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## A study to assess the knowledge on disaster management among staff nurses at Narayana medical college hospital, Nellore, Andhra Pradesh

**Jupudi Anusha, Latha P, Kalpana B and Dr. Indira**

### Abstract

**Background:** Disaster are sudden catastrophic events that disrupt patterns of life and in which there is possible loss of life and property in addition to multiple injuries disaster can be either natural phenomena or caused by people. Causes of disaster natural: Air, Tornado, Hurricane, Blizzard, Land earth quakes, volcanic eruption, avalanches, cave in water: floods slow rising and flash floods, tribal wave man-made: transportation Air, land water, fire housing, forest, explosion, disease epidemic civil riot war.

**Aim:** The aim of the study was to assess the knowledge regarding disaster management among nurses.

**Objectives:** 1. To assess the level of knowledge regarding disaster management among staff nurses. 2. To find out the association between level of knowledge regarding disaster management among staff nurses with selected socio demographic variables.

**Methodology:** 100 staff nurses working in NMCH, Nellore were selected by using Non-probability convenience sampling technique method.

**Results:** Regarding the level of knowledge among nurses, 19 (19%) had inadequate knowledge, 72(72%) had moderately adequate knowledge and 9(9%) had adequate knowledge regarding disaster management.

**Keywords:** Knowledge, disaster management, staff nurses

### Introduction

The world health organization defines “disaster as any occurrence that causes damage, economic disruption loss of human life and deterioration in health and health services on a scale sufficient to warrant extraordinary response from outside the affected community area”. The term emergency cases usually refers to any extraordinary events that requires a rapid and skilled response and that can be managed by a community’s existing resources<sup>[1]</sup>.

Disaster are sudden catastrophic events that disrupt patterns of life and in which there is possible loss of life and property in addition to multiple injuries disaster can be either natural phenomena or caused by people. Causes of disaster natural: Air, Tornado, Hurricane, Blizzard, Land earth quakes, volcanic eruption, avalanches, cave in water : floods slow rising and flash floods, tribal wave man made : transportation Air, land water, fire housing, forest, explosion, disease epidemic civil riot war<sup>[2]</sup>.

Disaster response medical treatment for large number of casualties is likely to be needed only after certain types of disaster. The management of mass casualties are rescue, first aid, triage and stabilization of victim’s, hospital treatment and redistribution of patients to other hospital if necessary etc. First aid is likely to be so great that organized relief services will be able to meet only a small fraction of the demand. Most immediate help comes from the injured survives disaster preparedness. Emergency preparedness is a program of long term development activities with goals to strengthen the overall capacity and capability of country to manage efficiently all types of emergency. It should bring about an orderly transition from relief through recovery and back to sustained development<sup>[3]</sup>.

The objectives of disaster preparedness is to ensure that appropriate systems, procedures and resources are in place to provide prompt effective assistance to disaster victims, thus facilitating relief measures and rehabilitation of services disaster preparedness is an ongoing multi-sectoral activity. It forms an integral part of the national system responsible for developing plans and programs for disaster management, prevention, mitigation, preparedness, response, rehabilitation and reconstruction disaster mitigation emergency

prevention and mitigation involves measure designed either to prevent hazards from causing emergency or to lessen the likely effects of emergencies<sup>[4]</sup>.

### Need for the Study

Triage should be carried out at the site of disaster, in order to determine transportation priority, and admission to the hospital or treatment center, where the patient's needs and priority of medical care will be reassessed. Ideally local health workers should be taught the principles of triage as part of disaster training. Disaster management there are three fundamental aspect of disaster management or disaster response by disaster preparedness. In disaster mitigation management sequence of sudden onset disaster<sup>[5]</sup>.

Globally approximately 2 billion people are affected by natural or man-made disaster since part 10 years about 86% of people killed by natural disaster<sup>[6]</sup>.

The objectives of disaster preparedness is to ensure that appropriate systems, procedures and resources are in place to provide prompt effective assistance to disaster victims, thus facilitating relief measures and rehabilitation of services disaster preparedness is an ongoing multisector activity<sup>[5]</sup>.

A descriptive study was conducted on preparing health care professional students for disaster and public health emergencies and to promote their coping competencies. The aim of the study was to improve knowledge and skills of students in emergency preparedness. The sample size was 150. The study described both a process and a list of core competencies for teaching emergency preparedness to students in various health care professionals, and their differences in knowledge level of & proficiency. And it concluded that there is a need for training and practice to enhance the clinical competencies<sup>[6]</sup>.

### Statement of the Problem

A study to assess the knowledge on disaster management among staff nurses at Narayana Medical College Hospital, Nellore, Andhra Pradesh.

### Objectives

- To assess the level of knowledge regarding disaster management among staff nurses.
- To find out the association between level of knowledge regarding disaster management among staff nurses with selected socio demographic variables.

### Delimitations

- Nurses working in medical and surgical ward at Narayana Medical College Hospital, Nellore.
- Sample size of 100.

### Methodology

#### Research Approach

A quantitative approach was adopted to determine the research study.

#### Research Design

The present study was conducted by using descriptive research design

#### Setting of the Study

The study was conducted at Narayana Medical College

Hospital, Nellore.

### Target Population

The target population for the present study includes all nurses.

### Accessible Population

The accessible population for the present study was nurses working in Narayana Medical College Hospital, Nellore and who fulfilled the inclusion criteria.

### Sample

The sample for the present study was nurses working in Narayana Medical College Hospital, Nellore.

### Sample Size

The samples consist of 100 staff nurses.

### Sampling Technique

Non-probability convenience sampling technique was adapted for the study.

### Criteria for sampling selection

#### Inclusion Criteria

- Staff nurses working in medical and surgical ward at NMCH, Nellore.
- Staff nurses who are willing to participate in the study.

#### Exclusion Criteria

- Staff nurses who are sick.
- Staffs who were not available at the time of data collection.

### Description of Tool

**Part-I:** Socio demographic variables of staff nurses.

**Part-II:** This consists of structured questionnaire to determine the knowledge on disaster management.

### Variables of the Study

**Research variable:** Level of knowledge on disaster management.

**Demographic variables:** It includes Age, Sex, Educational status, area of working, Year of experience, Source of information and attended any CNE or workshop.

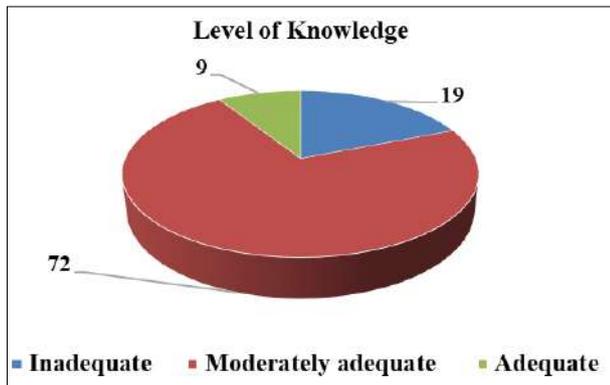
#### Score Interpretation

Level of Knowledge	Score
Inadequate Knowledge (1-17)	<50 %
Moderately Adequate (18-34)	51-70%
Adequate Knowledge (35-51)	>70%

### Data Analysis and discussion

**Table 1:** Frequency distribution of level of knowledge among staff nurses. (N=100)

Level of knowledge	F	P
Inadequate	19	19
Moderately adequate	72	72
Adequate	9	9
Total	100	100



**Fig 1:** Frequency distribution of level of knowledge among staff nurses.

**Table 2:** Mean and standard deviation of knowledge score among staff nurses. (N=100)

Level of knowledge	Mean	SD
Staff nurses	17.59	5.87

**Major Findings of the Study**

- Regarding the level of knowledge among nurses, 19 (19%) had inadequate knowledge, 72(72%) had moderately adequate knowledge and 9(9%) had adequate knowledge regarding disaster management.
- The mean knowledge score of nurses was 17.59 and standard deviation was 5.87.
- Regarding association, none of the demographic variables had association with level of knowledge.

**Conclusion**

The study concluded that majority of the nurses, 72(72%) had moderately adequate knowledge regarding disaster management.

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