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Effectiveness of video assisted teaching module on contraceptive practices with special Emphasis to Emergency contraception among the Eligible couples in the villages of Pondicherry- A Pilot Study

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Abstract

From the global perspective, countries currently face the crisis of rapid population growth which has begun to threaten human survival. The population explosion which is affecting the whole world has been particularly detrimental to the infrastructure of the developing countries like India. Therefore it is necessary to stabilize the growth of the population in order to achieve the common goal of human survival. Objectives -To assess the knowledge, attitude and practice of couples regarding contraceptive practices including emergency contraception before and after the video assisted teaching. Evaluate the effectiveness of Video Assisted Teaching Module. Methodology-Experimental design i.e Pre and post test with control group design was used to collect the data from 100 couples(50 in control group and 50 in experimental group) by using interview schedule before and after presentation of video-assisted teaching module. The study was conducted in community setting of Pondicherry. Findings -Highest percentage of couples (38%) in control group and highest percentage of the couples (46%) in the experimental group were in the age group of 23 to 27 years. Highest percentage of the couples in the control group (36%) and highest percentage of the couples in the experimental group (38%),were completed pre primary education and only 4% in the control group, 6% in the experimental group, were completed higher secondary school education. 56% of couples in the control group and 68% of the couples in the experimental group, the primary decision maker for no. of children were husband. Overall experimental group post- test mean knowledge score was 38.24+5.54 which is 76.48 % of the total score, reveals excellent knowledge of the couples. Overall control and experimental group post- test attitude mean score (102.14+8.76) which is 75.10 % reveals excellent positive attitude of the couples towards contraceptive practices including emergency contraception. The above result shown that there is improvement in the knowledge attitude and practice in the experimental group than the control group, hence it can be concluded that the VATM was effective

Keywords: Contraception, emergency contraception, video teaching, couple.

Introduction

India, with a population of 1029 million (2001 census), is the most populous country in the world after china[1]. Every 7th man in the world is an Indian and India accounts for 15% of the world's total population[2,] which creates a serious problem in the country[3-5]. According to WHO family planning defined as "a way of thinking and living that is adopted voluntarily" upon the basis of knowledge, attitudes and responsible decisions 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[6-8].

In India in every five minutes a woman dies due to some complications of child bearing. 15% of all pregnant women in India develop life threatening complications. 65% of deliveries occur at home. Only 41% of women have skilled birth attendant at the time of delivery. 60% of all maternal death occurs after delivery but only 1 in 6 receives postnatal care. The risk of maternal death is one in 37 in India, while it is one in 240 in Sri Lanka as compared to one in 5000 in Singapore and one in 7300 in Norway. India accounts for over 20% of the world's maternal death. There is 15000 to 20000 abortions related to death are reported every year with 12% to 20% of the maternal death are due to septic abortions[9-11]. Around 40% pregnancy are unplanned each year, hence to maintain small family norm women must practice any of the contraceptive methods consistently[11-15.]

Objectives: i. To assess the knowledge, attitude and practice of couples regarding contraceptive practices including emergency contraception prior to video assisted teaching. ii. To assess the knowledge, attitude and practices of selected couples regarding contraceptive practices following teaching programme. iii. To evaluate the effectiveness of video assisted teaching programme on contraceptive practices including Emergency Contraception (EC) to the experimental group in comparison to control group. iv. To correlate the knowledge and attitude and attitude and practice among the couples.

Conceptual framework: Conceptual framework adopted for this study was based on baker's health beliefs model[16].

Null Hypothesis: There will be no significant difference between the knowledge, attitude and practice of eligible couples towards methods of contraception in control and experimental group during post test.

There will be no significant correlation between the knowledge of contraception to attitude and attitude to practice of contraception of the eligible couples in experimental group during the post test.

Methodology

Experimental design i.e Pre and post test with control group design[17-18]. was used to collect the data from 100 couples (50 in control group and 50 in experimental group) by using interview schedule before and after presentation of video-assisted teaching module. The study was conducted in community setting of Pondicherry.

Result and Discussion

The findings of the study were: Highest percentage of couples (38%) in control group andhighest percentage of the couples (46%) in the experimental group were in the age group of 23 to 27 years. All the couples in both control and experimental group were Hindus. Highest percentage of the couples in the control group (36%)and highest percentage of the couples in the experimental group (38%), were completed pre primary education and only 4% in the control group, 6% in the experimental group, were completed higher secondary school education. Around (58%) of couples in the control group and (52%) of couples in the experimental group had income Rs 2501 to Rs 5000 and only 4% of couples in the control group and 2% of couples in the experimental group had income Rs 7500 to Rs 10000 .Regarding occupation of the couples showed that highest percentage of them was had business (66% and 42%) in control and experimental group respectively. Highest percentage of couples (68%) in the control group and (62%) in the experimental group had lived in nuclear family. 56% of couples in the control group and 68% of the couples in the experimental group, the primary decision maker for no. of children were husband. Percentage wise distribution of couples regarding the various methods of contraception they heard showed that all of them, in both control and experimental group heard about Condom, CU-T and Female sterilization where as only 14% in the experimental group had heard about emergency contraception. Most of the couples in the control group (76%) and in the experimental group (78%) the source of information were health worker and 44% in the control group and 46% in the experimental group the source of information was the media. Overall experimental group post- test mean knowledge score was 38.24+5.54 which is 76.48 % of the total score, reveals excellent knowledge of the couples. The difference in knowledge mean percentage between control and experimental group post- test was 37.24% and difference in mean percentage between experimental group pre and post test was around 49.28% showed that the video assisted teaching module was effective in improving the knowledge of couples on contraceptive practices including emergency contraception . Overall control and experimental group post- test attitude mean score (102.14+8.76) which is 75.10 % reveals excellent positive attitude of the couples towards contraceptive practices including emergency contraception. The difference in mean percentage between control and the experimental group post- test attitude score was around 47.56%. It showed that the video teaching module was effective to improve the attitude of the couples on contraceptive practices including emergency contraception. The paired 't' test was calculated and found that there was a highly significant difference ($p<0.005$) between control and experimental group post- test knowledge scores and the pretest and post- test knowledge scores of experimental group. There was no significant association found between the experimental post- test knowledge and attitude scores with their demographic variables. Karl Pearson's coefficient of correlation analyzed knowledge and attitude ($r=0.06$) showed that significant relationship, which reveals that when knowledge level increases, the attitude will also increase.

Conclusion

Population control through family planning is no longer an exclusive responsibility of the ministry of health and family welfare at the centre and their counterparts in the states; it is equally responsible of all other agencies of the Government[19].

The task should have a persuasive approach involving more directly and extensively all those capable of influencing public opinion like women's organizations, teacher's association's village panchayats, religious organizations, etc. Local enthusiastic public co-operation, if mobilized and careful handling has greater chance of success as compared to any outside agency[14].

Awareness does not always lead to the use of contraceptive. A lot of education and motivational activities as well as improvement in the family planning services are needed to promote the use of contraceptive and reduce high fertility rate[11.]

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