daily living using the Katz tool. This was aimed at finding out the effect of the intervention.

#### **1.3.1 Research Question**

- What is the attitude and practice of the finalist student nurses towards the care of hospitalized elderly concerning activities of daily living?

#### **Main objective**

- To determine the effect of the educational intervention on the finalist student nurses attitude and practices towards the care of the hospitalized elderly in Uganda.

### **1.3.2 Specific Objectives**

- To determine the attitude of the finalist student nurses towards care of the hospitalized elderly patients concerning activities of daily living.
- To identify the practices of the finalist student nurses towards care of the hospitalized elderly patients concerning activities of daily living.
- To determine the effect of the educational intervention on the finalist student nurses' attitude and practice towards care of the hospitalized elderly patients concerning activities of daily living with the baseline practice.

### **Significance of the Study to:**

#### **Nursing.**

Hospitalization for the elderly has many debilitating effects on the patient's health and recovery. Positive attitude towards elderly enables proper care of activities of daily living. Nurses can positively improve on the elderly patient's health and aid recovery during hospitalization. Finalist student nurses as future key health care providers play a vital role in aiding the patient's recovery when they correctly assess activities of daily living, identify the patient's care needs, plan and provide the correct care. This improves on the patient's health and the quality of health care. It is therefore important to correctly assess patients' activities of daily living, plan and provide specific individualized care.

#### **Student nurses**

The intervention was to equip the finalist student nurses with correct skills for assessing patients' activities of daily living and improve on the attitude to be able to correctly identify

gaps in the care, plan and provide correct and individualized care. This shall improve on their ability and attitude towards care of elderly.

### **Nurse Managers**

The nurse managers may adopt the use of the Katz tool for assessing activities of daily living as they emphasize on positive attitude during care. This will enable correct identification of gaps in patient care, planning and provision of correct care. The findings can also guide the nurse managers to develop guidelines that will aid to improve on the quality of care provided to elderly patients concerning activities of daily living.

### **Policy Makers**

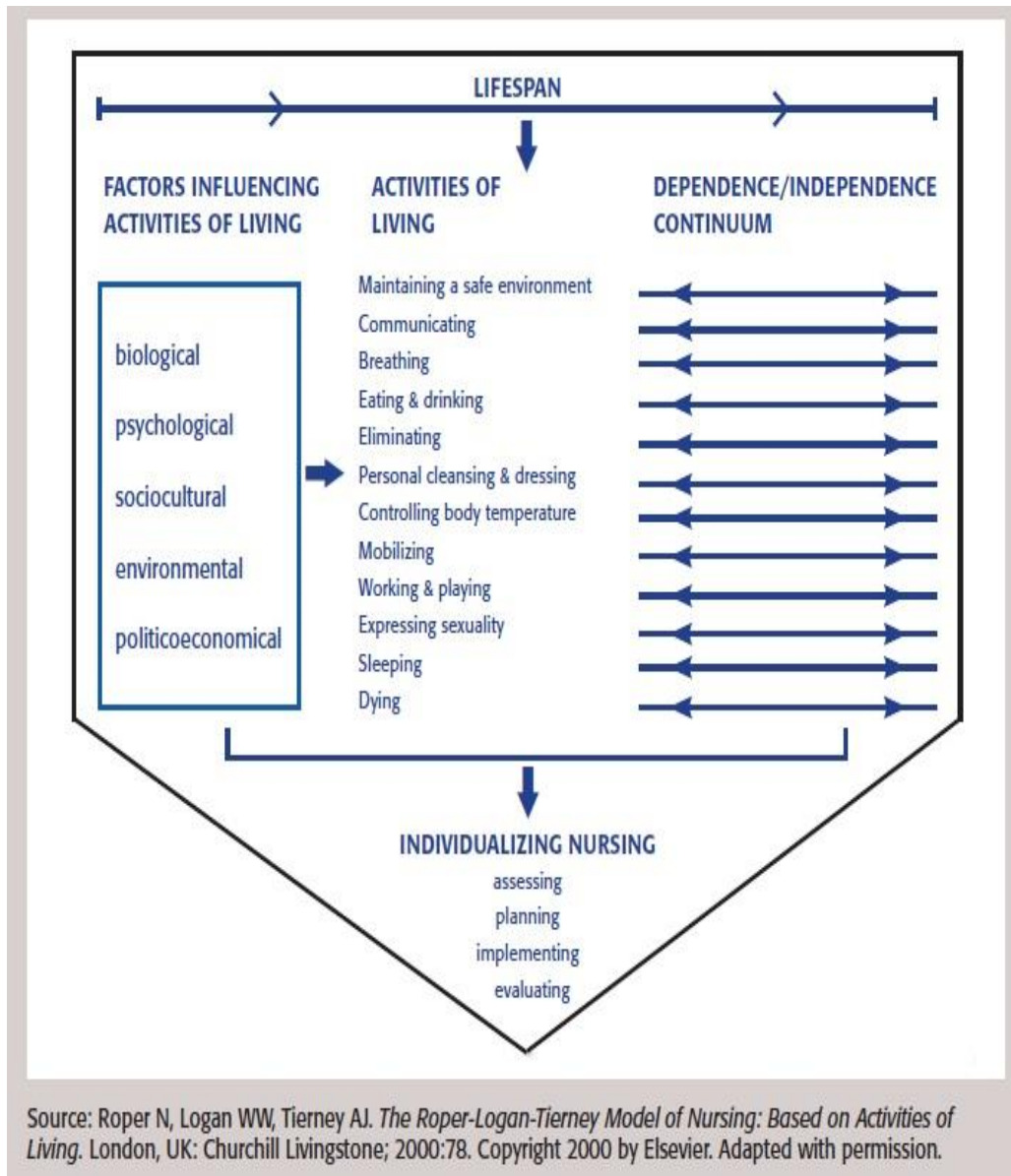
The findings can guide policy makers to awaken them on the existing gaps in nursing education like the care of the elderly. The findings can also guide them during development of policies to develop policies that are geared towards improving on the care and health of the elderly. The study findings shall contribute to further researches in elderly care in Uganda.

### **1.4 Theoretical Framework.**

The researcher adopted the Roper Logan Tierney framework with amendments to guide the study. The framework emphasized on Activities of daily living as vital to the patient's health and recovery and the use of the Katz tool for assessing activities of daily living. This is a practice centered theoretical framework used in clinical settings to facilitate patient assessment and care planning. It guides nurses during assessment of the patients' activities of daily living to know how the patient's life has progressed during hospitalization and enables them to identify the patient's care needs, determine the correct care to provide and develop individualized care plans

for the patients (Williams & Bridgette, 2017). The framework guides the assessment of the basic activities of daily living (bathing, dressing, toileting, transferring, continence, and feeding) and the Instrumental activities of daily living. In this study it was used to assess the six basic activities of daily living.

Figure 1: Roper-Logan Theoretical framework.



### 1.4.1 Description of the Concepts in the Framework

The Roper Logan Tierney framework is a practical framework used in clinical settings for assessing patients' activities of daily living and developing individualized care plans. It is used to assess individual patients in order to identify individual care needs and develop an individualized care plan. It assesses basic and instrumental activities of daily living. For the purpose of this study, it was used to assess the functionality in the six basic activities of daily living (i.e. bathing, dressing, toileting, transferring, continence, and feeding).

The framework is composed of the following concepts: factors influencing activities of daily living (i.e. the biological factors, psychological factors, socio cultural factors and environmental factors), activities of daily living, dependency / independency continuum and the final stage of individualized care (Roper, Logan, and Tierney (2000)). The biological factors, psychological factors, socio cultural factors and the environmental factors as in Roper Logan framework are the factors that can affect the patient's performance of ADLS at any point and time. They can affect performance either positively or negatively (Roper, Logan, and Tierney (2000)).

**Biological factors** are the patient's past and present health history and vulnerabilities like any illnesses that the patient may have. Any illness like a heart condition can directly affect the patient's health status, the ability to perform activities of daily living in that during the assessment of the ADLS the patient may not be able to ably perform, and this can affect scoring of the activity

**Psychological factors:** Address the patient's individual beliefs and cognitive functions like the patient's perception of activities of daily living in relation to his/ her health whether they can worsen or improve on the health. These can affect the patient's ability to perform ADLS

independently, e.g. does the patient have any beliefs that can contribute to failure to perform activities of daily living.

**Socio-cultural factors:** Address how the patient's culture can influence the ability to perform ADLS. These factors can affect the patient's healing and recovery from the illness in that the patient may not be willing to perform ADLS yet by performing ADLS the patient's care needs are identified and addressed and this can improve on the patient's health. Patients come from different cultural backgrounds therefore it's important for the nurses to understand the patients' cultural background before performing ADL assessment to be able to know how to encourage the patient to perform the ADLS.

**Environmental factors:** Address how the patient's environment affects his / her healing and recovery. Is the environment conducive for the patient to freely perform ADLS. These help the finalist students to prepare for carrying out the ADLS, a good environment encourages the patient to perform the ADLS.

**Activities of daily living:** These are the basic activities of daily living that a patient is expected to ably carry out in everyday life without assistance. When the patient performs without assistance it means the patient is independent. In this study we are looking at the six basic activities and these are bathing, toileting, dressing, mobility, getting out of bed, feeding and are used as indicators for the patient's functional status, to identify the care needs and the level of care the patient needs in order to correctly develop individualized care plans. The activities are assessed using the Katz tool for their functionality status and are reflected in the dependency / independency scale.

**Dependency / independency continuum:** This is the scale for rating the patient's level of functionality / performance of activities of daily living. It ranges from completely independent (able to perform ADLS by self) to completely dependent (not able to perform ADLS by self and needs assistance). The scale guides the nurse to determine the patient's ADLS' level of function and what interventions to provide in order to improve on the patient's health status. The continuum scale has scores used for assessing the functional status ranging from 6 to 0 (6 being full function, 4 moderate impairment, 2 or less severe functional impairment and 0 lack of performance) as reflected in the Katz tool.

**Individualizing nursing care:** Means providing specific care according to the identified care needs of the individual patient. This is the final stage in the framework in which each patient is treated as an independent entity according to his or her identified care needs from the ADLS assessment. The individual care plan is developed from the gaps identified during the assessment. The patient receives specific / individualized nursing care that is developed according to the individual's care needs. Care is individualized because each patient is assessed individually, gaps identified, individual care plan developed and the care is provided according to the identified care needs of the patient. The finalist student nurses plan for each / individual patient.

#### **1.4.2 Application to the study**

Roper – Logan Tierney model of nursing for activities of daily living guided the finalist student nurses during clinical assessment of patients. The Katz tool was used for assessing activities of daily living to be able to correctly identify the gaps / care needs, plan and implement the correct care needed by the patient.

### **The factors influencing activities of daily living:**

Are the factors that enabled the finalist student nurses to understand the patient's general health status / illness before the assessment (i.e. the finalist student nurses' had to understand whether the patient has any underlying diseases that could affect the process of performing ADLS and increase the dependency level. These factors guided the finalist student nurses during the assessment.

### **Activities of daily living**

Are the six basic activities of daily living that the patient ought to be able to perform in everyday life namely bathing, toileting, and dressing, mobility, getting out of bed and feeding. The functionality status is the gauge that assesses whether the patient is able to carry out these basic activities freely and alone or not. It assesses the level of tolerance for each patient to perform each activity freely.

The Katz tool is the instrument used to assess the patient's ability to perform the activities of daily living and has markings on the independency / dependency continuum with a scale of six to zero (6 to 0). This scale enables the nurse to gauge the level of the ability of the patient to perform these activities where 6 is fully independent and able to perform the activities by self and 0 is fully dependent needs assistance to perform activities of daily living. The functionality of these activities influences the patient's health and recovery in that the less the dependency level the faster the recovery i.e. the patient is able to carry out these activities by self.

During the assessment, the finalist student nurses identified the patient's care needs, planned and developed individualized care plans and provided the correct care to individual patients. Assessment is carried out on admission and throughout the patient's stay in hospital.

### **Dependency / independency continuum**

Dependency / independency continuum as mentioned in the framework is the scale that is used to determine the level of the ability of the patient to freely perform activities of daily living in order to identify the care needs and plan for the correct individualized care. Dependency in this context means the patient is not able to perform ADLS alone and needs assistance while the independency means the patient can ably perform the activity of daily living e.g. bathing alone and does not need the nurse to assist. The scale ranges from six to zero meaning that the patient who is able to independently perform all the six basic activities scores six points and is rated as independent, does not need assistance to perform ADLS. Those scoring four points need some assistance as identified and those who score two and below need assistance according to the existing gaps in the functionality of the activities of daily living.

### **Individualizing nursing care**

Is the stage in which the nurse develops a plan of care for each patient according to the care needs and provides care accordingly. The results from the independency / dependency continuum are used to guide the development of the individualized care plans in order to provide the individualized care. This aims at improving on individual patient care and the quality of health care provided to the elderly patients.

## **Summary of chapter one**

The chapter described the background to the study, problem statement, objectives of the study, significance of the study and the theoretical framework for the study. The framework guided the finalist student nurses in the care of the elderly concerning activities of daily living.

## **Chapter Two: literature review**

This chapter reviews the literature on the nurses' attitude and practice towards care of the elderly in relation to care of activities of daily living. In this context the elderly are referred to as 65 years and above and the care of the elderly concerning activities of daily living as the main area of concern.

Aging is a global phenomenon and every country is experiencing an increase in the elderly population, which is growing faster than any other population. By 2019 one in every six people was either 65 years old or above and the global population of 65 years and above was at 703 million and is expected to double to 1.5 billion by 2050. In Sub Saharan Africa was 31.9 million, with a projection of 101.9 in 2050 and in Uganda was 1.83 million (World Population Ageing, 2019). This is an indication that nurses need positive attitude and correct skills to be able to provide quality care to this category of patients.

Globally, the developments in technology and urbanization are influencing the health of the elderly in different ways enabling them to seek health care services and frequent hospitalizations (Meola, 2019). Worldwide there is an increase in the elderly population and 40 % of the patients admitted to hospitals are the elderly. They mostly suffer from conditions that either make them frequent hospital and / or stay long in hospital. (Wandera, Kwagala & Ntozi, 2015). With the challenges of hospitalization causing deficits in physical functionality and increasing dependency for the elderly, there is need for nurses to have positive attitude and the correct skills towards care of the elderly to be able to provide quality care to these patients. Finalist student nurses upon qualification are part of the key care providers to these patients so they need positive attitude and right skills in the care of the elderly.

## **2.1 Attitude towards care of the elderly**

Worldwide the elderly suffer from chronic illnesses, which tend to increase their frequency of hospitalizations and cause decline in physical functionality. This prompts for positive attitude towards their care to be able to correctly handle these patients.

A cross sectional study conducted in a health care setting by Brauwer, Corrette, Boland, Verschuren, &Hoore, (2019) to assess care towards elderly people revealed that nurses were not providing adequate care to the elderly. They recommended training nurses in areas of elderly care which can improve on attitude and skills towards assessing elderly patients for activities of daily living and thus improve on the quality of care they provide to these patients. They further emphasized that finalist student nurses, as the future key care providers are to correctly assess patients for activities of daily living, identify the care needs and provide the correct care.

Hain and Haras, (2015) in their research observed that many nurses were not correctly assessing patients' activities of daily living and therefore were not able to provide adequate care to these patients. They recommended that nurses should have positive attitude to be able to provide care to patients.

A related study conducted by Edemekong, Bomgaars, Sukumaran & Levy (2020) on care of activities of daily living for the elderly patients reported that activities of daily living were not correctly attended to because nurses had negative attitude towards the elderly patients. They emphasized on positive attitude towards this category of patients and correct assessment of activities of daily living for functionality as critical to be able to correctly identify the patient's care needs, plan and provide the correct care. They recommended continuing education training

that can improve on assessment of activities of daily living to be able to correctly identify the patient's care needs, plan for and provide correct and individualized care.

In Saudi Arabia, across sectional descriptive study conducted by Elebiary & Elshenewy, Abulazm (2018) to assess the care provided by the nurses to elderly patients revealed that the nurses were not providing adequate care to these patients. They recommended educational interventions that can improve on the care provided to elderly patients and thus improve on their quality of life.

In Sub-Saharan Africa, Abdu - Birresborn, McCleary, Pusts, Yakong & Cranley (2019), carried out a scoping review study in the lower income countries. They examined the attitude of nurses and nurse students towards care of the elderly and found out that they had negative attitude towards their care and this was because they lacked adequate preparation in the care of the elderly. They suggested educational interventions that can improve on attitude in elderly care.

A cross sectional study by Brauwer, Corrette, Boland, Verschuren, &Hoore, (2019) on the nurses' attitude towards elderly care found out that the nurses had negative attitude towards the elderly and therefore were not able to provide adequate care to these patients. The nurses' negative attitude often traumatized and frustrated elderly patients and affected their recovery.

A cross sectional descriptive study conducted by Arani, Aazami, Azami & Borja (2017) to assess the attitude of nurses working in the public hospitals in the City of Iam towards elderly care revealed that more than half of the registered nurses had negative attitude towards the elderly care. In their study, they emphasized that attitude plays a very critical role in patient care and negative attitude can worsen the health of the patient and delay recovery. They concluded

that there was need to promote positive attitude towards elderly care in order to provide quality care.

Similarly, Chumbler, Otani, Desai & Herrmann (2016) conducted a cross sectional study on the hospitalized elderly patients' satisfaction in patient care and examined experiences of the elderly patients on the care they received from the nurses in hospital. The study revealed that elderly patients were dissatisfied with the care they received and this was because the nurses portrayed a negative attitude towards elderly patients. They emphasized on the importance of positive attitude towards elderly patients during care provision.

Similarly in Saudi Arabia Rush, Hickey, Epp, & Janke, (2017) conducted a systematic review study to examine the nurses' attitude towards elderly care. They found out that nurses had negative attitude and this was due to the characteristics and demands of the elderly patients that they cared for. The study concluded that it is important for the nurses to have positive attitude towards their patients because this enhances recovery and improves on the quality of care provided.

In Sub Saharan Africa Nzima & Maharaj (2020) carried out a descriptive cross sectional study to assess the health and care of the elderly in Africa. They found out that elderly patients faced many challenges during care provision and this could have been due to negative attitude towards their care. They emphasized that activities of daily living be used to gauge the patient's level of functioning in order to determine the kind of care the patient requires and provide the correct care needed. The study recommended that one of the ways of improving elderly care was to administer trainings that improve on the health of the patient and the quality of care provided.

An exploratory and qualitative study was conducted in Nigeria by Tanyi, Andre, Mbah & Tong (2018) to explore major problems faced by the elderly in response to their current needs. They reported that the nurses perceived elderly patients as slow confused, hopeless and resistant to change. This created negative attitude towards their care and made patients generally unhappy with the care provided leading to slow recovery. A study by Abrams & Swift, 2012 in Lumianyi, Adre & Tong, 2018) revealed that negative attitude affects the patient's health and recovery. They concluded that nurses need positive attitude towards elderly patients to be able to correctly assess them, identify care needs and provide the correct care.

In Uganda, a cross sectional study conducted by Wandera, Kwagala & Ntozi (2015) on the determinants of access to healthcare by older persons reported that the elderly patients expressed dissatisfaction and inadequacy in the care provided to them. This was attributed to negative attitude as one of the causes. They recommended trainings of care providers in specialized areas like gerontological nursing in order to equip them with positive attitude and skills in elderly care.

## **2.2 Practices towards care of the elderly**

A cross sectional study carried out by Michelle, & Michelle, (2016) on the current utilization of trends of health care services by the elderly revealed a rapid increase in the elderly population and the increasing demand for well-trained nurses in elderly care. The demand was due to the key role nurses play as care providers and their influence on the quality of care they provide. The research emphasized that in order to improve on the care provided; the nurses should have the right skills to correctly assess patients, identify the care needs and provide the correct care

A cross sectional study to assess activities of daily living in hospitalized patients was conducted by Edemekong, Bomgaars & Levy in (2017). They found out that many of the hospitalized elderly patients were discharged with activities of daily living function worse than the baseline function on admission and that during hospitalization activities of daily living were not correctly assessed and the patients were not able to perform or sustain activities of daily living. They were concerned that this could lead to prolonged hospitalizations, slow recovery and poor quality of life. In their research, they found out that the nurses did not carry out proper and correct assessment of activities of daily living yet it's important for them to correctly assess patients in order to provide the correct care. They emphasized that it was important for the nurses to correctly assess patients' activities of daily living to be able to identify their needs and provide the correct care and recommended educational interventions that can improve on the practice of the care providers

Research carried out by Inderpal, (2016) on assessment and management of older persons in the general hospitals revealed that the older patients' care needs were not fully attended to and this lead poor patient recovery and long stay in hospital. She recommended comprehensive assessment of patients' activities of daily living by observing the patient and assessing ADLS for functionality. This enables the nurse to correctly identify gaps in the patients' health, develop correct interventions and provide individualized care.

### **2.3 Summary**

The literature reviewed relates that nurses had negative attitude towards care of the elderly so they hardly provided adequate care to the elderly patients. Negative attitude contributed to poor quality of care. They were not able to adequately assess patients' ADLS identify the care needs and provide the correct care. They were not assessing patients' functionality status. They made

some recommendations towards improving on the care to the elderly patients i.e. educational interventions and trainings that can improve attitude and practice for quality care provision.

## **Chapter three: Methodology**

This chapter presents the research methods that were used to conduct the study on the effect of the educational intervention on the attitude and practice towards the care of the hospitalised elderly in Uganda in relation to the care of activities of daily living. The chapter covers study design, the intervention and its rationale, study area, study population, sampling procedure, sample size, inclusion and exclusion criteria, It also provides details about data collection instruments, data collection procedure, quality control, data analysis procedure, ethical consideration, study limitations alongside dissemination of the results.

### **3.1 Study Design**

The researcher employed Interventional quansi experimental design. The design serves as one of the quantitative strategies used to estimate the effect of an intervention on a target population without a random assignment (Polit & Beck, 2019). The design was used to determine the effect of the educational intervention on the finalist student nurses' attitude and practices towards the use of the Katz tool for assessing activities of daily living. The pretest and post-test approach was adopted.

In this study, the researcher enrolled seventy (70) finalist student nurses to the study and examined the effect of the educational intervention on their attitude and practices towards care of the elderly concerning assessing activities of daily living. The pretest created a baseline to the study by ascertaining the finalist student nurses' basic information on elderly care, attitude, and practices before the intervention while the post-test established if there was any change in their attitude and practices towards the care of the elderly after the intervention.

### **3.2 Study Area**

The area of study was a selected health training institution specifically Mulago School of nursing and midwifery. This school was preferred because it trains nurses at diploma level both directly for three years and for one and half years for completion. Both pre and post interventions were conducted in the same health training institution.

### **3.3 Study Population**

The target population constituted of the finalist student nurses in the health training institutions. The study population were the finalist student nurses in Mulago School of Nursing. The finalist student nurses were preferred because of their seniority and preparation during the training besides they are expected to be practically skilled in nursing care with positive attitude towards patient care and are expected to have nursed elderly patients during their time of clinical practice. Therefore, this population is well prepared to practice upon completion of the training intervention as it aligns well with the completion of their course.

### **3.4 Sampling technique**

Sampling is the process of selecting a portion of the population to represent the entire population (Polit & Beck, 2019). The researcher adopted a simple random sampling approach through a lottery method. Identically cut and folded pieces of paper were numbered 1 to 85, placed in a box and shuffled to complete mixing. The included final year nursing students were then requested to pick one at a time. Only students whose papers had numbers 1 to 70 were included and consented to the study. This sampling technique was chosen because it allows equal opportunity of participation permitting a representative sample of the population

### **3.5 Sample size estimation**

the sample size represents the total number of subjects that were enrolled to the study. this study determined the sample size for the study using krejcie & morgan (1970) sampling table. the method eliminates bias in the selection process. the population for the study was determined from the total population available for the study. the sample size was determined from the table according to the available population and referring to krejcie & morgan (1970) sampling table. the sample size according to this table was 70 finalist student nurses out of the 85

### **3.6 The intervention and rationale**

The intervention involved training the finalist student nurses in the use of the Katz tool for assessing activities of daily living for functionality status. The assessment provided useful information for nursing care needs that enabled correct planning for individualized patient care to provide the correct care and prevent functional decline. It was important for the student nurses to have positive attitude and correct skills in assessing patients for activities of daily living to be able to correctly identify the care needs, plan and provide safe and individualized care (Krešević, 2017).

The Katz tool is the instrument used for assessing the patient's functional status for independence/dependence levels to be able to correctly identify any gaps in performing activities of daily living in order to plan care accordingly. The Katz tool enables quick and correct patient assessment. It uses a checklist with scores indicated from zero to six. The zero score indicates total lack of function, two or less indicates severe functional impairment, four indicates moderate impairment and six means full function of the activities of daily living.

According to Wallace and Shelkey (2007), the scale uses zero, two, four and six as the indicators for performance functional assessment tool. It assesses the six basic activities of daily living (i.e. toileting, dressing, transferring / getting out of bed, feeding, bathing and continence) each activity scoring one point and the six activities totaling to six points. When the patient is able to perform all the six activities independently by self and does not need assistance, it indicates good functional status and the patient scores all the six points. When the patient is not able to perform any of the six activities by self and needs assistance the nurse will use the scale to identify areas where the patient needs assistance and the level of performance is scored accordingly. Assessing activities of daily living is key to patient care as it guides the nurse during planning of care to identify individual patient's care needs, develop individualized care plan and provide the correct care (Michelle & Michelle 2016).

The nurse refers to the Katz tool as she / he closely observes the patient perform the activity as she assesses the level of performance and identifies the care needs in order to plan for the correct intervention. This requires a well-prepared nurse with positive attitude to be able to identify the gaps.

The researcher trained two research assistants who would assist in the training process. Administered a pretest to the finalist student nurses to determine their attitude and practice towards care of the elderly patients concerning assessing activities of daily living. The researcher drew the training program which included orientating the participants on the use of the Katz tool for assessing activities of daily living, lectures, group discussions, and practice.

The finalist student nurses were first orientated on the components in the Katz tool, thereafter trained on its use to assess activities of daily living. After the training, they practiced the use of the Katz tool for assessing activities of daily living in pairs then continued to practice

in the clinical area for two weeks. Thereafter they returned for evaluation in form of a post-test using the same tool that was used in the pretest, but labeled posttest.

### **Inclusion Criteria**

The inclusion criteria were all the diploma student nurses in their final year (both direct entrants and extensors) who were available during the time of the study, were willing to participate and consent to the study.

### **Exclusion Criteria**

Exclusion criteria included all the finalist student nurses who could not participate due to one reason or another. All those who were sick to participate were excluded or were busy on duty and so not able to attend the training were excluded from participating in the study. Those who had consented to the study but for some reason withdrew or had challenges that did not allow them to continue with the study or were willing to participate in the study but were not present during the time of the intervention.

### **3.7 Data collection instruments**

Data collection instrument was a self-administered questionnaire developed by the researcher with guidance of information drawn from the Katz tool and the Roper Logan and Tierney theoretical framework (Roper, Logan & Tierney, 2000). The questionnaire included the demographic data of the participants, data describing the use of the Katz tool for assessing activities of daily living, baseline information, attitude and practice of student nurses towards care of the elderly. The demographic data collected the participant's personal information on age, gender, religion, level of formal education and the Katz tool generated information on the attitude and practice towards care of the elderly concerning assessing activities of daily living.

The questions were guided by the research objectives and the information on the Katz tool and its use.

### **3.8 Data collection procedure**

The researcher sought clearance and approval of the proposal from Uganda Christian University Ethics Review Board. After clearance, the researcher presented a letter to area of study seeking permission to conduct the study in the area. Participants' rights were highly respected and information kept confidential. Data was collected using pre tested self-administered questionnaires at a pretest and posttest measurement levels.

#### **Pre-Intervention phase**

In this phase, the researcher briefed the finalist student nurses about the study, the participants' expectations towards the study and allowed them to make informed choices. 70 participants were randomly selected, given to consent to the study thereafter had a pretest by filling in the self-administered questionnaires. This enabled the researcher to obtain the participants' baseline information on care of the elderly, attitude and practice towards care of the elderly concerning activities of daily living.

#### **Intervention phase**

This phase involved implementing educational intervention (i.e. training the finalist student nurses in the use of the Katz tool for assessing activities of daily living). The researcher drew the training program and used interactive lectures, group discussions and practice to deliver the training. Two research assistants were trained prior to the training session. The Katz tool was used for assessing activities of daily living for functionality status (namely bathing, toileting, and dressing, mobility, getting out of bed and feeding). During the intervention they practiced in

pairs, thereafter continued to practice in the clinical area for two weeks. They used the Katz tool for assessing elderly patients in the clinical area. Thereafter they returned to the training institution for evaluation in form of a posttest using the same questionnaire written posttest. This was to assess whether they were able to assess patients using the Katz tool.

### **Post Intervention phase**

In this phase, the participants were given the same questionnaires to fill but labelled posttest. This was to assess the effect of the intervention. They used the same secret numbers. Labeling enabled easy coding of the pretest and the posttest results and correct confirmation of the total number of respondents. All the respondents returned for the posttest.

### **3.9 Data quality control**

The questionnaire was pre tested before use on a similar population (finalist student nurses) in a similar setting (a health training institution offering diploma in nursing programs and with finalist student nurses). Ten participants were selected for the pilot study and the questionnaire was administered. Pretesting the questionnaire ensured validity and reliability, and the pretest and posttest measured the dependent variable before and after the intervention (Polit & Beck, 2019). The findings from the pre-tested questionnaires were analyzed to ascertain the reliability of the instrument. Depending on the findings from the pretested questionnaire, the tool was revisited and reviewed to suit the study and ensure that it met the objectives of the study. The pretested questionnaire was then administered to the participants.

### **3.10 Data analysis**

The collected raw data was validated to make sure it was collected as per the preset standards. The data was entered in SPSS version 26.0. Analysis of the data involved processing of data in frequency tables and percentages in tabular form, measures of central tendencies. The

mean and standard deviation and the results were compared to establish the extent of the intervention using the SPSS package. The results from the data on the demographics, attitude and practices were presented in frequency tables. The baseline and end line extent of attitude and practice were presented in frequency tables through means and standard deviations to address objectives one and two. The paired samples t tests were processed to determine the effect of the educational intervention on attitude and practices and the mean differences were found to be normally distributed.

### **3.11 Ethical Consideration**

After clearance and approval of the proposal by the Uganda Christian University Ethics Review Board, the researcher adhered to ethical principles of conducting research. The researcher observed the participants' rights throughout the study, explained details of the study before recruitment, participants' expectations, conditions for the study, their willingness to participate or withdraw from the study and freedom to information was observed. Obtained Informed consent prior to commencement of the study. Questionnaires were given to individuals and each participant filled independently and no names used but numbers. Sampling bias was eliminated through simple random sampling.

### **Dissemination of the results**

The study is mainly for academic purposes. The researcher will present the results of the study to Uganda Christian University, department of health; share the study findings and recommendations with the administration in the area of study.

## Chapter Four: Presentation and Interpretation of the findings

### 4.1 Introduction

This chapter presents findings on the effect of the educational intervention towards improving the Care of the Hospitalized elderly. The findings are presented under the following headings: demographic characteristics of the participants, basic information, their attitude and practices towards care of the elderly before and after the intervention. The results were presented in frequency tables.

### 4.2 Demographic characteristics of the participants

The demographic characteristics of the finalist student nurses were processed and presented in frequency and percentage table. These are the participants' age in years, gender, religion, level of education and current training.

**Table 1. Demographic characteristics** n = 70

<b>Variables</b>	<b>F</b>	<b>%</b>
Age in years		
20-24	21	30
25-29	35	50
30-34	9	13
35 and above	5	7
Gender		
Female	59	84
Male	11	16
Religion		
Catholic	23	33
Anglican	22	31
Moslem	7	10
SDA	2	3
Pentecostal	14	20
Baptist	2	3

Level of formal education		
O level	31	44
A level	39	56
Current training		
Diploma nursing direct	15	21
Diploma nursing extension	55	79

Table 1 shows that the majority of students who participated in the study were twenty-five years and above of which 35 (50 %) were 25 to 29 years. Most participants 59 (84.3%) were females. The dominant religions were Catholics 23 (32.9%) and Anglican 22 (31.4%). They all had formal education, A level was 39 (56%) and O level were 31 (44%).

#### 4.3 Baseline information towards care of the elderly.

This section provides baseline information on the finalist student nurses towards care of the elderly. It inquires if the participants had ever heard about care of the elderly and if so from where and if they have ever nursed elderly patients.

**Table 2: Baseline information towards care of the elderly**

Variables	F	%
Have you ever heard about care of the elderly?		
Yes	42	60
No	28	40
If yes to no. 6 above, where did you hear from?		
During introductory teaching.	2	4.8
During CME	10	23.8
During previous training	1	2.4
During clinical placement	29	69
Did you ever nurse elderly patients?		
Yes	67	95.7
No	3	4.3

Table 2 shows the baseline information of the finalist nursing students concerning care of elderly. The study established whether the finalist student nurses had any information on care of

elderly in relation to the study. The majority of them had ever heard some information 42 (60%) on care of the elderly and of those who had, most of them 29 (69%) heard during clinical placement and the majority had ever nursed elderly patients 67 (95.7%).

#### 4.4 Attitude towards care of the elderly

The objective aimed at establishing the finalist student nurses' attitude towards care of the elderly in relation to assessing activities of daily living before and after the intervention using the Likert's scale with numerical value of 1 to 4 as described in the tables SD – Strongly disagree -1, D- Disagree-2, A- Agree-3, SA Strongly Agree- 4, & M- Mean, SD- Standard Deviation.

**Table 3: Attitude towards care of the elderly (pretest).**

Variables	Frequencies				M	SD
	SD	D	A	SA		
1. Assessing the elderly patients' activities of daily living provides a focus for quality nursing care	0	0	37	33	3.43	0.51
2. Correct use of the Katz tool improves assessment of activities of daily living	0	9	45	16	2.71	0.76
3. Physical dysfunction is a common complication of the hospitalized elderly patient.	1	15	33	21	2.71	0.9
4. Critical identification of gaps in the patient's functional status enables the nurse to provide appropriate individualized care.	0	6	30	34	3.11	0,68
5. The Katz tool is a useful instrument for assessing the basic activities of daily living	0	6	44	20	2.71	0.61
6. Activities of daily living are good indicators of the patient's functional status.	0	3	35	32	3.13	0.64
7. Activities of daily living are rated in a scale that ranges from completely independent to completely dependent	1	7	43	19	2.87	0.92
8. The Best mode of intervention in activities of daily living care is by developing an individualized plan of care for each patient.	0	15	37	18	3.3	0.66
9. The Elderly patients need specialized care	0	10	27	33	3.15	0.57
10. Nurses' attitude directly affects the quality of care provided to hospitalized patients.	0	3	32	35	3.16	0.75
11. While aging is a universal human experience it is not uniformly viewed worldwide	9	15	36	10	1.97	0.93
12. Nurses must ensure that the needs of the elderly are always met	6	5	38	21	2.2	0.95
13. Nurses must always have positive attitude towards the elderly to be able to effectively care for them.	1	2	30	37	3.21	0.79

**Table 4: Attitude (posttest)**

Variables	Frequencies					M	SD
	SD	D	A	SA			
Attitudes							
1. Assessing the elderly patients' activities of daily living provides a focus for quality nursing care	0	0	28	42	3.67	0.49	
2. Correct use of the Katz tool improves assessment of activities of daily living	0	3	55	12	2.92	0.65	
3. Physical dysfunction is a common complication of the hospitalized elderly patient.	0	10	29	31	3.42	0.51	
4. Critical identification of gaps in the patient's functional status enables the nurse to provide appropriate individualized care.	0	1	25	44	3.5	0.67	
5. The Katz tool is a useful instrument for assessing the basic activities of daily living	0	6	47	17	3.08	0.9	
6. Activities of daily living are good indicators of the patient's functional status.	0	5	29	36	3.33	0.78	
7. Activities of daily living are rated in a scale that ranges from completely independent to completely dependent	4	8	40	18	2.33	1.15	
8. The Best mode of intervention in activities of daily living care is by developing an individualized plan of care for each patient.	1	0	30	39	3.58	0.9	
9. The Elderly patients need specialized care	0	2	31	37	3.42	0.79	
10. Nurses' attitude directly affects the quality of care provided to hospitalized patients.	0	0	21	49	3.75	0.42	
11. While aging is a universal human experience it is not uniformly viewed worldwide	0	0	41	18	3.25	0.62	
12. Nurses must ensure that the needs of the elderly are always met	0	2	46	24	3.25	0.62	
13. Nurses must always have positive attitude towards the elderly to be able to effectively care for them	0	0	18	52	3.42	0.51	

Average for attitude = Pretest: MEAN = 2.90; SD =0.74

Posttest: MEAN =3.30; SD = 0.6

Table 3 & 4 established the attitude of the finalist student nurses towards care of the elderly The findings revealed that the intervention improved on the finalist student nurses' attitude towards care of the elderly. Most of them were positive about care of the elderly.

**Table 5: Practices (pretest)**

Variables	Values					
	SD	D	A	SA	M	SD
Practices						
14.Direct patient observation and use of a checklist provide strong evidence to the care to be provided	1	6	30	33	3.35	0.68
15.During the assessment of the basic activities of daily living the nurse must focus on their functional status	3	8	39	20	3.1	0.87
16.Routine assessment of activities of daily living enables identification of areas for intervention in the care.	1	4	38	27	3.32	0.68
17.During assessment, the score of 0 to 2 is referred to as dependent and needs assistance.	2	9	44	15	3.06	0.67
18.The Katz tool is a useful instrument for assessing basic activities of daily living	0	5	39	23	3.28	0.59
19.Activities of daily living are assessed on admission to provide baseline information and throughout hospitalization to continually, observe the patient's health progress	5	3	39	23	3.16	0.91

**Table 6: Practices (Posttest)**

Variables	Frequency					
	SD	D	A	SA	M	SD
Practices						
14.Direct patient observation and use of a checklist provide strong evidence to the care to be provided	0	0	18	52	3.73	0.45
15.During the assessment of the basic activities of daily living the nurse must focus on their functional status	0	3	21	46	3.63	0.57
16.Routine assessment of activities of daily living enables identification of areas for intervention in the care.	0	0	19	51	3.71	0.46
17.During assessment, the score of 0 to 2 is referred to as dependent and needs more assistance.	0	6	51	13	3.12	0.6
18.The Katz tool is a useful instrument for assessing basic activities of daily living	0	0	19	51	3.71	0.46
19.Activities of daily living are assessed on admission to provide baseline information and throughout hospitalization to continually, observe the patient's health progress	0	0	18	52	3.73	0.45

**Averages for Practices Pretest MEAN = 3.21; SD =0.73; Post test MEAN = 3.60; SD =**

Tables 5 & 6 reflect the practices of the finalist student nurses before and after the intervention.

It shows that Majority of the respondents agreed that direct patient observation and use of a checklist provide strong evidence to the care of the elderly with a S/D of 0.45. Concerning assessment of activities of daily living the finalist student nurses agreed that the Katz tool was a useful instrument for assessing basic activities of daily living SD of 0.46. Most of the finalist student nurses agreed that activities of daily living are to be assessed on admission to provide baseline information and throughout hospitalization to continually observe the changes in the patient’s condition with a SD of 0.45. This directly indicates that the intervention improved on the finalist student nurses’ practice.

**Table 7 Comparison of the Attitude pre and post-tests**

Variables	Pretest		Post-test	
	Mean	SD	Mean	SD
1. Assessing the elderly patients’ activities of daily living provides a focus for quality nursing care	3.43	0.51	3.67	0.49
2. Correct use of the Katz tool improves assessment of activities of daily living	2.71	0.76	2.92	0.65
3. Physical dysfunction is a common complication of the hospitalized elderly patient	2.71	0.9	3.42	0.51
4. Critical identification of gaps in the patient’s functional status enables the nurse to provide appropriate individualized care	3.11	0.68	3.5	0.67
5. The Katz tool is a useful instrument for assessing the basic activities of daily living	2.71	0.61	3.08	0,9
6. Activities of daily living are good indicators of the patient’s functional status	3.13	0.64	3,33	0.78
7. Activities of daily living are rated in a scale that ranges from completely independent to completely dependent	2.87	0.92	2.33	1,15
8. The Best mode of intervention in activities of daily living care is by developing an individualized plan of care for each patient	3.3	0.66	3.58	0.9

9.The Elderly patients need specialized care	3.15	0.53	3.42	0.79
10.Nurses' attitude directly affects the quality of care provided to hospitalized patients.	3.16	0.75	3.75	0.45
11.While aging is a universal human experience it is not uniformly viewed worldwide	1.97	0.93	3.25	0.62
12.Nurses must ensure that the needs of the elderly are always met	2.2	0.95	3.25	0.62
13.Nurses must always have positive attitude towards the elderly to be able to effectively care for them	3.21	0.79	3.42	0.51
Average	2.896923	0.740769	3.301538	0.695385

The table above shows that after the intervention most of the finalist student nurses developed positive attitude towards care of the elderly. they strongly agreed that the Katz tool is very useful for assessing ADLS with average mean of 3.08 and SD of 0.9.

**Table 8 Comparison of the Practices pre and post tests**

Practices	Pretest		Post-test	
	Mean	SD	Mean	SD
14.Direct patient observation and use of a checklist provide strong evidence to the care to be provided	3.35	0.68	3.73	0.45
15.During the assessment of the basic activities of daily living the nurse must focus on their functional status	3.1	0.87	3.63	0.57
16.Routine assessment of activities of daily living enables identification of areas for intervention in the care.	3.32	0.68	3.71	0.46
17.During assessment, the score of 0 to 2 is referred to dependent and needs more assistance	3.06	0.67	3.12	0.6
18.The Katz tool is a useful instrument for assessing basic activities of daily living.	3.28	0.59	3.71	0.46
19.Activities of daily living are assessed on admission to provide baseline information and throughout hospitalization to continually, observe the patient's health progress	3.16	0.91	3.73	0.45
Average	3.211667	0.733333	3.6	0.49833

Table above shows that the finalist students gained some skills on the care of the elderly. The overall practice increased from 3.21 to 3.6 with a SD of 0.49. They appreciated the use of the Katz tool. The mean increased from 3.16 to 3.73 with a SD of 0.45.

**Table 9: Summary of the paired t-test for mean and P values on the attitude towards the care of the elderly.**

Variable	Mean Difference( pretest &posttest)	t-statistic	p-value
1.Assessing the elderly patients' activities of daily living provides a focus for quality nursing care	0.24	2.45	0.022
2. Correct use of the Katz tool improves assessment of activities of daily living	0.21	1.62	0.119
3. Physical dysfunction is a common complication of the hospitalized elderly patient.	0.71	5.70	0.000
4.Critical identification of gaps in the patient's functional status enables the nurse to provide appropriate individualized care.	0.39	3.58	0.003
5. The Katz tool is a useful instrument for assessing the basic activities of daily living	0.37	2.51	0.018
6. Activities of daily living are good indicators of the patient's functional status.	0.20	1.59	0.122
7.Activities of daily living are rated in a scale that ranges from completely independent to completely dependent.	-0.54	-3.02	0.006
8.The best mode of intervention in activities of daily living care is by developing an individualized plan of care for each patient from completely independent to completely dependent	0.28	2.16	0.043
9. The Elderly patients need specialized care	0.27	2.54	0.016
10. Nurses' attitude directly affects the quality of care provided to hospitalized patients.	0.59	5.89	0.000
11.While aging is a universal human experience it is not uniformly viewed worldwide.	1.28	14.14	0.000
12. Nurses must ensure that the needs of the elderly are always met	1.05	11.16	0.000
13. Nurses must always have positive attitude towards the elderly to be able to effectively care for them	0.21	1.66	0.112

**The table above shows that the intervention was significant.**

**Table 11: Paired t-test for mean comparisons and P value on the Practices towards the care of the elderly.**

Variable	Mean Difference (Posttest - Pretest)	t-statistic	P-value
14. Direct patient observation and use of a checklist provide strong evidence to the care to be provided	0.38	3.36	0.003
15. During the assessment of the basic activities of daily living the nurse must focus on their functional status	0.53	3.7	0.002
16. Routine assessment of activities of daily living enables identification of areas for intervention in the care.	0.39	3.41	0.004
17. During assessment, the score of 0 to 2 is referred to dependent and needs more assistance	0.06	0.54	0.593
18. The Katz tool is a useful instrument for assessing basic activities of daily living.	0.43	4.68	0
19. Activities of daily living are assessed on admission to provide baseline information and throughout hospitalization to continually, observe the patient's health progress	0.57	3.98	0.001

Table above shows a summary of the effect of the intervention on the practices of the finalist student nurses towards the care of the elderly. The intervention was successful. The nurse must focus on the functional status (mean difference of 0.53 and P value of 0.002). They appreciated routine patient assessment (mean difference of 0.39 and P value of 0.04) and standard deviation. The S/D reduced after the intervention in most of the areas indicating success. Positive attitude was realized in most interventions with a gain in the skills. Most of the participants agreed that assessing elderly patients for activities of daily living provides a focus for quality nursing care. The mean increased from 3.47 to 3.60 with the standard deviation reducing from 0.50 to 0.49 earning a P value of 0.129 and t value of -1.527. The participants were positive that physical

dysfunction was a common complication of the hospitalized elderly patient increased from a mean value of 3.06 to 3.30 and a t value of -1.956. Most of them agreed that the best mode of intervention in activities of daily living care is by developing an individualized plan of care with the mean increasing from 3.04 to 3.53 and a t value of - 4.498.

The quality of a hospitalized patient's care with the majority of them (35 to 51) strongly agreeing, the mean value increasing from 3.46 to 3.71 and a t value of -2.838.

The participants were positive that nurses must ensure that they always meet the needs of the elderly with the mean increase from 3.06 to 3.51 and a t value of -3.764. They also agreed that nurses must always have positive attitude towards the elderly to be able to effectively care for them. This was shown by the majority increase from 37 to 57, the mean increasing from 3.47 to 3.81 and the standard deviation reducing from 0.63 to 0.39, setting a t value of -3.864.

#### **4.7 Summary**

The findings of the study revealed that the participants had some information on care of the elderly and they had ever nursed elderly patients. Most of them received the information during clinical placement. The intervention improved on the participants' attitude and practice towards care of the elderly. They appreciated the importance of positive attitude during care, the use of the Katz tool for assessing ADLS, critical identification of the patient's care needs and the need for individualized care plans.

## **Chapter Five: Discussion**

This chapter discusses the major findings, draws conclusions and recommendations from the study on the effect of the educational intervention on the attitude and practice of the finalist student nurses towards care of the hospitalised elderly in Uganda. The study was carried out in Mulago School of nursing and midwifery among 70 finalist student nurses. The discussion is under the following subthemes; demographic characteristics, basic information on the care of the elderly and attitude and practice towards care of the elderly. The attitude will be discussed in relation to whether it directly affects the care provided to the elderly and that nurses must ensure that the needs of the elderly patients are always met. The practice whether routine assessment of ADLS enables identification of areas for intervention in the care, patient observation and use of the Katz tool provides strong evidence to the care to be provided under the following sub themes.

### **5.1 Demographic Characteristics**

Majority of the participants in the study were 25years and above 49 (70%) and all had formal education of which O level were 31 (44%) and A level were 39 (56%). These are the right entry requirements to this nursing program. The participants were undertaking diploma nursing program, direct entrants were 15 (22%), and extensors were 55 (79%). This implied that they qualified to participate in the study.

### **5.2 Baseline Information on the care of the elderly**

The study revealed that almost all the participants 67 (95.7%) had some information on the care of the elderly. Those who had some information acquired it from either continuous medical education 10 (23.8%) or during clinical placement 42 (60%). Care of the elderly needs

knowledge. Brauwer, Corrette, Boland, Verschuren, &Hoore, (2019) in their research emphasized on interventions that improve on the care of the elderly.

The study results also revealed that the participants were positive that assessing elderly patients needed positive attitude to be able to correctly identify the care needs and provide the correct care. This is in line with a study carried out by Abdu - Birresborn, McCleary, Pusts, Yakong & Cranley (2019) on the nurses' attitude towards care of the elderly. The study revealed that nurses had were not able to care for the elderly because they lacked adequate preparation. Therefore it's important to adequately prepare the finalist student nurses for them to be able to provide quality care to these patients.

### **5.3 Attitude towards care of the elderly**

This sub theme provides the participants' attitude towards care of the elderly. Most participants 67 (95.7%) agreed that nurses' attitude directly affects the quality of care provided to hospitalized patients with a standard deviation of 0.58 and that negative attitude affects patient care and recovery. These findings concur with a study by Chumbler, Otani, Desai & Herrmann (2016) who emphasized on the importance of positive attitude towards elderly patients during care provision. They reported that the elderly patients were dissatisfied with the care they received because the nurses portrayed a negative attitude towards them. This is in line with a study by Tanyi, Andre, Mbah & Tong (2018) who reported that nurses had negative attitude towards the care for the elderly because they perceived the elderly patients as slow confused, hopeless and resistant to change.

Most of the participants 33 (47.1%) S/D of 0.72 agreed that the elderly needed specialized care and that nurses must ensure that the needs of the elderly are always met 35 (50%) S/D 0.58. This concurs with a study by Nzima & Maharaj (2020) who emphasized on the

importance of positive attitude and correctly identifying the patient's care needs. They found out that elderly patients faced many challenges during care provision because nurses had negative attitude towards their care and did not always meet the patient's care needs. They emphasized that activities of daily living should be measured for functionality to gauge the patient's level of functioning in order to identify the care needs and provide the correct care needed.

#### **5.4 Practices towards care of the elderly**

Regarding practice towards care of the elderly, majority of the participants 67 (95.9%) had ever nursed elderly patients. Most of them agreed that routine assessment of ADLS enables identification of gaps in the patient's functional status enables the nurse to provide appropriate individualized care as agreed by 44 (62.9%). This is in line with a study by Edemekong, Bomgaars & Levy (2017) who emphasized on correct assessment of ADLS in hospitalized patients for proper identification of gaps and intervention in the care. Similarly, Inderpal, (2016) emphasized on a comprehensive assessment of patients for activities of daily living as a measure to identify gaps and provide correct care and improve on the patients' health. This includes observing the patient and assessing ADLS for functionality.

#### **5.5 Effect of the intervention**

##### **5.5.1 Attitude towards elderly care**

The intervention improved on the finalist student nurses' attitude and practice towards the care of the elderly. They all agreed 70 (100%) that assessing elderly patients' ADLS for functionality provides a focus for identifying gaps in the care. This concurs with a study by Edemekong, Bomgaars, Sukumaran & Levy (2020) who emphasized on the importance of

assessing patients' activities of daily living as critical to be able to correctly identify the patient's care needs and provide the correct care.

Majority of the participants 65 (92.8%), t value of -0.28 agreed that activities of daily living are good indicators of the patient's functional status. They appreciated the use of the Katz tool from 61 (87.1%) to 67 (95.7%) and that critical identification of gaps enables provision of individualized care from 64 (91.4%) to 69 (91.4%) with a narrow p value of 0.032. The findings after the intervention are significantly higher than the baseline levels indicating that the intervention improved on the participants' attitude towards care of the elderly. Majority of them 68 (97.1%) were positive that elderly patients needed specialized care, that nurses attitude directly affected the care provided from 67 (95.7%) to 69 (98.6%). They agreed that nurses must always have positive attitude towards the elderly from 67 (95.7%) to 70 (100%) in order to ably provide care.

These findings concur with the studies by Abrams & Swift, (2012) in Lumianyi, Adre & Tong, (2018) who emphasized on the importance of positive attitude. They pointed out that negative attitude affects the patient's health and recovery. The participants' responses are also in line with a study by Brauwer, Corrette, Boland, Verschuren, & Hoore, (2019) and Rush, Hickey, Epp, & Janke, (2017) that revealed that t negative attitude towards the elderly often traumatized and frustrated them and affected their recovery.

The participants' responses are also in line with a study by Nzima & Maharaj (2020) who reported that elderly patients faced many challenges during care provision because of the nurses' negative attitude towards their care. They emphasized that positive attitude enables the nurse to correctly assess patients, identify care needs and provide the correct care. Therefore, it is

important for the finalist student nurses to portray positive attitude to the elderly to be able to correctly care for these patients.

The results are also illustrative of the need for MoES to effect training of students in elderly care to instill good morals and positive attitude towards elderly care.

### **5.5.2 Practice towards care of the elderly**

The results of the study revealed that the participants improved their skills in the care of the elderly. This was seen in the increase in the number of respondents from the pre intervention/baseline study to the post-intervention. Majority of the respondents 66 (94.2%) agreed that the Katz tool was a useful instrument for assessing basic activities of daily living. Most of them 62 (88.6%) agreed that activities of daily living are to be assessed on admission to provide baseline information and throughout hospitalization to continually observe for any changes. They agreed that routine assessment of activities of daily living enables identification of areas for intervention in the care and during the assessment the nurse must focus on their functional status as well as direct patient observation to identify areas for care provision.

This is in line with a study by Nzima & Maharaj (2020) who recommended that activities of daily living can be used to gauge the patient's level of functioning in order to determine the care the patient requires and to provide the correct care. The participants' responses also concur with a study by Wandera, Kwagala & Ntozi (2015) who recommended training of care providers in specialized areas like gerontological nursing in order to equip them with specialized skills in elderly care.

## **5.6 CONCLUSION**

The study addressed the attitude and practices of the finalist student nurses towards care of the hospitalised elderly. Attitude plays a key role in the care of the elderly and affects practice.

The intervention improved the finalist student nurses' attitude. They realised that nurses should have positive attitude towards the elderly to be able to provide the correct care.

Basing on the study results, care of the elderly is a very important area of nursing care that requires positive attitude and skills for quality of care. The finalist student nurses had some information on care of the elderly from the clinical area. They realised the importance of positive attitude towards care of the elderly and that negative attitude affects the care provided and patient recovery.

### **5.7 Recommendations**

Elderly are important category of patients who need specialized care.

The nurse educators and policy makers need to address this area of care as a specialty and to consider training care providers who will be able to provide quality care to these patients.

There is need to emphasize on positive attitude during care provision.

The nurse educators, administrators and policy makers need to consider effective ways of providing quality care to this special category of patients like developing tools that can guide care providers to identify areas of care.

The elderly are a special category of patients with specific needs that need to be addressed in different ways. Therefore further research will ably enlighten the researchers on ways to improve on the status of this special category of patients. This will in turn improve on the health of the elderly.

The elderly have contributed so much to the population and need to be acknowledged and recognized. Further research shall move milestones to recognize elderly care as a noble specialty for critical care. Therefore, there is need to further research in this area of care.

## References

- Abdi, S., Spann, A., Borilovic, J., Luc de Witte, & Hawley, (2019). Understanding the care & support needs of older people using the WHO international classification of functioning, disability and health framework (ICF) BMC Geriatrics <https://doi.org/86/s12877-019-1189-9>
- Abdu – Birresborn, D., McCleary, L., Puts, M., Yakong, V., & Cranley, L. (2019). Preparing nurses & nursing students to care for older adults in lower- and middle-income countries. A scoping review. *International journal of nursing studies*. United Kingdom. [www.elsevier.com/ijns](http://www.elsevier.com/ijns).
- Arani, M. S., Azami, M., Borji (2017). Assessing attitudes toward elderly among nurses working in the city of Hamadan doi: 10.1016/j.ijnss.2017.06.00
- Brauer, L., Corrette, P., Boland, B., Verschuren, F., & Hoore, W. (2017) Can we predict functional decline in hospitalized older admitted through emergency department. *Reanalysis of a predictive tool ten years later after its conception*. doi 10.1186/s12877-0498-0
- Chumblor, N.R., Otani, K., Desai, S.P., Herrmann, P.A., & Kurz R.S. (2016). Hospitalized older adult patient satisfaction. *In patient care experiences*.
- Dokpesi, A. O. (2015). The future of elderly care in Nigeria. Borrowing a leaf from a foreign land *Ageing Int* 40, 81–97 (2015). <https://doi.org/10.1007/s12126-014-9205-z>
- Edemekong, P.F., Bomgaars, D.L., & Levy, S.B. (2017). Activities of daily living. *Stat Pearls*

Publishing, Treasure Island (FL) PMID: 29261878

Edemekong, P.F., Bomgaars, D.L, Sukumaran, S., & Levy, S.B. (2020) Activities of daily living. US National Library of Medicine

Elebiary, H., Elshenewy, H., & Abulazym, S. (2018). Knowledge & attitudes of nurses toward caring of elderly people in Health care sittings. *Journal of nursing & Health sciences*, volume 7, issues 3 www.iosr journals

Elfil & Negenda (2017). Sampling methods in clinical research, an educational review , Emerg (Tehran) 5(1) e52

Fang, E.F.; Scheibye-Knudsen, M.; Jahn, H.J.L. J.; Ling, L.; Guo, H.; Zhu, X.; Preedy, V.; Lu, H.; Bohr, V.A. (2015). A research agenda for aging in China in the 21st century. *Ageing Research* 24, 197–205

Ghislaine, B. (2018). Improving nursing knowledge, satisfaction & retention in long term care. nursing practice, Walden University

Hain, D. & Haras, M.S. (2015). Changing nephrology nurses' beliefs about the value of evidence based practice and their ability to implement in clinical practice. *Nephrology Nursing Journal*, 42(6), 563-5

Inderpal (2016). Assessment and management of older people in the general hospital settings. Doi: 10.5772/64294

Joiner, B. (2015). Nursing knowledge of geriatric care in acute care hospital setting& the implementation of a staff geriatric education program retrieved from <https://mao.ca /bpg get involved>

Lumianyi, P.L., Andre, P., & Tong, K. (2018). Care of the elderly in Nigeria. implications for policy , vol 4 doi: 10.1080/233/1886.155201

- Marques, M. B. (2017). Effectiveness of an educational intervention on knowledge-attitude-practice of older adults' caregivers. *Rev Bras Enferm* .doi.org/10.1590/0034-7167-2017-01
- Meola, A. (2019) Future domains for elderly care services like assisted living & home care are refers for digital disruption
- Michele, E.M., Michelle, C. F. (2016). Assessment of activities of activities of daily living, self-care and independence. *Achieves of clinical Neuro psychology*, volume 31 doi: //org/10,1093
- Moreira, A. C .A., Silva, M. J., Darder, J. J. T., Coutinho, J. F. V., Vasconcelos, M. I. O., Nzima, D., & Maharaj, P. (2020).Long term care for the elderly in Sub Saharan Africa. *Health and care in old age in Africa* 1<sup>st</sup> ed doi: 10.4324/9780 429020750-3ISBN 97804 290 20 759 1555201 retrieved from <https://doi.org/10.1080/23311886.2018.155520>
- Roper, N., Logan, W.W., & Tierney, A. J. (2000). The Roper- Logan Tierney model of nursing based on activities of daily living. Edinburg. Elsevier Health Sciences. ISBN O – 443-06373-7
- Rush, K.L., Hickey, S., Epp, S., & Janke, R. (2017). Nurses attitudes towards older peoples care An integrative review. *Journal of clinical nursing*, volume 26, issue 23-24 retrieved from <https://doi.org/10.1111/joen.13939>
- Ssensamba, J.T., Mukuru, M., Nakafeero, M., Ssenyonga & Kiwanuka, S.N.(2019). Health Systems' readiness to provide geriatric friendly care services in Uganda. Across sectional study *BMC Geriatrics* volume 19, 256 <https://doi.org/10.1186/s12877-019-1272-2>
- Tanyi, P.L., Andre, P., Mbah, P., Tong, K. (2018). Care of the elderly in Nigeria: *Implications*

*of policy* Vol, 4, No 1, 1555201doi1080/23311886.1555201 retrieved from  
<https://doi.org/10.1080/23311886.2018.155520>

Wallace, M., & Shelkey, M. (2007). Katz index of independence in activities of daily living. *Best practices in nursing care of Older Adults*. Harlford institute for Geriatric nursing. New York College of nursing.

Wandera, S., Kwagala, B. & Ntozi, J. (2015). Determinants of access to healthcare by older persons in Uganda: a cross-sectional study. *International Journal for Equity in Health*, 14(26). doi: 10.1186/s12939-015-0157-z

Wilhelmina L.E., Quti, J., Jaakko, V., Lauri, S., & Maria, J. (2017). Understanding functional ability: Perspectives of nurses and older people living in long-term care. *Journal of aging studies* volume 431016

World Population Ageing (2019). United Nations Department of Economic and Social Affairs | Population Division. *Global and regional trends in population ageing ST/ESA / SER A / 430*|

World population Aging (2020) Global health and aging. National institute on aging, World health organization *retrieved from [https://www.int/aging/publications/global\\_health\\_on\\_1st\\_December2021](https://www.int/aging/publications/global_health_on_1st_December2021)*.

## LIST OF APPENDICES

### APPENDIX 1: UCU RESEARCH ETHICS COMMITTEE APPROVAL FORM



**UGANDA CHRISTIAN  
UNIVERSITY**

A Centre of Excellence in the Heart of Africa

23/05/2022

To: Margaret Wandabwa

Uganda Christian University  
0772476315

Type: Initial Review

**Re: UCUREC-2022-289: An educational intervention towards improving the Care of Hospitalized Elderly in Uganda by Increasing Student Nurses' Knowledge Attitude and Practice, 1, 2022-04-27**

I am pleased to inform you that the Uganda Christian University REC, through expedited review held on **04/05/2022** approved the above referenced study.  
Approval of the research is for the period of **23/05/2022** to **23/05/2023**.

As Principal Investigator of the research, you are responsible for fulfilling the following requirements of approval:

1. All co-investigators must be kept informed of the status of the research.
2. Changes, amendments, and addenda to the protocol or the consent form must be submitted to the REC for re-review and approval **prior** to the activation of the changes.
3. Reports of unanticipated problems involving risks to participants or any new information which could change the risk benefit: ratio must be submitted to the REC.
4. Only approved consent forms are to be used in the enrollment of participants. All consent forms signed by participants and/or witnesses should be retained on file. The REC may conduct audits of all study records, and consent documentation may be part of such audits.
5. Continuing review application must be submitted to the REC **eight weeks** prior to the expiration date of **23/05/2023** in order to continue the study beyond the approved period. Failure to submit a continuing review application in a timely fashion may result in suspension or termination of the study.
6. The REC application number assigned to the research should be cited in any correspondence with the REC of record.
7. You are required to register the research protocol with the Uganda National Council for Science and Technology (UNCST) for final clearance to undertake the study in Uganda.

The following is the list of all documents approved in this application by Uganda Christian University REC:

No.	Document Title	Language	Version Number	Version Date
1	The Katz Patience Tool	English	1	2022-04-27
2	Data collection tools	English	1	2022-04-27
3	Protocol	English	1	2022-04-27
4	Informed Consent forms	English	1	2022-04-27

Yours Sincerely

  
Peter Wainwa  
For: Uganda Christian University REC

APPENDIX 2: REQUEST FOR PERMISSION TO CONDUCT RESEARCH IN  
MULAGO SCHOOL OF NURSING



**UGANDA CHRISTIAN UNIVERSITY**

A Centre of Excellence in the Heart of Africa

Permission letter  
to consent me  
study.  
let's DIP  
Accept now  
re exercise



TO WHOM IT MAY CONCERN

Dear Sir/Madam,

**RE: INTRODUCTORY LETTER FOR AKITENG WANDABWA MARGARET**

Warm greetings from Uganda Christian University!

This serves to introduce the above named; **Akiteng Wandabwa Margaret**, as our student registered number **RM12M12/001** pursuing a Master degree of Nursing Science.

Margaret is conducting a research as a requirement for the award of the above mentioned degree entitled; ***An educational intervention towards improving the Care of Hospitalized Elderly in Uganda by Increasing Student Nurses' Knowledge Attitude and Practice.***

She has fulfilled all clearance requirements such as getting Research Ethics Approval from UCUREC which is accredited and regulated by Uganda National Council for Science and Technology (UNCST).

Any assistance given to her in achieving this goal will be highly welcome.

Thank you so much.

Yours faithfully,

for  
**Dr. Owor Joseph Jakisa**  
Directorate of Postgraduate Studies,  
Uganda Christian University  
[jowor@ucu.ac.ug](mailto:jowor@ucu.ac.ug)



cc. Executive Secretary, Uganda National Council Science & Technology

A Centre of Excellence in the Heart of Africa

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✉ [info@uchristianuniversity](mailto:info@uchristianuniversity) [@UCUniversity](https://www.facebook.com/UCUniversity), Founded by the Province of Church of Uganda. Chartered by the Government of Uganda.

### Appendix 3:

#### Participants' consent form

I the undersigned acknowledges that the researcher has fully explained to me the nature, purpose and procedures involved in the study.

I \_\_\_\_\_ acknowledge that my participation is voluntary and my withdrawal will not in any way affect me. I therefore sign as proof of my consent to participate in the study.

Signature \_\_\_\_\_

Date \_\_\_\_\_

The researcher has explained the purpose of the study and what it entails to the the participant and has voluntarily consented to the study without any coercion.

Name \_\_\_\_\_

Signature \_\_\_\_\_

## APPENDIX 4: QUESTIONNAIRE

### **Effect of an educational intervention on the finalist student nurses' attitude and practice towards Care of Hospitalized Elderly in Uganda.**

I am a student of Uganda Christian University pursuing a master of nursing science and in my final year. The purpose of the study is to ascertain the finalist student nurses' attitude and practice towards care of the elderly. The information gathered here will remain confidential. Do not write your name on the questionnaire. Your participation in the study is voluntary. You are therefore required to read the questionnaire and decide whether to participate in the study or not. You are free to withdraw at any point at your own will.

Please **circle** the most suitable answer to you.

#### **Demographic characteristics:**

Age in years

- a) 20 -24
- b) 25 -29
- c) 30 – 34
- d) 35 and above

1. Gender

- a) Female
- b) Male

3. Religion

- a) Catholic
- b) Anglican
- c) Moslem

d) Seventh day Adventist

e) Pentecostal

f) Baptist

g) **Others specify**-----

4. Level of formal education

a) O level

b) A level

5. Current training

a) Diploma nursing direct

b) Diploma nursing Extension

**Baseline information on care of the elderly**

6. Have you ever had any information on the care of the elderly?

a) Yes

b) No

7. If yes to no. 6.above, where did you hear from?

a) During classroom teaching

b) During CME

c) During Previous training

d) During clinical placement

8. During your clinical experience, did you ever nurse elderly patients?

a) Yes

b) No

The questions below (9 – 27) are rated according to Likerts scale i.e. strongly Agree, Agree, Disagree or Strongly Disagree.

**Instructions:** For each of the questions Tick in only one statement in the Box provided.

Serial Nos.	Questions	Strongly Agree = 4	Agree = 3	Disagree = 2	Strongly Disagree = 1
<b>Attitude on care of the elderly</b>					
9	Assessing the elderly patients for activities of daily living provides a focus for quality nursing Care.				
10	Correct use of the Katz tool improves assessment of activities of daily living				
11	Physical dysfunction is a common complication of the hospitalized elderly patient.				
12	Critical identification of gaps in the patient's functional status enables the nurse to provide appropriate individualized care.				
13	The Katz tool is designed for assessing the basic activities of daily living.				
15	Activities of daily living are rated in a scale that ranges from completely independent to completely dependent				
16	The Best mode of intervention in activities of daily living care is by developing an individualized plan of care				
17	The Elderly need specialized care				
18	Nurses' attitude directly affects the quality of a hospitalized patient's care				
19	While aging is a universal human experience it's not uniformly viewed worldwide.				
20	Nurses must ensure that the needs of the elderly are always met				
21	Nurses must always have positive attitude towards the elderly to be able to effectively care for them.				
<b>Practice towards the care of the elderly.</b>					
22	Direct patient observation and use of a checklist provide strong evidence to the care to be provided.				
23	During the assessment of the basic activities				

	of daily living, the nurse must focus on their functional status.				
24	Routine assessment of activities of daily living enables identification of areas for intervention in the care.				
25	During assessment, the scale of 0 to 2 is referred to as dependent and needs assistance.				
26	The Katz tool is the instrument used for assessing basic activities of daily living .				
27	Activities of daily living are assessed on admission to provide baseline information and throughout hospitalization to continually, observe the patient's health progress.				

### APPENDIX 5: BUDGET ESTIMATES

S/N	Item	Quantity	Unit cost	Total
1.	Proposal writing internet costs		100,000	100,000
2.	Stationery		200,000	200,000
3.	Transport costs to the University to and fro		300,000	300,000
4.	Pre testing of the questionnaire		100,000	100,000
5.	Planning meetings		200,000	200,000

6.	Data analysis software		300,000	300,000
7.	Data storage system		200,000	200,000
8.	Report writing		200,000	200,000
9.	Dissemination of results		150,000	150,000
	<b>Grand total</b>			<b>1,750,000</b>

**APPENDIX 6: THE KATZ TOOL**

Patient's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Patient ID # \_\_\_\_\_

Katz tool for assessing Activities of Daily Living		
Activities Points (1 or 0)	Independence (1Point) NO supervision, direction or personal assistance.	Dependence (0Points) WITH supervision, direction, personal assistance or total care.
BATHING Points: _____	1 POINT) Bathes self completely or needs help in bathing only a single part of the body such as the back, genital area or disabled extremity.	0 POINTS) Need help with bathing more than one part of the body, getting in or out of the tub or shower. Requires total bathing
DRESSING Points: _____	1 POINT) Get clothes from closets and drawers and puts on clothes and outer garments complete with fasteners. May have help tying shoes.	(0 POINTS) Needs help with dressing self or needs to be completely dressed.
TOILETING Points: _____	(1 POINT) Goes to toilet, gets on and off, arranges clothes, cleans genital area without help.	(0 POINTS) Needs help transferring to the toilet, cleaning self or uses bedpan or commode

<p>TRANSFERRING</p> <p>Points: _____</p>	<p>1 POINT) Moves in and out of bed or chair unassisted. Mechanical transfer aids are acceptable</p>	<p>(0 POINTS) Needs help in moving from bed to chair or requires a complete transfer</p>
<p>CONTINENCE</p> <p>Points: _____</p>	<p>(1 POINT) Exercises complete self control over urination and defecation</p>	<p>(0 POINTS) Is partially or totally incontinent of bowel or bladder</p>
<p>FEEDING</p> <p>Points: _____</p>	<p>(1 POINT) Gets food from plate into mouth without help. Preparation of food may be done by another person.</p>	<p>(0 POINTS) Needs partial or total help with feeding or requires parenteral feeding.</p>
<p>TOTAL POINTS: _____ SCORING: 6 = High (patient independent) 0 = Low (patient very dependent)</p>		

## APPENDIX 7: THE KREJCIE AND MORGAN SAMPLING TABLE

Table 3.1									
<i>Table for Determining Sample Size of a Known Population</i>									
N	S	N	S	N	S	N	S	N	S
10	10	100	80	280	162	800	260	2800	338
15	14	110	86	290	165	850	265	3000	341
20	19	120	92	300	169	900	269	3500	346
25	24	130	97	320	175	950	274	4000	351
30	28	140	103	340	181	1000	278	4500	354
35	32	150	108	360	186	1100	285	5000	357
40	36	160	113	380	191	1200	291	6000	361
45	40	170	118	400	196	1300	297	7000	364
50	44	180	123	420	201	1400	302	8000	367
55	48	190	127	440	205	1500	306	9000	368
60	52	200	132	460	210	1600	310	10000	370
65	56	210	136	480	214	1700	313	15000	375
70	59	220	140	500	217	1800	317	20000	377
75	63	230	144	550	226	1900	320	30000	379
80	66	240	148	600	234	2000	322	40000	380
85	70	250	152	650	242	2200	327	50000	381
90	73	260	155	700	248	2400	331	75000	382
95	76	270	159	750	254	2600	335	100000	384

Note: N is Population Size; S is Sample Size Source: Krejcie & Morgan, 1970



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## DISSERTATION CORRECTION COMPLIANCE REPORT BY THE CANDIDATE (POST VIVA FORM)

Date: 6<sup>TH</sup> April 2024

Name of Candidate: Margaret A.Wandabwa

Reg. No: RM / 12M12 / 001

**Title of Dissertation Effect of the educational intervention on the attitude and practice of finalist student nurses towards the care of the hospitalized elderly in Uganda**

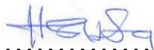
SN	COMMENTS BY EXTERNAL EXAMINER	ACTION TAKEN	INDICATOR
1	Refocus on the problem statement to bring out the gap in the study	Enriched the statement. With literature. Added why Ugandan hospitals lacked readiness in the care of the elderly .. Nurses displayed negative attitude towards care of the elderly. They only gave treatment and did not care for the elderly. Patients discharged with activities of daily living in a worse state than on admission.	Page 4

2	There is no main objective	Main objective inserted	Page5
3	Change specific objective from ascertain to determine	Specific objectives 3 & 4 revisited	Page 5
4	Chapter 3 Methodology Sections in the chapter are not systematic. For example, the researcher described the intervention before the study setting, study population and sample size estimation and selection.	Sections reorganized	Pages 20 -22
5	Inclusion and exclusion criteria to be revisited	Revised	Page 24
6	Quality control: not adequate; should also mention checking of completed questionnaires to check for completeness	Revisited and checking of completed questionnaires inserted	Page 26
7.	Chapter four: Presentation and analysis of data Tables crowded and not very clear	All tables revisited and reorganized Total student population / sample size appearing only once for each table.	Pages 28 - 37
8.	Conclusion and recommendations Recommendations are directed to the policy makers only	Redirected to all parties responsible for training of care providers i.e. Nurse educators, administrators and policy makers.	Page 43

SN	COMMENTS BY INTERNAL EXAMINER	ACTION TAKEN	INDICATOR
1			
2			
3			
4			
5			

SN	COMMENTS BY VIVA VOCE PANNEL	ACTION TAKEN	INDICATOR
1	Refocus on the problem statement to bring out the gap	Refocused by improving on the statement.by adding The nurses were not caring for activities of daily living but only treating conditions. Patients were discharged in a worse state than on admission. Nurses had negative attitude towards elderly and called them difficult patients	Page 4
2	Under objectives use an action verb that allows measurement e.g. Assess	Objectives improved by adding action verb	Page 5
3	What is the use of the Katz tool	The use explained as in the application to the study	Page 11
4	What was the inclusion and exclusion criteria	Inclusion: All finalist students nurses in health training institutions. Exclusion: The finalist student nurses not available for the study.	Page 24
5			

.....  
Candidate's Name Margaret A. Wandabwa      Margaret A. Wandabwa

Signature.......... Date...24<sup>th</sup> / 08/ 2023.....

Supervisor's Approval

Signature

Supervisor's Name Dr Grace Ntale

Signature 

