

2. To implement a structured teaching programme on stress and coping stratagems.
3. To evaluate post-test knowledge and coping stratagems after the intervention.
4. To compare pre-test and post-test knowledge and coping stratagems scores.
5. To find the association between knowledge and coping stratagems with selected demographic variables.

Hypotheses

- **H₁**: There will be a significant difference in knowledge scores between pre-test and post-test after structured teaching.
- **H₂**: There will be a significant difference in coping stratagems scores between pre-test and post-test after structured teaching.
- **H₃**: Knowledge and coping stratagems scores will be associated with selected demographic variables.

Research Methodology

Research Design

A pre-experimental, one-group pre-test post-test design was chosen.

Setting

The study was conducted in selected rural nursing institutions of Vadodara district, Gujarat, which cater to students from underprivileged and rural backgrounds.

Sample and Sampling Technique

A total of 60 undergraduate nursing students were selected using simple random sampling.

Instruments

1. **Demographic Data Sheet:** Age, gender, year of study, residence, academic performance, family support, etc.

2. **Structured Knowledge Questionnaire:** Developed by investigators, validated by experts.
3. **Coping Stratagem Inventory:** Standardized tool to assess adaptive and maladaptive coping methods.

Data Collection Procedure

1. Formal permission was obtained from institutional authorities.
2. Informed consent was taken from participants.
3. Pre-test was administered to assess baseline knowledge and coping stratagems.
4. A **Structured Teaching Programme** covering stress awareness, coping strategies, relaxation techniques, time management, and problem-solving skills was implemented over two sessions.
5. After 7 days, a post-test was conducted.

Structured Teaching Programme

- Meaning and sources of stress in nursing education
- Importance of coping stratagems in professional development
- Types of coping strategies: problem-focused, emotion-focused, adaptive and maladaptive
- Relaxation techniques: deep breathing, progressive muscle relaxation
- Time management and organization
- Cognitive restructuring and positive self-talk

Data Analysis

Data were analyzed using SPSS software. Descriptive and inferential statistics were applied:

- **Frequency and percentage** for demographic variables
- **Mean and standard deviation (SD)** for knowledge and coping scores
- **Paired *t*-test** to compare pre- and post-test scores

- **Chi-square test** for association with demographic variables

Results

Demographic Profile

- Majority were female students between 18-22 years.
- Most were first- to third-year students from rural backgrounds.
- Majority lived with families and reported moderate academic pressure.

Comparison of Knowledge Scores

Test	Mean	SD	t Value	p Value
Pre-test	11.4	3.2	12.56	$p < 0.001$
Post-test	19.8	2.5	—	—

Comparison of Coping Stratagems Scores

Test	Mean	SD	t Value	p Value
Pre-test	42.1	7.4	8.23	$p < 0.001$
Post-test	55.6	6.1	—	—

Association with Demographic Variables

Significant associations were found between knowledge and coping scores with:

- Year of study ($p < 0.05$)
- Previous exposure to stress management education ($p < 0.05$)

No significant association was found with gender or family income.

Discussion

The structured teaching programme significantly improved students' knowledge about stress and coping. Post-intervention, students demonstrated enhanced adaptive coping

stratagems, such as positive reframing, relaxation techniques, and problem solving. These findings align with international research showing educational interventions can reduce stress levels and promote effective coping among nursing students.

Conclusion

The structured teaching programme was effective in enhancing knowledge and coping behaviours in nursing students. Integrating structured stress and coping management education into nursing curricula is recommended, especially in rural settings where support resources may be limited.

Implications

For Nursing Education:

- Integrate regular structured teaching sessions on stress and coping.
- Encourage peer support groups and mentorship programmes.

For Nursing Practice:

- Empower students with coping skills to reduce burnout and improve clinical performance.

For Future Research:

- Conduct longitudinal studies to measure long-term effects of structured programmes.
- Compare urban vs rural nursing student populations.

Limitations

- One-group pre-experimental design without control group
- Short-term evaluation
- Self-reported measures

Recommendations

1. Replicate the study with a control group.
2. Extend follow-up assessments to evaluate long-term impact.
3. Include multi-centre samples from different rural regions.