# Animated Video Assisted Teaching on Self-Care Activities among Mildly Retarded mentally Challenged Children

Sreenath M.<sup>1</sup>, Assuma Beevi T.M.<sup>2</sup>

### **Author Affiliation**

<sup>1</sup>MSc Nursing Student, Pediatric Nursing, <sup>2</sup>Princpal, MIMS College of Nursing, Puthukode, Kerala 673633, India.

Corresponding Author
Assuma Beevi TM, Princpal, MIMS
College of Nursing, Puthukode,
Kerala 673633, India.
E-mail: principal@mimscon.com

**Received on** 05.03.2018 **Accepted on** 02.04.2018

#### Abstract

Background and objectives: According to WHO estimation, 10% of global population has some form of disability [1]. This study examines the effectiveness of animated video assisted teaching on self-care activities among mildly retarded mentally challenged children. Objective of the study was to evaluate the effectiveness of animated video assisted teaching on self-care activities among mildly retarded mentally challenged children. Methods: The study was done by quantitative approach with pre-experimental one group pretest post test design on 30 mildly retarded mentally challenged children from VKM Special School Malappuram, Kerala. Pretest data was collected by using self-care ability assessment tool. Animated video assisted teaching provided for 15 days, post test done by re administering the same tool. Results: Study results revealed that in pre test assessment of cumulative scores on self-care activities, majority 53.3% (16) sample scored average, 46.7% scored poor and none of the sample scored good. In post test score, majority 93.3% sample scored average, 6.7% sample scored good, and none of the sample scored poor. There was significant difference between pretest and posttest scores since t = 14.04, with p value 0.000, which was significant at 0.05 level of significance. It depicts that animated video assisted teaching was effective to improve the self-care activities of children with mild mental retardation Conclusion: The study findings identified that there was significant difference in pre and post test scores, and it concluded that animated video assisted teaching on self-care activities were effective among mildly retarded mentally challenged children.

**Keywords:** Effectiveness; Animated Video Assisted Teaching; Self-Care Activities.

#### Introduction

"We worry about what a child will become tomorrow, yet we forget the fact that he is someone today"

-Stacia Taucher

Mental retardation or intellectual disability is largely known for substantiallimitation in the normal functioning of a child. It includes malformations in bothintellectual and adaptive skills like self care, social skill, self direction, health andsafety etc. Intellectual disability is not a disease and it is certainly not contagious. It is a condition which affects an individual because of some change or damage with in the developing brain and neurological system.

The literature shows that approximately 15% of the entire world population constitutes children with intellectual disability. About 25% of cases are caused bygenetic disorder, and for approximately 25-30% of children born with intellectual disability; the cause reveals unknown [1].

Children love cartoons; this feature of children can be utilized for training the self care activities. Animated video with cartoon characters can be effectively utilized for training. At present there are no such teaching modalities available in Kerala. It is essential to develop an animated video on self care abilities to teach the children in an effective manner. It seems to be more helpful as these children easily get attractive towards animated characters and try to imitate them.

#### Materials and Methods

The study was done by quantitative approach with pre-experimental one group pretest posttest design on 30 mildly retarded mentally challenged children from VKM Special School Malappuram, Kerala.

Pretest data collected by using demographic proforma, and self care ability assessment tool. The animated video assisted teachingon self-care activities (eating with spoon, combing the hair, brushing the teeth and toileting) provided for 15 days along with the practice (3 times a day).

Schematic design of the study

Pre test O1	Intervention X	Post test O2
Assessing the self-care	Animated	Reassessing
activities of mildly	video on self-	the self-care
retarded mentally	care activities	activities of mildly
challenged children		retarded mentally
Ü		challenged children

Parents were instructed to use the steps of animated video while performing self-careactivities by children at home too. Post test was done 7 days after the last session of animated video assisted teaching by using the same self-care ability assessment tool. Collected data tabulated and analyzed

#### **Results**

The present study is aimed to assess the effectiveness of animated video assisted teaching on self care activities among mildly retarded mentally challenged children in selected special school,

Malappuram Kerala. The data collected were categorized and analyzed based on study objectives and hypothesis by using descriptive and inferential statistics with the application of Statistical Package for Social Sciences (SPSS Version 17).

Figure 1 Shows that the frequency and percentage distribution of skills on self-care ability's score (pre test-post test score) among mildly retarded mentally challenged children. In pre test assessment majority 53.3% (16) sample scored average, 46.7% (14) scored poor and none of the sample scored good. In post test score, majority 93.3% (28) sample scored average, 7% (2) sample scored good, and none of the sample score poor.

Table 1 Reveals the mean pretest score was found to be 16.00 with a SD±4.127 and mean post test score is 23.57 with SD±4.688. The 't' value was 14.021 with 'p' value 0.000 which was significant at 0.05 level of significance. And it found that there is significant difference between the mean pre test and post test scores on level of performance of self care activities among mildly retarded mentally challenged children.

**Table 1**: Effectiveness of animated video assisted teaching on overall self care ability of mildly retarded mentally challenged children

					(n=30)
Variable	Mean	SD	't' value	Df	'p' value
Pre test score	16.00	4.127			
Post test Score	23.57	4.688	14.021	29	0.000*

(\* significant at p<0.05)

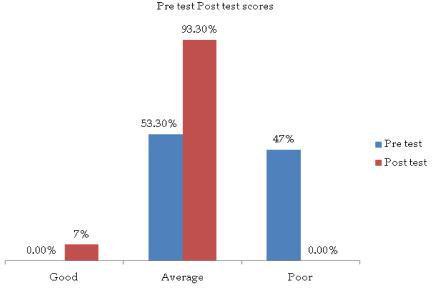


Fig. 1: Frequency and percentage distribution of skills on self-care ability score (pre test-post test score) among mildly retarded mentally challenged children

#### Discussion

In the present study, 30 children with mild mental retardation were assessed for the effectiveness of animated video assisted teaching on self-care activities. In pre test assessment of cumulative score on self-care activities, majority 53.3% (16) sample scored average, 46.7% (14) scored poor and none of the samplescored good. In post test score, majority 93.3% (28) sample scored average, 6.7% (2) sample scored good, and none of the sample scored poor. The above mentionedvalues clearly identifies that improvement in self-care activities among children withmild mental retardation after the animated video assisted teaching.

An experimental study done to assess the effectiveness of photographic training on self-care activities among children with autism spectrum disorder California. 4 samples were selected for the study by using convenience sampling technique. Selected self-care skills were hand washing and tooth brushing. 10 photographs were used to train the skills, depicting 10 steps of each skill. The intervention is provided for 21 days in 2 sessions. 2 (50%) children showed significant improvement in the self-care. 1 (25%) child had moderate improvement and the remaining 1 (25%) child had no improvement in the self-care activities. The tudy also emphasized to use different visual training methods for the teaching ofmentally challenged children 35. The findings of this study support the findings of the present study [2].

experimental study examined effectiveness of a video-based anchored instruction to enhance self care abilities and communication among mentally disabled children in Taiwan by Hsin-Yih Cindy Shyu. The purpose of this study was to investigate the effects of computer assisted video disc-based anchored instruction on self care abilities and communication. Total 47 samples were selected for the study. Results from a t-test indicate a significant main effect on student ability to perform self care. Results from a two-way repeated measures ANOVA shows that students' self care and communication skills improved significantly with anchored instruction. The findings suggest that video-based anchored instruction provide a more motivating environment that enhanced

student's learning and grasping capacity. This study is significant because it establishes an example of video-based anchored instruction for Taiwanese students and also provides empirical evidence of its effects on affective and cognitive responses among mentally challenged children. This study also visualizes the similar concepts of the present study [3].

#### References

- 1. World health organization. Disabilities and rehabilitation World report on disability [Internet]. 2011:1-350. Available from: http://www.who.int/disabilities/world\_report/2011/report.pdf.
- 2. Mac Duff G S, Krantz P J, Lynn E. Teaching children with autism to use photographic activity schedules: maintenance and generalization of complex response chains. Journal of applaied behavioural analysis [Internet]. 1993 Mar;26(1):89-97. Available from: http://onlinelibrary.wiley.com/ doi/10.1901/jaba.1993.26-89/full.
- 3. Shyu H Y C. Using video-based anchored instruction to enhance learning Taiwan's experience. British journal of educational technology [Internet]. 2000;31(1):57-69. Available from: https://pdfs.semanticscholar.org/a958/73e138a 5f9d4b57df5d1a28495aeb39cd7c6.pd.
- 4. Jeyachandran P, Gadkari J P, Mishra S K. Mental retardation [Internet]. 1961;1(1):1-106.
- 5. Ronald S, Illingworth. The development of the infant and young children: Normal and Abnormal. 9th edition. Noida: 2007.pp.142-145 The advocacy alliance. Developmental Disabilities-Myths vs. Facts [Internet]. 2012 Jan 16 Available from: http://theadvocacyalliance. org/blog/2012/01/16/developmental-disabilities-myths-vs-facts/.
- Lakhan R, Ekundayo OT. National sample survey organization survey report: An estimation of prevalence of mental illness and its association with age in India. J Neurosci Rural Pract [Internet]. 2015 Jan-Mar;6(1):51–54. Available from: https://www. ncbi.nlm.nih.gov/pmc/articles/PMC4244788/ Doi: 10.4103/0976-3147. 143194.
- Kammath SS. Childhood Disability Our Responsibility. Indian pediatrics [Internet]. 2015; 52(1):1-2. Available from: http://medind. nic.in/ ibv/t15/i1/ibvt15i1p13.pdf.

# Red Flower Publication (P) Ltd.

## Presents its Book Publications for sale

**1. Shipping Economics (New for 2018)** by D. Amutha, Ph.D. INR345/USD27

2. Breast Cancer: Biology, Prevention and Treatment (2015)

by Rana P. Singh, Ph.D. & A. Ramesh Rao, Ph.D. (JNU) INR395/USD100

INR150/USD50

**3. Child Intelligence (2005)** *by Rajesh Shukla, MD.* 

**4. Pediatric Companion (2004)** by Rajesh Shukla, MD. INR250/USD50

## Order from

Red Flower Publication Pvt. Ltd.

48/41-42, DSIDC, Pocket-II

Mayur Vihar Phase-I

Delhi - 110 091(India)

Mobile: 8130750089, Phone: 91-11-45796900, 22754205, 22756995

E-mail: sales@rfppl.co.in

# **Special Note!**

Please note that our all Customers, Advertisers, Authors, Editorial Board Members and Editor-inchief are advised to pay any type of charges against Article Processing, Editorial Board Membership Fees, Postage & Handling Charges of author copy, Purchase of Subscription, Single issue Purchase and Advertisement in any Journal directly to Red Flower Publication Pvt. Ltd.

Nobody is authorized to collect the payment on behalf of Red Flower Publication Pvt. Ltd. and company is not responsible of respective services ordered for.