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Effectiveness of video assisted teaching module on knowledge regarding maternal and child health programmes among B.Sc (N) final year students at selected nursing colleges at Puducherry

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Abstract
Introduction: Maternal and Child mortality is a global issue and World Health Organization recommends the use of Maternal and Child Health services to improve women's and babies' health during pregnancy and childbirth.
Aim of the study: The main objective of the study to assess the existing level of knowledge regarding maternal and child health programmes among B.Sc.(N) final year students.
Methodology: A quantitative research approach was adopted for the present study. The sample size for this study was 200 B.Sc (N) final year students who was selected using convenience sampling technique.
Results: The present study revealed that in pre-test those students having 112(56%) inadequate knowledge and moderate knowledge 88 (44%), after completing video assisted teaching programme lets conduct post-test students gather knowledge in maternal and child health 128 (64%) having adequate knowledge and 72 (36%) moderate knowledge.
Conclusion: The present study concludes that the pretest level of knowledge was inadequate and in the posttest majority of the subjects have adequate level of knowledge.

Keywords: World Health Organization, maternal and child health (MCH), students

Introduction

Maternal and Child mortality is a global issue and World Health Organization recommends the use of Maternal and Child Health services to improve women's and babies' health during pregnancy and childbirth. Proper utilization of maternal and child health services will reduce the risk of maternal and child deaths, especially in the place where MCH services are Poor.

In India, despite an increase in public and private expenditure on advanced health care, the utilization of basic health services remains poor. In India, over 50% of the children born are reported to have low birth weight. The poor utilization of MCH services also serious threats to maternal and child health (WHO, 2019) [1].

Maternal and Child Health (MCH) programs in India play a pivotal role in addressing the health needs of mothers and children, aiming to reduce maternal and child mortality rates, improve overall health outcomes, and ensure the well-being of both mothers and infants. These programs are essential components of the broader healthcare system, contributing significantly to India's efforts to achieve sustainable development goals related to health. In India, national programs to improve maternal and child health (MCH) exist, but maternal and neonatal mortality and morbidity remain high. There are a number of potential causes for this, but one crucial one is the under- or non-utilization of services.

Maternal and child health programs in India are multifaceted, aiming to provide comprehensive care from pregnancy through childhood. As the country continues to evolve its healthcare strategies, a holistic and collaborative approach involving government agencies, healthcare providers, and communities is essential to achieve sustained improvements in maternal and child health outcomes.

Need for the study

In worldwide, according to UNICEF, from 2000 to 2020, there was a 34% decrease in the global maternal mortality ratio (MMR) - from 339 deaths to 223 deaths per 100,000 live births.

However, this is only about one-third of the 6.4% annual rate required to achieve the Sustainable Development Goal (SDG) of 70 maternal deaths per 100,000 live births by 2030. Although there has been significant progress in reducing the global MMR between 2000 and 2015, the rates of reduction have been stagnant between 2016 and 2022. In most regions, the rate of reduction has stalled, and in Western Europe and North America, and Latin America and the Caribbean, MMR has increased over the 2016-2022 period.

In India, according to the latest report of the National Sample Registration System (SRS) data, the Maternal Mortality Ratio (MMR) of India for the period 2016-18 is 113 deaths per 100,000 live births. This is a significant reduction of 17 points, from 130 deaths per 100,000 live births in 2014-16. As a result, an estimated 2,500 mothers were saved in 2018 compared to 2016. The total number of annual maternal deaths declined from 33800 in 2016 to 26437 in 2018. The Maternal Mortality Ratio (MMR) in India was alarmingly high in 1990, with 556 women dying during childbirth per hundred thousand live births. This means that approximately 1.38 lakh women were losing their lives every year due to complications related to pregnancy and childbirth. In comparison, the global MMR at that time was much lower, at 385.

Understanding of the knowledge and attitude of the community regarding maternity care during pregnancy, delivery and postnatal period is required for better implementation of education programmes for better utilization of MCH services by the community. From the previous researcher felt that there a few study made on nurses and nursing students regarding MCH programmes.

Statement of the problem

"A study to evaluate the effectiveness of video assisted teaching module on knowledge regarding maternal and child health programmes among B.sc(n) final year students at selected nursing colleges at Puducherry."

Objectives of the study

- To Assess the existing level of knowledge regarding maternal and child health programmes among B.Sc(N) final year students
- To evaluate the effectiveness of video assisted teaching module knowledge regarding maternal and child health programmes among B.Sc.(N) final year students
- To associate the post-test level of knowledge regarding MCH programme among B.Sc(N) final year students with selected demographic variables

Hypothesis

- **H_1:** There is a significant difference between pre-test and post-test level of knowledge regarding maternal and child health programmes among B.Sc(N) final year students.
- **H_2:** There is the significant association between the post-test level of knowledge regarding MCH programme among B.Sc(N) final year students with selected demographic variables

Delimitation

The study is delimited to,

- Period of 4 weeks
- Selected nursing colleges at Puducherry
- 200 B.Sc(N) final year students

Methodology

The research approach adopted for this study was Quantitative research approach. The research design adopted for this study was pre-experimental - one group pretest and posttest research design. The setting of the study was Selected Nursing Colleges at Puducherry. The sample size for this study was 200 B.Sc(N) final year students who was selected using purposive sampling technique. Inclusion criteria includes B.Sc(N) Final year Students those who were willing to participate in the study and co-operative to conduct study.

Data collection procedure

Prior the data collection, formal permission was obtained from the selected nursing colleges at Puducherry. The period of data collection was 1 month. The researcher selected 200 B.Sc(N) Final year students by adopting purposive sampling technique. On the first day of data collection the researcher introduce myself and explained about my study, got permission from the Respective colleges and approached respective college principal and class coordinator who is incharge of B. Sc(N) Final year student in each colleges at Puducherry. On the day the Class Co-ordinator gathered every Students and make into comfortable seating position in class room with Power point presentation.

The researcher introduce herself to the participants and also the researcher explained the purpose of the study. The researcher assured that the collected data would be maintained confidentially. The subjects had the freedom to withdraw from the study at any time. Informed consent was obtained from the individual subjects. Pre interventional data regarding their demographic variables, knowledge regarding MCH Programme was collected. On the same day Video assisted power point presentation was taught regarding MCH Programmes. Totally 200 samples were selected based on the inclusion criteria by using purposive sampling technique. On the 8th day, post test was assessed by using the same tool. All the B.Sc(N) Final year students were co-operated well throughout the data collection period. The data was collected in three phases

In Phase 1

Researcher introduced herself to the student and the purpose of the study was clearly explained to the subjects and also assured that the collected data will be kept confidentially. Informed written consent was obtained from the subjects prior to the data collection. Pretest was done to the subjects by using self-structured questionnaire for collecting demographic data and knowledge questionnaire regarding MCH Programmes. Around 200 subjects were selected for data collection it took around 1hour 30minutes for completing each selected Nursing colleges for totally 5 Nursing colleges covered in 26 days. The data was collected from 200 final year B.Sc(N) Students.

In Phase 2

On the same day video assisted power point presentation was taught to the final year B.SC Nursing students regarding MCH Programmes.

In Phase 3

Post-test was carried out on 8th day with the same tool which was used for pretest. The same procedure was continued for all 200 subjects. All the subjects cooperated well throughout the data collection period.

Results and Discussion

The results of the study reveals demographic variables of 200 sample Shows that majority 136 (68%) of students belongs to the age group of (20-21), 64 (32%) belongs to the age group of (21-22), no one belongs to the age group of (22-23). According to gender majority 176(88%) were Female, 24(12%) were male. Regarding area of residence, 168(84%) were living in urban region, and 32(16%) were living in rural region. At Pertaining to the source of knowledge, majority 184(92%) had books as sources of knowledge on MCH Programmes, 16(8%) had internet as sources of knowledge and none had pamphlets as the source of knowledge on MCH programmes. Regarding to the conference/ CNE/ related to MCH programme they attend majority 192(96) had attend the conference/ CNE related to MCH programme, 8(4%) had not attend any CNE/ Conference related to MCH programme. Related to attend previous health related to MCH programmes 200(100%) has attend MCH programmes.

The first objective of the study was to assess the existing level of knowledge on MCH programmes among B.sc (N) final year Students

The result shows that in pre-test those students having 112(56%) inadequate knowledge and moderate knowledge 88 (44%), after completing video assisted teaching programme lets conduct post-test students gather knowledge in maternal and child health 128 (64%) having adequate knowledge and 72 (36%) moderate knowledge.

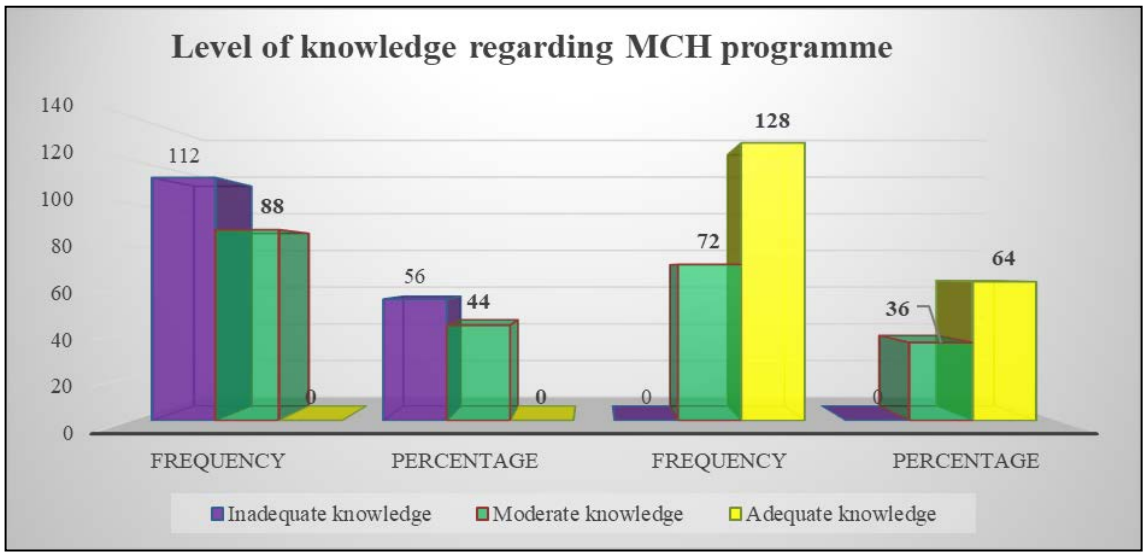

Fig 1: Frequency and percentage distribution of pre and post test level of knowledge regarding MCH programme among B.Sc(N) Final year students.

The second objective was to evaluate the effectiveness of Video Assisted teaching on knowledge towards MCH programmes among B.sc (N) final year students

The finding shows that the pre-test 19.52+4.538, t value is 60.833 and post-test 42.12+4.013, t value is 148.833 was found to be statistically significant at $p<0.05$* level which reveals that the video assisted teaching module regarding MCH programmes was effective and also necessary for the students. States there is a significant difference between the pre-test and post-test level of knowledge on MCH programmes among B.sc (N) final year students. Hence the hypothesis H1 was accepted.

The third objective is to associate the pos- test level of knowledge towards the MCH programmes among B.sc (N) final year students with selected demographic variables

Association between post-test level of knowledge communicates that age and sources of knowledge of MCH programmes has shown significant association at p level<0.05. Other demographic variables had not shown significant association with post-test level of knowledge on MCH programmes among B.sc (N) final students with selected demographic variables. Hence the hypothesis H2 was accepted.

Table 1: Effectiveness of video assisted teaching module by comparing the level of pre-test and post-test scores. N = 200

Level of knowledge	Mean	S.D	Mean Difference	Paired 't' test Value
Pretest	19.52	4.538	22.6	**t = 6.833 p=0.0001, S*** **
Post Test	42.12	4.013		

***$p<0.001$, S – Significant

The table 1 shows that the mean and standard deviation values on the effectiveness of knowledge in pre-test 19.52+4.538, t value is 60.833 and post-test 42.12+4.013, t value is 148.833 was found to be statistically significant at $p<0.05$* level. This was clearly representing that video assisted teaching module on knowledge regarding maternal and child health programmes among B.sc (N) final year students had significant improvement in their post-test of knowledge.

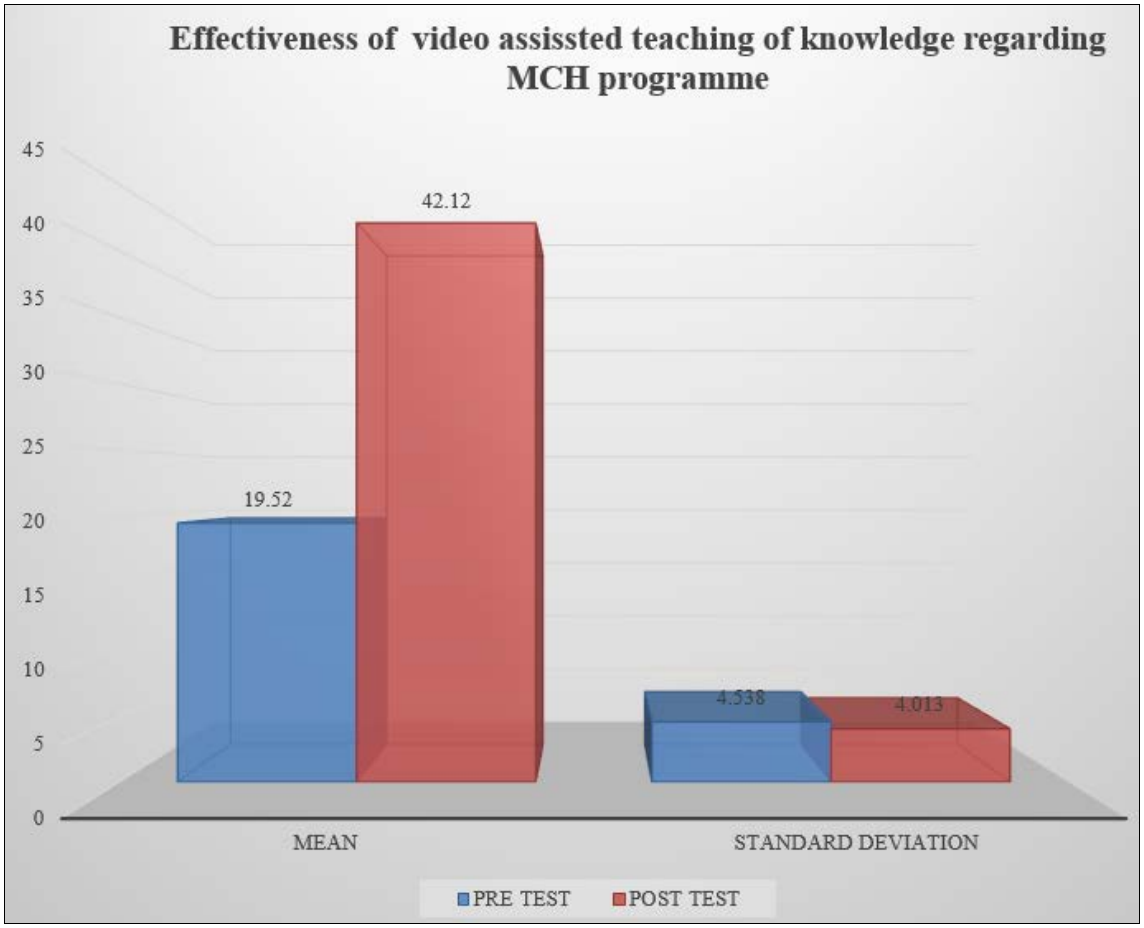

Fig 2: Effectiveness on knowledge for pretest and post-test level of knowledge regarding MCH programme among B.Sc(N) Final year students.

Conclusion

The present study concludes that the pretest level of knowledge was inadequate and in the posttest majority of the subjects have adequate level of knowledge.

Recommendation

- A comparative study can be done between different health care professionals.
- The study can be replicated with all health care professionals for generalization.
- A similar study can be conducted using time series research design to find out the effectiveness of video assisted teaching.

Conflict of Interest

Not available

Financial Support

Not available

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