

A RESEARCH REPORT
ON
KNOWLEDGE ON FIRST AID AND EMERGENCY MANAGEMENT
AMONG PLAY SCHOOL TEACHER OF LALITPUR DISTRICT



SUBMITTED BY:

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2015 BPH 11th BATCH
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**SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
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SUBMITTED TO:

DEPARTMENT IN PUBLIC HEALTH
ASIAN COLLEGE FOR ADVANCE STUDIES
PURBANCHAL UNIVERSITY
BIRATNAGAR, NEPAL

2076

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CERTIFICATE

It is certified that this research entitled “**Knowledge On First Aid And Emergency Management Among Play School Teachers Of Lalitpur District**” is the bona fide work of **Ms. Neeru Yadav**, conducted under our guidance and supervision as partial fulfillment of the requirement for the degree of Bachelor in Public Health from Asian Health facilities for Advance Studies, Satdobato, Lalitpur of Purbanchal University.

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DECLARATION

I hereby declare that this research entitled “Knowledge On First Aid And Emergency Management Among Play School Teachers Of Lalitpur District” has been prepared by me under the close guidance and supervision of Asst. Prof. Rupesh Kumar Mandal as a guide in the partial fulfillment of the requirement for the degree of bachelor of public health from Asian Collage for Advance Studies of Purbanchal University, Nepal.

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BIRATNAGAR, NEPAL

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RECOMMENDATION

This is to recommend that the research entitled “**Knowledge on First Aid and Emergency Management among Play School Teachers of Lalitpur District**” has been carried out by **Ms. Neeru Yadav** for the partial fulfillment of Bachelor in Public Health. This original work was conducted under my supervision. I would like to recommend keeping this research report for final evaluation.

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LIST OF ABBREVIATION

ANRCS:	American National Red Cross Society
ACEP:	American College of Emergency Physicians
NFSAD:	National First Aid Science Advisory Board
NHRC:	National Health Research Council
SPSS:	Statistical Package for the Social Science
WHO:	World Health Organization
U.K:	United Kingdom

ABSTRACT

Background: First aid management is the temporary and immediate treatment given to a person who is injured or suddenly ill, using facilities or materials available at that time before regular medical help is impacted. School Teachers have a pivotal role in dissemination of knowledge and development of positive attitude towards any disease among school children. There is a definite need for an intensive health education considering every disease as serious and take emergency care rather than neglecting the myths and misconceptions. First aid makes the difference between life and death, sometimes, more recently, with a children , it is clear that a little knowledge of first aid will go a long way in saving live.

Methodology: The study was cross-sectional descriptive study design in which semi structured questionnaire was used to generate quantitative data to gain insight into institutional knowledge and management on first aid. Non- probability purposive sampling was taken from Lalitpur municipality. Primary data was collected by self-administrative through pre-school. The sampling size was 165. The data will be analyzed through epi-data 3.1. SPSS will be used for the data analysis and interpretation, descriptive statistical will be studied and bivalent analysis will be done between dependent and independent variables.

Result: The majority of teachers were female between age group 22-38 with frequency 121 (73.3%). The overall knowledge of the participant was fair in all first aid domains except the general information on management was good. Vast majority of participant's teacher had positive response towards first aid primary schools. The lowest teacher management response was toward medical condition. There is no significant relationship between the management with age, gender, monthly income but there is significant relation between educational status.

Conclusion: In this study majority of participant has positive attitude for first aid. Most respondents agreed that giving first aid was helpful, the vast majority believe the importance and

usefulness learning first aid. Children's times mostly spend in school under direct supervision of teachers. Consequently, first-aid should be well-known by teachers who are the key personnel to deal with urgent health needs during school hours.

Keywords: Knowledge, First Aid, Emergency Management, Play School Teachers.

CHAPTER 1: INTRODUCTION

1.1 BACKGROUND OF STUDY

The primary purpose of first-aid is to reduce suffering, make healing process possible and decrease damage. So that, the first action taken to deal with injuries and sudden illnesses decides the upcoming sequences of illness and complication rates. Injuries and sudden illnesses are an essential issue in public health and usually occurring at any times of daily life. Besides, school children injuries take a major part (1). Unintentional playground injuries occurring during school hours and includes falls, head injuries, wound bleeding and others. Accidental injuries are usually categorized based on their happening, for instance: burns, scalds, poisoning, falls and drowning. They are also exposed to numerous kinds of epidemiological factors in the school which impact their current and upcoming condition of health (2).

Injuries and sudden illnesses are an essential issue in public health and usually occurring at any times of daily life. Besides, school children injuries take a major part. The first aid is an urgent attention delivered to victims of sudden illness or injury until medical helps arrive. So that, early treatment of such emergencies decreases morbidity and deaths among school aged children (3). A significant part of children's life is school lifetime, which directly affects their physical and mental health. Unfortunately, school health services are ignored in some countries particularly the developing ones. This contributes to shortage in awareness and knowledge regarding sudden illnesses and first aid measure(4).

Children's times mostly spend in school under direct supervision of teachers. Consequently, first-aid should be well-known by teachers who are the key personnel to deal with urgent health needs during school hours. Healthy harmless environment is very vital to avoid these hazards besides competent teachers who can identify any health problem and able to provide first aid for commonly happening emergencies in school. (5)

The 2005 guidelines for first aid definition is “the assessment and interventions that can Heart Association) and ANRCS (American National Red Cross Society), 2005). Another definition adopted in 2014 by American College of Emergency Physicians (ACEP), which refers to first aid

as the actions taken in response to somebody who is wounded or has unexpectedly become ill (6). The primary purpose of first-aid is to reduce suffering, make healing process possible and decrease damage. So that, the first action taken to deal with injuries and sudden illnesses decides the upcoming sequences of illness and complication rates (7).

The National First-aid Science Advisory Board (NFSAB) clarified, everybody can and must learn first-aid, i.e. education and training in first-aid should be worldwide. This is recognized by the fact that 5correctly directed first-aid means the difference among life and death, early versus late rescue, and momentary versus long-lasting disability. Therefore, teachers must know the basic rules for first aid as well as the students must be instructed on first aid. Identification of urgent situation and calling for help is an important issue in first aid, particularly in case of lack or insufficient basic knowledge about first aid measures for complex situations to be sure that the child will have a professional medical help (8).

Teachers are almost the first and the main caregiver represented the first line to protect school children, in addition, teachers' role complements the parent's role. School teachers during the school hours, are the real first-respondent to emergencies, injuries resulting from school accidents. Therefore, they have to be capable to act accurately with health emergencies affected the school children (9).

1.2 STATEMENT OF PROBLEM

Unintentional injuries encountered in the childhood are a global public health problem and are to be found as a first order among the causes of mortality and morbidity. Across the world, at least 875 000 children aged below 18 years decease due to unintentional injuries yearly and more than 95% of these deaths happen in countries with low and middle income levels. (10) . For example, in United States of America each year 200,000 schoolchildren are injured during playing and 70% of cases requires hospitalization, moreover, in Europe countries as Poland there were 3274 school accidents reported among 293,000 primary school student every year(11).

Not only injuries but, chronic childhood illnesses may become suddenly an emergency during school period. Schools today contains higher numbers of children with long-lasting and severe

illnesses, suffering from diseases like epilepsy, asthma and diabetes mellitus which are requiring special attention and urgent care (12).

Global studies have noted a diverse depiction around readiness among school teachers to apply first aid. In European studies, for instance, the current philosophy is tending to learn first aid to primary school teachers and they will in turn transfer such skills and knowledge to their pupils, besides, poor knowledge, attitude, practice and awareness among school teachers was observed by many Asian researchers(13).

There is a lack in scientifically sound data and only few studies are concerned with this subject in Iraq, in addition, physicians and health care providers are not present in the school (14).

1.3 RATIONALE AND JUSTIFICATION OF THE STUDY

As the study shows the rapid growth of primary school in the in present it shows that the primary school growth as the business. In the other hand most of the family are nuclear and parent could not give full time for their children as a result the demand of the primary school is increasing day by day. So that parent could give their time on job for earning and searching for the new better job opportunities. As a result responsibility of the school increases and teacher are the main key person for management of children in their study, food, and health.

Children spend most of the time in school where they are exposed to various types of activities and could causes minor injuries, which influence their present and future state of health. First aid is the treatment of any injury or illness before availability of professional medical aid. Teacher is the key person who can attend the children for minor injuries in school through complete knowledge regarding first aid management. This study will be done among primary school teachers to evaluate the effectiveness of teaching program on knowledge and practice regarding first aid management of selected minor injuries in children.

1.4 OBJECTIVES OF STUDY

1.4.1 General objective

- To assess the knowledge on first aid and emergency management among play school teacher at selected play school teachers at selected play school

1.4.2 Specific objectives

- To assess the level of knowledge regarding first aids management among play school teacher
- To assess the level of knowledge regarding emergency management
- To assess the association between the level of knowledge and the selected socio-demographic variable

1.5 THEORETICAL/CONCEPTUAL FRAMEWORK

This conceptual framework is intended to help school governors and managers, and those who work with them on risk, safety and emergency management, to promote school safety more effectively. It can be used to assess a school's strengths and weaknesses in risk and emergency management, identify gaps and opportunities for improvement, and – importantly – make connections between operational definitions.

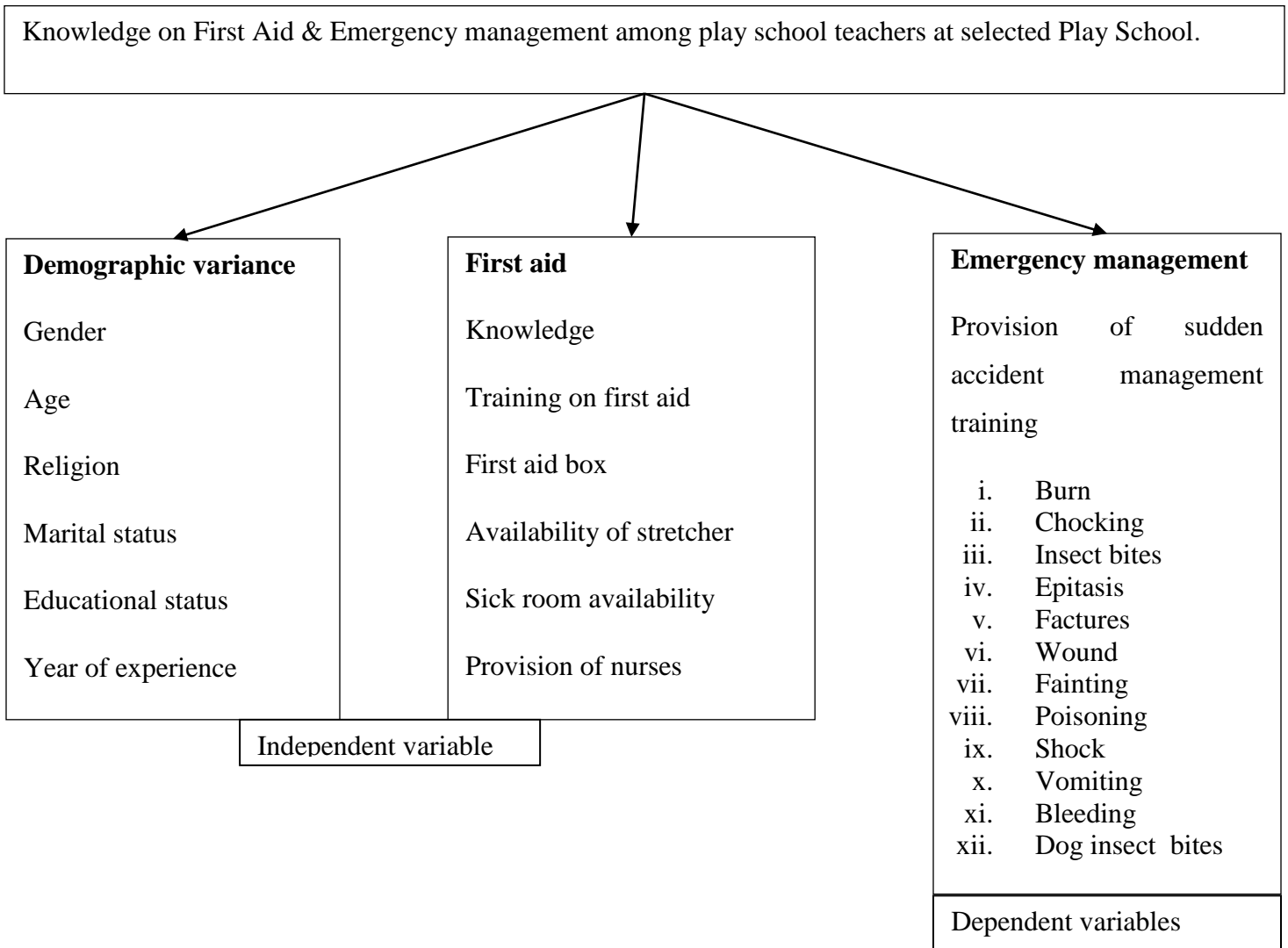


Figure 1. 1Conceptual frame work

Demographic variance: it is defined as the variable that is collected by researchers to describe the nature and distribution of the sample used with inferential statistic, Gender, Age, Education status, Educational Background, Year of experience

First aid: it is the immediate and temporary care given to an injured or ill person before treatment provided by medical trained personnel or by a health care institution.

Knowledge: knowledge is a familiarity awareness, or understanding of something, such as facts information, descriptions or skills which is acquired through experience or education by perceiving, discovering or learning.

Training on first aid: training is teaching, or developing in oneself or other, any skill and knowledge that relate to specific useful competencies. Training has specific useful competencies. Training has specific goal of improving one's capacity, productivity and performance. .

First aid box: it is a collection of supplies and equipment that is used to give medical treatment

Availability of stretcher: is an apparatus used for moving patients who require medical care.

Sick room availability: define as the room in which sick or ill person can rest or confined.

Emergency management: define the state in which normal procedure are interrupted and immediate measures need to take to prevent that state turning into a disaster

Hospital near school: it defines the school operated in a hospital, generally a children's hospital which provide instruction to primary and secondary grade levels. It helps the school children and academic progress during periods of hospitalization or rehabilitation

Provision of school nurse: the school nurse has crucial role in the seamless provision of comprehensive health service to children

Provision of sudden accident management training

Burn: coagulated destruction of the surface layer of the body is called burn or scald

Chocking: have severe difficulty in breathing because of a constriction or obstructed throat or lack of air.

Insect bites: bites mean injury resulting from a cut with the teeth or sting. Bite may be either by insects or animals

Epitasis: acute hemorrhage from the nostril nasal cavity,

Fractures: defined as the structural break in the normal continuity of bone cartilage

Fainting: defined as sudden brief loss of consciousness and posture caused by decreased blood flow to brain.

Death: the end of life

Poisoning: is a condition caused by introduction to harmful substances or chemical into the body either by injection, inhalation or ingestion

Hemorrhage: is defined as escape of blood from the vascular compartment to exterior

1.6 KEY TERMS, CONCEPTS AND VARIABLES

- **Play school:** It refers to a regular supervised play sector for children of 1-3years. “A study to assess the knowledge on first aid management among play school teachers at selected playschools at Lalitpur District.”
- **First aid management:** First aid management is defined as the temporary and immediate treatment given to a person who is injured or suddenly becomes ill, using facilities or materials available at that time before regular medical help is impacted.
- **Teachers:** It refers to the individual who provide care and guidance for children in play schools.
- **Assumptions:** The play school teachers may have inadequate knowledge regarding the first aid management of children.
- **Knowledge:** knowledge is a familiarity awareness, or understanding of something, such as facts information, descriptions or skills which is acquired through experience or education by perceiving, discovering or learning
- **Training on first aid:** training is teaching, or developing in oneself or other, any skill and knowledge that relate to specific useful competencies. Training has specific useful competencies. Training has specific goal of improving one’s capacity, productivity and performance.

1.7 LIMITATION OF THE STUDY

- Since the study was done in small sample, generalization cannot be done. Also data was collected in primary school setting. Thus, the answer of the respondents may be influenced by each other.
- Since study was done by non-probability sampling, therefore the generalization of the population may affect
- Information was collected in play school setting so, the concept denote generalize the activities of first aid and emergency management at general school

CHAPTER 2: LITERATURE REVIEW

2.1 LITERATURE REVIEW

Review of literature is an essential step in research process. It refers to a widespread, exhaustive and systematic examination of different publications related to study issue.

Review of literature, is originated from many sources such as books, manuals, previous thesis, dissertation, journal articles, encyclopedias, report and internets.(15) The most vital aim for conducting review of the literature is to identifying any topics known regarding the current study, whereas any former studies are located, and the conceptual framework of the study is formulated. Besides, review of literature is beneficial in planning the methodology of study.(15)

Baser2007 conducted scientific research to evaluate and determine Turkish primary school teachers' knowledge and attitude concerning first aid. The study sample included three hundred twelve primary school teachers asked on first aid for hemorrhage, epistaxis, wound, object aspiration and insects' stings. The study result indicated that the progress of primary school teachers' the study result indicated that the progress of primary school teacher' age was accompanied with more unlikely first aid practices and attitudes. Finally, study pointed that the knowledge and attitude of primary school teachers toward first aid was insufficient and recommended for first aid and pediatric basic life support training (16)

During the same year a study in Poland done by Wisniewski & Majewski 2007 to assess knowledge and attitude about first aid among selected high school teachers in the western Pomerania region. Sample of one hundred school teachers encompassed in this survey from two high schools of two polish cities. The study tool used in this work was a consistent questionnaire used formerly to determine problems of providing first aid among Polish society. The study result showed that despite the fact that the majority of targeted teachers previously had first aid courses, the level of their knowledge required to provide first aid was insufficient. For example, the result indicated that 50% of teachers had theoretical knowledge about rules of providing first aid but only one third of the respondents were able to put these theoretical rules into practice in reality. Also the majority of teachers demonstrated negative attitude toward providing first aid in emergency cases. So that, the study concluded that the training for administering first aid is

mandatory for teachers as well as pupils and should be done by medical professional staff, and the study did not omit to mention the importance of changing negative attitude of teachers during first aid session by focusing on ethical value of human assistance.(17)

Few years later, Ali, in 2010 performed an educational training program about first aid for recently graduated nursery school teachers and aimed to develop, implement and evaluate such program about first aid for emergencies happening in preschools. The interventional program included 60 female participants of recently graduates of specific education college, university of Zigzag. The data collection of study divided into three parts, in the first part a questionnaire used to assess teachers' knowledge regarding first aid, and during second part an educational program implemented on twenty sessions (30 - 45) minute per session, and also participant teachers were distributed to smaller groups during practical sessions and finally the third part was an evaluation of program by analyzing the pre and post test results of the respondents. Besides an observational check-list used to assess participants first-aid practices regarding wounds, seizure, fractures, epistaxis, burns and choking. The result confirmed that a significant improvement of knowledge and practice from (0 – 10%) at pre-test to (80-95%) in post-test result scores, which indicated that the program was successful, hence, the study recommended to add first aid practical courses for undergraduate curriculum and periodic training courses for graduated nursery teachers (18)

Furthermore, in 2013 Kumar, carried out a study aimed at assessing practices and perceptions of school teachers toward first aid, and to find rapport between socio-demographic characteristic and first aid practices, and also to discover any factors that may influence teachers' perceptions and practices regarding first aid. A cross-sectional study design applied for nine months by using self-administered questionnaire which was tested formerly, and included forty schools that selected randomly in city of Mysore. From 262 school teachers involved in the study 57.3% were from urban areas while 42.7% from rural ones, additionally, 49.6% of teachers 'age was above 40 years old. Despite of study results that exposed already 97.3% of selected teachers were heard the term first aid previously, just 78.8% of them comprehended that wounds needs first aid and only 30.2% of them were mindful that fainting needs first aid. So that, the total deduction referred that teachers' perceptions and practices regarding first aid is poor and disappointing (19)

Devashishet *al.*, in 2013 performed a research to evaluate teachers' knowledge and practices about first aid, their readiness and if they need first aid training in the city of Vadodara. The

study done through cross-sectional design and included 236 school, which two teachers selected from each school (one teacher of physical education and the second teacher from other subjects) and the total number of respondents were 472 teachers (394 males and 78 females), and the study lasted from January 2010 to December 2010. The result of the study showed that just 2.96% of teachers were previously trained on first aid, 14.83% of teachers answered correctly 70% of the questionnaire. Also the authors noticed a significant association between first aid training and better knowledge and also noteworthy association between knowledge score and age, gender, teaching experience and school level (primary, secondary and higher secondary) had been recognized. Generally, paucity in knowledge of teachers detected and based on results of study, the researchers concluded and recommended that first aid training is important and must be regular and updated as well as it must continue throughout teachers' professional career.(20)

Sonmez *et al.*, in 2014 conducted a study that aimed to evaluate preschool teachers' knowledge regarding first aid practices in city of Isparta, Turkey and to identify factors that may affect such levels of knowledge. Total 110 of preschool teachers included in this cross-sectional study by using a questionnaire consisted of 20 points scale. Study result pointed that washing a wound after a dog bite by soap and water and immobilization of fallen child from high altitude were the issues which had lowest knowledge by participants, and their scores were 16.4% and 20.9%, respectively. Additionally, the findings of the study revealed that the age, employment years, previous first aid training and previous experience with situation that needs first aid had no significant effect on teachers' levels of knowledge. Likewise, the study detected that participants had poor knowledge and since first aid training did not show noteworthy differences on their knowledge, the researchers inference was that the quality of training need to be received is a fundamental matter(21)

Shobha Masih in 2014 conducted a quasi-experimental study with one group in Dehradun district of Uttarakhand. The study aimed at evaluating the efficiency of educational program on information of teachers regarding first aid for minor injuries in school children. 50 primary school teachers were selected by convenience sampling, and 94% of selected teachers were female, the result showed that 72% of them experienced previous injuries in school children and 86% of them had no previous training about first aid, but instead of that 74% of them had appropriate knowledge about first aid from other sources like: reading, friends, relatives and

health professionals personnel. The study concluded that the applied program was effective and revealed the further need for such programs to improve the total health standards for school children(2)

CHAPTER 3: RESEARCH METHODOLOGY

3.1 STUDY DESIGN: The study was cross-sectional descriptive study design in which semi structured questionnaire was used to generate quantitative data to gain insight into institutional knowledge and management on first aid.

3.2 STUDY AREA: the study area was done in Lalitpur municipality. This municipality mainly includes school of Hattiban, Satdobato, Kupondol, Dhapakhel, Harishaddhi, Jhamsikhel.

3.3 STUDY DURATION: The study duration of the study was from Jestha 1st –to Ashwin 29th month.

3.4 STUDY POPULATION: The targeted study population group is teacher of play school to assess the Knowledge on First Aid & Emergency management among play school teachers at selected Play School of Lalitpur municipality. School name are listed below:

- Fairy's World Early Child Development School, Hattiban, Lalitpur
- Nagarjuna Kid's World Montessori Pre School, Gushingal- Kupondol, Lalitpur,
- Mahendra Adarsha Vidiyashram Secondary School. Satdobato, Lalitpur
- Ankur Pre-School And Day Care Jhamshikhel Lalitpur
- Machhapuchchhre School. Kusunti Lalitpur, Nepal
- Blue Bird Secondary School. Satdobato, Lalitpur
- Bright Future Secondary School, Satdobato Lalitpur,
- Radiant Readers' Academy Sanepa-2, Nepal
- Nazareth School Sanepa-2 Lalitpur
- Gyandeep Secondary Boarding School Sanepa-2 Lalitpur
- Nightangle Play School Gushingal, Lalitpur.

3.5 SAMPLING TECHNIQUE: non- probability purposive sampling was taken from Lalitpur municipality.

3.6 DATA SOURCES: primary data was collected by self-administrative

3.7 PRIMARY DATA: Primary data was taken through personal experimental studies. The data would be unique, original reliable and accurate. Primary data was obtained through interview. Questionnaires survey, observation checklist, case studies.

3.8 SAMPLING TECHNIQUE AND SIZE

The sample size was a total of 165. The sample size was taken as the standard value which is 165 as prevalence was not included, Allowable error of 8%, 95confidence interval and 10%non-response rate was used to calculate the sample size.

The formula used for the sample size calculation was,

$$Z^2pq/d^2$$

Where,

n = sample size

z= confidence interval = 95%= 1.96

p= proportion prevalence= 50%

q= (1-p) =1-0.5 =0.5

d= permissible error= 0.08

$$n= (1.96)^2*0.5*0.5/ (0.08)^2$$

$$= 3.8416*0.25/ 0.0064$$

$$= 0.9604/0.0064$$

$$=150$$

With adjusting 10% nonresponsive rate sample size was = 165

3.9 DATA COLLECTION TECHNIQUES/ TOOLS

- **Tools:** semi structured questionnaire was used for the data collection
- **Techniques:** Self-administered was done by the teachers themselves

3.10 VALIDITY AND RELIABILITY

Relevant literature review was done throughout the research. Questionnaire was developed after consultation with supervisor and subject expert. Questionnaire was developed in English language and back to Nepali language and was consulted with the third expert. The questionnaire was pretested by taking 10% of total sample of the study in similar setting in the Lalitpur district and modification was done after consultation with supervisor.

3.11 ETHICAL CONSIDERATION

Study was conducted after the approval from department of research and development of research of Asian college for advanced studies. Ethical approval was taken from Ethical Review Board (ERB) of Nepal Health Research Council

- **Consent**
 - Verbal consent was taken from the teacher and the permission had been taken from the head of the schools
- **Confidentiality**
 - Confidentiality of the information was maintained through anonymity of personal information.
 - Participant was not forced to answer the questions.
 - Collected information was used only for the study purpose

3.12 EXCLUSION/INCLUSION CRITERIA

Inclusion Criteria

- The respondent who were present on the time of data collection.
- The respondent who were willing to participate was included

Exclusion Criteria

- The respondent teachers who were absent on the day of data collection.
- Workers of the primary school

3.13 DATA ANALYSIS AND INTERPRETATION

Information that obtain from primary school teachers of Lalitpur district

The data was be analyzed through epi-data 3.1. SPSS was used for the data analysis and interpretation, descriptive statistical was been studied and bivalent analysis was done between dependent and independent variables

3.14 WORK PLAN

Work plan on Knowledge on First Aid & Emergency management among play school teachers at selected Play School

S. N	Activities	Jestha				Ashad				Shrawan				Bhadra				Aswin			
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
1.	Topic selection	■																			
2.	Literature review	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■				
3.	Proposal Development		■	■																	
4.	Proposal Presentation				■																
5.	Questionnaire Development				■	■															
6.	Pre-testing the question				■	■															
7.	Data collection						■	■	■												
8.	Data entry and loading										■	■	■								
9.	Data analysis and interpretation														■						
10.	Draft writing of research														■	■	■				
11.	Final presentation																		■		
12.	Submission of final research																			■	

CHAPTER 4: FINDINGS OF THE STUDY

TABLE 4.1 SOCIO -DEMOGRAPHIC CHARACTERISTIC

Characteristics	Frequency (n=165)	Percentage %
Gender		
Female	148	89.7
Male	17	10.3
Age		
Below 22	16	9.7
22-38	121	73.3
Above 38	28	17.0
Religion		
Hindu	132	80.0
Christian	22	13.3
Buddhist	7	4.2
Muslim	4	2.4
Residence		
Urban	140	84.8
Rural	25	15.2
Marital status		
Married	122	73.9
Unmarried	37	22.4
Divorced	6	3.6
Educational status		
Intermediate	46	27.9
Bachelor	82	49.7
Master	37	22.4
Year of experience		
1-6	118	71.5
7-30	47	28.5

Monthly income		
7000-14000	52	31.1
14001-15000	40	24
15001-20000	46	27.5
20001-50000	29	17.5

The above table showed that among 165 participants maximum number of 121 falls under current age group 22-38 which is 73.3% of total participants. Other 16 and 28 comes under age group below 22 and above 38 respectively which is 9.7% and 17.0%. Among these participants 148 is female and 17 is male population which in percentage is 89.7% and 10.3% respectively.

In the Religion category, maximum participants follows Hinduism which is 132 out of 165 i.e. 80.0% of total population. Similarly Christian, Buddhist and Muslim participants are 22 (13.3%), 7 (4.2%) and 4 (2.4%) respectively.

84.8% of total participants belong to urban area and 15.2% belong to rural area. Among the respondents 122 of them are married, 37 are unmarried and 6 are divorcee.

According to the survey, maximum of 82 participants holds a bachelor degree which is almost half of the population, 49.7% to be exact. Similarly respondents with intermediate degree are 27.9% and with master degree is 22.4%.

As per my survey, maximum teachers have a working experience in between 1 to 6 years. 118 i.e. 71.5% population comes under this period. Participants with an experience from 7 to 30 years are few with 28.5% (47).

In terms of monthly income, every category has a frequency of more or less same. 52 participants have a salary range from 7000-14000. 40 teachers have a salary from 14001-15000 whereas respondents with salary range from 15001-20000 are 46 but number of participants is minimum of 29 whose salary range is from 20001-50000.

TABLE 4. 2 KNOWLEDGE ON FIRST AID

Characteristics	Frequency (n=165)	Percentage %
Heard about first aid		
Yes	164	99.4
No	1	0.6
Correct definition		
A completing a primary survey	24	14.5
The first help to the victim of an accident	137	83.0
Assessing a victim's signs	2	1.2
Treating victim of shock	2	1.2
Attained Training or workshop		
Yes	71	43.0
No	94	57.0
If attained		
To provide medical care on the spot	39	23.6
To prevent over expenses	16	9.7
To maintain airway, breathing, and circulation	2	1.2
All of the above	21	12.7

Among all the participants, 164 teachers heard about first aid and it's obvious but I was shocked to know about one teacher who doesn't have any idea on first aid. On defining majority number, 83% defined first aid as "The first help to the victim of an accident" while 14.5%, 1.2% & 1.2% respondents define it as "A completing a primary survey", "Assessing a victim's signs" and "Treating victim of shock" respectively. The table also illustrates some interesting fact on participants attaining training or workshop and as we can find numbers is on slightly more on negative side. 57% hasn't attended any training or workshop where as 43% are such who has taken training or attended workshop.

TABLE 4. 3 KNOWLEDGE ON FIRST AID

Characteristic	Frequency (n=165)	Percentage %
School having first aid box		
Yes	10	90.9
No	1	9.1
School having stretcher		
Yes	2	18.2
no	9	81.8
School having sick room		
Yes	3	27.3
No	8	72.7
Direct contact with hospital		
Yes	9	81.8
No	2	18.2
School having nurses		
Yes	3	27.3
No	8	72.7
Provision of sudden accident		
Yes	4	36.4
No	7	63.6
Death of child during school		
Yes	2	18.2
No	9	81.2

The table showed that the school having first aid box in school was 10%(90.9) among them 1%(9.1)have heard about the first aid , the school didn't have stretcher 81.8% (9), the school having the sick room 27.7% (3) which is less which is not expected. School having direct contact with hospital the school having as a result is 81.8% (9) and the school not having the contact with hospital is 18.2% (2). The provision of sudden accident in the school or during the time period 36.7% (4), the school not having emergency condition or sudden accident 63.6% (7). The

any record of the school of child death during time of school the respondent teacher of was 18.2% (2) among them 81.2 % (9) answered not death in the school.

TABLE 4. 4 SOURCE OF GAINING THE KNOWLEDGE

Characteristic	Frequency (n)=267	Percent of cases %
Sources of knowledge about First aid		
Reading	124	75.0
Mass media	39	23.6
Training	62	37.6
Internet	42	25.5

Above table shows represent the multiple choice question in which sources of knowledge about first aid the total number of frequency (n)267 which represented including reading 124(75.0%) mass media 39(23.6%) training 62(37.6%)internet 42 (25.5%). As result we could know that the most common method of gaining knowledge is through reading 124(75.0%) then through the various training method 62(37.6%)

TABLE 4. 5 MOST COMMON ACCIDENT

Characteristic	Frequency(n=487)	Percent of cases %
Burn	7	4.2
Chocking	40	24.2
Insect bites	61	37.0
Epitasis	54	32.7
Fracture	72	43.6
Wound	140	84.8
Fainting	58	35.2
Poisoning	27	16.4
Shock	28	17.0

Above table shows the most common accident which occurred in the school during the school time of the child as it represent the multiple choice question include burn 7(4.2%) ,chocking 40(24.2%), insect bites 61(37.0),epitasis 54(32.7%), fracture72(43.6%), wound 140(84.8), fainting 58(53.2%)poisoning 27(16.4%), shock28(17.0)respectively. Among them the high percent or frequency represent wound 140(84.8%) as a first common accident insect bites in the second listed and fainting as a third listed category.

TABLE 4. 6 ASSOCIATION BETWEEN SOCIO-DEMOGRAPHIC VARIABLE AND LEVEL OF KNOWLEDGE

Variable	Level of the knowledge of teacher		Chi-square value	p-value
	Adequate	Inadequate		
Gender				
Male	3	5	2.635	0.131
Female	46	23		
Age				
13-22	4	2	1.375	0.503
22-38	38	19		
38-55	7	7		
Residence				
Urban	43	23	45.8	0.498
Rural	6	5		
Marital status				
Married	23	34	2.108	0.349
Unmarried	13	13		
Divorced	2	2		
Religion				
Hindu	18	48	2.108	0.349
Christian	9	3		
Buddhist	0	2		
Muslim	1	1		

Education status				
Intermediate	17	4		
Bachelor	25	18	16.398	0.000*
Master	6	20		

*Statistically significant association between independent variable and knowledge on first aid on socio-demography.

Above table represent the level of knowledge in which participated teacher were aware of the first aid and it's knowledge as the above results shows the female participant are more than the male participant the level of the significance p-value 0.503 (>0.05) hence there were no level of significant according to the gender. As the age wise the adequate and in adequate number of teacher were group of 22-33 the level of significance (0.498). According to the residence the level of significance was (0.498). Studying the marital status of the participant (0.349) according to religion (0.349) which doesn't associate significant value (<0.05). At lastly education status which intermediate, bachelor and master relates the 0.000(<0.05), significant association was seen interrelated.

TABLE 4. 7 FIRST AID MANAGEMENT

Characteristic	Frequency (n=165)	Percentage of cases %
Shock is a life threatening condition		
True	141	85.5
False	24	14.5
Treatment of shock		
Prevent the body head	37	22.4
Check ABC	53	32.1
Raise the victim leg 8-12 inches	25	15.2
Keep the head injured patient on his back	50	30.3
Diabetic treatment		
Drive the bus straight to hospital	40	24.2
Ask him where his insulin is and give him a shot	18	10.9
Do not give him food or drink	6	3.6
Make him comfortable give him a sweet drink, candy something with sugar in it.	101	61.2
Poison case include department		
Gynecology	6	3.6
Surgery	26	15.8
Pediatric	92	55.8
psychiatry	41	24.8
First aid for chocking		
it is best not to do anything if the person is chocking	12	7.3
tap the back	108	65.5
make him/her vomit	27	16.4
give him her water to drink	18	10.9

The above table represent management of the first aid, Shock is a life threatening condition 141(85.5%) were agreed as shock is a life threading condition among 24(14.5), Treatment of shock in which maximum answer were check ABC which were right 53(32.1%), first aid management on the Diabetic case maximum answered the correct answer that was Do not give him food or drink Make him comfortable give him a sweet drink, candy something with sugar in it 101(61.2%). Poison case include the department answered ware pediatric 92(55.8%) which were not answer accepted, correct answer was psychiatry. First aid management for chocking answer was to tap the back 108(65.4%) which were right answer.

TABLE 4. 8 FIRST AID MANAGEMENT

Characteristic	Frequency (n)=165	Percentage of cases %
Signs of food poisoning		
Nausea	11	6.7
Vomiting	63	38.2
Diarrhea	4	2.4
All of the above	87	52.7
First step of caring bleeding wound		
Apply pressure at the pressure point	35	21.2
Add bulky dressing to fore blood soaked bandage	43	26.1
Elevate the wound	13	7.9
Apply direct pressure with a clean or sterile dressing	74	44.8
First aid management if child faint		
Give soft drink containing sugar	106	64.2
Give food to eat	1	0.6
Call ambulance	48	29.1
Inform parent's	10	6.1
Purpose of cold application on fever		
To reduce temperature	127	77.0

To relief pain	5	3.0
To check hemorrhage	13	7.9
All of the above	20	12.1
Dressing and bandage are used to		
Reduce the victim pain	14	8.5
Reduce internal bleeding	16	9.7
Help control bleeding and prevent infection	126	76.4
Make it easier to the hospital	9	5.5

Above table show the management part of first aid in which question were asked Signs of food poisoning maximum teacher gave the right answer Nausea, Vomiting , Diarrhea All of the above of the above were correct answer 87 (52.7%). First step of caring bleeding wound in which Apply direct pressure with a clean or sterile dressing 74 (44.8%). first aid management in the condition of child faint give soft drink containing sugar were the correct answer given maximum 106 (64.2%). purpose of cold application on fever which correct answer were to reduce temperature were answered 127 (77.0%). Dressing and bandage are used to help control bleeding and prevent infection 126 (76.4%) which were maximum.

TABLE 4. 9 FIRST AID MANAGEMENT

Characteristic	Frequency (n=165)	Percentage of cases %
First aid for stop nose bleeding		
To give him time to rest	17	10.3
To sit down , lean in the back	86	52.1
To sit down lean in the back and pinch the nostrils	58	35.2
Take him her to nearby clinic and hospital	4	2.4
Fracture definition		
Inflammation of bone	46	27.9
Restriction of boney tissue	55	33.3
Loss of continuity of boney tissue	57	34.5
Loss of continuity of skin and member	7	4.2
First aid in case of fracture		
Control bleeding by pad bandage in case of open fracture	25	15.2
Massage at the site of fracture	73	44.2
Make the patient comfortable	24	14.5
Immobilization of the part	43	26.1
First aid for fractured leg and bleeding		
Clean the wound	29	17.6
Apply the splint	27	16.4
Apply pressure bandage	20	12.1
All of the above	89	53.9

Common dislocation in children		
Shoulder	66	40.0
Knee	20	12.1
Elbow	70	42.4
Hip	9	5.5

First aid management on First aid for stop nose bleeding correct answer were and had maximum 86 (52.1%). Fracture definition Loss of continuity of boney tissue which were answered by 57 (34.5%) and in case of fracture what should not be done, correct answer were Massage at the site of fracture 73 (44.2%). First aid for fractured leg which is bleeding the answer were Clean the wound, Apply the splint , Apply pressure bandage , All of the above were correct 89 (53.9%). Common dislocation in children elbow were correct answer which were answer by the maximum teacher hence the above table show that the most of the teacher have the knowledge on first aid management.

TABLE 4. 10 FIRST AID MANAGEMENT

Characteristic	Frequency (n=165)	Percent of cases %
First aid management of insect bites		
Hot compression	75	45.5
Gentle tightening above the site of sting	45	27.3
Pain reliving drug	18	10.9
Reassurance	27	16.4
Rubbing the eye the best method of removing foreign bodies from eye		
True	20	12.1
False	145	87.9

First aid management of dog bite		
Hospital visit	32	19.4
Inform the parents	14	8.5
Wash the wound with water	113	68.5
Give him water to drink	6	3.6
First aid management of seizure attack		
Keeping the person safe until the seizure stop	49	29.7
Stay calm, loosen around the neck area	28	17.0
Stay with him if the seizure stops	14	8.5
All of the above	74	44.8

The above table represent the management procedure of the question were asked about the management of insect bite which include option 75 (45.5%), Gentle tightening above the site of sting 45 (27.3%), Pain reliving drug 18 (10.9%)reassurance 27 (16.4%) in which 75 (45.5%) and 90 (54.5%) gave the wrong answer. Rubbing the eye the best method of removing foreign bodies from eye in which 145 (87.9%) answered that rubbing eye was the wrong method where 20 (12.1%) answered that rubbing eye were the right method. First aid management of dog bite in which hospital visit 32 (19.4%), inform the parents 14 (8.5%), wash the wound with water 113 (68.5%), give water to drink 6 (3.6%)in which maximum gave the right answer wash the wound with soap and water. First aid management for seizure attack in which answered maximum answered for all of the above 74 (44.8%) which were the right answer.

TABLE 4. 11 ASSOCIATION BETWEEN SOCIO-DEMOGRAPHIC VARIABLE AND LEVEL OF MANAGEMENT

Variable	Level of Management of Teachers		Chi Square Value	p-value
	Adequate	Inadequate		
Gender				
Male	6	7	0.315	0.575
Female	42	35		
Age				
13-22	5	5	0.74	0.786
22-38	31	34		
38-55	12	7		
Residence				
Urban	41	35	0.74	0.786
Rural	7	7		
Marital status				
Married	33	34	0.5841	0.54
unmarried	6	14		
Divorced	3	0		
Religion				
Hindu	33	37	0.497	0.919
Christian	7	7		
Buddhist	1	2		
Muslim	1	2		
Education status				
Intermediate	17	4	16.328	0.000*
Bachelor	25	18		
Master	6	20		

*Statistically significant association between independent variable of management on first aid and socio-demography

Above table describe the level of management among the teacher with the socio-demographic variance. According to gender which include male and female as studying the adequate and inadequate the level of significant value was 0.57 (>0.05) which does not associate any relation with the management. According to the age which was categorized into three categories the significant result were 0.786 (>0.05) no significant relation with management. Residences also doesn't shows the significant relation 0.786 (>0.05). Marital status also doesn't show the significant result 0.54 (0.05). Religion include the Hindu, Christian, Buddhist, Muslim, the result were 0.919 (>0.05). Education status include intermediate, bachelor and master results 0.000 (<0.05) which shows the association between level of significant value

TABLE 4. 12 OPINIONS ON IMPORTANCE OF FIRST AID

Characteristic	Frequency (n=165)	Percentage of cases %
Important to learn first aid indaily life		
Agree	149	90.3
Disagree	16	9.7
Learning first aid is difficult		
Agree	41	24.8
Disagree	124	75.2
Done only by experienced health care professionals		
Agree	85	51.5
Disagree	80	48.5
Training for teacher is useful		
Agree	148	89.7
Disagree	17	10.3
First aid should be taught to		

teacher as well as peoples		
Agree	159	96.4
Disagree	6	3.6
Important to keep first aid box in school		
Agree	160	97.0
Disagree	5	3.0
Asthma and diabetic child should be isolated with special need kid		
Agree	120	72.5
Disagree	45	27.3
Teacher should have first aid knowledge and skill		
Agree	154	93.3
Disagree	11	6.7

The above table represent the opinion of the teacher towards the importance of knowledge and management of the first aid which we categorized into 4 group strongly agree, agree, undecided, disagree and again merged into two group strongly agree and agree as agree and undecided and disagree as disagree.

The opinion point include ‘Important to learn first aid in daily life agreed teachers were 149 (90.0%) and disagreed were 16 (9.7%). Teachers were asked question about learning first aid is difficult in which 124 (75.8%) were disagreed and 41 (24.8%) were agreed. The first aid management is done only by health professional agreed were 85 (51.5%), and 80 (48.5%) were disagreed. Training for the teacher on first aid management is useful in which 148 (89.7%) were agreed and 17 (10.3%) were disagreed. First aid management were taught only to teacher as well as people 159 (96.4%) were agreed and 6 (3.6%) were disagreed. It would be important to keep first aid box in the school 160 (97.0%) were agreed and 5 (3.0%) were disagreed. Asthma and diabetic child should be isolated with special need kid 120 (72.5%) were agreed and 45 (27.3%)

were not agreed. Teacher should have knowledge about first aid management in which 154 (93.3%) were agreed and disagreed were 11 (6.7) respectively.

CHAPTER 5: DISCUSSION

In this study majority of participant has positive attitude for first aid. Most respondents agreed that giving first aid was helpful, the vast majority believe the importance and usefulness learning first aid. Children's times mostly spend in school under direct supervision of teachers. Consequently, first-aid should be well-known by teachers who are the key personnel to deal with urgent health needs during school hours. Healthy harmless environment is very vital to avoid these hazards besides competent teachers who can identify any health problem and able to provide first aid for commonly happening emergencies in school.

Level of knowledge in which participated teacher were aware of the first aid and it's knowledge as the above results shows the female participant are more than the male participant the level of the significance p-value 0.503 (>0.05) hence there were no level of significant according to the gender. As the age wise the adequate and in adequate number of teacher were group of 22-33 the level of significance (0.498). According to the residence the level of significance was (0.498). Studying the marital status of the participant (0.349) according to religion (0.349) which doesn't associate significant value (<0.05). At lastly education status which intermediate, bachelor and master relates the 0.000(<0.05), significant association was seen interrelated.

Level of management among the teacher with the socio-demographic variance according to gender which include male and female as studying the adequate and inadequate the level of significant value was 0.57 (>0.05) which does not associate any relation with the management. According to the age which was categorized into three categories the significant result were 0.786 (>0.05) no significant relation with management. Residences also doesn't shows the significant relation 0.786 (>0.05). Marital status also doesn't show the significant result 0.54 (0.05). Religion include the Hindu, Christian, Buddhist, Muslim, the result were 0.919 (>0.05). Education status include intermediate, bachelor and master results 0.000(<0.05) which shows the association between level of significant value.

CHAPTER 6: CONCLUSION

6.1 CONCLUSION

- 1) The majority of teachers were female between age group 22-38 with frequency 121 (73.3%).
- 2) The overall knowledge of the participant was fair in all first aid domains except the general information on management was good
- 3) Vast majority of participant's teacher had positive response towards first aid primary schools.
- 4) The lowest teacher management response was toward medical condition.
- 5) The socio demographic characteristic of teachers showed insignificant direction association between teacher monthly income, where a direction between teacher educational status were significant
- 6) There is no significant relationship between the management with age, gender, monthly income but there is significant relation between educational status

6.2 RECOMMENDATION

- 1) Encouraging teachers to learn first aid through incentive, if not financially at least let it be morally
- 2) Adding first aid education to the curriculum of colleges and institutes of teacher's preparation.
- 3) The provision of medical staff from the physician and nurses
- 4) Working on establishment of compulsory course or training on the first aid in collaboration with the ministry of health

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ANNEXES

ANNEX 1: CONSENT FORM

PURBANCHAL UNIVERSITY
ASIAN COLLAGE FOR ADVANCE STUDIES
DEPARTMENT OF PUBLIC HEALTH
SATDOBATO, LALITPUR
NAMASTE

My name is Neeru Yadav. I am currently studying BPH 8th semester in Asian Collage for Advance studies, as per the curriculum of Purbanchal University (BPH 8thsemester). We have to accomplish or research topic is knowledge on first aid emergency management among play school teacher at selected play school at primary school of Lalitpur district.’ The study procedure involve no foreseeable risk and harm to you and the study time will be only of 30min and you are free to ask any question regarding the study, I will be very grateful if you could help me share your knowledge. I will not disclose your shared information and keep it safely.

Similarly the information you’ve given to me will only be reveal and use for research purpose. It depends on you whether you want to participate on this study, like wise if you feel any hesitation regarding following questions you are being asked then you can kindly tell me.

But it would be even better if you could participate with all your pleasure and help me by answering following question honestly.

So are you ready to answer the following question

- i. Yes
- ii. No

.....

Signature

ANNEX 2: QUESTIONNAIRES

A. DEMOGRAPHIC INFORMATION

1. Respondent No:
2. Name of the school:
3. Age:
4. Gender
 - i. Female
 - ii. Male
5. Residence:
 - i. Urban
 - ii. Rural
6. Marital status
 - i. Married
 - ii. Unmarried
 - iii. Single
 - iv. Divorced
- 8.1 Number of children
7. Educational Status
 - i. Intermediate
 - ii. Bachelor
 - iii. Master
 - iv. other
8. Years of experience (year).....
9. Monthly income (IQD).....

B. KNOWLEDGE ON FIRST AID.

1. Have you heard about first aid?
 - i. Yes
 - ii. No

- 1.1. If yes, then question below which one would be the definition of first aid?
 - i. A completing a primary survey
 - ii. The first help given to the victim of an accident
 - iii. Assessing a victim's signs
 - iv. Treating victim for shock
2. What do you understand about first aid?
.....
3. From where do you get knowledge about first aid?
 - i. Reading
 - ii. Mass media
 - iii. Training course
 - iv. Internet
 - v. Other
4. Have you attained any training or workshop regarding first aid?
 - i. Yes
 - ii. No
 - 4.1 If yes, what is the main principle of first aid?
 - i. To provide medical care on the spot
 - ii. To prevent over expenses
 - iii. To maintain airway, breathing, and circulation
 - iv. All of the above
5. Have you heard about first aid box?
 - i. Yes
 - ii. No
 - 5.1. Do you have first aid box in your school?
 - i. Yes
 - ii. No
6. Does the school have stretcher services?
 - i. Yes
 - ii. No

7. Does the school have sick room services?
 - i. Yes
 - ii. No
8. Is there any provision nurses appointed in your school?
 - i. Yes
 - ii. No
9. In the past 6 month were there any provision of sudden accident or emergency condition occurred in your school?
 - i. Yes
 - ii. No

10. Which one of the sudden accident are common in your school

Common Accidents	Choose
Burn	
Chocking	
Insect bites	
Epitasis	
Facture	
Wound	
Fainting	
Poisoning	
Shock	

11. Was there any past history of student death during the school time?

.....

.....

C. FIRST AID MANAGEMENT

1. Shock is the life threatening condition
 - i. True
 - ii. False
2. What should be done in case of shock?
 - i. Prevent the body head
 - ii. Check ABC
 - iii. Raise the victims leg 8-12 inches
 - iv. Keep the head injured patient on his back
3. A boy on the bus goes into diabetic shock, what do you do?
 - i. Drive the bus straight to the hospital
 - ii. Ask him where his insulin is & give him a shot
 - iii. Do not give him food or drink
 - iv. Make him comfortable; give him a sweet drink, candy, or something with sugar in it.
4. Which of the following department deals with a poison case?
 - i. Gynecology
 - ii. Surgery
 - iii. Pediatric
 - iv. Psychiatry
5. First aid for food chocking?
 - i. It is best not to do anything if the person is choking
 - ii. Tap the back
 - iii. Make him/her vomit
 - iv. Give him/her water to drink
6. The main signs of food poisoning
 - i. Nausea
 - ii. vomiting
 - iii. Diarrhea
 - iv. All of the above

7. Which is the first step when caring for bleeding wound?
 - i. Apply pressure at the pressure point
 - ii. Add bulky dressing to reinforce blood soaked bandage
 - iii. Elevate the wound
 - iv. Apply direct pressure with a clean or sterile dressing
8. What is the cause of sudden fall of a child while watching the bleeding of an injured person?
 - i. Shock
 - ii. High blood sugar
 - iii. Low blood pressure
 - iv. High blood pressure
9. What is the first step of management if a child faint.
 - i. Give soft drink containing sugar
 - ii. Give food to eat
 - iii. Call ambulance
 - iv. Inform parent's
10. The purpose of cold application during fever is.....
 - i. To reduce temperature
 - ii. To relief pain
 - iii. To check hemorrhage
 - iv. All of the above
11. Dressing and bandages are used to?
 - i. Reduce the victims pain
 - ii. Reduce internal bleeding
 - iii. Help control bleeding and prevent infection
 - iv. Make it easier to take the victim to the hospital
12. In case of nose bleeding child that best way to help stop bleeding is?
 - i. To give him time to rest
 - ii. To sit down, lean in the backward
 - iii. To sit down lean in the backward and pinch the nostrils
 - iv. Take him/her to nearby clinic and hospital

13. Fracture is defined as
- i. Inflammation of bone
 - ii. Restriction of bony movement
 - iii. Loss of continuity of bony tissue
 - iv. Loss of continuity of skin and membrane
14. When the bone gets fractured one should not?
- i. Control bleeding by pad and bandage in case of open fracture.
 - ii. Massage at the site of fracture
 - iii. Make the patient comfortable
 - iv. Immobilization of the part
15. You encountered a victim with fractured leg and bleeding from fractured site what do you do before transporting him to the nearby hospital.
- i. Clean the wound
 - ii. Apply the splint
 - iii. Apply pressure bandage
 - iv. All of the above
16. Most common joint to get dislocation in children is
- i. Shoulder
 - ii. Knee
 - iii. Elbow
 - iv. Knee
 - v. Hip
17. all of the following are the treatment part of insect bite except
- i. hot compression
 - ii. gentle tightening above the site of sting
 - iii. pain relieving drug
 - iv. reassurance
18. Rubbing the eye is the best action to remove foreign bodies from eye?
- i. True
 - ii. false

19. First aid Knowledge about dog's bite?

- i. Hospital visit
- ii. Inform the parents
- iii. Wash wound with water
- iv. Give him water to drink

20. First aid for seizures attack?

- i. Keeping the person safe until the seizure stops
- ii. Stay calm, loosen around the neck area
- iii. Stay with him if the seizure stops
- iv. All of the above

D. OPINIONS ON FIRST AIDS

Opinion Of The Teacher	Strongly Agree	Agree	Undecided	Disagree
It is important to learn first aid in daily life				
Learning of first aids is so complicated and difficult				
The first aid action should be done only by experienced health care professionals.				
teacher for first aid training is helpful				
It is believed that first aid should be taught to teachers as well as their pupils				
It is very important to keep first aid box in school.				
the asthmatic or diabetic child should be isolated with special need kid				
the teacher should have first aid knowledge and skills, will perform first aid to a child in need				

पूर्वाञ्चलविश्वविद्यालय
एसियन कलेज फर एडभान्स स्टडिज
सातदोबाटो, ललितपुर

नमस्ते,

मेरो नाम निरु यादव हो । म एसियन कलेज फर एडभान्स स्टडिजमा जनस्वास्थ्य स्नातकतहमा अध्ययनरत छु । मैले पूर्वाञ्चल विश्वविद्यालय अन्तर्गत जनस्वास्थ्य स्नातकतहको पाठ्यक्रम अनुसार अध्ययनको लागि अनुसन्धानगर्नुपर्ने छ । मेरो अध्ययनको शिर्षक “Knowledge on First Aid and Emergency Management among Play School Teacher of Lalitpur District” हो ।

यो जानकारी केवलअध्ययनको लागिमात्र उपयोग गरिनेछ र तपाईंले दिनुभएको जानकारीलाई गोपनीय राखिने छ । अन्तर्वार्तामाकरिब ३० मिनेट समय लाग्ने छ ।

तपाईंको सहभागिता यस अनुसन्धानमा स्वैच्छिक रहनेछ र तपाईंले दिनुभएको जानकारीलाई गोपनीय राखिने छ । तपाईंले कुनै पनि समयमा रोकन सक्नुहुनेछ । यदितपाईंलाई कुनै पनिप्रश्नको उत्तर दिन अप्ठरो लागेमा मलाई थाहादिई त्यस प्रक्रियालाई बिचमै छोड्न सक्नु हुनेछ ।

मैले यो सहमतिफारम पढेको छु / बुझेको छु र स्वैच्छिक रुपमा यस अध्ययनमा सहभागीहुन इच्छुक छु ।

१.छु

२. छैन

मिति :

भाग 'क'

१. संख्या

२. विद्यालयको नाम

३. कक्षा

४. उमेर

५. लिङ्ग

क) महिला

ख) पुरुष

६. बसाई

क) सहर

ख) ग्रामिण

७. वैवाहिकस्थिति

क) विवाहित

ख) अविवाहित

ग) एकल

घ) सम्बन्धविच्छेद

८. बच्चाको संख्या

९. शैक्षिक योग्यता

१०. तपाईंले यो स्कुलमापढाउनथालेको कतिभयो ?

११. आयश्रोत

भाग 'ख'

प्राथमिक स्वास्थ्य सेवाकावारेमा ज्ञानकाप्रश्नहरु

१. के तपाइलाई प्राथमिक स्वास्थ्य सेवा सम्बन्धिथाहा छ ?

क) छ

ख) छैन

२. यदिथाहा छ भने तलकामध्ये कुनप्राथमिक स्वास्थ्य सेवाको उपयुक्तव्याख्याहुन?

क) पुर्ण स्वास्थ्य सेवा

ख) विरामीको संकात्मकलक्षणहरुको अध्ययन

ग) अभगाहो र विरामीहुनु नदिने ।

घ) अस्पतालपुगनअघि सम्म दिनुपर्ने सेवा सुविधा

३. प्राथमिक स्वास्थ्य सेवाको बारेमा तपाईं के भन्नु हुन्छ?

.....

४. प्राथमिक स्वास्थ्य सेवाको बारेमा ज्ञानकहाँबाटपाउनुभयो ?

क) पढेर

ख) मास मिडिया

ग) तालिमबाट

घ) इन्टरनेट

ड) अन्य

५. के तपाइले पहिले कुनै प्राथमिकउपचार सेवाको बारेमा कुनै तालिमलिनु भएको छ ?

क) छ

ख) छैन

६. यदि छ भने प्राथमिक सेवाको मुख्यसिद्धान्त के हो ?

क) स्थानमाचिकित्साले दिने जस्तै हेरविचार

ख) विरामिलाई अभै गाहो हुननदिने

ग) विरामीलाई श्वास प्रश्वासन र रक्त संचालनमाध्यानदिनु

घ) माथिका सवै

७. तपाईंले प्राथमिक सेवाबाकसको बारेमा सुन्नु भएको छ ?

क) छ

ख) छैन

८. के तपाईको स्कुलमाप्राथमिक सेवाबाकस छ ,

क) छ

ख) छैन

९. के तपाईको स्कुलमा स्ट्रेचर सेवा छ ।

क) छ

ख) छैन

१०. के तपाईको स्कुलमाविरामीले आराम गर्ने कोठा छ ?

क) छ

ख) छैन

११. तपाईको स्कुलले आपतकालिनअवस्थाको समयमाअस्पतालवाक्लिनिक सँग कुनै सिधा सम्पर्क छ ?

क) छ

ख) छैन

१२. तपाईको स्कुलनजिकै कुनै अस्पताल छ ?

क) छ

ख) छैन

१३. के तपाईको विद्यालयमाकुनै नर्सको नियुक्ति गरेको छ ?

क) छ

ख) छैन

१४. तपाईको स्कुलमाविगत ६ महिनामाकुनै पनिदुर्घटनावाआपतकालिन परिस्थितिहरु आएको रेकर्ड थियो ?

१५. तपाईको स्कुलमाबच्चाहरुलाई सामान्यतयादुर्घटनावागंभिर स्थितिहरु के के हुन?

स्थितिहरु	छान्नुहोस
पोल्लिनु	
सरकिनु	
जनावर वा किराले टोकेको	
नाकबाट रगतआउनु	

बेहोस हुनु	
डराउनु	
ज्वरो आउनु	
अन्य	

१६. स्कूलको समयमा विद्यार्थीको मृत्यु भएको कुनै पनि पुरानो रेकर्ड ?

क) छ

ख) छैन

भाग 'ग'

१. सदमाभनेको जिवनघातकअवस्थाहो ?

क) ठिक

ख) वेठिक

२. सदमाको अवस्थामा के गर्नु पर्छ ?

क) शरिको टाउकोको भागबचाउने

ख) श्वास प्रश्वास र रक्तचापको जाँचगर्ने

ग) विरामीको खुट्टा ८-१२इन्च सम्म उठाउने

घ) विरामिलाई उसको पिटफर्काएर सुताउने

३. बसमाएउटा केटामधुमेह रोग लागेको बच्चाअचानक बेहोस हुन्छ , तपाईं त्यो अवस्थामाके गर्नु हुन्छ?

क) बस सिधाअस्पताललग्ने

ख) उसको इन्सुलिनकहाँ छ भनी सोध्ने

ग) उसलाई खानावापिउनदिने

- घ) उसलाई सहजबनाएर बसाउने र चकलेट वा केहि गुलियो खानदिने
४. वच्चामा सवैभन्दा साधारणतयाकुनविषको सेवन गर्नु पुग्छ?
- क) खुल्ला ख) आइरन ग) केरोसिन घ) अर्गानोफस्फोरस
५. कुनै पनिबच्चाले विषखाएको छ भने ऊ अस्पतालको कुनविभागमापर्छ ?
- क) बालरोग ख) स्त्री रोग ग) सर्जरी घ) मनोचिकित्सक
६. तलकामध्ये सवैमा विषखाएमाउल्टीआउँछवाहेक
- क) केरोसिन ख) अर्गानो क्लोरिन ग) अर्गानोफस्फोरस घ) केन्डीन
७. फुडपोइजनिडको मुख्य संकेत के हो ?
- क) उल्टीआउलाजस्तो हुने ख) उल्टीआउने
- ग) भाडापखालाहुने घ) माथीका सवै
८. यदिकोहिवच्चा सक्थो भने के गरिन्छ?
- क) केहीपनिनगर्ने र संगै वस्ने ख) ढाडपछाडी ट्याप गर्ने
- ग) उसलाई भमेट गर्न लगाउने घ) उसलाई पानीखुवाउने
९. चोटपटकहुँदा रक्तपातभएमासवै भन्दापहिले गर्नुपर्ने प्राथमिकउपचार के हो ?
- क) रगतआउने ठाउँमादवावदिने ख) रगतआइरहेको ठाउँमा पट्टि गर्ने
- ग) घाउवद्न दिने घ) सफा पट्टि लगाइदिने र ठाउँमादवावदिने
१०. रक्तश्राव देख्दावच्चाको अचानक वेहोस हुनुको कारण के हो ?
- क) शक ख) उच्च रक्तसंक्रमण ग) कम रक्तचाप घ) उच्च रक्तचाप
११. यदिकुनै पनिबच्चाअचानकवेहोस भएमा के गर्नुपर्छ ?
- क) साधापानीवाचिनीपानीखुवाउने ख) साधाखानाखानदिने

ग) एम्बुलेन्स बोलाउने

घ) परिवारलाई बोलाउने

१२. हामीले ज्वरोको समयमापानी पट्टि किनदिइन्छ?

क) शरिरको ज्वरो कमगर्न

ख) दुखाई कम गर्न

ग) रक्त संचालन राम्ररी गराउनु

घ) माथिका सवै

१३. घाउ सफा गर्ने र पट्टि लगाउनेको मुख्यउद्देश्य के हो ?

क) दुखाई कम गर्नु

ख) रगत रोक्न

ग) रगत रोक्ने र संक्रमणहुननदिने

घ) अस्पताल सम्म पुग्न सजिलो गर्नु

१४. नाकबाट रगतआएको बेला सवैभन्दापहिलो उपयुक्तप्राथमिक सेवा के हो ?

क) बच्चालाई आराम गर्न दिनु

ख) बसाउने र अगाडीपट्टिउठाउने

ग) बसाउने टाउकोलाई माथिपट्टिउठाउने र नाक थिच्ने

घ) बच्चालाई अस्पतालवाक्लिनिकलग्ने

१५. हातखुट्टाको जोड्ने नचल्नु भनेको के बुझिन्छ?

क) हड्डी सुन्निनु

ख) जोड्नीचलाउनु गाह्रो हुनु

ग) हड्डी संगैको जोड्नी जोडिएको छालावा मासु नचल्नु

घ) मांशपेशीको भागनचल्नु

१६. हातखुट्टानचलेमा के गर्नुहुँदैन ?

क) रगतआएमा पट्टि लगाउनु पर्छ

ख) मालिस गर्नुपर्छ

ग) विरामीलाई सहजबनाउनु पर्छ

घ) दुखेको भागलाई चलाउनु हुँदैन

१७. यदिकुनै पनिविरामिको खुट्टाभाँचिएको वा रगतआएको छ भने के गर्नुहुन्छ?

क) रगतवग्न रोक्नु र सफा पट्टि लगाउनु हुन्छ

ख) भाँचेको भागमा केहि लठ्ठीजस्तोले अड्काउने र हल्लिननदिने

ग) विरामीलाई सजिलो गरेर बस्नु लगाउनुहुन्छ

घ) माथिका सवै

१८. बच्चाहरुमा सवैभन्दा धेरै डिसलोकेट हुने भागकुनहो ?

क) काँध

ख) घुँटना

ग) कुइना

घ) हिप

१९. किराले टोकेमा सवै तरिकाले उपचार गर्नु सकिन्छवाहेक

क) सफाकपडालाई मनतातो गरी टोकेको भागलाई सेक्ने

ख) टोकेको भागलाई टाइट गरेर बाँध्ने

ग) दुखाई कम गराउने

घ) आश्वासनदिने

२०. यदि आँखामा किटाणु पसेमा सवैभन्दा उपयुक्त तरिका आँखामिचु हो ।

क) ठिक

ख) वेठिक

२१. कुकुरले टोकेमा प्राथमिक सेवा

क) अस्पतालजाने

ख) बच्चाको परिवार बोलाउने

ग) घाउलाइपानीले सफा गर्ने

घ) पानीपिउनदिने

२२. सिजर आएमा प्राथमिक उपचार के गर्नुहुन्छ?

क) सिजर नरोकेसम्म बच्चालाई सहजतरिकाले राख्ने

ख) बच्चालाई सजिलो गराउने र घाँटी खुल्ला सजिलो पार्ने

ग) सिजर नरोकेसम्म बच्चासँगवस्ने

घ) माथीका सवै

२३. शिक्षकमा प्राथमिक सेवाको महत्व

शिक्षकको राय	एकदम सहमत छु	सहमत छु	थाहा छैन	असहमत
दैनिक जिवनमा प्राथमिक सेवा सिक्नु महत्वपूर्ण छ ।				
प्राथमिक सेवा जान्नु र बुझ्नु धेरै गाह्रो छ				
प्राथमिक सेवाको कार्यहरु मात्र अनुभवी स्वास्थ्यचिकित्सकले गर्छन ।				
शिक्षकहरु प्राथमिक स्वास्थ्य सेवाको तालिम लिएमा धेरै उपयोगी हुन्छ ।				
प्राथमिक स्वास्थ्य सेवाको बारेमा शिक्षकहरु र स्कुलका अन्य व्यक्तिहरुले सिक्नु जरुरी छ ।				
दम वामधुमेह रोग लागेका बच्चाहरुलाई धेरै ध्यान दिनुपर्छ र उनीहरुलाई विशेष स्कुलमा राख्नुपर्छ ।				
शिक्षकलाई प्राथमिक सेवाको ज्ञान र दक्ष हुनुपर्छ जसले गर्दा आवश्यकतामा बच्चालाई प्राथमिक सेवा सहज हुने छ ।				

ANNEX 3: LETTER FROM ACAS



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ASIAN COLLEGE FOR ADVANCE STUDIES
Affiliated to Purbanchal University/CTEVT

Satdobato, Lalitpur-15, Nepal
Tel: 01- 5540183, 5530656, 5543192
GPO Box: 24122, Fax 977-1-5543192
Email: info@acas.edu.np, asiansumeru@gmail.com

Ref. No. 1270/075/076



मिति: २०७६/०३/१२

विषय: आवश्यक सहयोग गरि दिने बारे ।

महोदय,

उपरोक्त सम्बन्धमा यस एशियन कलेज फर एडभान्स स्टडिज सातदोवाटो ललितपुरमा अध्ययनरत BPH. VIII Semester का विद्यार्थी श्री निरु यादवले पूर्वाञ्चल विश्वविद्यालयको पाठ्यक्रम अनुसार रिसर्च गर्नु पर्ने भएको हुनाले Data Collection को लागि अनुमति दिई आवश्यक सहयोग गरि दिन हुन विनम्र अनुरोध गर्दछौं ।

विद्यार्थीको नाम	विषय	अवधि	कैफियत
Neeru Yadav	Knowledge on first Aid and Emergency Management among Play School Teachers at Selected Play School of Lalitpur District.	२ हप्ता	

सहयोगको लागि धन्यवाद ।

श्रीजीत श्रेष्ठ

क्याम्पस प्रमुख

Campus Chief

ANNEX 4: LETTER FROM DIFFERENT SCHOOLS



ANKUR

pre-school & day care

"A home away from home for your child"

Jhamshikhel, Lalitpur

T: 01-5541340

M: 9841217599, 9843042460

Date:- 2076/04/05

To

Asian College for Advance Studies

Satdobato 15, Lalitpur

Nepal

Dear Sir /madam

This is certify that **Mrs. Neeru Yadav** Of BPH 8th semester in Asian College for Advance studies as per curriculum of Purbanchal University has visited our school (Ankur School & Day Care, Jhansikhel, lalitpur) for her thesis on " knowledge on first Aid and Emergency management among teachers at selected play school of Lalitpur District."

We wish her all success in her future endeavor.

Kripa Chhetry

Vice Principal





Date: 21st July, 2019

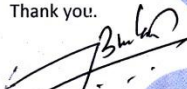
To Whom It May Concern

It is, hereby , approved that Ms. Neeru Yadav has carried out her research on Aid Emergency Management at pre-school level at Bluebird Secondary School, kumaripati among five different pre-school teachers from 2nd July to 3rd July ,2019.

We hearty appreciate herself and her institute for selecting our school for her research on our teachers. We hope the finding of her research will be beneficial to our school and the society as well.

We extend our best wishes for her every success in the days to come.

Thank you.


School Head



"Education is for self-expression & liberation"

Bright Future Secondary School



Ref No.: १३०/०७६


Date: 2076/04/16

To Whom It May Concern

It is hereby conformed that **Ms. Neeru Yadav** has carried out her research on First Aid Emergency Management at Pre- School Level at Bright Future Secondary School among fifteen various teachers working at Pre- School Level from 21st of July to 26th of July 2019.

We are highly appreciative of her selection this school for carrying out her research on the teacher of this school. We are also hopeful that the findings will be quite beneficial to our school so as to bring about improvements in First Aid Emergency Management at this school.

We wish her every success in her academic career in the days to come.


Basudev Koirala
Principal

Lalitpur-15, Satdobato Phone No.: 01-5534319, 5554894
Email: schoolcollegebrightfuture@gmail.com, www.bfc.edu.np



Fairy's World

Early Child Development School

Lalitpur Metropolitan City - 23, Hattiban, Lalitpur.
Tel. No. 01-5251221, 9841701771

Ref. No.: 27/076

Date: 9th July 2019.

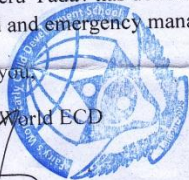
To,
The Asian Collage of Advance Study,
Satdobato, Lalitpur,

Dear Sir/ Madam,

Ms. Neeru Yadav has done survey on this institute for the thesis research on topic Knowledge on first aid and emergency management on preschool teachers.

Thank you.

Fairy's World ECD





Estd. 1987

ज्ञानदीप विद्याश्रम
Gyandeeep Secondary Boarding School
(G.S.B.S.)

Sanepa-2, Lalitpur, Tel : 5544623

"For self-reliance and leadership"

Date: 2076-03-29

To,

The Asian College of Advance Study,

Satdobato, Lalitpur

Dear Sir/Madam,


Ms, Neeru Yadav has done survey in this institution for the thesis research on topic Knowledge on first aid emergency management among preschool teachers .We wish her better and successful thesis regarding the topic selected by her too.

Thank You.



School Seal

2076-03-29
Issued Date


.....
(Binaya Pd. Chaudhary)
Founder/Principal

"Let us fight against illiteracy"



Regd. No.: 23130/059/060
PAN : 301926553

Ref.No.82-075/076

Date: 22nd July 2019

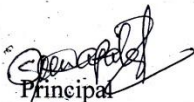


To Whom It May Concern

It is hereby confirmed that **Ms. Neeru Yadav** has carried out her research on First Aid Emergency Management at Pre- School Level at Machhapuchchhre School among fifteen various teachers working at Pre- School Level from 16th of July to 21st of July 2019.

We are highly appreciative of her selecting this school for carrying out her research on the teachers of this school. We are also hopeful that the findings will be quite beneficial to our school so as to bring about improvements in First Aid Emergency Management at this school.

We wish her every success in her academic career in the days to come.


Principal

MACHHAPUCHCHHRE SCHOOL

Lalitpur Metropolitan City-13, Kusunti

Phone: +977-1-5193144 / 5193884, E-mail: info@machhapuchchhreintl.edu.np, Web: www.machhapuchchhreintl.edu.np



Mahendra Adarsha Vidyashram

Secondary School
Satdobato, Lalitpur

Est. 2015 B.S.

01-5554066
9840023220

Ref. No.:-

076/077/01



Date: - 2076/04/06

To,
Asian College for Advance Studies
Satdobato, Lalitpur

Dear sir/Madam,
Mrs. Neeru Yadav has conducted a survey in this institution Mahendra Adarsha Vidyashram Satdobato, Lalitpur for her thesis research on the topic knowledge on first aid and emergency management among play school teachers at selected play school or lalitpur district.

Thank You.

K.D. Joshi
Principal

"Let us fight against illiteracy"
Email: mavhss2015@yahoo.com

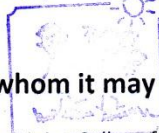


Nagarjuna Kids' World

Montessori Pre- School

Date: 2076/03/27

Nagarjuna Kids' World



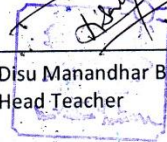
To whom it may concern

Student of BPH 8th Semester, Asian College for Advance Studies, Phurbanchal University Miss Neeru Yadav had accomplished her research on the topic 'First Aid Emergency Management among Play School Teacher' in this school Nagarjuna Kids' World, Gusingal, Kupondole, Lalitpur on 2076/03/24.

We acknowledge her approach regarding the selection of our school while this is also a great pleasure for participating in her research purpose.

We wish her all success in her future endeavor.

Nagarjuna Kids' World



Disu Manandhar Bhandari
Head Teacher

Member - GSP/UK

www.nagarjuna.edu.np, info@nagarjuna.edu.np

Kupondole -1, Gushingal, Lalitpur-Kathmandu, Nepal,
Telephone : 5542094, NTC Notice Board : 161801 5520112



NAZARETH SCHOOL

Sanepa-2, Lalitpur, Tel: 977-01-5552229
E-mail: info@nazareths.edu.np, Website: www.nazareths.edu.np

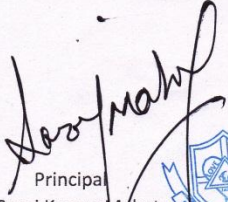
Date: 2076/04/13


To Whom It May Concern

This is notified that **Ms. Neeru Yadav** has carried out her research in **First Aid Emergency Management** at Pre-School Level at Nazareth School among five various teachers working at Pres-School Level from 2076/04/08 to 2076/04/09.

We highly appreciate her for selecting our school for the research purpose. We hope that this research will help us to know the First Aid understanding level of our teachers and take necessary steps for the improvement of its status.

We wish for her every success in here academic career.


Principal
Saroj Kumar Mahat


NAZARETH SCHOOL
Sanepa-2, Lalitpur

"Knowledge is treasure and Nazareth is the key to it."



NIGHTINGALE INTERNATIONAL SECONDARY SCHOOL

Kopundole, Lalitpur (Nepal)



Date: 2076/08/02

To Whom It May Concern

This is to certify that **Miss Neeru Yadav** student of BPH 8th Semester, Asian College of Advance Studies, Purbanchal University had accomplished her research on the topic "First Aid Emergency Management among Play School Teacher' in this school Nightingale International Secondary School, Kopundole, Lalitpur on 2076/03/24.

We acknowledge her approach regarding the selection of our school while this is also a great pleasure for participating in her research purpose.

We wish her all success in her future endeavor.

Ranjana Pradhan

Principal

© Nightingale School : 01-5535663 & 5551791 and Nightingale (+2): 01-5530744

✉ school@nightingale.edu.np 🌐 nightingale.edu.np



रेडियन्ट रिडर्स एकेडेमी

RADIANT READERS' ACADEMY

Discipline Punctuality Quality in Work

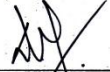
REF no. - 3099/076

July 21, 2019

To
Asian College for Advance Studies
Satdodobato, Lalitpur
Nepal

Dear Sir/Madan,

This is to certify that Mrs. Neeru Yadav of BPH final year has visited our school for her thesis on "Knowledge on first Aid and Emergency Management among teachers at selected play school of Lalitpur District".


Devraj Gelal
Vice Principal

Sanepa-2, Lalitpur, Nepal
GPO Box : 21838 Kathmandu
Phone No. : 977-01-5529757, 015532141
Fax : 977-01-5541136
E-mail : radiantschool@enet.com.np

www.radiant.edu.np

