



Basic educational needs of midwifery students for taking the role of an assistance in disaster situations: A cross-sectional study in Iran



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ABSTRACT

Background: After disasters, the disaster medical assistance team composed of skilful healthcare staff should be available at the disaster site for providing care to disaster's victims. It is believed that midwives are at the front line of the disaster management team and should be prepared for providing care to mothers and children.

Objectives: To investigate the midwifery students' basic educational needs for taking the role of an assistant in disaster situations.

Design: A cross-sectional study was conducted in an urban area of Iran, in year 2015.

Participants: Two hundred and thirty-one final-year midwifery students with bachelor and master degrees in midwifery participated in this study.

Setting and Samples: The samples were chosen using a census method from four nursing and midwifery schools affiliated with four medical sciences universities in Tehran, Iran.

Methods: The informed consent form was signed by the samples before data collection. The samples were asked to fill out the researcher's made questionnaires consisting of the demographic data form and the basic educational needs for taking the role of an assistant in disaster situations. The later was consisted of two parts: 'coping with disaster situations' and 'performing the triage'. The data were analysed using descriptive and inferential statistics via the SPSS software for Windows.

Results: The mean score of coping with disaster situations was 31.3 ± 8.2 (out of 45). Also, the mean score of performing the triage was 14.6 ± 11.8 (out of 20). It was found that 68.8 and 74% of the students in coping with disaster situations and performing the triage, respectively had high and very high educational needs. The highest educational need was reported in the areas of 'time management' and 'the use of equipment in disaster situations'. About 86.8% of the students declared that academic education did not prepared them for taking roles in disaster situations. Only 10.6% passed educational courses about disasters before and 11.5% had the work experience in disaster situations. There was a statistically significant relationship between the students' age ($P = 0.01$), participation in educational courses ($P = 0.005$) and the work experience in disaster situations ($P = 0.04$) and educational needs.

Conclusions: Our findings showed that the midwifery students had high needs for education regarding disaster situations. Therefore, the incorporation of disaster management content in the midwifery degree curricula is suggested.

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1. Introduction

Disasters are destructive events that occur suddenly and are divided into the following categories: (i) natural such as earthquakes, floods,

and (ii) man-made such as war. Disasters occur frequently and lead to the death of 75,000 people in each year (Zarea et al., 2014). Disasters are more common in Asia. In other words, 40% of the world's disasters occur in Asian countries (IFRC, 2010). Disasters are accompanied with damages to the economic, social and environmental resources of the community. They also lead to emergency conditions and hinder the provision of healthcare services (Al Khalailieh et al., 2010). Since, saving the life of people in disasters is a priority, there is a need to the preparation of healthcare professionals for disaster management (Ranse et al., 2013).

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The disaster medical assistance team is dispatched to disasters' sites for addressing the healthcare needs of affected communities. The members of the disaster team are healthcare professionals who have appropriate knowledge and skills for providing specialized care to people. They should have abilities such as flexibility and stress management, working in difficult conditions, providing emotional support and performing the triage (Abbasi and Salehnia, 2013).

The members of the disaster team is varied based on the needs of societies. In this respect, the presence of a midwife or a nurse-midwife in the disaster medical assistance team is important, because of the importance of the role played by midwives in this situation (Jorgensen et al., 2010). The midwife as a member of the disaster management team has the responsibility for providing care to vulnerable peoples (Giarratano et al., 2010). In disaster situations, waiting for the arrival of medical teams from the outside the region (national or international) is not cost effective. In this respect, skilled midwives should be present at disaster sites to play their role if needed (Lalonde and Adrien, 2015). The role of midwives in all phases of the disaster including prevention, preparedness, response and recovery is important (Chan et al., 2010). Pregnant women and their infants need especial care besides ordinary trauma care (Harville et al., 2010). Midwives are the successor of gynaecologists who are not present in disasters and can manage issues that women face in disasters. Women's issues, pregnancy, delivery, lactation, family planning, the prevention of sexual violence and AIDS are the specialized areas of midwives practice (Abbasi and Salehnia, 2013).

In many emergencies, physical and emotional losses are severe. Therefore, particular qualifications for healthcare providers are necessary for a rapid response in disasters (Turner, 2015). The world health organization (WHO) stated that coping with disaster situations, improving necessary skills, identifying the needs of vulnerable people and performing triage are essential for nurses and midwives (WHO, 2009). When an individual does not have the resilience to manage disasters and cannot apply the triage system, the disaster team is faced with a large population of casualties and the provision of healthcare services becomes difficult (Panicker and Chitra, 2014). The triage is an efficient way for making the use of limited resources and maximizing care to critically ill patients (Nypaver, 2011).

In Asian countries, the education of disaster management to healthcare professionals is a necessity (Kako et al., 2010). A few studies have addressed the education of students in disaster situations. Appropriate education to students for the application of knowledge is an important aspects of planning for disaster management. Students always can be used as the potential sources for increasing the response power in disasters (Cusack et al., 2010).

Midwifery education in Iran is independent from nursing education and midwifery students are specifically educated in the field of reproductive healthcare services. A bachelor degree in midwifery is granted to those students who pass all theoretical and practical courses during a four-year education process. However, no education is provided on disasters to midwifery students unless a course that is not mandatory during the degree education. While the number of studies on disaster education has increased in recent years, a few studies specifically have addressed the educational needs of midwives (Nypaver, 2011). Also, the specific required education for midwives and midwifery students has not been well described. Therefore, there is a need to the development of education programmes and guidelines on disaster management in the field midwifery (Pinkert et al., 2013).

The first step for developing educational programmes for students in disasters is the identification of their educational needs (Selby and Kagawa, 2012). Educational need assessment strategies can improve the designation and implementation of midwifery disaster education. However, little is known on the basic educational needs of midwifery students and related priorities in Iran. This study was conducted to investigate the midwifery students' basic educational needs for taking the role of an assistant in disaster situations.

2. Methods

2.1. Design

This cross-sectional descriptive study was conducted in Tehran, Iran in 2015.

2.2. Participants

The samples were 235 final-year midwifery students studying in nursing and midwifery schools in four medical sciences universities in Tehran, Iran. Using a census sampling method, all final-year midwifery students were invited to participate in this study. The inclusion criteria were: being a student in the bachelor or master degrees of midwifery and willingness to participate in this study. Out of 235 students invited for taking part in this survey, four students did not fill out questionnaires and were excluded from this study. Therefore, our survey was finalized with 144 bachelor and 87 master degree midwifery students.

2.3. Setting

This study was conducted in four schools of nursing and midwifery affiliated with four medical sciences universities in Tehran, Iran.

2.4. Measurement

The informed consent form was signed by the students before data collection. The samples were asked to fill out the researcher's made questionnaires consisting of the demographic data form and the basic educational needs for taking the role of an assistant in disaster situations. The later was consisted of two parts: 'coping with disaster situations' and 'performing the triage'.

The questionnaire's items were designed based on literature review on disasters and basic educational needs in emergencies and disasters. This questionnaire was consisted of a self-report rating scale comprising 9 items on coping with disaster situations and 4 items related to performing the triage using a 5-point Likert scale (1 = I have a very low educational need, 5 = I have a very high educational need). The minimum and maximum scores for coping with disaster situations were 5 and 45, respectively. The maximum and minimum scores for performing the triage were 4 and 20, respectively. The average and total scores in each area were measured and classified into four levels of the basic educational needs in terms of low, medium, high and very high.

The content validity of this questionnaire was assessed by 15 faculty members and 10 staff of the Iranian Red Crescent Society. Corrections were made in the questionnaire according to their comments. The Cronbach's alpha coefficients for coping with disaster situations and performing the triage were 0.97 and 0.95, respectively.

2.5. Ethical Considerations

Before the study, an approval was obtained from the Ethics Committee affiliated with Tehran University of Medical Sciences (decree number: 21685). The students received information about the aim of the study, rights to withdraw from the study at any time and the confidentiality of the collected data.

2.6. Data Analysis

The data were analysed using descriptive and inferential statistics via the SPSS v.16. The results were presented using descriptive (frequency, percentage, and mean) and inferential statistics (analysis of variance, *t*-test, and Pearson correlation). The significance level was set at $P < 0.05$.

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