

# Effectiveness Of Video Assisted Teaching Module (VATM) Regarding Self-Care Management Of Minor Disorders In Pregnancy On Knowledge Among Primi Mothers

Ms Soni Kumari

Department of Obstetrics and Gynecological Nursing  
Masters of Science in Nursing, Vinayaka Missions University

## Abstract

*A quasi-experimental research design with pre and posttest without control group approach was undertaken at ESI Hospital Phulwarisharipf, Bihar from 12.09.2009 to 26.09.2009. The data were collected from 86 primi mothers with minor disorders in pregnancy selected through purposive sampling technique to assess the effectiveness of VATM regarding self care management of minor disorders in pregnancy on knowledge of primi mothers by using structured interview schedule.*

*Findings revealed that most of the primi mothers with minor disorders were in the gestational age 21-30 weeks (47.67%) and Hindus (45.35). Highest percentage (44%) were from age group of 21-25 years, (39.53%) had no formal education, (47%) were house wife, (51.16%) belonged to joint family, (50%) belonged to income group of less than Rs.3000. Higher similar percentage (58.14%) were from rural area and received the information from the relatives.*

*The overall mean knowledge score during pretest was  $15.98 \pm 2.25$  which is 31.33% of total score whereas, during posttest, it was  $29.71 \pm 3.48$  which is 58.25% of total score revealing gain of 26.92% in knowledge score. Area wise assessment shows that during posttest mean score values were above 77.62% of the total score depicting good knowledge. It is observed that during pretest primi mothers had poor overall knowledge whereas it was good after implementation of VATM. Highly significant difference was found between pre and posttest knowledge score ( $P < 0.01$ ) and no significant association was found between KS of primi mothers in posttest when compared to the demographic variables of primi mothers except age which reveals significant relationship which shows highly significant relationship with the posttest score. It shows that age influence the effectiveness of VATM among primi mothers with minor disorders in pregnancy.*

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## INTRODUCTION

“Pregnancy is special  
Let us make it safe”  
(WHO, 1986)

Pregnancy is a challenging time for all women as they adjust to the changes they experiences and prepare to assume a new role as mother of one child or two or more children. At the time of pregnancy age may be factor in women adjustment, both physically and psychologically (Old, London, Ledwig, 1992 ).

## Objectives

- To asses
  - ❖ the knowledge of primi mother regarding self care management of minor disorders in pregnancy before implementing video assisted teaching module
  - ❖ the effectiveness of video assisted teaching module on self care management of minor disorders in pregnancy.
- To compare the effectiveness of video assisted teaching module with demographic variables
- To find out
  - ❖ the significant difference between pre and post test knowledge scores on self-care management of minor disorders in pregnancy.
  - ❖ the association between the posttest knowledge scores on self-care management of minor disorders in pregnancy with their demographic variables

## Delimitation

The study was limited to the mothers who were:

- **Primi.**
- **willing to participate in the study.**
- **available during period of data collection .**
- **knowing Hindi.**
- **attending antenatal OPD.**

**Hypothesis**

- **H<sub>01</sub> : There is no significant difference between pre test and post test knowledge scores of primi mothers regarding self-care management of minor disorders in pregnancy.**
- **H<sub>02</sub> : There is no significant association between pre test and the post test knowledge scores of primi mothers regarding self care management of minor disorders in pregnancy and the selected demographic variable.**

## **REVIEW OF LITERATURE**

The review of literature was carried out under following headings:

- Introduction
- Incidence and prevalence of minor disorders
- Complication to the fetus and newborn
- Self care management of minor disorders
- Knowledge of primi mothers regarding minor disorders in pregnancy
- Effectiveness of VATM
- Nursing role or implications

## **METHODOLOGY**

**Research Design** : Quasi-experimental  
**Approach** : Pretest-posttest without control group  
**Setting** : ESI Hospital, Phulwarisharif, Bihar  
**Population** : All the primi mothers who were attending antenatal OPD in selected hospital.  
**Sample Size** : 86 primi mothers  
**Sampling Technique** : Purposive sampling technique

**Tools for the study are –**

- Video assisted teaching module on self care management of minor disorders in pregnancy
- Structured interview schedule to assess knowledge regarding self-care management of minor disorders in pregnancy among primi mothers
- **Validity and Reliability of the Tools**
- **Validity** : established in consultation with guide and subject experts in ....area
- **Reliability of the tool** : Split half method (Spearman's co-relation co- efficient formula) was used to find out the reliability of the structured interview schedule ( $r = 0.86$ ).
- **Data collection procedure**: pretest was done on 14.09.2009 followed by presentation of VATM and posttest was done on 26.09.2009, after obtaining permission from the medical officer of ESI, hospital and informed consent was obtained from the primi mothers.
- **Data Analysis and Interpretation** : Data was analyzed by using mean, SD, median, mean percentage, 't' test and chi square

## **ANALYSIS AND INTERPRETATION**

### **Section 1**

- Distribution of the primi mothers according to demographic variables.
- Highest percentage (44%) of the primi mothers were in the age group of 21-25 years and 47.67% of them was in 21-30 weeks and (39.53%) of them had no formal education
- Highest percentages (45.35%) of the mothers were Hindus, (51.16%) belonged to joint family and (47%) house wife.
- Highest percentage (50%) of the primi mothers belonged to the income group of less than Rs.3000
- Higher percentage (58.14%) of the primi mothers were from rural area when compared to the primi mothers from urban area (41.86%).
- Most (58.14%) of the primi mothers received the information from the relatives.

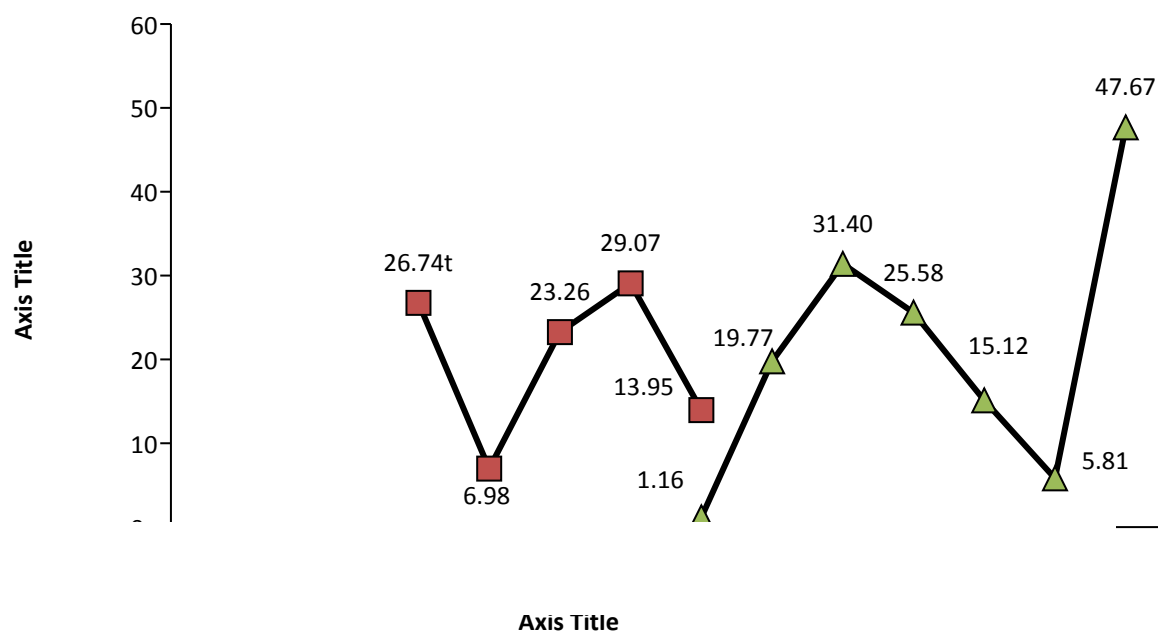
### **Section 2**

Area wise description of mean, SD and mean percentage of pretest knowledge score primi mothers

S. No	Area	Scores			
		Max Scores	Mean	SD	Mean %

1	Meaning of minor disorders and self care management.	3	1.17	0.63	39.15
2	Common minor disorders in digestive system and its self care management.	15	4.70	0.26	39.15
3	Common minor disorders in musculoskeletal system and its self care management.	10	3.22	0.39	32.21
4	Common minor disorders in cardiovascular system and its self care management.	9	2.03	0.45	22.61
5	Common minor disorders in Genitor-urinary system and its self care management.	6	1.99	0.45	33.14
6	Common minor disorders in nervous system and its self care management.	4	1.59	0.51	39.83
7	Common minor disorders in integumentary system and its self care management.	4	1.27	0.67	31.69
	Total	51	15.9	0.25	31.33

**Line Graph**



**Fig. No. 4.3.1** Line diagram showing the comparison of pre and posttest knowledge scores of primi mother regarding self care management of minor disorders in pregnancy

0 3 6 9 12 15 18 21 24 27 30 33 36

**O-give Diagram**

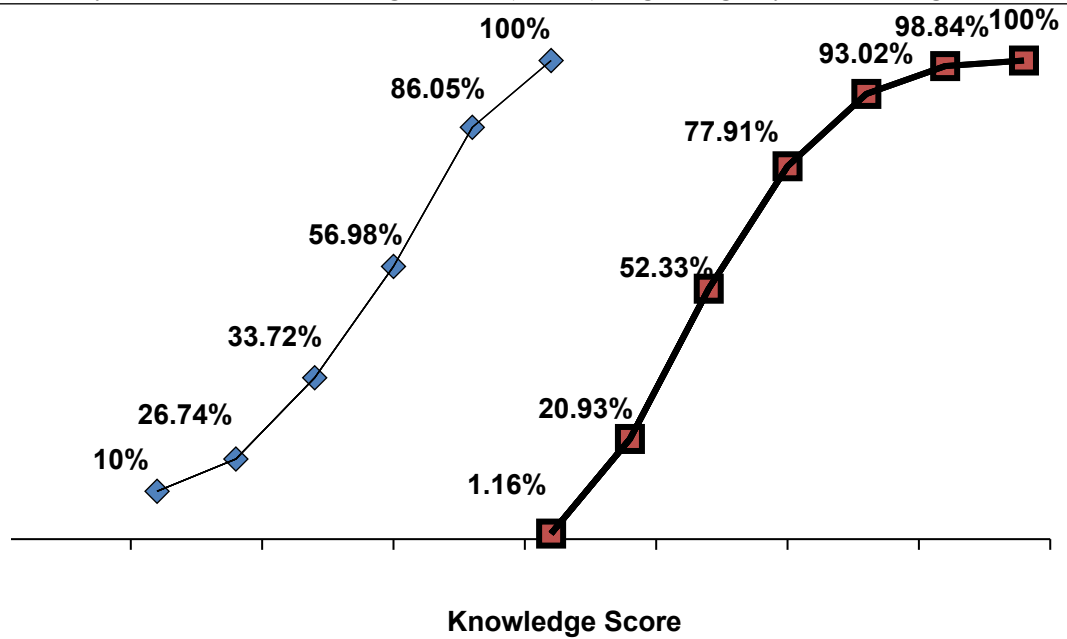
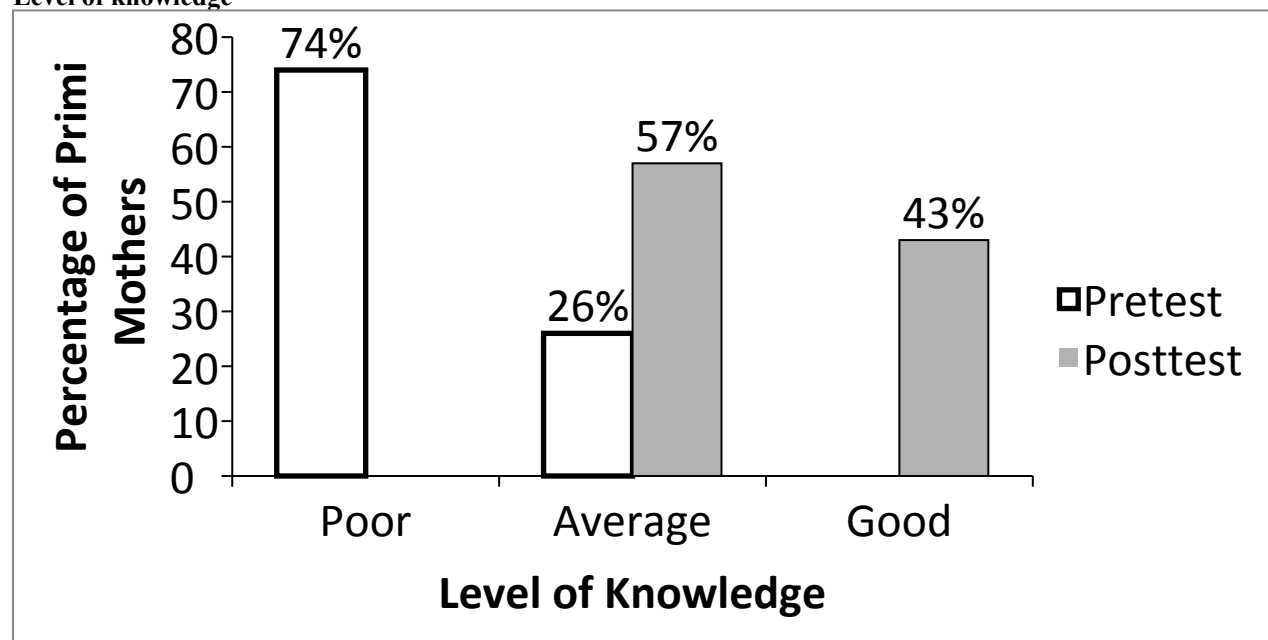


Fig. No. 4.3.2 O-give curve showing comparison of pre and posttest KS of primi mother regarding self care management of minor disorders in pregnancy



#### Section –V , Testing Hypothesis

Sl. No	Area	't' value	Level of Significance
1	Meaning of minor disorders and self care management	8.08	Highly significant
2	Common minor disorders in digestive system and its self care management.	15.24	Highly significant
3	Common minor disorders in musculoskeletal system and its self care management	6.58	Highly significant

4	Common minor disorders in cardiovascular system and its self care management	13.11	Highly significant
5	Common minor disorders in Genitor-urinary system and its self care management	7.74	Highly significant
6	Common minor disorders in nervous system and its self care management	6.75	Highly significant
7	Common minor disorders in integumentary system and its self care management	2.87	Highly significant
	Overall	8.94	Highly significant

### Conclusion

- From the findings, it can be concluded that highest percentage (44%) of them were in the age group of 21-25 yrs , (47.67%) of them was in gestational age 21-30 weeks, (39.53%) of them had no formal education, (45.35%) of the mothers were Hindus, (47%) of the primi mothers were house wife, (51.16%) of the primi mothers belonged to joint family, (50%) of the primi mothers belonged to the income group of less than Rs.3000 and (58.14%) of the primi mothers were from rural area when compared to the primi mothers from urban area (41.86%) whereas, most (58.14%) of the primi mothers received the information from the relatives.
- Prior to implementation of video assisted teaching module to the primi mothers had poor knowledge whereas, after implementation of video assisted teaching module the primi mothers had good knowledge with the difference of 26.92% of mean percentage revealing effectiveness of video assisted teaching module.

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