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EFFECT OF SOCIAL MEDIA ASSISTED TRAINING (SMAT) ON KNOWLEDGE REGARDING MANAGEMENT OF PSYCHIATRIC EMERGENCIES AMONG NURSES

Premalatha Paulsamy*¹, Krishnaraju Venkatesan², Pranave Sethuraj³, Absar Ahmed Qureshi²,

¹*College of Nursing for Girls, King Khalid University, Khamis Mushayit, Asir Province, Saudi Arabia.

²Department of Pharmacology, College of Pharmacy, King Khalid University, Abha, Asir Province, Saudi Arabia.

³Vee Care College of Nursing Chennai, Tamilnadu, India.

ABSTRACT

Mental disease is often, but not always, the cause of psychiatric emergency. They necessitate immediate action to preserve the patient and others from death or other dire effects. Immediate treatment aimed at the acute manifestations is required, both to ease the patient's subjective symptoms and to prevent potentially harmful behaviour. Therefore, this study was undertaken to assess the effect of Social Media Assisted training (SMAT) on knowledge regarding management of psychiatric emergencies among nurses from selected hospital. A pre-experimental, one group pre and post-test design was adopted with sixty nurses who were selected using non-probability purposive sampling technique. In addition to demographic information, a self-administered questionnaire with 20 questions to assess the knowledge on management of psychiatric emergencies and teaching material was developed by the researchers. Pre-test, SMAT followed by post-test after 2 weeks was done. Regarding the knowledge of nurses on management of psychiatric emergencies, at the pre-test, 48% of the nurses had poor knowledge and 37% had fair knowledge on the management of psychiatric emergencies. But in the post-test, after STP, there were 73% of the nurses gained good knowledge and only 5% had poor knowledge which was significant at $p=0.01$ level. The study concludes that there must be SMAT like training should be given during this pandemic which can empower the nurses to handle the psychiatric emergencies.

KEYWORDS

Psychiatric emergency, Social Media Assisted Training (SMAT) and Knowledge.

Author for Correspondence:

Premalatha Paulsamy,
College of Nursing for Girls, King Khalid University,
Khamis Mushayit, Asir Province, Saudi Arabia.

Email: pponnuthai@kku.edu.sa

INTRODUCTION

A psychiatric emergency is any behaviour that the community's normal mental health, social welfare, or criminal justice systems are unable to address as quickly as it is required¹. During a public disaster, the prevalence of mental health issues in the general community is considerable. The number of patients

who appear with mental illness outbreaks or crises may increase in a disaster or pandemic, but the support systems that are needed to help them may be compromised if they have not been planned for. Disasters, natural and man-made disasters, epidemics, and pandemics, such as the present COVID-19 outbreak²⁻⁴, are examples of these. The relationship between natural disasters and human behavior must be studied in order to understand how to deal with their impact and repercussions, as well as how to manage their mental health implications.

In turn, the prevalence of mental problems is two to three times higher in crisis scenarios than in normal settings, ranging from 8.6 to 57.3 percent in the affected population^{5,6}. Furthermore, the affected community may experience a variety of subsyndromal symptoms. Many responses and acute diseases are self-limiting, while others may necessitate medical attention⁶.

Nonetheless, one of the most pressing concerns about natural disasters is their impact on mental health⁷, which includes patients' symptoms deteriorating and a rise in psychiatric emergencies^{8,9}. Psychiatric problems such as posttraumatic stress disorder, anxiety, and depression have afflicted both direct and indirect survivors of disasters and health professionals who worked in the crisis^{10,11}. In addition to the long-term consequences of calamities, the tactics used to treat emergencies in health care in the acute crisis are crucial in reducing their immediate long-term impact.

The incidence rate of psychiatric emergencies in non-psychiatric institutions such as general hospitals and general medical settings has been estimated at anywhere from 10% to 60%. As a result of the aforementioned, all healthcare professionals require a basic understanding of the diagnostic and therapeutic procedures to be followed in mental emergencies. A number of studies have indicated that up to 60% of mental problems presenting to medical attention in mostly non-psychiatric facilities and hospitals are not effectively diagnosed or treated. Every health care professional should, however, be familiar with the basic aspects of management of psychiatric emergencies. Therefore, this study was undertaken to assess the effect of

Social Media Assisted training (SMAT) on knowledge regarding management of psychiatric emergencies among nurses from selected hospital.

MATERIAL AND METHODS

A pre-experimental, one group pre and post-test design was adopted to assess the effect of SMAT on knowledge regarding management of psychiatric emergencies among nurses from selected hospital. Sixty nurses were selected using non-probability purposive sampling technique. Demographic information such as gender, age, educational qualification, work experience, previous experience in mental health care setting was collected. A self-administered Questionnaire with 20 questions to assess the knowledge on management of psychiatric emergencies and teaching material was developed by the researchers on the following most prevalent emergency topics: severe self-neglect, self-harm, suicidal behavior, depressive or manic episodes, aggressive psychomotor agitation, severely impaired judgment, intoxication, or withdrawal from psychoactive substances.

The pre-test was conducted followed by Social Media Assisted Training (SMAT) on management of psychiatric emergencies was given. The training material was circulated to the nurses through WhatsApp, email and face book etc. The nurses were given 3 reminders to learn the content. The post test was conducted after 2 weeks of the education program. A no harm certificate, institutional ethical approval and consent from the participants were obtained prior to the study.

RESULTS AND DISCUSSION

More than half of the nurses (65%) were from the age group between 25 to 30, and 77%, were female, 63.3% of them were in managerial level, 46.7% with GNM nursing education qualification and 70% were having more than 5 year experience as well as 76.66% of them were reported not worked in psychiatry hospitals.

In Table No.1, regarding the level of the knowledge of nurses on management of psychiatric emergencies, at the pre-test, 48% of the nurses had poor knowledge and 37% had fair knowledge on the

management of psychiatric emergencies. But in the posttest, after STP, there were 73% of the nurses gained good knowledge and only 5% had poor knowledge. This results show that the Social Media Assisted training (SMAT) was effective in improving the knowledge of the nurses on management of psychiatric emergencies. The similar findings were reported in the study by Meghana Madan Kamble, Monita Thokchom (2019) that the STP was effective method for enhancement of knowledge¹¹.

According to the Table No.2, the level of knowledge of nurses on management of psychiatric emergencies was improved significantly at p= 0.01 level. These findings conclude that the SMAT has improved the nurses knowledge on management of psychiatric emergencies. Similar findings were reported in few studies which emphasise the need for frequent in-service education for the nurses to equip and empower them with appropriate knowledge^{12,13}.

Table No.1: Level of knowledge of nurses on management of psychiatric emergencies

S.No	Variable	Pre-test			Post-test		
		Poor	Fair	Good	Poor	Fair	Good
1	Knowledge	N (%)	N (%)	N (%)	N (%)	N (%)	N (%)
		29(48)	22(37)	9(15)	3(5)	13(22)	44(73)

Table No.2: Effect of STP on knowledge of nurses regarding management of psychiatric emergencies

S.No	Variable	Pre-test			Post-test			t' value	p' value
		n	Mean	SD	n	Mean	SD		
1	Knowledge	60	9.12	0.51	60	15.36	2.64	4.521	0.01**

CONCLUSION

Many patients can present with psychiatric emergencies that require care and cannot be neglected. To manage such emergencies, the health care professionals, especially nurses should be equipped with adequate knowledge to handle these emergencies. There must be SMAT like training should be given during this pandemic which can empower the nurses to handle the psychiatric emergencies.

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DECLARATION OF CONFLICTING INTEREST

The authors declare no conflict of interest. The funders had no role in the design of the study; in the collection, analyses, or interpretation of data; in the writing of the manuscript, or in the decision to publish the results.

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