**Effect of Video-Assisted Teaching Module on Home Care Management of Children with Mental Retardation**

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**Abstract**

A quasi experimental study was undertaken to assess the effectiveness of video-assisted teaching module regarding home care management of children with mental retardation on knowledge of parents. Data collected from 50 parents was analysed using descriptive and inferential statistics. The results showed that video-assisted teaching module was effective in enhancing the knowledge of parents for handling children with mental retardation.

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Mental retardation is a condition of arrested or incomplete development of the mind characterised by impairment of skills and overall intelligence. Cases of Mental Retardation are found in all the societies of the world. Status of disability in India (2000) reported that globally the prevalence of mental retardation is estimated to be 30 per thousand. Almost 75 percent of the population diagnosed as mentally retarded have mild mental retardation, while the remaining 25 percent have either moderate or severe and profound grade of retardation. In India prevalence of mental retardation varies from 0.22 to 32.7 per thousand populations.

Wong (2002) stated that mentally retarded child needs skill in communication, self care, home living social skills, leisure, health and safety, self direction, functional academics and community use.

Haward (2006) stated that parents have the responsibility of preparing an appropriate environment of love and care and meeting the needs of their children, which rapidly multiplies when the child has developmental disabilities. Parents need to learn all they can in regards to mental retardation. The more information you possess the better you are able to deal with it, and help your child in the future.

**Objectives**

The objectives of the study were:

1. To assess the knowledge of parents regarding home care management of children with mental retardation before implementation of video-assisted teaching module;

2. To assess the effectiveness of video-assisted teaching module on knowledge of the parents in home care management of children with mental retardation

3. To compare the post-test knowledge scores of parents with their selected demographic variables.

**Methodology**

A quasi-experimental research design, pre-test and post-test without control group approach were used. Parents with mentally retarded children were the population for the study. Purposive sampling technique was utilised for selecting the samples. The parents were selected according to the inclusion criteria. The data was collected from 50 parents by using structured interview schedule which consists of socio demographic data (10 items) and knowledge items (44 items).

Reliability of the tool was tested by test re-test method, where Karl Pearson’s correlation formula was used to find out the reliability of the tool \( r = 0.87 \). The final data was collected from 50 parents. The collected data was organised and analysed according to the objectives of study using descriptive and inferential statistics.

**Findings of the study**

> The highest percentage (34%) of the parents were in the age group of 31 - 35 years.

> Majority (68%) of them were fathers.

> Highest percentage (37%) of fathers had secondary school education and were daily wagers.

> Thirty percent were in the income group of Rs. 2001 - 2500.
Around 62 percent of them were Hindu and 50 percent of the parents from urban areas.

Majority (62%) of them belonged to nuclear family.

Highest percentage (46%) of the parents had two children.

34 percent of the parents received information on mental retardation from the television.

Findings related to knowledge aspects
The overall mean knowledge score on home care management of parents with mentally retarded children during pretest was 21.2 ± 4.79 which is 44.17 percent of total score whereas, during post-test, it was 33.18 ± 3.38 which is 69.13 percent of total score revealing the gain of 24.96 percent in knowledge score. It was observed that during pre-test family member had average overall knowledge whereas it was good after implementation of video-assisted teaching module.

Highly significant difference was found between pre-test and post-test knowledge score (p<0.01) and no significant association was found between knowledge scores of parents with their demographic variables, except the residence.

Implication
Findings of the study imply that a mentally retarded child requires skill in communication, self care, social skills, health and safety, so parents having mentally retarded children need to have adequate knowledge to deal with them effectively. Hence it is imperative for nursing personnel working in hospitals and at home to provide supportive and educative services.

Conclusion
From the findings of the present study it can be concluded that video-assisted teaching module regarding home care management of the parents with mentally retarded children was effective to improve the parents’ knowledge.

Recommendations
Based on our findings, following recommendations are made:

- Similar study with large sample size can be done for replication to standardise the VATM on home care management of children with mental retardation.
- Similar study can be conducted with control group.
- A self-instructional module can be prepared and tested for its effectiveness.
- A study can be conducted on factors influencing home care management of the parents with mentally retarded children.
- A comparative study can be conducted on knowledge and practice of the parents on home care management of mentally retarded children.

References
4. Status of disability in India, 2000
5. Wong et al. Maternal Child Nursing Care, 3 edn, Mosby publication, Missouri, 2008; p1256.

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