



EFFECTIVENESS OF LAUGHTER THERAPY ON QUALITY OF SLEEP AMONG B.Sc. NURSING STUDENTS

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ABSTRACT

Introduction: During sleep, your body is working to support healthy brain function and maintain your physical health. Getting inadequate sleep over time can raise your risk for chronic health problems. Sleep is very essential in better memory, lower weight gain risk, better calorie regulation, greater athletic performance, and social intelligence. There is a need for simple, easy treatment to improve quality of sleep of B.Sc. Nursing students. The regular practice of laughter therapy can have beneficial effects on quality of sleep among B.Sc. Nursing students.

Aim: The aim of study to assess the effectiveness of laughter therapy on quality of sleep among B.Sc. Nursing students of selected college of Punjab.

Material and Methods: A quantitative research approach and pre experimental research design was conducted on 50 B.Sc. Nursing students. Data was collected by sleep quality scale and analyzed by using descriptive and inferential statistics.

Results: The study depicted that during pre-test, Mean \pm SD score of moderate quality of sleep was 51.08 ± 4.582 and for severe quality of sleep, score is 66.84 ± 6.6764 . During post-test, Mean \pm SD score of moderate quality of sleep was 46.8 ± 5.02 and for severe quality of sleep, the score was 67 ± 5.339 .

Conclusion: Based on the results, the studies conclude that laughter therapy implementing in day to day life may increase quality of sleep.

Keyword: Laughter therapy, quality of sleep, B.Sc. Nursing students.

INTRODUCTION

“Sleep, especially deep sleep, is like a balm for the brain”, said Shashank Joshi, MD, associate professor of psychiatry and behavioral sciences at Stanford. “The better you sleep, the more clear you can think while awake and it may enable you to seek help when a problem arises. You have your faculties with you. You may think; I have 16 things to do, but I know where to start. “Sleep deprivation can make it hard to remember what you need to do for your busy teen life. It takes away the support, the infrastructure.” Laughter therapy is considered to be useful, cost-effective and easily-accessible intervention that has positive effects on depression, insomnia and sleep quality proved in many studies.²

In 1998, World Laughter Day was created by Dr. Madan Kataria, founder of the worldwide Laughter yoga movement. In more than 70 countries, World Laughter Day is celebrated around the world on the first Sunday of May. This year it falls on 3 May.³

People went to Laughter Club, gather and laugh together. You can see several comedy pictures can listen to the famous comedian and also take part in the improvisation classes. Some people share funny jokes on social media by keeping hash tag World Laughter Day. Watch movies with friends with full of comedy and entertainment. Even people gather in some park and perform laughing yoga practice.⁴

Gelotology is the study of laughter and its effects on the body, from a psychological and physiological perspective. Its proponents often advocate induction of laughter on therapeutic grounds in alternative medicine. The field of study was pioneered by William F. Fry of Stanford University.¹

MATERIALS AND METHODS

A Pre-experimental study approach was used to for the study conducted on B.Sc. Nursing students from selected college of Punjab (State Institute of Nursing and Paramedical Sciences, Badal, Sri Muktsar Sahib). A sample of 50 B.Sc. Nursing students were selected from selected college of Punjab by non-probability convenient sampling. Inclusion criteria for study was B.Sc. Nursing 1st year and B.Sc. Nursing 2nd year.

Data was collected by using two tools- Socio-demographic tool and modified sleep quality scale. Socio-demographic tool includes 13 items. The sleep quality of the students was assessed by using modified sleep quality scale which includes 28 statements. The scale had 6 positive statements and rest 22 statements are negative. The statements were rated as 'rarely', 'sometimes', 'often', 'almost always' and were scored 1,2,3,4 for negative statements and reversed for positive statements. According to modified sleep quality scale, criteria used to measure quality of sleep was : 1-28 score for normal sleep quality, 29-56 score for moderate sleep quality, 57-84 score for severe quality of sleep and 85-112 score for very severe sleep quality.

Laughter therapy was given as intervention to group. The laughter session was of 15-20 minutes for 15 days which includes 10 techniques : slapping laughter, child like play, just laugh, ant in your pants, argument laughter, electric shock laughter, drinking laughter, greeting laughter, Jokes, belly laughter to improve quality of sleep of students.

Statistical Analysis: Data was analyzed by SPSS. Data was described by using frequency, percentage, mean and SD. Chi square test was used. All statistical tests were two-tailed and significance level was at 0.05.

RESULTS

Socio-demographic Characteristics

A total 50 B.Sc. Nursing students were considered in the study.

From 50 students, 28 (56%) were of 18-19 age group, 7 (14%) and 15 (30%) were above 19 years. 38 (76%) were students of B.Sc. Nursing 1st year and 12 (24%) were of B.Sc. Nursing 2nd year. More than half of the students belongs to Sikh religion 26 (52%), 19 (38%), 3 (6%), 2 (4%) were Hindu, Muslim and any others respectively. 27 (54%) were vegetarian and 23 (46%) were non-vegetarian. 36 (72%) students belongs to moderate economic conditions and 14 (28%) belongs to good condition. Information about laughter therapy considered 42 (84%), 6 (12%), 2(4%) from books and journals, media and family and relatives respectively. All students consumes caffeine a night. Majority students 47 (92%) were have 6-8 hours sleep and 3 (6%) were have 8 hours of sleep. 25 (50%) use mobile phones before sleep, 23 (46%) students study and 2 (4%) were taking bath. 23 (46%) students were have intermittent

awakening, 19 (38%) students were have early awakening and 8 (16%) were belong to late awakening. 18 (36%) students have 10-11 p.m. bed timing, 28 (36%) were 10-12 p.m. and 4(8%) were have bed timing after 12 a.m. 33(66%) students falling asleep during lecture sometimes., 14 (28%) were never falling asleep and 3 (6%) students were always falling asleep during lectures. Majority students 28 (56%) taken 1 nap per day, 13 (26%) were have 2 naps, 2 (4%) were have 3 naps per day.

According to modified sleep quality scale, the pre-interventional quality of sleep includes 12 (24%) students having moderate sleep quality and 38 (76%) students having severe quality of sleep. The post-interventional quality of sleep includes 45 (90%) students having moderate quality of sleep and 5 (10%) students having severe quality of sleep. Mean \pm SD of moderate quality of sleep was 46.8 ± 5.021 and for severe quality was 67 ± 5.339 .

Observation	Mean	SD	t value	Df	P value
Pre-test	63.06	9.246	9.969	49	0001
Post-test	48.82	7.902			

Comparison of pre and post-interventional Quality of sleep.

Table depict the mean, standard deviation, paired 't' test values in the pre interventional assessment and post interventional assessment of the quality of sleep. In the pre interventional assessment of quality of sleep mean and SD score 63.06 ± 9.246 and the post interventional assessment of quality of sleep mean and SD score 48.82 ± 7.902 . paired 't' value was found to be $t=9.969^*$ $df = 49$ which is significant.

As the calculated value is more than table value at 0.05 level of significance, the research hypothesis H1 is accepted. So, the mean post interventional score of level of anxiety 48.82 among B.Sc. Nursing students participated in laughter therapy is significantly decreased the mean pre interventional score of quality of sleep 63.06.

So, there is statistically significant difference in the mean pre-test and post-test quality of sleep.

DISCUSSION

The present study is conducted to assess the effectiveness of laughter therapy among B.Sc. Nursing students. At last, we conclude that laughter therapy has positive effect on quality of sleep.

The findings shows that the pre-interventional quality of sleep was differentiate from the post-interventional quality of sleep. 12 (24%) students had moderate quality and 38 (76%) students had severe quality of sleep. The study conducted by Han, jiHyoung MSN et al who reported that sleep level was 8.68 prior to therapy⁵.

By giving laughter therapy as intervention, the findings shows huge difference by increasing number of students had moderate quality and rest had severe that was 45 (90%) and 5 (10%) respectively. Han jiHyoung et al showed a decrease in sleep level 6.53 after the therapy.⁵

The findings reveals that the mean, standard deviation, paired 't' test values in the pre-interventional assessment and post-interventional assessment of the quality f sleep. In the

pre-interventional assessment of sleep, mean \pm SD score was 63.06 ± 9.246 and the post-interventional assessment of sleep, mean \pm SD was 48.82 ± 7.902 .

Further findings shows that the chi-square test was used to find out association of pre-interventional quality of sleep with the selected demographic variables. There was no significant association of pre-test assessment of sleep with age, educational status, religion, dietary habits, economic conditions, source of information, caffeine used at night, duration of sleep, night time awakenings, bed timing, falling asleep during lectures, total number of naps per day of B.Sc. Nursing students. According to Memarian, A. Sanatkaran et al (2017), the study reported that there is no significant association of duration of sleep, sleep disturbance.⁶

CONCLUSION

The findings of the study revealed that in the pre-interventional assessment, majority of B.Sc. Nursing students had severe quality of sleep and minorities had moderate and no one had normal and very severe quality of sleep whereas in the post-interventional assessment, more number of subjects had moderate and less number were had severe quality of sleep.

So, it can be concluded that laughter therapy helps in improve the quality of sleep among B.Sc. Nursing students.

REFERENCES

- 1) Liebertz, Charmaine (September 21, 2005) "A Healthy Laugh" Scientific American, retrieved November 24, 2011.
- 2) <https://www.pstchdb.com/sleep/1-introduction/home>
- 3) <https://www.jagranjosh.com/generalknowledge/amp/world-laughter-day/1556967559/>
- 4) <https://www.spandidos-publications.com/103892/etm.2021.9073>
- 5) Han jihyoung MSN et al.
<https://synapse.koreamed.org/upload/synapsedata/pdfdata/1094kjan/kjan-29-560pdf>.
- 6) Memarian, A.Sanatkaran et al (2017) pondiuni.edu.in