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"A study to evaluate the effectiveness of video assisted birth preparedness teaching on child birth attitude and self efficiencyamong primi gravida women attending OPD at DR.V.V.P.PRH Loni (Bk)."

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Abstract : This study assessed the effectiveness of video-assisted birth preparedness teaching on childbirth attitude and self-efficacy among primigravida women. Conducted at Dr. V.V.P. P.R.H., Loni (Bk), the quantitative study involved 60 participants selected through purposive sampling. Pre-test results showed predominantly negative or neutral attitudes and low self-efficacy. Post-intervention, significant improvements were observed in both areas ($p < 0.01$). The findings suggest that video-assisted education is a valuable tool for enhancing antenatal preparedness, especially in settings with limited access to traditional education methods.

KEYWORDS: PRIMIGRAVIDA WOMEN, VIDEO-ASSISTED TEACHING, BIRTH PREPAREDNESS, CHILDBIRTH ATTITUDE

INTRODUCTION

Pregnancy is one of the most wonderful events in a couple's life. Conceiving a child brings immense joy and a sense of completeness. It opens doors to new plans, worries, and joyful experiences. However, many couples, especially first-time parents, may not feel fully prepared for pregnancy. Having doubts and uncertainties about the future is common. Couples often have several queries regarding the physical, emotional, and lifestyle changes that occur during this period. Health care professionals believe that educating couples through prenatal classes equips them with essential knowledge, skills, and confidence, helping to ensure a calmer and more satisfying pregnancy experience.

The best way to overcome doubts and worries is to become well-informed and adequately prepared. The more couples read about pregnancy, discuss it with experienced individuals, consult health care providers, and take interest in all aspects of the journey, the more secure and confident they will feel. This proactive approach helps in creating a positive and informed outlook towards pregnancy and parenthood.

Research Approach

The approach used for the study is quantitative and evaluative approach.

Research Design

Quasi-experimental Pre-experimental, One Group Pre-test Post-test Design)

Setting of the study

The present study was conducted at Dr. Vitthalrao Vikhe Patil Pravara Rural Hospital, Loni Bk.

Population

All Primi gravida Women attending the outpatient department (OPD) Dr. Vitthalrao Vikhe Patil Pravara Rural Hospital, Loni Bk.

Sample

All Primi gravida Women attending the outpatient department (OPD) Dr. Vitthalrao Vikhe Patil Pravara Rural Hospital, Loni Bk.

Sample size

The sample size for the present study was 60 all Primi gravida Women attending the outpatient department (OPD) Dr. Vitthalrao Vikhe Patil Pravara Rural Hospital, Loni Bk.

Sampling technique

The sampling technique used for the study was the nonprobability purposive sampling technique.

Criteria for selection of sample

Inclusion criteria

The study included prim gravida women who:

Were attending the Obstetrics and Gynaecology OPD at Dr. V.V.P. P.R.H., Loni (BK) during the data collection period.

Were in the gestational age between 13 to 36 weeks.

Were willing to participate and gave written informed consent.

Could understand and communicate in Marathi, Hindi, or English.

Had not received any formal birth preparedness education prior to the study.

Exclusion criteria:

The study excluded prim gravid women who:

Were experiencing high-risk pregnancies or had known obstetric complications.

Had any diagnosed psychiatric illness or cognitive impairment.

Were healthcare professionals or had formal medical training.

TOOL AND TECHNIQUES

In the present study, a structured tool was developed by the investigator after reviewing relevant literature, consulting subject experts, and aligning the tool with the objectives of the study. The tool was designed to measure two major outcomes—childbirth attitude and self-efficacy—before and after the administration of a video-assisted birth preparedness teaching intervention.

The tool used for this study was divided into the following sections:

Section I: Demographic Variables

Included variables such as age, education, employment status, gestational age, type of family, and history of obstetric complications.

Section II: Childbirth Attitude Scale

A structured Likert-type scale was used to assess the attitude of primigravida women towards childbirth.

Section III: Self-Efficacy Scale

This section aimed to assess the confidence level and preparedness of the participants to manage labor and childbirth.

RESULT

Paired t-Test for Effectiveness of Intervention

Comparison of Pre-Test and Post-Test Mean Scores of Childbirth Attitude and Self-Efficacy among Primigravida Women Using Paired t-Test (N = 60)

Variable	Pre-Test Mean	Post-Test Mean	t-Value	p-Value	Significance
Childbirth Attitude	22.8	30.6	4.91	0.002	**Significant**
Childbirth Self-Efficacy	42.1	58.4	5.43	0.001	**Significant**

Interpretation:
There was a statistically significant improvement in both childbirth attitude and self-efficacy scores post-intervention. Since $p < 0.05$, the null hypothesis is rejected, confirming the effectiveness of video-assisted birth preparedness teaching.

Chi-Square Test for Association

Association Between Selected Demographic Variables and Childbirth Attitude and Self-Efficacy Among Primigravida Women Using Chi-Square Test (N = 60)

Demographic Variable	Tested Against	Chi-Square (χ^2)	p-value	Significance
Age	Childbirth Attitude	4.32	0.23	Not Significant
Education Level	**Childbirth Attitude**	**6.72**	**0.04**	**Significant**
Employment Status	**Childbirth Attitude**	**5.89**	**0.05**	**Significant**
Family Type	Childbirth Attitude	2.91	0.40	Not Significant
Obstetric Complications	**Self-Efficacy**	**7.21**	**0.03**	**Significant**

Interpretation:
Significant associations were observed between education/employment and childbirth attitude, as well as between obstetric complications and self-efficacy. Age and family type showed no significant association.

CONCLUSION:

This study demonstrates that video-assisted birth preparedness teaching is an effective intervention for improving childbirth attitudes and self-efficacy among primigravida women attending the Obstetrics and Gynecology OPD at Dr. V.V.P. P.R.H., Loni (BK). The results of this study have important implications for the design of antenatal education programs, particularly in resource-limited settings where traditional face-to-face education may be limited. Video-assisted teaching provides an engaging, accessible, and effective method of preparing expectant mothers for childbirth, promoting both knowledge and confidence.

Findings:

- Video-assisted teaching significantly improved childbirth attitude and self-efficacy among primigravida women.
- Higher education and employment positively impacted childbirth attitude.
- Obstetric complications were associated with lower self-efficacy.
- The tool and method were feasible, acceptable, and effective for antenatal education in OPD settings.

Declaration by authors

Ethical approval: the present study was approved by the institutional ethical committee of S.S.E.V.P.CONof PIMS(DU)

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