

Knowledge on Patient's Rights among Nursing Students in a College of Pokhara

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ABSTRACT

Background: Patient's rights are crucial for proper and ethical standard health care delivery in the health facilities. These rights are basic human rights that provide dignity, privacy, justice to patients and protect them from maltreatment. Nursing students, who are future health care professionals have the responsibility of ensuring these rights. Nursing students are expected to experience ethically sensitive cases in their workplaces, and they should be well informed about patients' right to provide ethically sound nursing care. This study aimed to assess knowledge of undergraduate nursing students on patient's rights.

Method: This was a descriptive cross-sectional study conducted on undergraduate nursing students of the School of Health and Allied Sciences, Pokhara University, located at Pokhara-30, Kaski. Data was collected using a structured self administered questionnaire developed by the researcher herself. A complete enumeration was done and data was collected from 128 respondents. Data were entered into SPSS version 22 and analysed using descriptive and inferential statistics. Chi-square test was used to determine the association between the level of knowledge on patient's rights with selected background variables.

Results: The study revealed that 44.5% of the respondents had Good Knowledge, 45.3% had moderate knowledge and 10.2% of the respondents had poor knowledge.

Conclusion: Nearly half of the nursing students have good knowledge on patient rights. Age and educational programs influenced the level of knowledge of the students. Hence, there is a need for educational programs and a more focused curriculum to enhance students' knowledge regarding patients' rights.

Keywords: Knowledge, Patient's Rights, Undergraduate Nursing Students

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INTRODUCTION

Patient's rights refer to the human rights that patients are privileged while they are being

served by health services.⁽¹⁾ Patients' rights are an integral components of human rights. They preserve favorable contractual associations between patients and health care service providers. The role of patients' rights is to recall fundamental human rights in the health care setting.⁽²⁾ The concept of patient rights has been elaborated based on the basis of concept of the person, and the fundamental dignity and equality of all human beings known since adoption of the Universal Declaration of Human Rights in 1948. It is a fundamental right of every person to be provided with

information regarding their rights, and the obligations of the healthcare workers.⁽³⁾

WHO launched a Patient Safety Rights Charter at the Global Ministerial Summit on Patient Safety. It is the first Charter to outline patients' rights in the context of safety, and will support stakeholders in formulating the legislation, policies and guidelines needed to ensure patient safety.⁽⁴⁾ Patients' rights are important as it ensures that every individual receive treatment they deserve with respect to their decision. Human dignity is one of the fundamental rights of human beings. People should have equal right to receive quality care and respect with dignity without discrimination in terms of culture and values.⁽⁵⁾

Constitution of Nepal 2020 A.D has stated 30 fundamental rights (Article 16 - 46) to protect the human rights by safeguarding freedom, equality, information, privacy, safety, right to health, communication, justice.⁽⁶⁾ Various studies have reported different degrees of respect for patient rights. A study in Iran shows that (31%) medical students have low, (53%) have moderate and (16%) have high knowledge.⁽⁷⁾ Another study in Nepal reveals that out of 122 nurses, 30 (24.6%) have an adequate level of knowledge whereas about half 62 (50.8%) of respondents had favorable and 60 (49.2%) had an unfavorable level of attitude regarding patients. The study in Egypt shows that 60.75% of nurses had a high level of awareness to patients' rights and 34.23% of patients had good awareness toward their rights.⁽⁸⁾

Nursing students are supposed to perform in their workplaces where they are exposed to ethically challenging situations so, they must have knowledge about patients' rights with the intention to provide holistic care to patients.⁽⁹⁾ Hence this study aimed to assess knowledge on patient's right among undergraduate nursing students as well as their understanding of legal and ethical frameworks in clinical settings.

METHODS

A descriptive cross-sectional study design was conducted at School of Health and Allied Sciences, Pokhara University. Complete Enumeration of undergraduate nursing students was done. The sample size (n) was 128, which were nursing students present on the day of data collection and willing to participate in the study.

A self-administered structured questionnaire was developed by the researcher based on the objectives of the study by consulting with subject expertise, research advisor, and nursing peer, which consisted of two parts: Part I was about Background information, which includes nine items and Part II was Structured Questionnaire about Knowledge on Patient's Rights that comprised 25 questions. There were 6 multiple-response questions and 19 multiple-choice questions. Each correct response was scored 1, and an incorrect response was scored 0. In multiple response questions, if the respondent had not marked the incorrect response, the score was given as 1. Total score was 46.

The study was conducted after approval and written permission from the Research Committee of Pokhara Nursing Campus, Pokhara University, School of Health and Allied Sciences and ethical approval from the Institutional Review Committee of Tribhuvan University, Institute of Medicine (387(6-11) E2, Ref: 081/082). The study objectives were explained to the nursing students and verbal and written informed consent were obtained and data was collected by gathering the students in their respective classrooms. Anonymity was maintained by using code numbers instead of names, and confidentiality was ensured by not disclosing the information to others. The data collection process was completed in two weeks from 2081/10/13 to 2081/10/15.

The collected data were rechecked for completeness and accuracy, categorized

according to the research objectives, and analyzed using different statistical tools as appropriate. The collected data were coded, classified, and tabulated. Data processing was performed using a computer. SPSS-22(Statistical Package for Social Science) was used for descriptive and inferential analyses. Data were analyzed in terms of frequency, mean, percentage, and standard deviations. The Chi-square test was used to determine the association between the level of knowledge and selected demographic variables.

RESULTS

Among 128 nursing students, aged 18-35 years with mean age of 23 ($SD \pm 3.15$), the highest representation was in the 18-25 years comprising (85.9%) of total respondents. The gender distribution indicated that almost all (99.2%) were female. Hinduism was the predominant religion (85.2%). Most respondents were unmarried (81.3%). In terms of family type, the largest group represented nuclear family (71.9%) following Joint family (25.0%). All of the students were clinically exposed. (Table no:1)

TABLE 1: Background Characteristics of the Respondents (n=128)

Variables	Number	Percent
Age (in years)		
18-25	110	85.9
26-39	18	14.1
Mean \pm SD: 23 \pm 3.15 Min:18 Max:35		
Gender		
Male	1	0.8
Female	127	99.2

Variables	Number	Percent
Religion		
Hindu	109	85.2
Buddhist	16	12.5
Islam	02	1.6
Christian	1	0.8
Gender		
Brahmin/ Chhetri	71	55.5
Dalit	08	6.3
Janajati	39	30.5
Madhesi	6	4.7
Muslim	1	0.8
Thakuri	3	2.3
Marital Status		
Unmarried	104	81.3
Married	24	18.7
Type of Family		
Nuclear	92	71.9
Joint	32	25.0
Extended	4	3.1
Programme		
BSN	64	50.0
BNS	64	50.0

Majority of nursing students (99.2%) answered correctly on purpose of patient's rights and (96.1%) agreed that patients should always be allowed to make informed decisions. Additionally, fewer respondents are aware of the right to end-of-life care, including refusal of life-sustaining treatment (64.1%), and the Patient Bill of Rights (61.7%) (Table no: 2).

TABLE 2: Respondents' Knowledge on Patients's Right: Meaning, Purpose and Management (n=128)

Correct Responses	Number	Percent
Patient's rights are the legal and ethical entitlements that ensure patients have the ability to make informed decisions about their care	119	93.0
Patients' rights help to ensure patients receive respectful and appropriate care	127	99.2
Health information should be delivered always before any nursing procedure	123	96.1
A nurse should provide information and discuss options if patient want to know more about their treatment options	119	93.0
Sharing patient's health information without consent is a form of violation of patient's rights	110	85.9
Right to refuse treatment is a basic right of a patient	106	82.8
The nurse's responsibility regarding a patient's rights is to educate patients about their rights and advocate for them	100	78.1
Right to end-of-life care includes refusing life-sustaining treatment	82	64.1
<u>Patient Bill of Rights outlines a patient's rights in a healthcare setting</u>	79	61.7

Almost all respondents (93%) agreed that patient can file a formal complaint with the hospital or appropriate regulatory body if they feels that their rights have been violated. The high percentage of students (92.2%) recognized that explaining procedures helps to reduce discomfort with a procedure. Less than half of the respondents (46.1%) reported that patients should be allowed to read and copy their medical reports (Table 3).

TABLE 3: Respondent's Knowledge on Violation of rights, Treatment Procedure and Basic Patient Rights (n=128)

Correct Responses	Number	Percent
If a patient feels that his rights have been violated, he can file a formal complaint with the hospital or appropriate regulatory body	119	93
If a patient expresses discomfort with a procedure, a nurse should explain the procedure again and address their concerns	118	92.2
Right to respectful care means health care providers must acknowledge and accommodate patients' cultural, personal, and religious beliefs	98	76.6
If nurses overhear a colleague discussing patient's case in a public area, they should report the incident to supervisor	78	60.9
Right to continuity of care means patients are ensured follow- up and consistent care throughout their treatment process	73	57.0
If the patient refuses treatment when he is able to make informed decision, the nurse must respect patients' decision to refuse treatment, but document the refusal and inform the healthcare team immediately	63	49.2
Right to dignity allows a patient to receive a care without being subjected to unnecessary physical restraints	60	46.9
If the patient want to read and copy their medical record, allow to them	59	46.1

TABLE 4: Respondents' Level of Knowledge on Patients' Rights (n=128)

Knowledge Level	Number	Percent
Poor (<50%)	13	10.2
Moderate (50-75%)	58	45.3
Good (>75%)	57	44.5
Mean \pm SD: 32 \pm 5.85 Min: 18 Max: 45		

This table shows that 10.2 % had poor knowledge, 45.3% had moderate knowledge and 44.5% had good knowledge (Table no 4).

TABLE 5: Association between Knowledge Level on Patients Right and Selected Variables (n=128)

Variables	Level of Knowledge			χ^2	p-value
	Poor No. (%)	Moderate No. (%)	Good No. (%)		
Age					
≤ 25	10 (9.1)	45 (40.9)	55 (50.0)	9.475	0.009*
>25	3 (16.7)	13 (72.2)	2 (11.1)		
Ethnicity					
Brahmin/ Chhetri	9(12.7)	35 (49.3)	27 (38.0)	3.069	0.216
Others	4 (7.0)	23 (40.4)	30 (52.6)		
Type of family					
Nuclear	08 (09.0)	38 (42.7)	43 (48.3)	1.772	0.412
Others	05 (12.8)	20 (51.3)	14 (35.9)		
Programme					
BSN	12 (18.8)	42 (65.6)	10 (15.6)	44.980	<0.001*
BNS	1 (01.6)	16 (25.0)	47 (73.4)		

χ^2 :Chi square *significant $p<0.05$

There was significant association between level of knowledge and age and educational level of nursing students, However, there is no significant association with other background variables (Table 5).

DISCUSSION

A descriptive cross sectional research design based on quantitative approach was used to find out level of knowledge on patient's rights among undergraduate nursing students in a selected college of Pokhara. This study was

conducted among 128 respondents. In the present study, more than two third (68.0%) nursing students agreed to explain the objective and (82.8%) agreed to take permission from the patient if someone wants to do medical research on a patient whereas in Saudi Arabia (99.1%) nursing students agreed that to get the patient participation in research, he must be provided with clear and comprehensive information.⁽⁸⁾

This study revealed that (93.0%) agreed that a nurse should provide information and

discuss options if patient want to know more about their treatment options whereas in a study of Nepal conducted among patients (90.3%) agreed that patient has right to make a treatment choice⁽¹⁰⁾ which prove the role of nurses as key members of the healthcare team, often serving as important communicators between patients and doctors, helping to ensure patients are informed and comfortable with their treatment decision. In another study conducted in Mashhad University of Medical Sciences, among midwifery students, 4.7% has weak knowledge, 77.6% has moderate knowledge and 17.6% has good knowledge on patient's rights⁽¹¹⁾ which contradicts with this study which might be due to difference in socio-demographic characteristics, sampling technique and sample size.

The present study indicated that age and academic level are positively associated to students' knowledge. It means that the higher the students' academic level, the more knowledge they have about the patients' rights. One possible explanation for this association is that having a higher academic level always entails having more opportunities for clinical training and observing nurses as they interact with patients in a real-world setting. Experience and familiarity with patient cases provide more knowledge about patients' rights. Similarly, in the study conducted among nursing students in Saudi Arabia found that academic level positively affects nursing students' knowledge of the patients' bill of rights and they reported that nursing students at Bachelor 4th year have more knowledge than those at 3rd year.⁽⁸⁾ Hence, a future study is recommended to establish the causal effect of age and academic level on ethical knowledge.

CONCLUSIONS

The study conclude that less than half of the nursing students' have good level of knowledge regarding patient rights whereas considerable proportion have poor knowledge regarding patients rights. Age and educational program

tend to influence the level of knowledge regarding patients right. Thus, there is a need of education programs for the nursing students to enhance their knowledge about patients' rights..

Further, there is need for more focus on curriculum development to aware students regarding patients' rights.

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