Original Research Article

A study to assess the effectiveness of video assisted teaching programme on knowledge regarding post-partum intra uterine contraceptive devices (PPIUCD) among antenatal mothers in selected rural areas at Udaipur, Rajasthan

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ABSTRACT

A Pre-experimental study to evaluate the effectiveness of Video assisted teaching programme on knowledge regarding PPIUCD among antenatal mothers in selected rural areas at Udaipur, Rajasthan. The sample consisting of 150 antenatal mothers in selected rural areas by using non-probability convenient sampling method. The tool comprised of structured self-administered questionnaire. The pre-test was conducted and the Video assisted teaching programme was administered. The post-test was conducted after one week. The data obtained were analyzed by using descriptive and inferential statistics. The mean post-test knowledge score 23.04 was higher than mean Pre-test knowledge score i.e. 11.30 ($p=0.05$, significant). This indicated that there was a significant difference between pre-test and post-test knowledge score of antenatal mothers regarding PPIUCD. Hence, the research hypothesis H_1 was accepted. The Chi-square test was carried out to determine the association between the posttest knowledge and demographic variables such as Age in years, Religion, Education, Occupation, Income, type of family, Aware about PPIUCD, Source of information. Out of which age in years ($\chi^2=16.97^*$) education ($\chi^2=13.51^*$) awareness ($\chi^2=8.77^*$) source of information ($\chi^2=8.56^*$) were found to be significantly associated with posttest knowledge at .05% level. Hence, research hypothesis H_2 was accepted.

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1. Introduction

The words birth control, contraception and family planning are often used interchangeably and although they are not identical in meaning. The term birth control refers to regulation of the number of children that are conceived or born. Contraception refers to the prevention of pregnancy, which is accomplished by specific contraceptive or birth control methods. Family planning has the broadest connotation.¹

Current population of India in 2011 is 1.21 billion. Current population in Rajasthan is 68,548,437. In India total fertility rate in India is 2.62 children born \ women. Total fertility rate in rural area is 2.9% and urban area is 2%.²

The current realization that socio-economic development and wellbeing of a society can be affected by astronomical increase in population has led to the establishment of family planning programmes. Family planning is a way of thinking and living that is adopted voluntarily, upon the basis of knowledge, attitude and responsible decision by individuals and couples in order to promote the health and welfare of the family group and thus contribute effectively to the social development of a country.³

Women remain one of the most underserved segments of the Indian population, an alarmed number of women who want to space or limit their families currently do not have access to or cannot afford or use appropriate means to do so. Although India was the first country to adopt family planning as a national programme during 1951 – 52, the demographic situation in the country is still a matter of

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grave concern. The low use of spacing methods is reflected in early child bearing and short birth intervals. Where ever services exist, women are constrained from using the family planning methods by cultural mores or pressure to rebuild the population.⁴

Globally, Family planning is recognized as a key life intervention for mothers and their children. An estimated one fourth of maternal mortality could be prevented through avoiding unintended pregnancies, while family planning is important throughout an individuals and couples reproductive life, postpartum family planning (PPFP) focuses on the prevention of unintended and closely spaced pregnancies through the first 12 months following childbirth. Nearly 65% of women, globally, in their first year postpartum, have an unmet need for family planning. Poised to become the most populous country in the world by the year 2020.⁵

2. Research Elaborations

2.1. Statement of problem

“A study to assess the effectiveness of video assisted teaching programme on knowledge regarding post-partum intra uterine contraceptive devices (PPIUCD)among antenatal mothers in selected rural areas at Udaipur, Rajasthan.”

3. Objectives

1. To assess pre-test and post-test knowledge score of antenatal mothers regarding post-partum intra uterine contraceptive devices.
2. To administer the video assisted teaching programme regarding post-partum intra uterine contraceptive devices.
3. To find out the association between pre-test knowledge score of ante natal mothers regarding postpartum intrauterine devices with selected socio demographic variables.

4. Hypothesis

H₁: There is a significant difference between the mean pre-test and post-test knowledge scores of antenatal mothers regarding post-partum intrauterine contraceptive devices.

H₂: There is a significant association between pre-test knowledge score of antenatal mothers regarding post-partum intra uterine contraceptive devices with selected socio-demographic variables.

5. Material and Method

5.1. Population

Antenatal mothers

5.2. Sample

The Antenatal mothersin selected rural areas at Udaipur, Rajasthan

5.3. Sample size

150 Antenatal mothers.

5.4. Settings

The study was conducted at Aanganwadicentre of Kodiyat, khemachkheri , Gorrella and Sisarma of Udaipur Rajasthan.

5.5. Sampling technique

Non-probability convenient sampling method.

The conceptual framework for the study was developed based on Imogene Ludwig Von Betalanffy's (1968) General system Theory.

6. Research Design

The research design selected for the present study was one group pre-test post-test research design.

Table 1: Pre-experimental one group pre -test post -test design

Group	Pre test	Intervention	Post test
	Depended Variable	Independent Variable	Depended Variable
	O₁	X	O₂
	Knowledge of Antenatal Mothers	Video assisted teaching programme	Knowledge of Antenatal Mothers

Key:

O₁ = Assesmentknowledge by administering pre-test.

X = Video Assisted Teaching on knowledge regarding PPIUCD.

O₂ = Assessment of knowledge by administering post-test.

6.1. Ethical consideration

After obtaining permission from research committee of Geetanjali College of nursing, prior permission was obtained from centers head from selected Anganwadi, at Udaipur. Consent was taken from each participant who had participated in the study.

6.2. Description of the tool

6.2.1. Section A-demographic data

Consisted of selected socio-demographic variables such Age in years, Religion, Education, Occupation, Income, type of family, Aware about PPIUCD, Source of information.

6.2.2. Section B-Tools and scoring technique

A structured self-administered questionnaires was selected based on the objective of the study as it was considered the

based and appropriate instrument to elicit the response from the literate subject.

6.3. Scoring

The knowledge of antenatal mothers regarding the outcomes of PPIUCD was scored as follows, one mark for each correct answer and zero marks for incorrect answer. The maximum score was 28, to interpret level of knowledge the score was distributed as follows; Interpretation of knowledge:

Level	Range
Inadequate knowledge	<50 %
Moderate knowledge	51-75 %
Adequate knowledge	>76 %

An answer key was prepared for scoring answer to the structured knowledge questionnaire.

6.4. Data collection and data analysis

The data was presented under the following sections

Section-I: Description of socio-demographic variables of the respondents.

Section-II: Distribution of respondents according pre-test and post-test level of knowledge score.

Section-III: Effectiveness of video assisted teaching programme on knowledge of antenatal mothers regarding PPIUCD.

7. Result

Table 2 The result showed that, in pre-test 100% of the respondents had inadequate knowledge, 00.00 % of the respondents had moderate knowledge and none of the respondents had adequate knowledge and in post-test 00.00% of the respondents had adequate knowledge and 00.00% of the respondents had moderate adequate knowledge and 100.00% of the respondents had an inadequate knowledge regarding PPIUCD.

Table 3 The result showed that the mean post-test knowledge score 23.04 (82.28%) is greater than the mean pre- test knowledge score 11.3(40.35%). The enhancement in the knowledge of respondents is 11.74 (50.95%) supporting the post-test knowledge score was higher than the pretest knowledge score. The data further represent that the 't' value 31 is significantly higher than the table value 1.96 at 0.05 level of significance. This indicates that there was difference in pre-test and post-test knowledge score of respondents and video assisted teaching was effective in improving the knowledge of antenatal mothers regarding PPIUCD.

H₁ - There is a significant difference between the pre and post-test knowledge score of antenatal mothers regarding PPIUCD. Hypothesis was tested at 0.05 levels. The calculated 't' value 31 is significantly higher than the

Table 2: frequency and Percentage distribution of respondents to their level of knowledge score. N=150

Knowledge Level	Pre test		Post test	
	Frequency	Percentage	Frequency	Percentage
A. Inadequate [<50%]	150	100	0	0
B. Moderate [51-75%]	0	0	0	0
C. Adequate [>75%]	0	0.0	150	100

Table 3: Effectiveness of Video assisted teaching by comparing pre-test and post-test knowledge score of respondent. N= 150

	Mean	Mean %	SD	Enhancement	Enhancement %	df	T value	Inference
Pre test	11.3	40.35	3.80					
Post test	23.04	82.28	2.87	11.74	50.95	149	31	S

S = Significant

table value 1.96 at 0.05 level of significance. This indicates that there is significant difference between the pre-test and post-test knowledge score hence the hypothesis H_1 is proved and accepted.

8. Conclusion

This study concluded that there is improvement in the level of knowledge of Antenatal mothers which indicates that the Video assisted Teaching Programme was effective. The demographic variables of Antenatal mothers significantly associated with the pre-test knowledge score. The development of Video assisted Teaching Programme will help the Antenatal mothers to enhance their knowledge regarding PPIUCD.

9. Conflicts of Interest

All contributing authors declare no conflicts of interest.

10. Source of Funding

None.

References

1. Basvanthappa BT. Text book of Community Health Nursing. New Delhi: Jaypee Brothers Medical Publishers;.
2. Available from: <http://censusindia.gov.in/2011-prov-results/indiaatglance.html>.
3. Kumar PR. Available from: <http://www.economicdiscussion.net/articles/main-effects-of-population-explosion-in-india/2254>.
4. Shankar A, Sebayang S. Available from: <http://www.prb.org/Publications/Datasheets/2013/family-planning-worldwide-2013.aspx>.
5. Banerjee M. Available from: <http://nrhm.gov.in/nrhm-components/rmnch-a/family-planning/background.html>.

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