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FACULTY OF NURSING

UNIVERSITY OF COLOMBO

PROCEEDINGS



5th INTERNATIONAL NURSING CONFERENCE

Nursing Beyond Boundaries

Innovation, Collaboration and Sustainable Healthcare

06TH NOVEMBER 2026

5th International Nursing Conference

"Nursing Beyond Boundaries: Innovation, Collaboration and Sustainable Healthcare."

PROCEEDINGS

FACULTY OF NURSING

UNIVERSITY OF COLOMBO

2026

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Message from the Vice Chancellor, University of Colombo



It is my immense pleasure to convey this message as the Vice Chancellor of the University of Colombo for the 5th International Nursing Conference (INC 2026) organized by the Faculty of Nursing, University of Colombo.

I firmly believe that this conference will contribute to advancing nursing research, strengthening professional practice, and improving the quality of healthcare delivery. Research plays a pivotal role in addressing emerging healthcare challenges and supporting the development of evidence-based solutions. Therefore, research findings should be critically evaluated and constructively discussed to generate meaningful recommendations for improving nursing practice and healthcare outcomes.

The theme of this year conference, "Nursing Beyond Boundaries: Innovation, Collaboration and Sustainable Health Care," highlights the evolving role of nursing in addressing the complex healthcare needs of individuals, families, and communities. Innovation encourages the development and adoption of new approaches to nursing education, clinical practice, research, and healthcare delivery. Collaboration among healthcare professionals, academic institutions, researchers, policymakers, and communities is essential to strengthening healthcare systems and achieving better patient outcomes. Furthermore, sustainable healthcare emphasizes the importance of developing accessible, equitable, efficient, and environmentally responsible healthcare practices that can meet present and future health needs. I am confident that the discussions and research presented at INC 2026 will inspire innovative thinking, strengthen professional partnerships, and contribute to the advancement of sustainable healthcare.

I am confident that this conference will further advance the academic and research objectives of the Faculty of Nursing and strengthen its position as a center of excellence in nursing education, research, and professional development. By providing opportunities for knowledge exchange and international collaboration, INC 2026 will support the development of competent, compassionate, and innovative nursing professionals who can respond effectively to the changing demands of healthcare locally and globally.

Finally, I wish to express my sincere gratitude to the keynote and plenary speakers, reviewers and all participants for their valuable contributions to this conference. I extend my appreciation to the organizing committee and all staff members of the Faculty of Nursing, University of Colombo, for their dedication and commitment to making INC 2026 a success. I wish the conference every success and all participants a productive, enriching, and inspiring experience.

Professor I. M. Karunathilake
Vice Chancellor
University of Colombo
Sri Lanka

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Message from the Dean, Faculty of Nursing



It is with great pleasure that I present this message for the proceedings of the 5th International Nursing Conference organized by the Faculty of Nursing. As the Dean of the Faculty of Nursing at the University of Colombo, I am truly honored to host this prestigious event for the fifth consecutive year. The theme for 5th International Nursing Conference," Nursing beyond boundaries; Innovation, Collaboration and Sustainable Healthcare", reflects the evolving role of nursing in addressing the complex and changing healthcare needs of our society.

Nursing today extends beyond traditional boundaries, embracing innovation, technology, evidence-based practice, and interdisciplinary collaboration to improve healthcare quality, safety, and accessibility. The International Nursing Conference is a key academic event of the faculty, providing a platform for researchers, academics, healthcare professionals, and students to share knowledge, exchange ideas, and foster collaboration.

I would like to convey my deepest appreciation to Professor I. M. Karunathilaka for his steadfast encouragement, visionary leadership which have greatly contributed to the successful organization and overall success of this conference. I also warmly congratulate all authors and presenters for their valuable research contributions and thank our keynote speaker, Prof. H.D.W.T. Damayanthi Dassanayake, together with all invited speakers, for sharing their expertise and enriching the scientific programme.

I congratulate all awardees and commend their innovations for their potential to advance nursing. My sincere gratitude goes to our esteemed international professionals and panelists for their valuable contributions. I also thank the organizing committee, led by Ms. Nilushi Nisansala, Chair of INC 2026, and her dedicated team for their commitment in making this conference a reality despite the challenges. I encourage all participants to share knowledge, engage in meaningful discussions, and foster collaborations that will contribute to positive change in global healthcare.

I wish INC2026 every success and look forward to its impact on the future of the Nursing Profession.

Ms. W. A. R. P. Menike
Dean
Faculty of Nursing
University of Colombo, Sri Lanka

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Message from Conference Chair - INC 2026



It is my great pleasure and privilege to welcome you to the 5th International Nursing Conference (INC 2026), organized by the Faculty of Nursing, University of Colombo, under the theme "Nursing Beyond Boundaries: Innovation, Collaboration and Sustainable Healthcare."

Nursing continues to evolve in response to advances in science and technology, changing population health needs, emerging global challenges, and the increasing complexity of healthcare delivery. In this rapidly changing landscape, nurses are called upon to move beyond traditional boundaries, embrace innovation, foster meaningful collaboration, and contribute to the development of sustainable, equitable, and people-centred healthcare systems.

INC 2026 provides a valuable platform for nurses, academics, researchers, educators, healthcare professionals, and students to share knowledge, present research, exchange experiences, and explore innovative approaches that can shape the future of nursing and healthcare. The academic programme is further enriched by an eminent keynote speaker and distinguished plenary speakers, including international experts who bring diverse global experiences and perspectives to the conference. Complementing the main conference programme, two pre-conference workshops aligned with the conference theme provide opportunities for focused learning, practical engagement, and professional development.

The abstracts included in this book reflect the breadth and diversity of contemporary nursing research and practice. They demonstrate the commitment of nurses and other healthcare professionals to evidence-informed practice, innovative education, research, and improved healthcare delivery.

On behalf of the Organizing Committee, I extend my sincere appreciation to our keynote and plenary speakers, authors, presenters, reviewers, workshop facilitators, and all members of the organizing committee for their invaluable contributions to the success of INC 2026.

I warmly welcome you to the 5th International Nursing Conference 2026 and wish you an inspiring, enriching, and rewarding conference experience.

Ms. M. W. N. Nisansala
Chairperson -INC 2026
Faculty of Nursing
University of Colombo, Sri Lanka

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Message from Conference Secretary - INC 2026



It is my privilege to contribute this message to the proceedings of the 5th International Nursing Conference 2026, organised by the Faculty of Nursing, University of Colombo, under the theme "Nursing Beyond Boundaries: Innovation, Collaboration and Sustainable Healthcare." This theme reflects the evolving role of nursing in addressing contemporary healthcare challenges through innovation, collaboration and a commitment to developing sustainable healthcare systems.

In an increasingly interconnected world, nurses play a vital role in advancing healthcare through evidence-based practice, technological innovation and interdisciplinary collaboration. This conference provides a valuable platform for academics, researchers and healthcare professionals to share scientific knowledge, exchange experiences and explore innovative approaches to improving nursing practice and healthcare delivery.

This year's conference is further enriched by two plenary presentations delivered by distinguished international speakers, as well as a keynote address offering valuable perspectives on contemporary developments and future directions in nursing and healthcare. These sessions will encourage scholarly discussion, promote knowledge exchange and foster stronger professional collaborations.

I extend my sincere appreciation to all the speakers, presenters, reviewers and members of the organising committee for their dedication and invaluable contributions to the success of this conference. I also gratefully acknowledge the support and guidance provided by the leadership of the Faculty of Nursing, University of Colombo.

May the knowledge shared and the collaborations fostered through this conference inspire meaningful innovations in nursing and contribute to building resilient, inclusive and sustainable healthcare systems.

Ms. D. L. N. L. Ubhayawardana

Senior Lecturer (Gr. II)

Department of Basic Science & Social Science for Nursing

Faculty of Nursing

University of Colombo

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Programme Outline

Programme of the 5th International Nursing Conference

8.00 am - 8.30 am	Registration of Participants
8.30 am - 8.40 am	Inauguration of the 5th International Nursing Conference Lighting the Traditional Oil Lamp
8.40 am - 8.50 am	Traditional Cultural Dance
8.50 am - 9.00 am	Welcome Address, Ms. M. W. N. Nisansala, Chairperson 5th International Nursing Conference
9.00 am - 9.10 am	Speech by the Dean, Faculty of Nursing
9.10 am - 9.15 am	Introduction of the Chief Guest by the Dean, Faculty of Nursing
9.15 am - 9.25 am	Address by the Chief Guest Professor Indika Mahesh Karunathilaka, Vice-Chancellor, University of Colombo
9.25 am - 9.30 am	Introduction of the Keynote Speaker by Ms. M. W. N. Nisansala, Chairperson 5th International Nursing Conference
9.30 am - 10.00 am	Keynote Speech, Prof. Damayanthi Dasanayaka Faculty of Allied Health Sciences, University of Peradeniya
10.00 am - 10.05 am	Vote of Thanks by Ms. D. L. N. L. Ubhayawardana Secretary, 5th International Nursing Conference
10.05 am - 10.30 am	Refreshment
10.30 am - 10.35 am	Introduction to Plenary Speaker I by Ms. M.G.A.S. Malkanthi, Co-secretary, 5th International Nursing Conference
10.35 am - 11.00 am	Plenary Speech I Prof. Kusum Kumari, All India Institute of Medical Sciences, Deoghar, India
11.00 am - 11.05 am	Introduction to Plenary Speaker II by Ms. H. H. N. D. Dharmarathna, Co Secretary, 5th International Nursing Conference
11.05 am - 11.30 am	Plenary Speech II Dr. Anuradha Perera, Senior Clinical Lecturer, Occupational and Aviation Medicine Unit, Department of Medicine, University of Otago.
11.30 am - 12.45 pm	Oral Presentations Session I and Poster Presentations Session I
12.45 pm - 1.30 pm	Lunch
1.30 pm - 2.45 pm	Oral Presentations Sessions II, III & IV and Poster Presentation Sessions II
2.45 pm - 3.30 pm	Certificates Awarding and Closing Remarks

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Programme of the Technical Session

ORAL PRESENTATIONS- PANEL 01		
SN	**Paper ID**	**Title and author/s of the paper**
OP1	INC002	IMPACT ON FAMILY-CENTERED NURSING CARE MODEL ON QUALITY OF LIFE IN CHILDREN WITH CHILDHOOD NEPHROTIC SYNDROME AT PAEDIATRIC NEPHROLOGY UNIT, TEACHING HOSPITAL BATTICALOA, SRI LANKA: A QUASI-EXPERIMENTAL STUDY *Peiris MHC,* ***Lenagala ARN****, Bandara Venuja*
OP3	INC005	ATTITUDES OF FAMILY INVOLVEMENT IN NURSING CARE AMONG NURSING UNDERGRADUATES IN A SELECTED UNIVERSITY IN SRI LANKA *Dilrukshi, KT,* ***Weerasooriya, KMWR****, Abeyaratne, T and Amarasekara, AATD*
OP4	INC008	EXPERIENCES OF NOVICE NURSE EDUCATORS REGARDING THEIR ROLE TRANSITION IN SELECTED GOVERNMENT NURSING SCHOOLS IN SRI LANKA ***Samarakoon SRHD*** *and Yapa HE*
OP5	INC009	KNOWLEDGE, ATTITUDES AND FACTORS ASSOCIATED WITH KNOWLEDGE REGARDING CHILDHOOD ASTHMA AMONG PARENTS OF PRIMARY SCHOOL CHILDREN IN A SELECTED SCHOOL IN DENIYAYA EDUCATIONAL ZONE, SRI LANKA ***Sachindi AGL****, Gamage MAMN*
OP6	INC011	QUALITY OF LIFE AND ASSOCIATED FACTORS AMONG FAMILY CAREGIVERS OF CHILDREN AND ADOLESCENTS WITH CANCER RECEIVING INPATIENT CARE AT APEKSHA HOSPITAL, MAHARAGAMA, SRI LANKA: A CROSS-SECTIONAL STUDY *Madhushika UGD, Arachchi STH,* ***Sewwandi LA****, Weragoda WADID, Dilrukshi JKS, Rishivan S, Jayawardana PDAS, Perera HDP, Malkanthie MGAS, Senarathne HS*

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ORAL PRESENTATIONS- PANEL 02		
SN	**Paper ID**	**Title and author/s of the paper**
OP2	INC004	FACTORS ASSOCIATED WITH AWARENESS, ATTITUDES, AND INTENTIONS TOWARDS ADVANCE CARE PLANNING AND END-OF-LIFE DECISIONS AMONG COMMUNITY-DWELLING OLDER ADULTS ***Wikramaarachchi RD,*** *Barthelot DE, Ferdinandez MGCS, Kularathna KAI, Munasinghe JAID, Prasangi MP, Sanjeewa BHHSR, Thennakoon TMCK, Nelum KIT, Priyadarshani, UGN, Warnakulasuriya SSP*
OP7	INC014	HEALTH-RELATED QUALITY OF LIFE AND ASSOCIATED FACTORS AMONG OVERWEIGHT AND OBESE ADVANCED-LEVEL STUDENTS IN SRI JAYEWARDENEPURA EDUCATIONAL ZONE: A DESCRIPTIVE CROSS-SECTIONAL STUDY ***Rathnayake SAN,*** *Madhushani EAND, Pathirana HKNS, Ajithra NA, Dheerarathne TS, Jayathilaka KATE, Sewwandi WHN, Weerasinghe WMSM, Bandara HMC, Bandara DMOTK, Kisokanth G*
OP8	INC018	PREVALENCE AND FACTORS ASSOCIATED WITH DIABETIC PERIPHERAL NEUROPATHIC PAIN AMONG PATIENTS ATTENDING THE DIABETIC CLINIC AT A SELECTED TERTIARY HOSPITAL IN COLOMBO DISTRICT, SRI LANKA ***Pasangee PSJ****, Haththella HMSM, Kumarage SK, Gamage HGPK, Banu MIA, Lakmali WGD, Senavirathna RHMSS, Aswer ARM, Prabath KB, Hathurusinghe HDHN, Edirisinghe NP*
OP9	INC024	ASSOCIATION BETWEEN JOB SATISFACTION AND RETENTION IN THE NURSING PROFESSION AMONG NURSING OFFICERS AT BASE HOSPITAL HOMAGAMA, SRI LANKA ***Liyange RS****, Amarasekara AATD*
OP11	INC029	KNOWLEDGE, ATTITUDES, PRACTICES AND ASSOCIATED FACTORS REGARDING EXCLUSIVE BREASTFEEDING AMONG MOTHERS OF CHILDREN ATTENDING SELECTED CHILD WELFARE CLINICS IN THE IMADUWA MOH AREA ***Manodya NKG****, Jayawardene DMS*

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ORAL PRESENTATIONS- PANEL 03		
SN	**Paper ID**	**Title and author/s of the paper**
OP10	INC025	KNOWLEDGE, ATTITUDES AND PREVENTIVE PRACTICES RELATED TO THE RISK OF MYOCARDIAL INFARCTION AMONG PATIENTS WITH TYPE 2 DIABETES MELLITUS ATTENDING SELECTED DIABETIC CLINICS IN COLOMBO DISTRICT, SRI LANKA ***Sandaruwani STD,*** *Vimansa DGJ, De Silva KM, Gamage TDL, Karunarathna HRM, Madhushanee ESP, Shakir MACM, Perera VTD, Gunathilaka MDTL*
OP15	INC037	PREVALENCE, DEPENDENCE, AND PATTERNS OF BETEL CHEWING AND THEIR ASSOCIATION WITH SLEEP QUALITY AMONG BUS DRIVERS IN THE COLOMBO DISTRICT, SRI LANKA ***Chagirna J,*** *Madhuhansi AADM, Jayasooriya JASS, Lakshmi MVU, Perera ETL, Chamara JGH, Randika SKKS, Sewwandi WMN, Ekanayake BMNS, Dharmarathna HHND*
OP16	INC038	ASSESSMENT OF ADHERENCE TO ORAL HYPOGLYCEMIC AGENTS, RELATED BARRIERS AMONG PATIENTS WITH TYPE 2 DIABETES MELLITUS ATTENDING THE MEDICAL CLINIC AT EHELIYAGODA BASE HOSPITAL, RATHNAPURA DISTRICT, SRI LANKA ***Sithara RA****, Amarasekara AATD*

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ORAL PRESENTATIONS- PANEL 04		
SN	**Paper ID**	**Title and author/s of the paper**
OP12	INC030	INFORMATION LITERACY SKILLS FOR EVIDENCE-BASED PRACTICE AMONG NURSING STUDENTS IN THE COLLEGES OF NURSING, WESTERN PROVINCE, SRI LANKA ***Kalhara WKE**, Athurugiri AAAOW, Siromiya U, Dissanayaka DSD, Wickramarathna HTTM, Sahraan MBM, Madusanka WGG, Perera KGNN, Nisansala MWN*
OP13	INC031	LEVEL OF PERCEIVED SOCIAL SUPPORT AND ASSOCIATED FACTORS AMONG PRIMARY CAREGIVERS OF PEDIATRIC CANCER PATIENTS AT APEKSHA HOSPITAL, SRI LANKA ***Rashmi RA**, Jayalath DCM, Gunarathna SS, Kawshalya PMC, Madhushani TGH, Sathsarani KHPSM, Thennakoon TMTS, Thathsarani WJK, Rahman MRA, Nishara MGS, Nisansala MWN*
OP18	INC042	AWARENESS OF GENETIC DISORDERS AND GENETIC SCREENING, AND ATTITUDES TOWARD GENETIC SCREENING AMONG MOH-BASED PRECONCEPTION CLINIC ATTENDEES IN COLOMBO, SRI LANKA ***Bandara DRUK**, Jayasinghe IDMP, Bhagya LPM, Lakshmi HKRM, Neranjala HAU, Prabudhara THS, Sewwandi EKL, Madhubhashini KAPK, Siyara NGS, Gunasekare MKCP, Elvitigala DAS*
OP19	INC043	ASSOCIATION BETWEEN SELECTED PSYCHOSOCIAL FACTORS AND FUNCTIONAL DECLINE AMONG OLDER ADULTS IN A SELECTED DIVISIONAL SECRETARIAT AREA IN COLOMBO DISTRICT, SRI LANKA ***Nadeeshan MKDO,** Bawanthi SPM, Pathirana GPTN, Athapaththu AMTBI, Hettiarachchi HGK, Lakmini AP, Sewwandi BWNH, Kumarathunga DMSH, Silva NBS, Priyadarshani UGN, Warnakulasuriya SSP*
OP20	INC046	PSYCHOLOGICAL WELL-BEING AND ASSOCIATED FACTORS AMONG THE INSTITUTIONALIZED ELDERLY POPULATION IN GALLE DISTRICT: A CROSS-SECTIONAL STUDY ***Tharuka HPMPM,** Shashinika DP, Kumara SATR, Tharanga KJMD, Sundarapperuma SMTD*

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POSTER PRESENTATIONS PANEL 01		
SN	**Paper ID**	**Title and author/s of the paper**
PP1	INC003	KNOWLEDGE AND PRACTICES REGARDING BREASTFEEDING TECHNIQUES AMONG PRIMIPAROUS MOTHERS IN GERMAN - SRI LANKA FRIENDSHIP HOSPITAL FOR WOMEN, GALLE - A DESCRIPTIVE CROSS-SECTIONAL STUDY ***Kugathasan N**, De Silva SMSA, Devindi SNM, De Silva KKPMK, Manodya NKG*
PP2	INC007	AWARENESS, ATTITUDES AND THE ASSOCIATED FACTORS TOWARD CARE OF DYING PATIENTS AMONG NURSES AT THE APEKSHA HOSPITAL, MAHARAGAMA, SRI LANKA: A CROSS-SECTIONAL STUDY ***Dharmaratne GIL**, Pathiraja PMRH, Amarasingha PGMM, Weerakoon WMHM, Senarathna KWTN, Javid ILA, Jayawardhana HHAMT, Rathnayaka RMSS, Edirisinghe NP*
PP3	INC010	HEALTH-RELATED QUALITY OF LIFE AND PSYCHOLOGICAL DISTRESS AMONG INSTITUTIONALIZED OLDER ADULTS WITH POLYPHARMACY IN COLOMBO DISTRICT, SRI LANKA ***Wickramanayake GYC**, Ruwanpathirana MD, Arachchi TM, Jayawickrama DS, Dishara WGD, Madhushyani PLPA, Perera HKCL, Sihara GGN, Amarasiriwardhana UI, Elvitigala DAS*
PP5	INC013	PREVALENCE OF DEPRESSIVE SYMPTOMS AND ASSOCIATED FACTORS AMONG COUPLES SEEKING FERTILITY CARE: A HOSPITAL-BASED CROSS-SECTIONAL STUDY IN JAFFNA ***Kajenthini K**, Kumar R, Raguraman S*
PP7	INC016	KNOWLEDGE, ATTITUDES, AND PRACTICES OF NURSES REGARDING NUTRITIONAL MANAGEMENT OF TYPE 2 DIABETES MELLITUS IN SELECTED TEACHING HOSPITALS IN THE WESTERN PROVINCE SRI LANKA. ***Lakmali SDLA,** Yasendra WU, Rajapaksha MD, Hewage NN, Chanuka IWS, Udara SE, Senadeera TRR, Nayanamali HIM, Gunathilaka TL*
PP8	INC020	PUBLIC AWARENESS OF PALLIATIVE CARE AND ASSOCIATED FACTORS AMONG ADULTS IN THE COLOMBO DISTRICT, SRI LANKA ***Yasara WNC,** Sewwandi LPSK, Thuvarakan S, Sayanthavi S, Nagoda MRK, Pushpakumara DMP, Harshana WAI, Chandrasekara NB, Sewwandi LAKB, Nishara MGS, Menike WARP*

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PP10	INC023	EXPLORING FACTORS INFLUENCING MENSTRUAL HYGIENE MANAGEMENT AMONG NURSING UNDERGRADUATES OF THE UNIVERSITY OF PERADENIYA ***Jayalth WADR,*** *Dasanayaka HDWTD*
PP11	INC026	INTERRELATIONSHIPS AMONG DEATH ANXIETY, EMOTIONAL INTELLIGENCE, AND COPING STRATEGIES AMONG NURSES AT APEKSHA HOSPITAL, SRI LANKA ***Ayodhya MDG,*** *Ahamed MFB, Jayasanka PMH, Vanushan T, Gunathilake KGAMN, Kawya KGKT, Malsha DKG, Seelawansha SHYU, Devindi HGK, Ranaweera RAND, Menike WARP*
PP12	INC027	KNOWLEDGE, ATTITUDES AND PRACTICES REGARDING FIRST AID MANAGEMENT OF COMMON WORKPLACE INJURIES AMONG ELECTRICITY DISTRIBUTION LANKA (PVT) LTD WORKERS IN KEGALLE DISTRICT ***Senarathna PPN****, Ariyarathne HTDW*

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POSTER PRESENTATIONS PANEL 02		
SN	**Paper ID**	**Title and author/s of the paper**
PP6	INC015	QUALITY OF LIFE AND ITS ASSOCIATED FACTORS AMONG NURSES WORKING IN SELECTED HOSPITALS IN TRINCOMALEE DISTRICT, SRI LANKA ***Shirafa LF**, Damayanthi LC*
PP9	INC021	PREVALENCE OF DEPRESSION, ANXIETY, AND STRESS AND ASSOCIATED FACTORS AMONG UNDERGRADUATE NURSING STUDENTS IN STATE UNIVERSITIES IN THE WESTERN PROVINCE, SRI LANKA ***Kurera WIL,** Thilakarathna MN, Sathsarani HMSN, Fernando, SGS, Bomanthi PLS, Priyashani WPD, Wimalasena SDAM, Munseer FM, Madushani HKKC, De Silva DKM, Chathurika SN*
PP14	INC034	FOODBORNE DISEASE KNOWLEDGE, FOOD SAFETY PRACTICES, AND SELF-REPORTED FOODBORNE ILLNESSES AMONG NURSING UNDERGRADUATES IN TWO SELECTED STATE UNIVERSITIES IN THE WESTERN PROVINCE, SRI LANKA ***Thathsara WPR**, Dilrukshi AKS, Dhananji JWA, Hettiarachchi HATD, Dissanayake KMGND, Madhushani SG, Kavindi SLT, Jayathilaka PASV, Ubhayawardana DLNL*
PP15	INC035	CULTURAL COMPETENCE, SENSITIVITY, AND ATTITUDES TOWARD CULTURALLY RESPONSIVE CARE BEHAVIOR AMONG NURSING UNDERGRADUATES IN SELECTED STATE UNIVERSITIES, SRI LANKA ***Bandara JMHJ,** Ahamed MRR, Harischandra HMSN, Jimzan MAM, Krishana N, Manathunga GHA, Senadheera SADPV, Gajaweera PS, Karunarathne UVDIL, Gunarathna AMC, Asurakkody TA*
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Introduction to Keynote Speaker



Prof. H.D.W.T. Damayanthi Dassanayake

Professor in Nursing
Department of Nursing
Faculty of Allied Health Sciences
University of Peradeniya

Prof. Damayanthi Dassanayake is a distinguished academic and healthcare leader, serving as Professor of Nursing at the University of Peradeniya, Sri Lanka. With nearly three decades of experience in clinical practice, teaching, and research, she has become a driving force in advancing nursing education, policy, and international collaboration.

Her academic achievements include a PhD in Nursing Sciences from the University of Malaya, Malaysia, a Master's in Nursing Administration from Chiang Mai University, Thailand, and a Master of Science in Food and Nutrition from the University of Peradeniya. This multidisciplinary foundation has enabled her to integrate nutrition, nursing, and health sciences into her teaching and research.

Prof. Dassanayake has been deeply engaged in strengthening global partnerships in nursing and healthcare innovation. Her research spans gerontology, palliative care, chronic disease management, and the integration of AI in nursing education.

Recognized with numerous awards, including the National Research Council Merit Award and honors for excellence in nursing and scientific publication, she has also contributed to national health policy and served as a mentor and resource person in countless professional forums. Prof. Dassanayake exemplifies "Nursing Beyond Boundaries," inspiring innovation, collaboration, and sustainable healthcare worldwide.

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Abstract of the Keynote Speech

NURSING BEYOND BOUNDARIES: INNOVATION, COLLABORATION AND SUSTAINABLE HEALTHCARE

Nursing today is at a turning point. The profession is moving beyond traditional roles to embrace innovation, collaboration, and sustainability as guiding principles for the future of healthcare.

This keynote will explore how nurses are harnessing new technologies, such as digital health tools and remote monitoring, to improve patient outcomes and education. It will highlight the importance of working together across disciplines, institutions, and nations to share knowledge and strengthen healthcare systems globally. At the same time, it will emphasize the nurse's role in promoting sustainable practices- ensuring that care is not only effective but also resource-conscious and environmentally responsible.

By moving beyond boundaries, nurses become leaders, advocates, and innovators. They are uniquely positioned to connect patients, families, and communities with systems of care that are compassionate, equitable, and resilient. The speech will call on nurses to see themselves as agents of change, shaping healthcare that meets the needs of today while preparing for the challenges of tomorrow.

Ultimately, this keynote celebrates nursing as a global force - one that transcends limits to build healthier, fairer, and more sustainable societies.

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Abstract of the Plenary Speech 1

INNOVATIONS IN NURSING

Dr. Kusum Kumari
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AIIMS, Deoghar, Jharkhand, India



The development of the nursing field requires innovation and research in access to nursing education, nursing practice, and health care delivery. Nursing innovation involves the assimilation of new knowledge, technologies, and evidenced practice to enhance the existing practices, enhance the care of the patients and develop professional skills. The presentation includes a discussion of the concept, need, principles, types, and processes of innovation in nursing with special reference to educational and clinical applications. The basic innovations are mobile computing, videoconferencing, e-learning, service learning, high-fidelity patient simulation, tele-teaching, microteaching, nursing informatics, and portable libraries. Such approaches promote critical thinking, interactive learning, clinical decision making, problem-solving skills, and lifelong learning. It also identifies some of the emerging research priorities in nursing, including strengthening the science of nursing education, developing research scholars, improving research methodologies, and creating effective links between education and clinical practice. Additionally, the presentation emphasizes translating research evidence into educational approaches and enhanced health outcomes. The gap between theory and practice should be addressed through technology, simulation, informatics, and educational innovations. Lastly, encouraging innovation and research in nursing is crucial for addressing the need to prepare competent nursing professionals and improve the quality of patient care and accessibility of effective and inexpensive healthcare (innovative and evidence-based).

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Abstract of the Plenary Speech 2

REDEFINING NURSING: ARE WE READY FOR WHAT'S NEXT?



Dr Anuradha Perera (BScN, RN, PhD)
Senior Lecturer
University of Otago

Nursing is at a critical turning point. Rapid technological advancements, evolving healthcare needs and increasing complexity in healthcare delivery demand a profession that is prepared not only to adapt to change but to actively shape its future. This plenary session explores the future of nursing through its four interconnected pillars' framework: **clinical practice, education, research, and leadership**, viewed through the integrated lens of the **3H Model -Head, Heart and Hands**.

The presentation examines how the integration of knowledge and critical thinking (Head), compassion and professional values (Heart), and practical skills and clinical competence (Hands) can strengthen each pillar of nursing practice. In clinical practice, this integration supports safe, evidence-based and person-centred care. Within education, it highlights the development of lifelong learners and mentors, drawing on the 70:20:10 learning model to emphasise experiential, collaborative and formal learning. In research, it encourages nurses to move beyond being consumers of evidence to becoming active contributors to knowledge generation, critical appraisal, translation and implementation. In leadership, it reinforces accountability, effective team management, patient advocacy and the creation of safe practice environments.

By connecting the four pillars through the 3H Model, the presentation highlights the importance of developing well-rounded nursing professionals who can think critically, act compassionately and translate knowledge into meaningful practice. Ultimately, redefining nursing requires a collective commitment to continuous learning, research engagement, innovation and courageous leadership.

The future of nursing will not simply be shaped by changes in healthcare, but by nurses' capacity and willingness to shape healthcare itself. Are we ready for what's next?

Keywords: Future of Nursing; Clinical Practice; Nursing Education; Research Capacity; Evidence-Based Practice; Nursing Leadership; Professional Development.

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Technical Session – Oral Presentations

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OP1: INC002

IMPACT OF A FAMILY-CENTERED NURSING CARE MODEL ON QUALITY OF LIFE IN CHILDREN WITH NEPHROTIC SYNDROME AT PEDIATRIC NEPHROLOGY UNIT, TEACHING HOSPITAL BATTICALOA, SRI LANKA: A QUASI-EXPERIMENTAL STUDY

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Background: Childhood Nephrotic Syndrome is a chronic protein loosing renal disorder. It significantly affects the physical, emotional, social, and educational well-being of affected children and their families. Family-Centered Nursing Care has been recognized as an effective approach to enhance family participation in care and improve health outcomes among children with chronic illnesses.

Objective: This study aimed to evaluate the effectiveness of a Family-Centered Nursing Care Model in improving the quality of life of children with childhood Nephrotic Syndrome registered at the Pediatric Nephrology Unit, Teaching Hospital Batticaloa, Sri Lanka.

Methods: A quasi-experimental one-group pre-test–post-test study was conducted among 32 children with childhood Nephrotic Syndrome. All eligible children who met the predefined inclusion criteria were recruited using purposive sampling. The Family-Centered Nursing Care Model was implemented over 8 weeks. Quality of life was assessed before the intervention and immediately after completion of the 8-week programme using the PedsQL™ 4.0 Generic Core Scale. Data were analyzed using descriptive statistics and paired-sample t-tests, with statistical significance set at $p < 0.05$.

Results: Thirty-two children completed the study. Following the 8-week Family-Centered Nursing Care Model, significant improvements were observed in all quality-of-life domains. The Physical Health Summary Score increased from 93.26 ± 11.91 to 98.05 ± 7.22 ($p = 0.031$). The Psychosocial Health Summary Score increased from 79.57 ± 19.02 to 94.47 ± 9.37 ($p < 0.001$), while the Total Quality of Life Score increased from 84.78 ± 14.56 to 95.83 ± 8.26 ($p < 0.001$). The greatest improvement was observed in psychosocial health.

Conclusion: This study suggests that an 8-week Family-Centered Nursing Care Model may improve the physical, psychosocial, and overall quality of life of children with childhood Nephrotic Syndrome. Given the single-center, one-group pre-test–post-test design and relatively small sample size, these findings should be interpreted cautiously. Further adequately powered, controlled, and multi-center studies are required to confirm the effectiveness of the intervention and establish its wider applicability in pediatric nephrology care.

Keywords: Childhood Nephrotic Syndrome, Family-Centered pediatric Nursing Care, Quality of Life, Sri Lanka.

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OP3: INC005

ATTITUDES TOWARDS FAMILY INVOLVEMENT IN NURSING CARE AMONG NURSING UNDERGRADUATES IN A SELECTED UNIVERSITY IN SRI LANKA: A DESCRIPTIVE CROSS-SECTIONAL STUDY

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Introduction: Family involvement in patient care is a cornerstone of quality healthcare, as families provide emotional support, assist in care planning, accompany patients to medical appointments, and act as surrogate decision-makers. Nurses' positive attitudes toward family participation are essential for delivering holistic and effective care.

Objective: This study aimed to determine nursing undergraduates' attitudes toward family involvement in nursing care at the University of Sri Jayewardenepura, Sri Lanka.

Methods: A descriptive cross-sectional design was employed with a sample of 156 nursing undergraduates selected through total population sampling. Data were collected using a self-administered questionnaire that included sociodemographic details and the Families' Importance in Nursing Care – Nurses' Attitudes (FINC-NA) instrument. The instrument measured four dimensions: as a conversational partner, family as their own resource, family as a resource in nursing care, and family as a burden. Permission to use the instrument was obtained from the original author, ethical approval was obtained, and informed consent was obtained. Data were analyzed using descriptive statistics and the independent-samples t-test (SPSS version 23), with significance set at $p < 0.05$.

Results: Most participants were female (79.5%), aged 23–25 years (84%), and in their fourth academic year (59%). The FINC-NA scale employed a five-point Likert format (1 = strongly disagree to 5 = strongly agree). Items requiring reverse scoring were adjusted before analysis. Scores of ≥4 on each item were classified as positive attitudes toward family involvement. Overall, the majority of students (85.9%) demonstrated positive attitudes toward family involvement, with a mean score of 100.79 (SD = 10.88). Subscale scores were highest for family as a resource in nursing care (M = 39.62, SD = 4.89), followed by family as a conversational partner (M = 30.83, SD = 4.01), family as its own resource (M = 15.83, SD = 2.44), and family as a burden (M = 14.51, SD = 2.57). An independent-samples t-test revealed a statistically significant difference in total FINC scores between genders, $t(154) = -2.528$, $p = .012$, with females (M = 3.92, SD = 0.39) scoring higher than males (M = 3.71, SD = 0.47).

Conclusions: Nursing undergraduates view family involvement positively, recognizing it as a valuable resource in care provision. These findings support embedding family-centered care principles in nursing curricula, and future research should explore the underlying mechanisms of gender differences and evaluate targeted educational strategies that promote competency development across diverse student populations. Encouraging family participation may support providing holistic care.

Keywords: Attitude, Family involvement, Nursing undergraduates, Sri Lanka

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OP4: INC008

EXPERIENCES OF NOVICE NURSE EDUCATORS REGARDING THEIR ROLE TRANSITION IN SELECTED GOVERNMENT NURSING SCHOOLS IN SRI LANKA

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Introduction: Novice nurse educators (NNEs) need skills, time, support and professional development opportunities to transition from clinical practice to academic roles successfully. While role transition of NNEs has been widely explored in developed countries, evidence from Sri Lanka is sparse.

Objective: To explore the experiences of NNEs regarding their role transition in selected government nursing schools in Sri Lanka

Methods: A qualitative descriptive phenomenological design was employed. The study was conducted in six Government nursing schools representing the Western, Southern and North-Western provinces. Participants with three years or less of teaching experience who were currently working in government nursing schools were purposively recruited. Data collection continued until data saturation was achieved, resulting in 15 participants. Diversity among participants was ensured by varying gender, educational qualifications and clinical experience. Data were collected by semi structured, in-depth interviews and analysed using thematic analysis involving data familiarization, coding, theme identification, review, and refinement. Rigor ensured through systematic coding and thematic analysis, and maintenance of an audit trial.

Results: Most participants were female (n=14), aged 37-46 years, with a mean clinical experience of 10.7 years. Four themes emerged: (1) *Passion for Personal and Professional Development,* including sub-themes: Motivations for becoming an educator, Professional growth, Work-life balance and Frustration towards the transition; (2) *Stressful Transition* including sub-themes: Lack of preparedness, Limited organizational resources, Lack of recognition of clinical experience and Role ambiguity; (3) *Catalysts Supporting Role Transition* including sub-themes: Supports received to the transition and Dealing with stresses; and (4) *Way forward for professional enhancement* including sub-themes: Regularizing recruitment and Empowering nurse educators. Participants described both the challenges and opportunities encountered during transition, highlighting the importance of organizational support, mentorship, and professional development.

Conclusions: This study provides valuable insights into the experience of role transition of NNEs in Sri Lanka. The findings reflect the need for structured recruitment, supportive orientation, mentorship, adequate resources, and greater institutional support to facilitate a smooth transition from clinical practice to academia and strengthen the quality of nursing education.

Keywords: Clinical Nurse, Novice, Nurse educator, Role transition

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OP5: INC009

KNOWLEDGE, ATTITUDES AND FACTORS ASSOCIATED WITH KNOWLEDGE REGARDING CHILDHOOD ASTHMA AMONG PARENTS OF PRIMARY SCHOOL CHILDREN IN A SELECTED SCHOOL IN DENIYAYA EDUCATIONAL ZONE, SRI LANKA

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Introduction: Childhood asthma is a common chronic respiratory condition, and inadequate parental knowledge and misconceptions may affect appropriate care. Evidence on parental knowledge and attitudes towards childhood asthma in Sri Lankan wet-zone areas like Deniyaya remains limited.

Objective: To assess parental knowledge and attitudes towards childhood asthma and determine factors associated with knowledge in a selected primary school in Deniyaya Educational Zone, Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among parents of Grade 1–5 children at Kotapola National School using proportionate stratified random sampling across five grades. One parent per child who understood the questionnaire language and provided written informed consent was selected. Data were collected from 238 participants using a researcher-developed, self-administered, pre-tested questionnaire. Face and content validity were assessed. Knowledge was assessed using 17 items scored 1 for correct, 0 for incorrect/don't know responses. Attitudes were assessed using eight five-point Likert-scale statements with reverse scoring for negative items. Descriptive statistics and Pearson's chi-square test were used, with significance set at $p<0.05$. Ethical approval was obtained from the Research Ethics Committee, Faculty of Allied Health Sciences, University of Sri Jayewardenepura.

Results: Most participants were female (82.8%) and married (99.2%). Of 238 participants, 143(60.1%) had poor knowledge and 95(39.9%) had good knowledge. Knowledge gaps concerned were cardiac complications (73.5%), complete cure with medication (77.7%), and safe school attendance (67.2%). Overall, 136 (57.1%) had negative attitudes, including restrictive views on normal foods (40%) and physical activity (43%). Knowledge was significantly associated with gender ($p=0.026$), educational level ($p=0.037$), and monthly household income ($p=0.003$).

Conclusion: Over half of the parents had poor knowledge and negative attitudes, particularly regarding treatment expectations, school participation, diet, and physical activity. Targeted, context-specific parental education addressing these knowledge gaps and misconceptions is recommended, particularly for parent groups identified with lower education and income.

Keywords: Associated factors, Attitudes, Childhood asthma, Knowledge, Parents

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OP6: INC011

QUALITY OF LIFE AND ASSOCIATED FACTORS AMONG FAMILY CAREGIVERS OF CHILDREN AND ADOLESCENTS WITH CANCER RECEIVING INPATIENT CARE AT APEKSHA HOSPITAL, MAHARAGAMA, SRI LANKA: A CROSS-SECTIONAL STUDY

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Introduction: Childhood cancer places a substantial burden on families and can adversely affect the quality of life (QoL) of family caregivers. Although the incidence of childhood and adolescent cancers is increasing in Sri Lanka, local evidence on QoL of family caregivers and its associated factors in inpatient paediatric oncology settings remains limited.

Objective: To determine the QoL and associated factors among family caregivers of children and adolescents with cancer receiving inpatient care at Apeksha Hospital, Maharagama, Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 243 family caregivers, selected by systematic random sampling from four paediatric wards at Apeksha Hospital. Data were collected using a validated, pre-tested interviewer-administered questionnaire and a self-administered questionnaire. Caregiver QoL was assessed using the World Health Organization Quality of Life instrument (WHOQOL-BREF), and psychological distress was evaluated via the Depression Anxiety Stress Scale (DASS-21). Data were analyzed using SPSS version 27.0, with descriptive statistics, chi-square test and Spearman correlation ($p < 0.05$). Ethical approval was obtained from the Ethics Review Committee, Faculty of Medicine, University of Colombo (Ref. No: EC-25-106), and informed consent was obtained from all participants.

Results: Most caregivers were female (83.1%), unemployed (65.8%), and reported a monthly family income below LKR 50,000 (65.4%). Overall, 30.0% reported low, 56.0% moderate and 14.0% high QoL (mean score 52.46, SD = 12.82). The physical domain had the lowest mean score (49.28, SD = 12.15), while the social domain had the highest (54.80, SD = 21.82). QoL was significantly associated with family type ($p = 0.003$), education level ($p < 0.001$), marital status ($p = 0.047$), chronic illness ($p < 0.001$), monthly income ($\rho = 0.153$, $p = 0.017$), distance to hospital ($\rho = -0.290$, $p < 0.001$), caregiving hours ($\rho = -0.140$, $p = 0.029$), and duration of hospitalization ($\rho = -0.245$, $p < 0.001$). Depression ($\rho = -0.449$, $p < 0.001$), anxiety ($\rho = -0.278$, $p < 0.001$), and stress ($\rho = -0.254$, $p < 0.001$) showed significant negative correlations with QoL.

Conclusions: Family caregivers of children and adolescents with cancer face substantial physical, psychological, and socioeconomic challenges, which are associated with lower QoL. Findings highlight the need for psychosocial support, routine psychological screening, and targeted financial assistance to improve caregiver well-being in paediatric oncology settings.

Keywords: Family caregivers, Paediatric cancer, Quality of Life, Associated factors, Sri Lanka

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OP2: INC004

FACTORS ASSOCIATED WITH AWARENESS, ATTITUDES, AND INTENTIONS TOWARDS ADVANCE CARE PLANNING AND END-OF-LIFE DECISIONS AMONG COMMUNITY-DWELLING OLDER ADULTS

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Introduction:Advance Care Planning (ACP) and end-of-life (EOL) decision-making are essential components of person-centered care for older adults. ACP enables individuals to express future healthcare preferences, while EOL decisions guide terminal care. However, Sri Lankan evidence on factors associated with these concepts remains limited.

Objectives: To identify factors associated with awareness, attitudes, and intentions towards ACP and EOL decisions among community-dwelling older adults in the Homagama Divisional Secretariat area in Colombo District.

Methods:A descriptive cross-sectional study was conducted from May to December 2025 among 422 older adults aged ≥60 years, selected through cluster sampling from ten Grama Niladhari divisions. Data were collected using an investigator-developed, interviewer-administered questionnaire, which was content-validated by experts and pretested. Total scores for awareness, attitudes and intentions were dichotomised at the median (awareness: adequate/inadequate; attitudes and intentions: positive/negative). Data were analyzed using SPSS version 27 with chi-square, likelihood ratio and Spearman correlation tests ($p < 0.05$). Ethical approval was obtained from the Ethics Review Committee, Faculty of Medicine, University of Colombo (Ref. No: EC-25-108).

Results: Nearly half of the participants had adequate awareness (47.9%), 43.1% had positive attitudes and 45.4% had positive intentions towards ACP and EOL decisions. Education level (p=0.003), monthly income (p=0.007), and familiarity with concepts (p=0.025) were significantly associated with awareness. Age (p=0.006), education level (p=0.021), living arrangement (p=0.006), self-rated health (p=0.036), and previous decision involvement (p=0.001) were associated with attitudes, while financial support type (p=0.004) and self-rated health (p=0.004) were associated with intentions. Spearman's correlation showed only weak positive relationships between awareness and attitude ($\rho = 0.109$, $p = 0.025$), awareness and intention ($\rho = 0.114$, $p = 0.019$), and attitude and intention ($\rho = 0.262$, $p < 0.001$).

Conclusion: Awareness, attitudes and intentions towards ACP and EOL decisions were associated mainly with education, income, age, living arrangement and self-rated health. Targeted educational programmes and supportive policies are recommended to improve ACP and EOL decision-making.

Keywords: Advance care planning, attitudes, awareness, end-of-life decisions, factors, intentions, older adults, Sri Lanka

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OP7: INC014

HEALTH-RELATED QUALITY OF LIFE AND ASSOCIATED FACTORS AMONG OVERWEIGHT AND OBESE ADVANCED-LEVEL STUDENTS IN SRI JAYEWARDENEPURA EDUCATIONAL ZONE: A DESCRIPTIVE CROSS-SECTIONAL STUDY

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Introduction: Overweight and obesity are growing public health concerns among adolescents, adversely affecting physical and psychological health and health-related quality of life (HRQoL).

Objectives: To assess HRQoL and its associated factors among overweight and obese Advanced Level (A/L) School students in all National Schools in the Sri Jayewardenepura Educational Zone, Western Province, Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 302 overweight and obese A/L students from all national schools (9) in the Sri Jayewardenepura educational zone identified using WHO BMI-for-age classification. Data were collected using validated, pre-tested self-administered questionnaire, including sociodemographic section and the culturally adapted WHO Quality of Life Bref (WHOQOL-BREF) instrument. Informed consent and assent were obtained as appropriate, Data were analyzed using SPSS 27 and Chi-square test was used to identify the factors associated with HRQoL with a significance level of < 0.05. Ethical approval was obtained from the ethics review committee of Faculty of Medicine, University of Colombo (EC-25-116).

Results: Among 1,074 students screened, 302 (28.11%) were overweight or obese. Unhealthy behaviours included breakfast skipping, frequent consumption of fried foods, fast food and sugary drinks, physical inactivity and insufficient sleep. Body-image concerns included self-consciousness and dissatisfaction. The overall mean HRQoL score was 57.63 (SD = ±7.82), with 79.1% reporting moderate level of HRQoL. The greatest impairments were observed in the physical domain (Mean = 51.14 ±9.76] and psychological domain (Mean = 52.2212.04). Furthermore, level of HRQoL was significantly associated with the school attended ($p < 0.001$, df = 16), family income ($p < 0.001$, df = 8), and BMI category ($p < 0.001$, df = 2).

Conclusions: Overweight and obese A/L students reported moderate level of HRQoL, with physical and psychological impairments. School attended, family income and BMI category were significantly associated with lower HRQoL. These findings support school-based screening and targeted support programmes for students from lower-income families and with higher BMI to improve HRQoL.

Keywords: Adolescents, Overweight, Obesity, Health related quality of life, Factors

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OP8: INC018

PREVALENCE AND FACTORS ASSOCIATED WITH DIABETIC PERIPHERAL NEUROPATHIC PAIN AMONG PATIENTS ATTENDING THE DIABETIC CLINIC AT A SELECTED TERTIARY HOSPITAL IN COLOMBO DISTRICT, SRI LANKA

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Background: Diabetic Peripheral Neuropathic Pain (DPNP) is a common complication of diabetes mellitus (DM) that can adversely affect quality of life (QoL), and physical functioning. Evidence on DPNP in Sri Lanka remains limited.

Objectives: To determine the prevalence and factors associated with DPNP among patients attending the diabetic clinic at a selected tertiary hospital in Colombo District, Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 377 patients attending the diabetic clinic at the National Hospital of Sri Lanka, selected using the consecutive sampling method. Data were collected using interviewer-administered questionnaires, including the Douleur Neuropathique-4 (DN4) questionnaire, and a structured data collection tool containing demographic data, clinical details, and lifestyle factors. A DN4 score of ≥4 indicated DPNP. The DN4 questionnaire was translated into Sinhala and Tamil, culturally adapted, validated for the study population, and pre-tested for clarity and comprehensibility (Cronbach's α = 0.821). Descriptive statistics, chi-square/Fisher's exact tests, and bivariate and multivariable logistic regression analyses were performed using SPSS version 27. The p-value <0.05 was considered statistically significant.

Results: Among the participants, 61.3% were female, 54.9% were aged ≥60 years, 46.5% had diabetes for more than 10 years, 72.4% had poor glycaemic control, and 55.7% reported regular physical activity. The prevalence of DPNP was 56.5%. Chi-square/Fisher's exact tests identified several demographic, clinical, and lifestyle factors significantly associated with DPNP and bivariate logistic regression assessed crude associations. After adjusting for the confounding factors gender (AOR = 0.25, 95% Cl: 0.099-0.65), duration of DM (overall Wald = 11.55, p= 0.003), BMI (overall Wald= 11.12, p= 0.011), hypertension (AOR= 2.76, 95% Cl:1.02-7.64), dyslipidaemia (AOR =0.11, 95%, Cl: 0.05 – 0.28), regular blood glucose screening (AOR = 8.09, 95% Cl: 2.63 – 24.87), pain medication use (AOR= 8.09, 95% Cl: 0.001 – 0.096), and level of physical activity (Overall Wald = 33.02, p < 0.001) remained independently associated with DPNP.

Conclusion: More than half of the participants experienced DPNP, highlighting the importance of routine screening, early detection, and management of modifiable risk factors.

Keywords: Diabetic Peripheral Neuropathic Pain, Diabetes Mellitus, Prevalence, Associated Factors, Sri Lanka

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OP9:INC024

ASSOCIATION BETWEEN JOB SATISFACTION AND RETENTION IN THE NURSING PROFESSION AMONG NURSING OFFICERS AT BASE HOSPITAL HOMAGAMA, SRI LANKA

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Introduction: Job satisfaction is widely recognized as a key factor influencing nurses' intention to remain in the profession. However, there is limited evidence regarding this association among nursing officers in Sri Lanka.

Objective: To assess the association between job satisfaction and retention in the nursing profession among nursing officers at Base Hospital Homagama, Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among nurses at Base Hospital Homagama, Sri Lanka. Total population sampling was used. Data were collected from 165 nurses with at least one year of work experience using a pre-tested (n=20), self-administered questionnaire adapted from a previous study with the author's permission. Composite scores for job satisfaction and retention were calculated based on Likert-scale responses. Simple linear regression was used to examine the association. Data were analyzed using SPSS 26.0, employing descriptive and inferential statistics. Ethical approval was obtained from the Ethics Review Committee, Faculty of Medical Sciences, University of Sri Jayewardenepura (REC/NSG 021), and further permission was obtained to conduct the study.

Results: The response rate was 64.7%. Only 10 (6.06%) nurses reported being fully satisfied with their job, while 61(37.00%) were dissatisfied. Simple linear regression analysis demonstrated a statistically significant positive association between job satisfaction and retention (B= 0.217, β= 0.286, $p<0.001$). The regression model was statistically significant ($F(1,163) = 14.643$, $p < 0.001$) and explained 8.2% of the variance in retention scores ($R^2 = 0.082$). Each one-unit increase in job satisfaction score was associated with a 0.217-unit increase in retention score, indicating that higher job satisfaction was associated with stronger intention to remain in the nursing profession.

Conclusions: Job satisfaction was significantly associated with nurses' intention to remain in the profession. Improving workplace conditions and job satisfaction may strengthen nurse retention. However, the single-hospital setting, cross-sectional design, and use of self-administered questionnaires limit the generalizability and causal interpretation of the findings.

Keywords: Job satisfaction, Nurse retention, Nursing officers, Workforce retention, Sri Lanka.

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OP11: INC029

KNOWLEDGE, ATTITUDES, PRACTICES AND ASSOCIATED FACTORS REGARDING EXCLUSIVE BREASTFEEDING AMONG MOTHERS OF CHILDREN ATTENDING SELECTED CHILD WELFARE CLINICS IN THE IMADUWA MOH AREA

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Background: Exclusive breastfeeding (EBF) during the first six months of life is important for infant growth, immunity and overall health. Despite its benefits, EBF rates remain suboptimal in many developing countries, including Sri Lanka.

Objective: To asses knowledge, attitudes, practices regarding exclusive breastfeeding and identify factors associated with breastfeeding practices among mothers of children attending selected child welfare clinics in the Imaduwa MOH area.

Methods: A descriptive cross-sectional study was conducted among 110 mothers of infants aged 0-6 months who attended selected child welfare clinics in Imaduwa MOH area. Participants were recruited using a convenience sampling method. Data were collected using a pre- tested, structured interviewer administered questionnaire. The questionnaire included sections on socio-demographic characteristics, attitudes, and practices regarding exclusive breastfeeding. Data were analyzed using SPSS version 25.0 with descriptive statistics and chi-square tests, with statistical significance at $p < 0.05$.

Results: The Majority of participants were aged between 18-30 years (52.7%), while 80% (n=88) had an educational level of GCE A/L or above. Adequate knowledge on exclusive breastfeeding was observed among 54.1% of mothers (95% CI: 45.2%-63.5%). However, only 27.2% knew that breastfeeding should begin immediately after birth, while 33.6% correctly identified that no food or fluid other than breast milk should be given during the first six months unless medically required. Positive attitudes were observed among 64% of mothers (95% CI: 54.3%-72.0%), while 46.6% demonstrated good breastfeeding practices (95% CI: 37.3%-55.6%). Breastfeeding practices were significantly associated with maternal age (X^2= 20.68, df=1, p=0.001), educational level (X^2 =51.97, df=1, p=0.001), employment status (X^2 = 32.86, df=1, p=0.023), place of antenatal care (X^2 = 24.21, df=1, p=0.001) and receiving of health education (X^2 = 12.50, df=1, p=0.002).

Conclusions: Although majority had favorable attitudes towards exclusive breastfeeding, their knowledge and practices were not up to the desired level. Therefore, targeted breastfeeding education and counselling should be strengthened to improve mothers' knowledge and practices.

Keywords: Exclusive breastfeeding, knowledge, attitudes, practices, Sri Lanka

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OP10: INC025

KNOWLEDGE, ATTITUDES AND PREVENTIVE PRACTICES RELATED TO THE RISK OF MYOCARDIAL INFARCTION AMONG PATIENTS WITH TYPE 2 DIABETES MELLITUS ATTENDING SELECTED DIABETIC CLINICS IN COLOMBO DISTRICT, SRI LANKA

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Introduction: Myocardial Infarction (MI) is the leading cause of mortality among patients with Type 2 Diabetes Mellitus (T2DM). Patient with T2DM face a two to four fold increased risk of experiencing an acute MI compared to those without diabetes.

Objective: To assess the knowledge, attitudes, and preventive practices related to the risk of MI among patients with T2DM attending selected diabetic clinics in Colombo district, Sri Lanka.

Methods: A descriptive cross - sectional study was conducted among T2DM patients attending selected diabetic clinics in Colombo district. Using systematic random sampling, 413 participants were recruited, and 395 completed the study. Data were collected using a validated, pre-tested interviewer-administered questionnaire comprising Socio-Demographic data, Clinical Data & Anthropometric Measures, Knowledge on Myocardial Infarction, Attitudes and Preventive Practices. Data were analyzed using IBM SPSS 27.0 using descriptive statistics, including frequencies, percentages, means and standard deviations. Ethical approval was obtained from Ethics Review Committee, Faculty of Nursing, University of Colombo.

Results: The majority were female (58.48%) and most of the participants were belonged to 41-60 age category. More than half of participants (57.9%) had been living with T2DM for more than 10 years while 57.4% had positive family history. According to the level of knowledge regarding the risk of myocardial infarction, the highest proportion of participants (45.06%) had good knowledge and (51.1%) had a neutral attitude on MI risk prevention. Further, 45.8% had fair practices while 44.6% participants had poor practices regarding MI risk prevention.

Conclusions: The highest percentage of participants showed moderate to good knowledge of MI and its risk factors. Nevertheless, the majority had a neutral attitude toward MI prevention and most reported fair or poor preventive practices, suggesting that adequate knowledge didn't consistently translate into healthy behavior. Lifestyle changes, early identification of risk and continuous health education are highly recommended to reduce cardiovascular risk among diabetes patients.

Keywords: Cardiovascular Risk Prevention; Knowledge, Attitude, Practices (KAP); Myocardial Infarction; Sri Lanka; Type 2 Diabetes Mellitus

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OP15: INC037

PREVALENCE, DEPENDENCE, AND PATTERNS OF BETEL CHEWING AND THEIR ASSOCIATION WITH SLEEP QUALITY AMONG BUS DRIVERS IN THE COLOMBO DISTRICT, SRI LANKA

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Introduction: Betel chewing remains common in South Asian countries, including Sri Lanka, particularly among bus drivers, who face long, irregular working hours and often chew betel to stay alert. Limited evidence exists on betel chewing dependence, chewing patterns, and their relationship with sleep quality among this group.

Objective: To determine the prevalence, dependence, and patterns of betel chewing and assess their association with sleep quality among bus drivers in the Colombo District, Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 355 bus drivers from three major bus stands (Pettah, Bastian Mawatha, and Kaduwela) in the Colombo District, using convenience sampling. Data were collected using a pretested questionnaire incorporating the Betel Quid Dependence Scale (BQDS) and the Pittsburgh Sleep Quality Index (PSQI). Global PSQI score >5 was defined as poor sleep quality. Data were analyzed in SPSS version 26 using descriptive statistics, chi-square tests, and odds ratios (OR) with 95% CI. The p value <0.05 was considered as significant. Ethical approval was obtained from the Research Ethics Committee, Faculty of Nursing, University of Colombo (ECFON26007).

Results: Among the 355 bus drivers, more than one-third were aged 45–59 years (43.7%), most were married (80.8%), Sinhalese (95.8%), and completed Ordinary Level (64.5%). Betel chewing prevalence was 98.9%, with 85.1% of chewers dependent, 41.4% chewed 3–5 times daily, and 45.4% had chewed for over 10 years. The mean Global PSQI score was 7.07 (SD±2.88), and 70.4% were poor sleepers. Dependent chewers were significantly more likely than non-dependent chewers to report poor sleep quality (75.8% vs. 40.8%; OR = 4.55, 95% CI: 2.43–8.52, $p < 0.001$).

Conclusions: Betel chewing was highly prevalent among bus drivers, and dependence was strongly associated with poor sleep quality. As the design was cross-sectional, causality cannot be inferred. These findings support workplace health promotion programs incorporating betel cessation support, sleep education, and routine screening. Since road safety was not directly assessed, further research is recommended.

Keywords: Betel chewing, Betel quid dependence, Sleep quality, Bus drivers

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OP16: INC038

ASSESSMENT OF ADHERENCE TO ORAL HYPOGLYCEMIC AGENTS, RELATED BARRIERS AMONG PATIENTS WITH TYPE 2 DIABETES MELLITUS ATTENDING THE MEDICAL CLINIC AT EHELIYAGODA BASE HOSPITAL, RATHNAPURA DISTRICT, SRI LANKA

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Introduction: Type 2 diabetes mellitus (T2DM) is a major health issue in Sri Lanka, and effective control mainly depends on adherence to oral hypoglycemic agents (OHAs). In Sri Lanka, limited data exist on adherence to OHAs and associated barriers among patients with T2DM.

Objectives: To assess adherence to OHAs and associated barriers among patients with T2DM attending the medical clinic at Eheliyagoda base hospital, Rathnapura District, Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 219 patients with T2DM attending the Medical Clinic at Eheliyagoda Base Hospital using systematic random sampling. Participants aged ≥18 years with T2DM confirmed by diagnosis or clinic records and taking only OHAs for >6 months were included. Pregnant or breastfeeding women and patients with cognitive or communication impairments were excluded. Data were collected using a pre-tested (N=10), interviewer-administered questionnaire and the Brief Medication Questionnaire (BMQ). Adherence was assessed using BMQ regimen, belief, and recall screens and classified as adherent, probable adherence, probable low adherence, or low adherence. Descriptive statistics and Chi-square tests were used, with Monte Carlo exact tests applied where appropriate. Statistical significance was considered at $p<0.05$. Ethical approval was obtained from relevant authorities.

Results: Among 219 participants with T2DM, the majority were aged 60–69 years (34.7%), female (76.3%), married (84%), and unemployed (73.5%). Hypertension was present in 60.3%, 34.7% had diabetes duration <5 years, and 38.8% had good glycemic control. Only 11% were fully adherent, while 32% showed probable adherence, 31.1% probable low adherence, and 26% low adherence; 57.1% demonstrated suboptimal adherence. Significant barriers included forgetfulness, cost, concerns about long-term side effects, beliefs about medication efficacy, perceived medication burden, experienced side effects, and refill or access barriers ($p<0.05$).

Conclusion: A considerable proportion of participants had suboptimal adherence to OHAs. Modifiable barriers should be addressed through targeted education and improved medication access.

Keywords: Barriers, Medication adherence, Oral Hypoglycemic Agents, Sri Lanka, Type 2 Diabetes Mellitus

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OP12: INC030

INFORMATION LITERACY SKILLS FOR EVIDENCE-BASED PRACTICE AMONG NURSING STUDENTS IN THE COLLEGES OF NURSING, WESTERN PROVINCE, SRI LANKA

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Introduction: Evidence-based practice (EBP) in nursing is essential for bridging the gap between research and clinical practice. However, inadequate foundational education and process-related barriers have hindered EBP adoption in Sri Lanka. As future nursing professionals, students need to develop information literacy skills to effectively implement EBP.

Objective: To assess information literacy skills for evidence-based practice (EBP) and their associated factors among nursing students at Colleges of Nursing in the Western Province, Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 350 nursing students from three Colleges of Nursing in the Western Province, Sri Lanka, using stratified random sampling. Data were collected using a researcher-developed, pretested, and validated self-administered questionnaire consisting of sociodemographic data and a six-item information literacy tool. Scores were categorized as unfavorable (0–40%), moderately favorable (41–70%), and favorable (>70%). Data were analyzed using descriptive and inferential statistics in SPSS version 26.0. Ethical approval was obtained from the Ethics Review Committee, Faculty of Medicine, University of Colombo.

Results: The response rate was 93% (n = 326). The majority of participants were female (96.1%), with a mean age of 25.36 ± 1.00 years; 43.7% were in the third academic year. Overall, 67% had favorable information literacy skills for EBP. Textbooks were used frequently or daily by 68.9% of participants, while nursing tutors or clinical instructors were consulted daily by 53.7%. Although most participants identified the Boolean operators AND (60.8%), OR (55.3%), and NOT (50.5%), only 28.4% recognized proximity operators. Furthermore, 59.9% rated the application of EBP recommendations in clinical practice as very or extremely important. The training school ($p < 0.001$) and English proficiency ($p = 0.014$) were associated with information literacy skills.

Conclusions: Nursing students had favorable information literacy skills on EBP, but advanced search skills such as Boolean operators were limited, highlighting the need for improved health literacy related training on EBP.

Keywords: Evidence-based practice, Information literacy, Nursing students

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OP13: INC031

LEVEL OF PERCEIVED SOCIAL SUPPORT AND ASSOCIATED FACTORS AMONG PRIMARY CAREGIVERS OF PEDIATRIC CANCER PATIENTS AT APEKSHA HOSPITAL, SRI LANKA.

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Background: Primary caregivers of children and adolescents with cancer are often faced with a greater burden that disrupts their daily routines and well-being. Social support serves as a coping resource for caregivers to overcome emotional distress and other challenges associated with cancer diagnosis.

Objective: This study aimed to assess the levels of perceived social support and associated factors among primary caregivers of pediatric cancer patients at Apeksha Hospital, Sri Lanka.

Method: A descriptive cross-sectional study was conducted among 294 primary caregivers of pediatric patients diagnosed with any cancer (≥ 1-month post-diagnosis), who were consecutively recruited from pediatric oncology wards and clinics. Ethical approval was obtained from the Research Ethics Committee, Faculty of Nursing, University of Colombo. Data were collected using a two-section interviewer-administered questionnaire assessing sociodemographic characteristics and perceived social support. Perceived social support was assessed using validated Sinhala and Tamil versions (Cronbach's α=0.911) of the Multidimensional Scale of Perceived Social Support (MSPSS). Descriptive and inferential statistical analyses (Chi-square and Fisher Freeman Halton) were performed using SPSS version 27.0, with *p*-value <0.05 considered significant.

Results: The majority of caregivers were females (79.9%)**,** mothers (74.8%) and over 30 years old (92.2%). Mainly driven by high support from significant others (87.4%) and family (79.9%), 63.3% of caregivers had high total social support (Median=5.583, IQR= 4.833-6.083). Gender (p=0.006) was associated with significant other support. Family support was significantly associated with religion (p<0.001), education (p=0.007), and the caregivers' chronic illness (p=0.036). Gender (p=0.021), relationship to the child (p=0.017), employment (p<0.001) and income (p<0.001) were significantly associated with friends' support. Total social support showed associations with relationship to the child (p<0.001), religion (p<0.001), education (p<0.001), income (p<0.001), and caregiver's chronic illness (p=0.001).

Conclusion: Primary caregivers receive adequate support from family and significant others, while friends' support remains limited. Strengthening broader social networks through peer-led support groups and policy-mandated routine screenings will ensure overall family resilience and caregiver well-being.

Keywords: MSPSS, Perceived Social Support, Primary Caregivers

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OP18: INC042

AWARENESS OF GENETIC DISORDERS AND GENETIC SCREENING, AND ATTITUDES TOWARD GENETIC SCREENING AMONG MOH-BASED PRECONCEPTION CLINIC ATTENDEES IN COLOMBO, SRI LANKA

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Background: Public awareness of genetic disorders and screening is vital for preventing inherited diseases through informed reproductive decision-making. Despite growing genetic services in Sri Lanka, evidence on awareness and attitudes among individuals at pre-conceptional ages remains limited.

Objectives: This study assessed awareness of genetic disorders and screening tests, attitudes toward genetic screening, and their association with socio-demographic characteristics among preconception clinic attendees in the Colombo District, Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 422 individuals planning pregnancy, recruited by consecutive sampling from preconception clinics across 18 MOH areas in the Colombo District, following ethical approval from the Research Ethics Committee, Faculty of Nursing, University of Colombo. Data were collected using a validated interviewer-administered questionnaire; awareness scores were categorized as poor (<40%), moderate (40–69%), or good (≥70%) of the maximum obtainable score, and attitude scores as negative (<60%), neutral (60–74%), or positive (≥75%). Chi-square, Mann–Whitney U, Kruskal–Wallis tests, and descriptive statistics were used for analysis.

Results: Among the 422 participants (mean age 28.5 years, 58.3% female, mostly married and employed), 44.3% showed good awareness, 37.0% moderate, and 18.7% poor (median score 13, IQR: 9–16/19). Just over half (51.2%) reported positive attitudes (median score 38, IQR: 34–40/50). Education and age were significantly associated with awareness and attitudes ($p < 0.05$), whereas gender and income weren't; higher education predicted greater awareness and more positive attitudes.

Conclusions: Although attitudes toward genetic screening were generally positive, awareness remained moderate. Strengthening health education and integrating genetic counselling into preconception services may improve genetic literacy and support reproductive decision-making.

Keywords: Genetic disorders, Genetic screening, Awareness, Attitudes, Preconception

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OP19: INC043

ASSOCIATION BETWEEN SELECTED PSYCHOSOCIAL FACTORS AND FUNCTIONAL DECLINE AMONG OLDER ADULTS IN A SELECTED DIVISIONAL SECRETARIAT AREA IN COLOMBO DISTRICT, SRI LANKA

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Introduction: Functional decline is defined as a significant reduction in an adult's ability to perform basic and instrumental activities of daily living (BADLs and IADLs).

Objective: This study aimed to determine the association between selected psychosocial factors (geriatric depression, loneliness, and perceived social support) and functional decline among community-dwelling older adults.

Methods: An unmatched case-control study was conducted with a 1:1 ratio, comprising 326 randomly selected community-dwelling older adults (163 cases and 163 controls) aged 60 years and older from 10 Grama Niladhari divisions. Cases were older adults who demonstrated functional decline over the preceding 1 year, defined as a reduction of ≥20 points on the Barthel index or ≥2 points on the Lawton IADL scale. Controls had no such decline. Data were collected using an interviewer-administered questionnaire. Chi-square and binary logistic regression were used to identify the associations using SPSS 27. Statistical significance was set at 0.05.

Results: In this study sample, 62.6% were female (65.6% cases; 59.5% controls). Median age of the sample was 75 (IQR=69-80). Partners were available for 69.9%. Median scores for Geriatric Depression Scale 15 (GDS-15), Revised UCLA Loneliness Scale (R-UCLA Loneliness), and Multidimensional Scale for Perceived Social Support (MSPSS) were respectively 5 (IQR=3-9), 45 (IQR=39-50), and 5.33 (IQR=4.58-6). Geriatric depression was prevalent in 66.3% of cases and 51.5% of controls. Among cases, 33.7% had moderate loneliness, and 63.8% had high loneliness. Corresponding proportions among controls were 44.2% and 48.5%, respectively. The prevalence of high perceived social support was 58.6% in cases and 54.6% in controls. Both Geriatric depression (P = 0.007, OR = 1.84; 95% CI [1.18-2.88]) and loneliness (P = 0.005, OR = 1.87; 95% CI [1.20-2.91]) had a significant association with functional decline. Perceived social support (P = 0.144, OR = 0.719; 95% CI [0.462-1.119]) was not significantly associated with functional decline.

Conclusions: Geriatric depression and loneliness were significantly associated with functional decline among community-dwelling older adults, whereas perceived social support was not significantly associated. These findings highlight the importance of screening for depression and loneliness as part of comprehensive geriatric assessment.

Keywords: Functional decline, risk factors, psychological, social, geriatric

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OP20: INC046

PSYCHOLOGICAL WELL-BEING AND ASSOCIATED FACTORS AMONG THE INSTITUTIONALIZED ELDERLY POPULATION IN GALLE DISTRICT: A CROSS-SECTIONAL STUDY

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Introduction: Aging is a natural process; however, psychological decline among older adults is a growing concern due to its impact on independence and quality of life. The institutionalized elderly population is a socially neglected, vulnerable group with higher dependency due to social isolation and comorbidities.

Objective: This study aimed to identify psychological well-being and associated factors among institutionalized older adults in Galle District.

Methods: A descriptive cross-sectional study was conducted among 185 randomly selected older adults residing in registered residential care homes. Psychological well-being was assessed using an interviewer-administered Sinhala-validated Depression Anxiety Stress Scale-21 (DASS-21). Total scores were multiplied by two according to standard scoring, giving a possible score range of 0-126. Higher scores indicate greater depression, anxiety, and stress. Older adults with hearing or visual impairments, psychiatric illnesses, or critical illnesses were excluded. Data were analysed using SPSS version 25. Descriptive statistics and chi-square tests were used ($p<0.05$). Ethical approval was obtained from the Ethics Review Committee of the Faculty of Allied Health Sciences, University of Ruhuna, Social Welfare Services for elders in Galle. Written informed consent was obtained from all participants.

Results: The mean age was 71.24 years (SD ± 5.40), ranging from 60-80 years. The majority were female (72.4%), Sinhalese (92.4%), and Buddhist (72.4%); 48.6% were married; 93% had no current income; and 51.9% stayed at the institution for less than five years. The mean total DASS-21 score was 38.31 (SD ± 18.31). Symptoms of depression, anxiety, and stress were common, and moderate depression, moderate anxiety, and mild stress were the most common psychological conditions observed. Depression and anxiety were significantly associated with age ($p=0.001$ and $p=0.004$, respectively) and medical condition ($p=0.007$ and $p=0.018$, respectively), while stress was significantly associated with age ($p=0.037$), previous employment ($p=0.006$), and nutritional level ($p=0.013$).

Conclusions: Psychological impairment was prevalent among institutionalized older adults. Regular monitoring of psychological well-being, encouraging family visits and communication, and training staff to identify psychological distress are recommended.

Keywords: DASS-21, Depression, Institutionalized elderly care, Older adults, Psychological well-being

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PP1: INC003

KNOWLEDGE AND PRACTICES REGARDING BREASTFEEDING TECHNIQUES AMONG PRIMIPAROUS MOTHERS IN GERMAN - SRI LANKA FRIENDSHIP HOSPITAL FOR WOMEN, GALLE - A DESCRIPTIVE CROSS-SECTIONAL STUDY

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Introduction: Breastfeeding is vital for infant growth and maternal well-being, but first-time mothers often face technique-related difficulties affecting breastfeeding outcomes.

Objective: To assess the knowledge and practices regarding breastfeeding techniques, and their associated factors, among primiparous mothers admitted to the German-Sri Lanka Friendship Hospital for Women, Galle.

Methods: A hospital-based descriptive cross-sectional study was conducted among 415 primiparous mothers in the in the hospital's postnatal wards. Mothers who were unable to breastfeed, or whose babies were preterm, had congenital anomalies or were admitted to the NICU, were excluded. Convenience sampling was used. Data were collected using a pretested, interviewer-administered questionnaire assessing socio-demographic characteristics, breastfeeding knowledge and practices. Ethical approval was obtained from the Ethical Review Committee, Faculty of Allied Health Sciences, University of Ruhuna (Ref. No: 2024.09.451), and informed consent was obtained from all participants. Data were analyzed using SPSS version 25, employing descriptive statistics and chi-square tests, with statistical significance set at $p < 0.05$.

Results: Among 415 primiparous mothers, 55.2% demonstrated moderate knowledge (total score 50–75%) regarding breastfeeding techniques, while 24% and 21% showed high (total score >75%) and low knowledge levels (total score <50%), respectively. Awareness of breastfeeding benefits (94.5%) and exclusive breastfeeding for six months (94.7%) was high. However, gaps were identified regarding on-demand feeding (50.0%), signs of effective suckling (55.7%), and breastfeeding positions (48.9%). Over half of the mothers (56.0%) reported good breastfeeding practices (total score >75%), including correct infant positioning (56.6%) and burping after feeds (71.6%) while 38% and 6% showed moderate (total score 50%– 75%) and low practice levels (total score <50%), respectively. Maternal discomfort, particularly back or shoulder pain (55.4%) and nipple pain (32.5%), was common. Knowledge level was significantly associated with age (χ^2 =19.000, p=0.004), educational status (χ^2 = 84.531, p<0.001), employment status (χ^2 =11.413, p=0.022), and monthly income (χ^2 =25.844, p<0.001). Practice levels were significantly associated with age (χ^2 =14.622, p=0.023), educational status (χ^2 =66.322, p<0.001), and monthly income (χ^2 =23.774, p=0.001).

Conclusions: Over half of the primiparous mothers reported good breastfeeding practices, although knowledge was mostly at a moderate level. Maternal age, education and income were significantly associated with both knowledge and practices, while employment was associated with knowledge only. Enhanced antenatal and postnatal education, including practical guidance and support, is recommended to improve breastfeeding outcomes.

Keywords: Breastfeeding techniques, knowledge, practices, primiparous mothers, exclusive breastfeeding

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PP2: INC007

AWARENESS, ATTITUDES AND THE ASSOCIATED FACTORS TOWARD CARE OF DYING PATIENTS AMONG NURSES AT THE APEKSHA HOSPITAL, MAHARAGAMA, SRI LANKA: A CROSS-SECTIONAL STUDY

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Introduction: Nurses' knowledge and attitudes toward caring for dying patients directly determine the quality of end-of-life care. Despite Sri Lanka recording over 19,000 cancer deaths annually, limited published evidence has examined these dimensions among nurses at Apeksha Hospital, the sole national cancer institute in Sri Lanka.

Objective: This study assessed awareness, attitudes, and the associated factors related to the care of dying patients among nurses at the Apeksha Hospital, Maharagama, Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 245 nurses at the Apeksha Hospital, recruited by consecutive sampling following ethical approval from the Ethics Review Committee, Faculty of Medicine, University of Colombo (Approval No. EC-25-122). Awareness was measured using a contextually modified 21-item Palliative Care Quiz for Nursing (PCQN), which underwent content validation, pretesting, and was classified using Bloom's criteria as good (≥80%), moderate (60–79%), or poor (<60%). Attitudes were assessed using the validated 30-item Frommelt Attitude Toward Care of the Dying (FATCOD) scale (range 30–150; higher scores indicating more positive attitudes). Data were analyzed using IBM SPSS version 27; Spearman's correlation examined the relationship between awareness and attitude.

Results: The mean awareness score was 12.01 ± 2.28 of 21, equivalent to 57.2% of the maximum possible score. Poor awareness was found in 60.8% of nurses, while only 3.7% had good awareness. Critical misconceptions included the belief that opioid addiction is a major risk with long-term morphine use (60.0% incorrect) and that placebos are appropriate for some pain (69.8% incorrect). The mean FATCOD score was 101.59 ± 12.34 of 150; 51.4% of nurses demonstrated less positive attitudes. Most nurses expressed support for family-centered care and honest disclosure, yet 40.4% were uncomfortable discussing impending death and 46.5% hoped patients would die during their absence. Awareness correlated weakly but significantly with attitudes ($r_s = 0.201$, $p = 0.002$).

Conclusions: Substantial knowledge deficits and challenges in attitudes toward end-of-life care persist among nurses at the National Cancer Institute of Sri Lanka. The correlation between awareness and attitude suggests these domains require simultaneous but distinct educational strategies.

Keywords: End-of-life care; awareness; attitudes; oncology nursing; Sri Lanka

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PP3: INC010

HEALTH-RELATED QUALITY OF LIFE AND PSYCHOLOGICAL DISTRESS AMONG INSTITUTIONALIZED OLDER ADULTS WITH POLYPHARMACY IN COLOMBO DISTRICT, SRI LANKA

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Introduction: Population aging has increased multimorbidity and polypharmacy among institutionalized older adults. Polypharmacy (≥5 medications) poses risks, yet local evidence on health-related quality of life (HRQOL) and psychological distress is limited.

Objective(s): To assess HRQOL and psychological distress, operationalized as depression, anxiety and stress symptoms, and examine their associations with medication burden and selected sociodemographic factors among institutionalized elderly with polypharmacy in Colombo District, Sri Lanka.

Methods: An analytical cross-sectional study was conducted among 201 residents aged ≥60 years from 10 elderly care homes. Data was collected from August to October 2025. Sample size was determined using a single-proportion formula with finite population correction, and proportionate stratified random sampling was used. All participants used ≥5 medications; medication burden was categorized as low polypharmacy (5–9 medications) or high polypharmacy (≥10 medications) from medication records and a structured checklist. HRQOL was measured using WHOQOL-BREF and depression, anxiety and stress symptoms using DASS-21. Descriptive statistics, chi-square tests, Spearman correlation and regression analyses were used to examine associations with medication burden; causal inference was not intended. Ethical approval was obtained from the Ethics Review Committee, Faculty of Medicine, University of Colombo with Reference Number EC-25-107, and informed consent was obtained from all participants.

Results: Out of 201 participants, 66.2% had low and 33.8% high polypharmacy. Moderate HRQOL was reported by 96.5%; 82.1% had at least mild depressive symptoms, 64.7% anxiety symptoms and 45.3% stress symptoms. Higher medication burden was associated with lower HRQOL (χ^2=7.24, p=0.027; ρ=−0.449, p<0.001) and greater psychological distress (DASS-21 total score; χ^2= 85.03, p<0.001; ρ=0.785, p<0.001). Regression analyses showed significant associations with HRQOL (β=−0.41, p<0.001) and distress scores (β=0.78, p<0.001).

Conclusion: Among institutionalized older adults with polypharmacy, higher medication burden was associated with poorer HRQOL and greater depression, anxiety and stress symptom burden. These findings support routine medication review and psychological screening in elderly care homes. As the study was cross-sectional and limited to selected care homes in Colombo, causality cannot be inferred and generalizability may be limited.

Keywords: Elderly with polypharmacy, Health-Related Quality of Life, Psychological Distress, Elderly Care Homes, Sri Lanka

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PP5: INC013

PREVALENCE OF DEPRESSIVE SYMPTOMS AND ASSOCIATED FACTORS AMONG COUPLES SEEKING FERTILITY CARE: A HOSPITAL-BASED CROSS-SECTIONAL STUDY IN JAFFNA

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Introduction: Subfertility is a significant reproductive health problem that is accompanied by deep emotional distress and social pressure. In Sri Lanka, social and cultural expectations surrounding fertility may further contribute to strained marital relationships and breakdown.

Objective: To determine the prevalence of depressive symptoms and identify factors associated with depressive symptoms among couples seeking fertility care at Teaching Hospital, Jaffna.

Methods: A descriptive cross-sectional study was conducted among 150 participants comprising 75 couples attending the Subfertility Clinic at Teaching Hospital, Jaffna. Participants were recruited consecutively; partners were interviewed separately. Depressive symptoms were assessed using the validated Tamil translation of the Patient Health Questionnaire-9 (PHQ-9; min-max score 0-27). Scores were categorized as none/minimal (≤4), mild (5–9), moderate (10–14), moderately severe (15–19), and severe (≥20) depressive symptoms. Chi-square tests were used to assess associations between depressive symptom category and selected factors after merging PHQ-9 categories into no/mild depressive symptoms (0–9) and moderate-to-severe depressive symptoms (10–27). Statistical significance was set at $p<0.05$. The study was approved by the Ethics Review Committee, Faculty of Medicine, University of Jaffna (J/ERC/25/173/DR/0106).

Results: Among 150 participants, most were Tamil (78.7%) and had primary-level education or less (females 53.3%; males 66.7%). Overall, 90.0% of participants had at least mild depressive symptoms (mild 15.3%, moderate 36.7%, moderately severe 26.0%, severe 12.0%). Depressive symptom category was significantly associated with age ($p=0.001$), sex ($p=0.017$), educational attainment ($p=0.001$), duration of subfertility ($p=0.002$), type of subfertility ($p=0.024$), and current treatment type ($p=0.015$). Participants aged ≥35 years, females, lower educational attainment, longer duration of subfertility, primary subfertility, and those undergoing IVF/ICSI were more likely to have moderate-to-severe depressive symptoms. No significant associations were observed with ethnicity, occupation, or individual income ($p>0.05$).

Conclusions: A high proportion of individuals seeking fertility care at Teaching Hospital, Jaffna report depressive symptoms. Incorporating routine assessment of depressive symptoms and appropriate psychological support and counselling into fertility care may help to address the emotional needs of couples undergoing fertility treatment**.**

Keywords: Subfertility, depressive symptoms, fertility care, couples, mental health.

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PP7: INC016

KNOWLEDGE, ATTITUDES, AND PRACTICES OF NURSES REGARDING NUTRITIONAL MANAGEMENT OF TYPE 2 DIABETES MELLITUS IN SELECTED TEACHING HOSPITALS IN THE WESTERN PROVINCE SRI LANKA.

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Introduction: Type 2 Diabetes Mellitus (T2DM) is a major and growing public health challenge in Sri Lanka. Effective nutritional management is a cornerstone of diabetes care. Nurses, being the largest healthcare workforce, play a critical role in supporting patients' dietary practices.

Objective: To assess nurses' knowledge, attitudes, and practices regarding the nutritional management of T2DM and to determine their associations with selected demographic and work-related factors in selected teaching hospitals in the Western Province Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 320 nurses from three teaching hospitals in the Western Province, Sri Lanka. Proportionate stratified random sampling followed by simple random sampling was used. Data were collected using a structured, self-administered questionnaire. Face and content validity were assessed and the questionnaire was pre-tested among 32 nurses. Cronbach's alpha coefficients were 0.78, 0.74, and 0.76 for KAP domains, respectively. KAP levels were categorized using modified Bloom's cut-offs as low/negative/poor (<60%), moderate/neutral/average (60–79%) and high/positive/good (≥80%), respectively. Chi-square tests assessed associations, with $p < 0.05$ considered statistically significant. Ethical approval was obtained from the Ethics Review Committee, Faculty of Medicine, University of Colombo (Ref. No: EC-25-110).

Results: Knowledge levels were predominantly low, with 67.2% scoring in the low range (mean = 4.61 ± 1.60). Less than half (48.1%) showed positive attitudes. The largest group (42.5%) had average practices (mean = 21.36 ± 4.85). Educational level ($p = 0.016$) and years of experience ($p = 0.024$) were significantly associated with knowledge level. Attitude levels varied significantly by hospital ($p = 0.001$) and experience ($p < 0.001$). Practice levels showed significant associations with hospital ($p = 0.001$), educational level ($p < 0.001$), experience ($p = 0.002$), and participation in training ($p = 0.019$).

Conclusion: Although nearly half of the nurses had positive attitudes, two-thirds had low knowledge of the nutritional management of diabetes.Targeted training, strengthened nursing curricula, and supportive hospital environments are recommended to improve nutritional care in diabetes management.

Keywords: Attitude, Knowledge, Nurses, Nutritional Management, Practices, Type 2 Diabetes Mellitus.

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PP8: INC020

PUBLIC AWARENESS OF PALLIATIVE CARE AND ASSOCIATED FACTORS AMONG ADULTS IN THE COLOMBO DISTRICT, SRI LANKA

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Introduction: Palliative care improves the quality of life of individuals with serious illnesses and supports patients and families throughout the illness trajectory. Public awareness is essential for the acceptance and appropriate utilization of palliative care services. However, evidence regarding public awareness in Sri Lanka, particularly in the Colombo District, remains limited.

Objective: To assess public awareness of palliative care and identify associated factors with awareness among adults in selected areas of the Colombo District, Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 432 adults aged ≥18 years in five randomly selected urban and semi-urban Grama Niladhari divisions in the Colombo District from March to October 2025. Voter lists obtained through the respective administrative systems served as the sampling frame. Participants were selected using systematic random sampling with an interval of 44. Data were collected using an interviewer-administered questionnaire comprising 21 awareness items, developed from relevant literature and validated by three palliative care experts. Internal consistency was acceptable (Cronbach's alpha = 0.739). No explanatory information about palliative care was provided before assessment. Ethical approval was obtained from the Ethics Review Committee of the Faculty of Medicine, University of Colombo, and informed consent was obtained. Data were analyzed using SPSS version 27, descriptive statistics, and chi-square tests, with significance set at $p<0.05$.

Results: Among the 432 participants, only 30 participants (6.9%) reported prior awareness of palliative care. Awareness levels were good (46.7%), satisfactory (26.7%), excellent (20.0%), and poor (6.7%) among those 30 participants. Educational level was the only factor significantly associated with prior awareness ($p<0.05$). Participants generally demonstrated good understanding of palliative care principles and services.

Conclusion: Public awareness of palliative care was low. Educational level was significantly associated with prior awareness. Targeted public health education initiatives are needed to improve public awareness and understanding of palliative care services in Sri Lanka.

Keywords: Health education, Palliative care, Public awareness, Sri Lanka

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PP10: INC023

EXPLORING FACTORS INFLUENCING MENSTRUAL HYGIENE MANAGEMENT AMONG NURSING UNDERGRADUATES OF THE UNIVERSITY OF PERADENIYA

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Introduction: Menstrual hygiene management is a critical aspect of women's health and well-being. Nursing undergraduates are a unique group because they have dual responsibilities of attending lectures and participating in clinical training in hospital settings. They may experience various cultural, social, personal, and institutional challenges related to menstrual hygiene management. Understanding these factors is important to improve support systems and facilities in universities and clinical settings.

Objective: To explore factors influencing menstrual hygiene management among nursing undergraduates at the University of Peradeniya, Sri Lanka.

Methodology: A descriptive qualitative exploratory study was used. Nursing undergraduates from the University of Peradeniya were selected using purposive sampling. Ten female nursing undergraduates from the second to fourth academic years, aged between 24-28 years participated. Data were collected through semi-structured interviews conducted in English, Sinhala, or Tamil according to participant's preference. Audio recordings were transcribed verbatim and analyzed using reflexive thematic analysis. Ethical clearance was obtained from the ethical review committee, Faculty of Allied Health Sciences, University of Peradeniya. (ERC number – AHS/ERC/2025/197.) To ensure the trustworthiness of the findings, the study incorporated the four criteria of credibility, dependability, confirmability, and transferability.

Results: Six themes were identified: personal factors, impact of menstruation on academic and clinical activities, coping strategies, cultural and religious beliefs, institutional barriers, and recommendations. They experienced physical, emotional, financial, cultural, and institutional challenges. But participants demonstrated good awareness. These challenges affected their menstrual hygiene practices, academic work, and clinical training. Peer support and self-care strategies helped participants to manage menstrual hygiene. Participants suggested the need for improved facilities, supportive policies, and increased institutional awareness.

Conclusion: Menstrual hygiene management is shaped by personal, social, cultural and institutional factors. Findings highlight the need for supportive policies, improved facilities, and culturally sensitive interventions in university and hospital settings. Further multi-institutional studies are recommended to strengthen the evidence base and improve the findings.

Keywords: Menstrual hygiene management, nursing undergraduates, qualitative research, thematic analysis

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PP11: INC026

INTERRELATIONSHIPS AMONG DEATH ANXIETY, EMOTIONAL INTELLIGENCE, AND COPING STRATEGIES AMONG NURSES AT APEKSHA HOSPITAL, SRI LANKA

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Background: Oncology nurses frequently encounter terminal illness and patient death, which can affect their psychological well-being. Understanding the relationships among death anxiety, emotional intelligence, and coping strategies is essential, to pay attention to establishing and strengthening programs for psychological wellbeing of nurses, while maintaining high-quality patient care.

Objective: To assess the interrelationships among death anxiety, emotional intelligence, and coping strategies among nurses at Apeksha Hospital, Sri Lanka.

Methods: A descriptive correlational study was conducted among 254 nurses working at Apeksha Hospital, Maharagama. Participants were selected using proportionate stratified random sampling, to ensure balanced representation from all the units and wards. Data were collected using a self-administered questionnaire consisting of a demographic questionnaire, Templer Death Anxiety Scale, Genos Emotional Intelligence Scale, and Brief COPE Scale. Data were analyzed using SPSS version 27, using Spearman's rank correlation. ($p<0.05$)

Results: Majority of the participants were female (89.4%). Majority demonstrated moderate levels of death anxiety and high levels of emotional intelligence. Among the 14 sub-scales of coping strategies, active coping (62.8 %), acceptance (62.6%), use of emotional support (52.6%), and self-distraction (48.4%) reported as most prevalently used coping strategies. Death anxiety showed significant weak positive correlations with active coping ($\rho=0.204$, $p=0.001$), venting ($\rho=0.169$, $p=0.007$), and self-blame ($\rho=0.146$, $p=0.020$). Emotional Intelligence has shown significant positive correlation with active coping ($\rho=0.383$, $p<0.001$), use of emotional support ($\rho=0.267$, $p<0.001$), use of instrumental support ($\rho=0.170$, $p=0.007$), positive reframing, ($\rho=0.226$, $p<0.001$), planning ($\rho=0.251$, $p<0.001$), acceptance ($\rho=0.433$, $p<0.001$), religion ($\rho=0.261$, $p<0.001$), and self-blame ($\rho=0.334$, $p<0.001$).

Conclusion: The findings indicate that emotional intelligence is positively associated with adaptive coping and negatively associated with maladaptive coping. These findings highlight the importance of emotional intelligence in managing stress and promoting effective coping. Therefore, we are recommending healthcare institutions to support to improve emotional intelligence, adaptive coping strategies and facilitate psychological support to enhance nurses' emotional well-being and stress management.

Keywords: Death Anxiety, Emotional Intelligence, Coping Strategies, Oncology nursing

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PP12: INC027

KNOWLEDGE, ATTITUDES AND PRACTICES REGARDING FIRST AID MANAGEMENT OF COMMON WORKPLACE INJURIES AMONG ELECTRICITY DISTRIBUTION WORKERS IN KEGALLE DISTRICT

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Introduction: Workplace injuries are a major occupational health concern, particularly among workers in the electricity sector who are exposed to hazards such as electrical burns, falls, cuts, and muscle strain. Prompt and appropriate first aid can reduce injury severity, prevent complications, and improve recovery. However, limited evidence is available regarding the knowledge, attitudes, and practices related to first aid management among electricity workers in Sri Lanka.

Objective: To determine the knowledge, attitudes, and practices regarding the first aid management of common workplace injuries among the workers at Electricity Distribution workers in Kegalle District.

Methods: A descriptive cross-sectional study was conducted. Proportionate stratified random sampling was used, and data were collected from 190 participants using a pre-tested, self-administered questionnaire. Face and content validity of the questionnaire was assessed by experts. The median value was used as the cut-off to categorize knowledge, attitude, and practice outcomes. Practices represented self-reported practices. Descriptive statistics and Pearson's chi-square test were used to examine associations between KAP outcomes and demographic and training-related factors. P value less than 0.05 was considered as significant.

Results: Among participants, 58.9% were aged ≥40 years, 86.8% were male, and 80.0% were field workers. The percentage of 58.4 demonstrated good knowledge, 54.7% had a positive attitude, and 66.8% reported good practices. A knowledge gap concerned severe bleeding management, with 57.4% correctly identifying direct pressure. Practice gaps included providing first aid to an injured coworker (47.9%) and regularly checking first aid supplies (21.6%). Job roles were significantly associated with knowledge (p=0.001) and attitude (p=0.003), age with knowledge (p=0.003), and gender with attitude (p=0.022) and practice (p=0.009). Although 95.3% had received first aid training, previous training was not significantly associated with knowledge, attitude, or practice.

Conclusion: More than half of the workers demonstrated good knowledge, positive attitudes, and good first aid practices regarding first aid management of common workplace injuries. However, gaps remain in some areas of first aid management. Regular refresher training and practical skill-based first aid programs are recommended to strengthen workers' first aid competence and improve workplace emergency preparedness.

Keywords: First aid, Workplace injuries, Knowledge, Attitudes, Practices

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QUALITY OF LIFE AND ITS ASSOCIATED FACTORS AMONG NURSES WORKING IN SELECTED HOSPITALS IN TRINCOMALEE DISTRICT, SRI LANKA

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Introduction: Quality of life (QOL) among nurses is an important determinant of workforce well-being, quality of patient care, and healthcare system performance. However, evidence on nurses' QOL and its associated factors in the Trincomalee District remains limited.

Objectives: This study aimed to assess QOL and its associated factors among nurses working in selected hospitals in the Trincomalee District.

Methods: A descriptive cross-sectional study was conducted among 175 registered nurses selected using stratified random sampling from General Hospital Trincomalee, Base Hospital Muthur, and Base Hospital Kinniya. Data were collected using a self-administered, researcher-developed, pre-tested questionnaire and the WHOQOL-BREF. The WHOQOL-BREF has demonstrated good internal consistency, with Cronbach's alpha values ranging from 0.70 to 0.90 across its four domains. Descriptive statistics and Chi-square tests were used, with $p < 0.05$ considered statistically significant. Ethical approval was obtained from the Research Ethics Committee, Faculty of Allied Health Sciences, University of Sri Jayewardenepura.

Results: Overall, 65.7% of participants had moderate QOL, while 22.3% and 12.0% had low and high QOL, respectively. The social domain had the highest mean score (66.12 ± 18.63), while the environmental domain had the lowest (55.80 ± 17.22). Overall QOL was significantly associated with gender ($p = 0.008$), self-reported work-related stress ($p = 0.018$), self-reported anxiety and depressive feelings related to work ($p = 0.004$), family support ($p = 0.007$), friend support ($p = 0.034$), and self-reported sleep quality ($p < 0.001$).

Conclusions: Most nurses reported moderate QOL. Several psychosocial factors were significantly associated with overall QOL. The findings may help inform workplace strategies to support nurses' psychological well-being, social support, and healthy sleep practices.

Keywords: Nurses, Psychosocial factors, Quality of life, Sri Lanka, WHOQOL-BREF

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PREVALENCE OF DEPRESSION, ANXIETY, AND STRESS AND ASSOCIATED FACTORS AMONG UNDERGRADUATE NURSING STUDENTS IN STATE UNIVERSITIES IN THE WESTERN PROVINCE, SRI LANKA

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Introduction: Psychological distress, including stress, anxiety, and depression, is common among undergraduate nursing students due to academic workload, clinical responsibilities, and emotional challenges of training. However, evidence on psychological distress among this population in Sri Lanka remains limited.

Objective(s): To assess the prevalence of depression, anxiety, stress, and their associated factors among undergraduate nursing students in state universities in the Western Province, Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 296 undergraduate nursing students from the University of Colombo and University of Sri Jayewardenepura, the only state universities offering undergraduate nursing program in the Western Province. Participants were selected using a systematic random sampling technique. Data were collected using a pre-validated, self-administered questionnaire including the Sri Lankan validated Depression, Anxiety, and Stress Scale 21(DASS-21). Data were descriptively analyzed for frequency and percentages. Spearman's rank correlation was used to determine the relationship between variables, while the chi-square test was used to identify the associations. Statistically significant threshold set as <0.05.

Results: Among participants, 21.2% were male, and 78.7% were female. Mild to extremely severe symptoms of depression, anxiety, and stress were reported by 63.2%, 69.3%, and 44.3% of students, respectively. Depression showed a strong positive correlation with stress ($r = 0.812$, $p < 0.001$) and anxiety ($r = 0.782$, $p < 0.001$). Anxiety was also positively correlated with stress ($r = 0.763$, $p < 0.001$). Age and the academic year were significantly associated with depression and anxiety ($p<0.001$), while academic year was significantly associated with stress ($p<0.001$)

Conclusions: A considerable proportion of nursing undergraduates experienced mild to severe symptoms of depression, anxiety, and stress. Age and academic year were identified as important factors associated with psychological distress. These findings highlight the need for targeted mental health promotion and student support interventions within undergraduate nursing program.

Keywords: Depression, anxiety, stress, nursing undergraduates, Sri Lanka

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PP14: INC034

FOODBORNE DISEASE KNOWLEDGE, FOOD SAFETY PRACTICES, AND SELF-REPORTED FOODBORNE ILLNESSES AMONG NURSING UNDERGRADUATES IN TWO SELECTED STATE UNIVERSITIES IN THE WESTERN PROVINCE, SRI LANKA

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Introduction: Foodborne diseases (FBD) remain a significant public health concern, causing considerable morbidity and affecting daily activities. Nursing undergraduates should have adequate knowledge of FBDs and safe food practices to support future health promotion and disease prevention.

Objectives: This study aimed to assess knowledge on FBD, food safety practices, and the prevalence of self-reported foodborne illness among nursing undergraduates and to determine the associations among these variables.

Methodology: A descriptive cross-sectional study was conducted among 279 nursing undergraduates from the University of Colombo and the University of Sri Jayewardenepura. The sample size was calculated using Yamane formula, and participants were selected through systemic random sampling. Data were collected from April to July 2026 using a validated self-administered questionnaire. FBD knowledge was categorized as low (0-60), medium (61-80), and high (81-100), while food safety practices were categorized as poor (<60), moderate (60-79), and good (80-100). Data were analyzed using descriptive statistics, Spearman's rank-order correlation, and Chi-square tests with SPSS version 27.0.

Results: The mean age of participants was 23.18 years (SD=1.1), and 72.4% (n=202) were female. The mean FBD knowledge score was 63.0 (SD = 19.4). Overall, 40.9% demonstrated low knowledge, while 23.3% demonstrated high knowledge. Good food safety practices were reported by 51.6% of, and the prevalence of self-reported foodborne illness was 43.7%. FBD knowledge showed a weak but significant positive correlation with food safety practices (Spearman's $\rho = 0.235$, $p < 0.001$). Food safety practices were not significantly associated with self-reported foodborne illness ($p = 0.515$). Male students reported a significantly higher prevalence of self-reported foodborne illness compared with female students ($p = 0.025$).

Conclusion: Although food safety practices were generally satisfactory, a considerable proportion of nursing undergraduates had inadequate knowledge of foodborne diseases. The positive association between knowledge and practices, together with the prevalence of self-reported foodborne illness, highlights the importance of strengthening food safety education and promoting preventive practices among nursing undergraduates.

Keywords: Foodborne disease, Food safety practices, Foodborne illness

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CULTURAL COMPETENCE, SENSITIVITY, AND ATTITUDES TOWARD CULTURALLY RESPONSIVE CARE BEHAVIOR AMONG NURSING UNDERGRADUATES IN SELECTED STATE UNIVERSITIES, SRI LANKA

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Introduction: Globalization has increased cultural diversity in healthcare systems worldwide. Cultural competence enables healthcare professionals to work effectively within diverse cultural contexts. Cultural sensitivity forms the attitudinal foundation for respectful cross-cultural interactions, while culturally responsive behavior translates these competencies into concrete clinical actions. Sri Lanka's ethnic, religious, and linguistic diversity demands a culturally competent nursing workforce to ensure equitable care.

Objectives: To assess the level of cultural competence, sensitivity, and attitudes toward healthcare professionals' culturally responsive behavior among nursing undergraduates in selected state universities in Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 311 nursing undergraduates from two selected universities located in Western Province and Southern Province, who were selected using systematic randomized sampling. Data was collected through a validated, self-administered questionnaire consisting of sociodemographic information, Cultural Competence and Culturally Sensitive Assessment Tool (BENEFITS-CCCSAT) and Cultural Sensibility Scale for Nursing (CUSNUR). Data analysis was performed using SPSS version 27.0. Ethical approval was obtained from the Ethics Review Committee, Faculty of Nursing, University of Colombo.

Results: The majority of the participants (70%) were aged 23-25 years (mean age =24.00, SD =1.66). The majority of the participants were female (75.2%). The majority of participants (90.7%) demonstrated moderate levels of cultural competence (mean =102.93, SD =10.83). Regarding cultural sensitivity, 54% showed moderate levels, while 36.7% had low levels (mean = 28.90, SD = 6.52). For attitudes toward culturally responsive behavior, 60.5% had neutral attitudes, 21.2% had unsatisfactory attitudes, and only 18.3% had satisfactory attitudes (mean = 25.97, SD = 5.49).

Conclusion: Nursing undergraduates in the selected Sri Lankan state universities demonstrate moderate cultural competence and sensitivity, while many exhibit unsatisfactory attitudes toward culturally responsive behavior. The findings highlight the need to integrate cultural competence into nursing curricula and targeted interventions to enhance cultural sensitivity and positive attitudes toward culturally responsive care.

Keywords: Attitudes, Cultural competence, Cultural sensitivity, Culturally responsive care, Nursing undergraduates, Sri Lanka

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RELATIONSHIPS BETWEEN DIGITAL COMPETENCE, EMOTIONAL INTELLIGENCE, LEARNING ENGAGEMENT, AND PERCEIVED CLINICAL COMPETENCY AMONG NURSING UNDERGRADUATES IN STATE UNIVERSITIES, SRI LANKA

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Introduction: Clinical competency is essential for safe patient care; digital competency (DC), emotional intelligence (EI) and learning engagement (LE) are also vital to nursing students' professional development. Limited studies have assessed these relationships among Sri Lankan nursing undergraduates.

Objectives: This study aimed to assess the levels of DC, EI, LE and perceived clinical competency among Sri Lankan nursing undergraduates in state universities, and determine the correlations among these factors.

Methods: A descriptive correlational study was conducted among 239 nursing undergraduates from six Sri Lankan state universities using systematic random sampling. Data were collected using the Digital Competency Questionnaire (DCQ), Schutte Self-Report Emotional Intelligence Test (SSEIT), and Clinical Competency Questionnaire (CCQ) (5-point Likert scale), and the Utrecht Work Engagement Scale-Student Version (UWES-9S) (7-point Likert scale). Weighted means of 3.40-4.19 indicated high levels for DCQ, SSEIT, and CCQ, while 2.89-4.66 indicated average levels for UWES-9S. All instruments were content-validated and pilot-tested among Sri Lankan nursing undergraduates, with Cronbach's alpha >0.7. Ethical approval was obtained from the Research Ethics Committee, Faculty of Nursing, University of Colombo. Data were analyzed using SPSS 27.0, applying descriptive statistics (weighted means), Pearson correlation, and independent samples t-test for gender comparisons.

Results: Response rate was 85.43%; the sample consisted of 75.3% female and 24.7% male students. Undergraduates reported high DC (3.96 ± 0.44) (weighted mean ± SD), EI (3.73 ±0.34), and perceived clinical competency (3.99 ± 0.57), with average LE (3.39 ± 0.87). EI demonstrated statistically significant positive correlations: weak with clinical competency ($r = 0.213$, $p < 0.001$), moderate with DC ($r = 0.530$, $p < 0.001$), and weak with LE ($r = 0.298$, $p < 0.001$). DC ($r = 0.106$, $p = 0.101$) and LE ($r = 0.023$, $p = 0.723$) showed no statistically significant correlation with perceived clinical competency. Female students scored significantly higher than males in EI ($t(237) = -3.244$, $p = 0.001$) and DC ($t(237) = -2.059$, $p = 0.04$).

Conclusion: EI was the only variable significantly associated with perceived clinical competency, showing a weak positive relationship. Female students reported significantly higher EI and DC compared to male students.

Keywords: Clinical competency, Emotional intelligence, Digital competence, Nursing undergraduates

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TRENDS IN BLOOD DONATION AMONG UNDERGRADUATES OF A SELECTED PRIVATE UNIVERSITY

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Introduction: Blood donation is an essential component of healthcare systems in maintaining an adequate blood supply, with voluntary non-remunerated donors. University students represent an important potential donor group due to their age and health status. However, knowledge gaps, fear, misconceptions and practical barriers may influence donation behaviour.

Objectives: This study aimed to describe trends in blood donation among undergraduates of a selected private university in Sri Lanka.

Methods: A descriptive cross-sectional study was conducted among 395 undergraduates, selected by simple random sampling. Ethical approval was obtained from the Ethics Review Committee, Faculty of Humanities and Sciences, SLIIT. Data were collected using a pilot-tested, structured, self-administered questionnaire assessing sociodemographic characteristics, blood donation history, knowledge, barriers, motivators and future donation intention. Data were analysed using Jamovi version 2.6.44. Descriptive statistics, chi-square tests and non-parametric analyses were performed to identify associations between variables.

Results: Of the participants, 159 (40.3%) had previously donated blood, while 236 (59.7%) had never donated. The mean knowledge score was 5.46 (SD = 2.80) out of 10. A majority (73.9%) expressed an intention to donate blood in the future. The most reported barriers were fear of needles or pain (47.6%), fear of seeing blood (35.2%) and lack of time (34.7%). Previous blood donation was significantly associated with gender, faculty and province ($p<0.05$). Knowledge scores differed significantly according to age group, faculty, previous donation history and future donation intention ($p<0.001$).

Conclusions: Blood donation participation among undergraduates was limited, but their willingness to donate in the future was encouraging. Addressing fear-related barriers, improving awareness, strengthening peer-based campaigns and providing accessible university donation opportunities may enhance voluntary blood donation among young adults.

Keywords: Blood donation, Undergraduate students, Voluntary blood donation, Voluntary donors, Blood donation behaviour

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FACTORS ASSOCIATED WITH RHEUMATOID ARTHRITIS: A CASE-CONTROL STUDY AT NATIONAL HOSPITAL OF SRI LANKA AND COLOMBO SOUTH TEACHING HOSPITAL

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Introduction: Rheumatoid Arthritis (RA) is a chronic autoimmune joint disease that affects approximately 0.5–1% of the global population and is a major cause of disability. Epidemiological data on factors associated with RA remain limited in Sri Lanka, and identifying locally relevant factors is essential for informing targeted prevention strategies.

Objective: To identify factors associated with RA among patients attending Rheumatology Clinics at the National Hospital of Sri Lanka (NHSL) and Colombo South Teaching Hospital (CSTH).

Methods: A case-control study was conducted over a 4-month period from January to April 2023 with 130 RA patients (cases) and 130 accompanying relatives without RA (controls), recruited via systematic sampling (N=260). Data were analyzed in SPSS version 26.0 using univariate and multivariate binary logistic regression, with odds ratios (OR), 95% confidence intervals (CI), and p-values.

Results: Cases were older than controls (median 60 years, IQR 53–65 vs. 55 years, IQR 30–64; $p<0.001$) and predominantly female, 72.3% vs. 58.5% in controls (OR 1.83, 95% CI 1.08–3.10, $p=0.027$). Median BMI was higher in cases (25.18 kg/m², IQR 22.83–28.40) than controls (23.13 kg/m², IQR 20.31–26.12) (OR 1.51 per 1 kg/m² increase, 95% CI 1.15–1.98, $p=0.003$). In the fully adjusted model, age (aOR 1.54, 95% CI 1.11–2.14, $p=0.010$), female sex (aOR 2.16, 95% CI 1.19–3.92, $p=0.011$), and BMI (aOR 1.34 per 1-SD increase, 95% CI 1.00–1.80, $p=0.048$) remained independently associated with RA. Comorbidities were more common among cases, including diabetes mellitus (41.5%, n=54/130 vs. 26.2%, n=34/130), dental disease (70.0%, n=91/130 vs. 49.2%, n=64/130), and heart disease (33.1%, n=43/130 vs. 16.9%, n=22/130) (all $p<0.05$), though these attenuated after adjustment for demographic factors. Among females (cases n=94, controls n=76), pregnancy history was reported by 83.0% (n=78/94) of cases vs. 56.6% (n=43/76) of controls (OR 4.04, 95% CI 1.92–8.51, $p<0.001$), and breastfeeding history by 81.9% (n=77/94) vs. 53.9% (n=41/76) (OR 4.02, 95% CI 1.92–8.40, $p<0.001$). Occupational stress was inversely associated with RA (aOR 0.52, 95% CI 0.29–0.94, $p=0.031$).

Conclusion: Age, female sex, and BMI independently predict RA, and reproductive history is a notable factor in women, so these should inform targeted screening, though prospective research is needed to confirm the causal pathways and screening value.

Keywords: Rheumatoid Arthritis, Factors Associated with RA, Case-Control Study, Sri Lanka, Logistic Regression

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RELATIONSHIP BETWEEN SOCIAL SUPPORT AND LONELINESS OF MENTAL DISORDERS LIVING IN JAPAN

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Introduction: Loneliness is a critical concern for individuals with mental disorders, particularly those living in community settings where informal social networks strongly influence wellbeing.

Objective(s): This study aimed to clarify the relationship between social support and loneliness among people with mental disorders living in City A, Japan.

Methods: A cross-sectional survey was conducted using self-administered questionnaires covering individual factors, social support, daily life problems, and loneliness, measured with the UCLA Loneliness Scale (UCLA3). Multiple regression analysis was performed with the loneliness score as the dependent variable. Data from 440 participants (52.1% male; 65.3% aged 40 years or above) among 1,805 randomly selected individuals with mental disorders living in City A were analyzed.

Results: Mean UCLA loneliness scores were significantly higher among participants with daily life problems than among those without (8.98 vs. 5.18, $p<0.001$). Higher loneliness scores were also associated with the absence of several forms of social support, including someone to talk to when in need of help, someone to talk to when feeling unwell, someone to assist with daily activities, someone to accompany them to hospital, and someone to care for them when bedridden (all $p\leq0.001$). Multiple regression analysis ($R^2=0.303$, adjusted $R^2=0.278$) showed that daily life problems had the strongest association with loneliness ($\beta=-0.371$, $p<0.001$), followed by absence of someone to talk to when in need of help ($\beta=0.217$, $p=0.001$) and absence of someone to accompany them to hospital when unwell ($\beta=0.135$, $p=0.044$). Female sex ($\beta=0.105$, $p=0.024$) and younger age ($\beta=-0.124$, $p=0.011$) were also significant predictors.

Conclusions: Daily life problems and specific forms of instrumental and emotional social support were associated with loneliness among people with mental disorders in Japan. Strengthening accessible support systems, particularly assistance during times of need and accompaniment to healthcare services, may reduce loneliness and should be prioritized in community mental health policy and nursing practice.

Keywords: Loneliness; Social support; Mental disorders; UCLA Loneliness Scale; Japan

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