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support, referral to the hospital, dressings, health surveillance, consultations, and participation in social support activities.

Conclusion: Although no facility preparedness plan was available, most of health problems identified were solved by PHC teams, since just one patient was referred to the hospital. There was an involvement of PHC teams to assist affected populations, although specific job descriptions and the difficult access to the rural population consisted of a barrier to qualified and sufficient care.

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Determining the Effect of Internet Usage Habits on Academic Success in University Students

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Study/Objective: The frequency of Internet use in today's society is proven by various studies conducted to increase innovation brought about by the Internet and plays an important role in increasing the ease of use. Requested information searches, homework, and uses for social interaction, the Internet brings with it many advantages, as well as some problems, which are mostly used by young people. With increased usage, especially among young people, it has been revealed that the Internet adversely affects the decrease in academic achievement and social life problems of young people.

Background: Research is planned as a descriptive study. Bezmialem Vakıf University Clinical Research Foundation with written permission from the Ethics Committee Students. Methods: The research was conducted by the Bezmialem Foundation University. The main campus where the students of vocational school (including preparatory class), students of medicine, dentistry, pharmacy, nursing, physiotherapy, audiology, health management, nutrition dietetics, and health services were educated; and took place in February-March 2016 at Eyüp and Gayrettepe settlement. In this study, it is assumed that the rate of Internet use in university students is 50% and the tolerance value is taken as 0.05 and the sample size at 95% confidence level is calculated as 333-363 of the students who were included in the study.

Results: According to the results of the research, most of the students (92.6%) use Internet in their daily life. As a result, no statistically significant difference was found between students' academic achievement status and Internet usage habits.

Conclusion: In the direction of findings and discussions: There was no significant difference between academic achievement and Internet use; (92.6%) in daily life, attachment purposes, reduction in the number of Internet connections and studying time (63.1%), indicate that we are unconscious about the use of high quality Internet. It is recommended that elective courses be put into university curricula for effective computer and Internet use.

Prehosp Disaster Med 2017;32(Suppl. 1):s146 doi:10.1017/S1049023X17004022 A Retrospective Survey to Determine the Nature and Risk Factors for Injury among the Victims admitted in the Emergency Department of a Selected Government Hospital of India, Using Pretested Trauma Registry Performa Harvinder K. Vaid, Laxmi N. Gupta, Sarita Ahwal, Raj L. Nishant Emergency Department, pgimer dr rml hospital, New Delhi/India

Study/Objective: To identify the nature of injury in terms of causes and severity of injury.

Background: In 2010, an estimated 1.3 million RTI deaths occurred worldwide, accounting for about 2.5% of all deaths. Mortality in serious injuries is 6 times worse in a developing country such as India compared to a developed country. Strengthening and undertaking research on the public health burden and impact and understanding the risk factors of trauma is the need of the hour.

Methods: Using quantitative approach, a retrospective cross sectional survey was conducted at an Emergency and trauma center in Ram Manohar Lohia (RML) Hospital, New Delhi. The information of all the injured patients seeking health care during the past year from October 2015 to September 2016 at the Emergency and trauma center, was collected from the trauma registry performa at the time of registration.

Results: A total of 1,952 cases of injury sought health care during the study period. The average number of cases reported per day was five. The maximum cases (40%) were reported between 12-6 pm. Among the injured, 82% were males and the majority of victims were between 20-30 year age group, followed by 30-40 years.

Conclusion: It can be concluded that there is a high incidence of RTI and measures should be taken to prevent the RTI focusing on the risk factors.

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Australian Civilian Hospital Nurses' Lived Experience of the Out-of-Hospital Environment following a Disaster: A Lived-Space Perspective

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Study/Objective: This research explored what it may be like being an Australian civilian in-hospital nurse, in the out-of-hospital disaster environment following a disaster, as part of a disaster medical assistance team. This presentation will explore the specific aspect of lived-space from a larger phenomenological research project.

Background: In the minutes following a disaster, reports from the media focus on the measurable impact. For example, the magnitude of an earthquake or the number of hectares burnt by a wildfire. Lived-space is concerned with felt space, going beyond these measurable physical, visible and touchable spaces. Lived-space is the way in which we find ourselves in our lifeworld through the spaces of our day-to-day existence. Nursing s147

Methods: For this phenomenological study, narrative was obtained from eight Australian civilian hospital nurses following a disaster. Semi-structured interviews were conducted at two points in time. Descriptive moments of a possible lived experience were identified from participant narrative. These moments formed a lived experience description as an anecdote of an experience. A preparatory epoché-reduction and reduction proper was used to guide a reflection on the lived-space of being a nurse, following a disaster from the lived experience description. Results: Lived-space was described as shrinking then being open too-wide, where nurses were drawn into the disaster lived-space, then returning home to a wide-open but crowded lived-space. Disaster health lived-space was described as occupying, sharing and giving back.

Conclusion: This research provides insight into Australian civilian in-hospital nurse in the out-of-hospital disaster environment, following a disaster as part of a disaster medical assistance team. In particular this work adds a lived-space perspective to the existing literature. These insights may inform future education, research, clinical practice and policy.

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How Disaster Response in the Emergency Department Disrupts our Lived World

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Study/Objective: According to van Manen (2015), there are five existential aspects common in the lived world of all humans. These include: "relationality" which is how we relate to others; "corporeality" how we experience our body; "temporality" our experience of time; "spatiality" how we experience space; and "materiality" our experience of things. This presentation will discuss how these existential aspects are experienced in the context of working as a nurse in the Emergency Department (ED) during a disaster.

Background: Our current understanding of emergency nurses and disaster response comes largely from narrative accounts which describe what it is like to work in the ED during a disaster response, or descriptive studies that explore emergency nurses' perceptions of as yet-hypothetical events. However, we have a limited understanding of how disaster response is experienced within the context of our existing lived world.

Methods: A Hermeneutic Phenomenological approach informed by van Manen underpins the research process. Thirteen nurses participated in this research. Thematic analysis and a guided existential reflection resulted in two different perspectives of the experience of working as a nurse in the ED during a disaster response. This presentation will report on the existential aspect of the research.

Results: Reflection on the five life existentials places a strong emphasis on the relational, spatial, and material aspects of

disaster response, while corporeal and temporal aspects were minimised. Consideration of the existential aspects highlights how disaster response disrupts the everyday experience of working in the ED. The findings from this research can raise awareness for emergency nurses, and can inform preparedness for future disaster response.

Conclusion: This presentation focuses on one aspect of the findings of a PhD study and provides an in-depth insight into the meaning behind the experience of nursing in the ED during a disaster response.

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Moments of Disaster Response in the Emergency Department

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Study/Objective: "In the end, we will not remember the years we spent in nursing. We will only remember the moments" (Donahue 1996). We experience our lives as a series of memorable moments, some good and some bad. Undoubtedly, the experience of participating in disaster response is likely to stand out as a memorable moment in a nurses' career. This presentation will describe five distinct moments of nursing in the Emergency Department (ED) during a disaster response.

Background: Our existing understanding of emergency nurses' participation in disaster response comes largely from narrative accounts of single events. This study is unique because it explores the experience of nursing in the ED during a disaster across different geographical regions and disaster types.

Methods: A Hermeneutic Phenomenological approach informed by van Manen underpins the research process. Thirteen nurses from different countries around the world participated in interviews about their experience of working in the ED during a disaster. Interviews were conducted face to face or via Skype. Thematic analysis and a guided existential reflection resulted in two different perspectives of the experience of working as a nurse in the ED during a disaster response. This presentation will report on one of these aspects. Results: "The moments of notification, waiting, patient arrival, caring for patients, and reflection" described by nurses who participated in this research provide insight into the experience of nursing in the ED during a disaster response. Consideration of these individual moments will lead to recommendations for future preparedness of emergency nurses.

Conclusion: This presentation focuses on one aspect of the findings of a PhD study, and provides an in-depth insight into the experience of nursing in the ED during a disaster response, which can help generate awareness and inform future disaster preparedness of emergency nurses.

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