Video assisted teaching programme on first-aid for common medical emergencies

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ABSTRACT

Adolescents are a period of curative madness in which every teenager has to remake his personality to free himself/herself from childhood, from parent and establish a new identity. Apart from the emotional and psychological independence, an adolescent has to deal with the ongoing physical and sexual changes in the body. He/she must have the intelligence to deal with external forces over which he/she has little control. Adolescents, mainly boys are very energetic at this stage and are prone to road accidents because of fast and negligent driving. They are at particular risk of violent deaths due to adventurous, great risk-taking and aggressive behavior. (Neelam Takur 2007) The goal of first aid is to save a life, prevent injury or illness from worsening or to help a speedy recovery. First aid and basic life support are so important to teach basic first aid and should be compulsory in all schools. Without any delay first aid saves a person’s life, it is always better as it is said that “Preparedness is a key element of first-aid”. The approach of the study was quantitative research with an evaluative approach. The study was conducted in Government High School Thirunanthikarai at Kulasekharam, Kanyakumari District. The population was Adolescents who are studying in classes of 8th and 9th standard (13-14 years). Purposive sampling technique was used. The sample size was 60 Adolescents in the age group. The tools used for data collection were demographic variables and structured knowledge questionnaire. The analysis revealed that there was a significant improvement in the mean knowledge. The pretest knowledge score was 23.4 and posttest knowledge score was 78.2. Video-Assisted Teaching Programme improved the knowledge level. The ‘t’ value found that 28.2 (P < 0.05 level of significance). That showed that there was a significant improvement in the level of knowledge after the Video Assisted Teaching Programme.

Keywords— Video assisted teaching programme, First-aid, Common medical emergencies and adolescent

1. INTRODUCTION

“Timely first-aid saves more Lives than Heroic Surgeries!!!”
- Dr. Debangshu Dam

“A Stitch in Time Saves Nine”
- Gary Martin

A world fit for children is one in which all children, including adolescents, have ample opportunity to develop their individual capacities in a safe and supportive environment. Indian Academy of Pediatrics’ IAP Vision (2007) Adolescents have significant energy and drive with innovative ideas. The future productivity of any nation is fully dependent on the adolescents. Hence it is essential that the healthy development of adolescents needs to be carried out in a positive manner. In any country, adolescents are considered healthy due to the low mortality rate in that age group. However, mortality is a misleading measure of adolescent health. In fact, adolescents do have a range of health problems that cause a lot of morbidities as well as definite mortality. It is a common observation that adolescents do not access existing health services despite having definite health problems. (N. Swami Nathan (2008).

Adolescence both in terms of age (spanning the ages between 10-19 years) and in terms of a phase of life marked by special attributes which includes rapid physical growth and development, social and psychological maturity but not all at the same time, sexual maturity and the onset of sexual activity, experimentation, development of adult mental process and adult identity (World Health Organization 2007).

At all ages, appropriate and timely medical care plays an important role in children’s health status. However, other factors include parental influences, nutrition, environmental hazards, safety and the overall quality of home and school life; exert strange influences over a child’s wellbeing. Childhood is generally a healthy time of life as evidenced by the improvement in many indicators of child’s health status; children have important responsibilities in promoting a healthy lifestyle, creating safe environments and ensuring assess to a child care (Elizabeth).

First Aid is the initial care of the ill or injured. The aims of the first aid are to preserve and potential life, prevent further injury or deterioration of illness and help to promote recovery. First aid provider is defined as someone with formal training in first aid, emergency care or medicine who provides first aid. First aid assessments and interventions should be medically sound and based on scientific evidence. Accidents happen daily, knowledge of first aid, which constitutes life-saving treatment for accident or unexpected illness. So every individual at every age should always have common knowledge of the accident. “First aid” is like the first responder. First aid is initial cares given to victim arise at a health care center, before medically trained personnel arrive, or before the victim arrives at a health care center. It is
estimated that 50% of death occurs within the first hour of the accident, 30% between first hours and a week. And 20% occurs after the 1st week. The “golden hour” and platinum hour highlight the importance of early trauma care important factor responsible for increasing secondary injuries and complication are non-available of first aid. Delay in transfer from injury side to a hospital, lack of definitive treatment in first aid, and unavailability of hospitals and absence of triage and external medico-legal problem. The importance of first aid is: to save a life, Prevent further injury and to minimize or prevent infection. A study was conducted in China on sports injury in children. They found a total incidence rate of 73.3 per 1000 per year. The types of injuries were contusions 37.1%, fractures 22.0%, sprains 24.8%, and wounds 9.5%. The study concluded, the hospitalization rate was 3.8% and the incidence rate was high. Globally every year 1,50,000 people die in situations where first aid could have given them a chance to live. In India, the accident death rate is increasing sharply. The significant observation is that 9% of the total injuries occur at schools. In India, the accident death rate is increasing sharply. The significant observation is that 9% of the total injuries are occurring at schools. Even so, fewer than one in 10 people are trained in first aid. The school children have to be equipped with the first aid training.

School health services take comprehensive care to the health and well-being of children throughout the school years. First aid and emergency care are important aspects of school health services. A study was conducted by Layman to assess the knowledge regarding Basic Life Support. The result shows that only 9.9% knows the mouth to mouth respiration,84.28% knew about the Chest Compression Technique and 79.9% of these knew the purpose. Only 14.5% knew how to position the victim to perform Chest Compression Technique.82.48% reported a frequency below 60/minute.

2. STATEMENT OF THE PROBLEM
A study to assess the effectiveness of Video-Assisted Teaching Programme on First aid for common medical emergencies among Adolescent in selected school at Kulasekharam, Kanyakumari district, Tamil Nadu, India

3. OBJECTIVES OF THE STUDY
• To assess the level of knowledge regarding first aid for common medical emergencies before and after Video Assisted Teaching Programme among adolescent.
• To determine the effectiveness of Video-Assisted Teaching Programme by comparing the pre and post-test knowledge scores.
• To find the association between the Adolescent regarding First aid for common medical emergencies with selected demographic variables such as age, sex, education of parents, the occupation of parents and source of information.

4. HYPOTHESIS
• There is a significant increase in the level of knowledge after Video Assisted Teaching Programme regarding First aid for common medical emergencies of Adolescents.
• There is a significant association between knowledge score regarding medical emergencies with selected demographic variables such as age, sex, education of parents, the occupation of parents and source of information.

5. MATERIALS AND METHODS
5.1 Research Approach
The Research Approach used in this study was a Quantitative Research approach.

5.2 Research Design
The Research Design used in this study was one group pretest, posttest Pre experimental Research design.

5.3 The setting of the Study
The study was conducted in Government High School Thirunanthikarai at Kulasekharam in Kanyakumari District, Tamil Nadu, India.

5.4 Population
Adolescents who are studying in classes of 8th and 9th standard (13-14 years) in Government High school Thirunanthikarai, Kulasekharam

5.5 Sample and sampling technique
The sample size consists of 60 Adolescents in the age group of 13-14 years. They were selected by purposive sampling technique.

5.6 Sample selection criteria
Inclusion criteria:
1. Adolescents between the age group of 13-14 years.
2. Adolescents who are present on the day of data collection.
3. Adolescents who are willing to participate in the study.
4. Those who are physically able.
5. Those who know to read and write Tamil.

Exclusion criteria:
1. Those who are absent on the particular day of data collection.

6. DEVELOPMENT AND DESCRIPTION OF THE TOOL
After wide reading, the researcher developed the tool as per the following:

Section A: The demographic variables included are age, sex, educational status of father, parents, the occupation of parents and source of information.

Section B: Structured knowledge questionnaire.

Scoring: It consists of 25 questions. Each question carries 4 marks for correct answer and zeroes for the wrong answer

<table>
<thead>
<tr>
<th>Knowledge Score</th>
<th>Knowledge Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>76-100</td>
<td>Excellent</td>
</tr>
<tr>
<td>51-75</td>
<td>Very good</td>
</tr>
<tr>
<td>26-50</td>
<td>Good</td>
</tr>
<tr>
<td>1-25</td>
<td>Poor</td>
</tr>
</tbody>
</table>

6.1 Reliability of the tool
Reliability of the tool was identified by split - half technique and Spearman’s rank correlation formula. The finding shows that $r = 0.99$. The tool is reliable.

7. DATA COLLECTION PROCEDURE
Before starting to conduct data collection the Investigator obtained permission from Government High school Thirunanthikarai, Head Master for conducting the study. The study was conducted in Government High school Thirunanthikarai, Kulasekharam with 60 samples. Data collection period was one month. The purposive sampling method was used. The samples are Adolescents those who are studying in the 8th and 9th standard. The pretest was conducted for the selected Adolescents. After pretest Video Assisted
Teaching Programme was given to those children for 45 minutes for 2 days. Then post-test was conducted after 2 weeks.

8. MAJOR FINDINGS OF THE STUDY AND DISCUSSION

The data are organized and presented in the following four sections:

- **Section A:** Distribution of sample according to their demographic variables of study subjects
- **Section B:** Distribution of sample according to the knowledge level
- **Section C:** Effectiveness of Video-Assisted Teaching Programme regarding First aid for Common Medical Emergencies among Adolescents.
- **Section D:** Find the Association between knowledge and selected demographic variables.

**SECTION A:** Distribution of sample according to their demographic variables of study subjects.

According to the distribution of samples 54% of participants were 13 years of age, 46% were 14 years of age regarding sex 42% were males and 35% were females. Regarding the Educational status of father 52% completed their primary education 35% higher secondary and 13% Degree holders. About the education of mother, 72% of mothers have completed primary education, 25% higher secondary and 3% were Degree holders. Regarding Occupation of father 69% Daily wagers, 28% Private Employees and 3% were Government Employees. In respect of occupation of mother 73% Housewives, 25% Daily wagers, 2% Private Employees. In the case of the source of Information 75% received information from Teacher 25% From Medias.

**SECTION B:** Frequency and percentage distribution of Adolescent according to their knowledge level.

The above table depicts that, the Video Assisted Teaching Programme regarding First aid for Common Medical Emergencies among Adolescents was highly significant. The mean score was increased after giving Video Assisted Teaching Programme from 23.4 to 78.2 and the standard deviation was 11.67 and 7.87 respectively. The above table reveals that the calculated value is higher than that of the table value (t value is 2.00) with df 59 and 0.05 level of significance (p<0.05).

There is a significant improvement in the level of knowledge after Video Assisted Teaching Programme.

**SECTION D:** Association between knowledge and selected demographic variables.

There is no significant association between the level of knowledge and demographic variables such as age, sex, education of parents, the occupation of parents, and the source of information obtained.

8.1 Recommendation

- A similar study can be conducted with large samples.
- Studies can be done on a long-term basis to produce more outcomes.
- Studies can be conducted to compare the effect of other different teaching methods on First aid for Common Medical Emergencies.
- Encourage beginning researchers to conduct a longitudinal study regarding First aid for Common Medical Emergencies.

9. NURSING IMPLICATIONS

The findings of the study reveal the implication of Nursing Education, Nursing practice, Nursing Administration and Nursing Research.

**9.1 Nursing education**

- In-service education can be given to the Nursing personnel on the use of various methods of teaching while providing Health education to children regarding First aid measures in order to capture their attention.
- Nursing students must be prepared to provide Health teaching by using various teaching methods.

**9.2 Nursing practice**

- Teach First aid and Emergency measures to the child and parents who are getting treatment from the hospital before discharge.
- Nurses can use various technologies to capture the attention of the School Children while providing Health teaching on First aid for Common Medical Emergencies.

**9.3 Nursing administration**

The Nurse Administrator can encourage the Nurses to provide Health teaching on First aid for Common Medical Emergencies by using Video Assisted Teaching Programme which helps to improve the knowledge of Adolescents regarding First aid for Common Medical Emergencies.

**9.4 Nursing research**

The findings of the study motivate the Nurse researcher to conduct many studies related to First aid measures among Adolescents.

10. CONCLUSION

The study reveals that the level of knowledge on First aid for Common Medical Emergencies has improved after Video
Assisted Teaching Programme at 0.05 level of significance. Knowledge on First aid for Common Medical Emergencies will help the Adolescents to get more ideas regarding First aid measures. Based on the findings of the study concludes that teaching Programme like Video Assisted Teaching Programme will improve the knowledge on First aid for Common Medical Emergencies among Adolescents.

11. REFERENCES