ARTICLE IN PRESS

PUBLIC HEALTH XXX (2016) 1-8



Available online at www.sciencedirect.com

Public Health

journal homepage: www.elsevier.com/puhe



Original Research

Barriers to evidence-based disaster management in Nepal: a qualitative study

A.C.K. Lee*

The School of Health and Related Research, The University of Sheffield, United Kingdom

ARTICLE INFO

Article history:
Received 1 October 2015
Received in revised form
31 December 2015
Accepted 11 January 2016
Available online xxx

Keywords:
Disasters
Evidence-based practice
Nepal
Qualitative research

ABSTRACT

Objectives: Globally, the incidence of natural disasters is increasing with developing countries tending to be worst affected. Implementing best practices in disaster management that are evidence-based is essential in order to improve disaster resilience and response. This study explores the barriers to evidence-based disaster management encountered in Nepal.

Study design: A qualitative study was conducted in Nepal involving interviews with key informants in the disaster management field.

Methods: Government officials, academics, programme managers, disaster management practitioners and policymakers involved in disaster management were purposively sampled and invited to interview. 11 agreed to participate and were interviewed. The face-to-face interviews were recorded, transcribed and analysed using thematic analysis.

Results: The interviews uncovered population-level barriers such as contextual factors (e.g. poverty), local custom and culture, as well as community-level issues (e.g. level of engagement and understanding). System-level barriers included limited demand for, availability and accessibility of the evidence-base. The implementation of evidence was influenced by the configuration of the disaster management system and system processes. Political ownership and leadership is an essential determinant of practice.

Conclusions: Several barriers to evidence-based practice in disaster management exist in Nepal. The relative influence of the different barriers varies with political determinants likely to have greater importance in countries such as Nepal where system governance and leadership is insufficiently developed. These issues affect a country's vulnerability to disasters and need to be addressed.

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Introduction

The 1990s was declared by the United Nations General Assembly as the International Decade for Natural Disaster

Reduction in recognition of the need for coordinated efforts internationally to mitigate the human and economic consequences of natural disasters. Since then, the frequency of disasters has not lessened, but paradoxically increased over the

http://dx.doi.org/10.1016/j.puhe.2016.01.007

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Please cite this article in press as: Lee ACK, Barriers to evidence-based disaster management in Nepal: a qualitative study, Public Health (2016), http://dx.doi.org/10.1016/j.puhe.2016.01.007

^{*} Regent Court, 30 Regent Street, Sheffield S1 4DA, United Kingdom. Tel.: +44 114 2220872; fax: +44 114 2724095. E-mail address: Andrew.lee@shef.ac.uk.

past 2 decades.^{1,2} Globally, in 2012 there were 357 reported natural disasters affecting 123 million people and resulting in US\$157 billion in economic damage.³ This estimate of the human toll of disasters is probably a gross underestimate due to considerable under-reporting that occurs.⁴

Most disasters afflict poorer nations that lack the resilience and means to respond to disasters. In addition to the human toll, disasters damage property and infrastructure, heighten risk of infectious disease outbreaks, threaten food security, cause social and economic disruption, and lead to population displacement. Disasters also delay or even reverse the development of these nations. These countries require effective disaster management including appropriate disaster risk reduction action to be undertaken to mitigate their vulnerability as well as effective emergency responses when disasters occur in order to minimize the adverse consequences of disasters.

Key to this is the implementation of evidence-based 'best practices' in disaster management. 8,9 Evidence-based practice in this context borrows from the 'Evidence-based medicine' (EBM) movement whereby professional practice is based upon sound research evidence about the effectiveness of each intervention, and is seen as the gold standard doctrine for decision-making.10 However, the implementation of 'best practice' in disaster management particularly in low- and middle-income country (LMIC) settings is hampered by the paucity of the evidence-base.^{8,11} There are also considerable uncertainties with regards to how evidence-based practice is best achieved. Reviews from high-income countries have identified various determinants and barriers to developing evidence-based practice in disaster management such as knowledge management issues, system configuration issues and behavioural aspects. 12,13 However, it is unclear whether these determinants are identical in developing countries. This study seeks to uncover the barriers to implementing evidencebased practice for disaster management in a LMIC setting using Nepal as a case study.

Methods

A qualitative study was carried out involving key informant interviews with academics, programme managers, disaster

management practitioners and policymakers involved in disaster management in Nepal.

In choosing a case study site, we sought a LMIC that was vulnerable to and had experience of disasters. Nepal is one of the poorest countries in the world with an estimated GDP per capita of US\$735 in 2011/12. Each year, Nepal experiences on average nearly 300 natural disasters such as lightning strikes, floods, earthquakes and landslides. Hetween 1971 and 2012, there were over 28,000 casualties from these natural disasters. Nepal's vulnerability to major disasters is evident by the recent earthquake in 2015 in the Kathmandu Valley that killed more than 8600 persons and injured a further 18,500. And the sound is sound to some the sound in the sound that the sound is sound to so the sound that the sound is sound to so the sound that the sound that the sound is sound to so the sound that the sound the sound that the sound

An additional critical selection criterion used was access to senior policymakers and programme managers in the government, UN agencies and non-governmental organisations involved in this field. We were able access to this target group of individuals with the assistance of 2 non-governmental organisations, Disaster Prevention Network Nepal (DPNet-Nepal) and PHASE Nepal, with whom we had good research links with who had the relevant professional networks locally.

These individuals were identified and purposively selected on the basis of their expertise, senior role, knowledge and/or experience in this field. A degree of snowballing was also used to identify other key informants to invite to interview. Participation was entirely voluntary and not remunerated. Signed informed consent was obtained and their responses were anonymised to protect their identity. Interviews were conducted in English by the researcher.

In total, 11 participants were recruited from diverse backgrounds (Table 1): five senior government officials/politicians, two senior programme managers from UN agencies, and four from non-governmental organisations. Two participants were academics in this field as well. All the participants were Nepalese.

An interview schedule was devised based on a schedule used in another similar study to explore barriers to evidence-based emergency planning practice in the UK.¹³ The set of interview questions was pre-tested to ensure clarity. The questions explored: how disaster plans and policies were devised and implemented; practitioners' adherence to disaster plans in disasters; sources of information, evidence, guidance or advice used on which to base disaster management decisions; interviewees' perceptions of the reliability of these information sources and the extent to which they relied

Tubic T Buckg	ground of key informants. Government official or member of parliament	Academic/ Researcher	Inter-governmental organisation (e.g. UN agency)	Non-governmental organisation
				0184110411011
Participant 1	\checkmark	$\sqrt{}$		
Participant 2	$\sqrt{}$	$\sqrt{}$		
Participant 3	$\sqrt{}$			
Participant 4	$\sqrt{}$			
Participant 5	\checkmark			
Participant 6			\checkmark	
Participant 7			$\sqrt{}$	
Participant 8				\checkmark
Participant 9				\checkmark
Participant 10				\checkmark
Participant 11				

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