

A study to assess the effectiveness of video assisted teaching programme on knowledge and skill regarding prenatal yoga among primigravida mothers in selected maternity units, Bangalore.

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Abstract

Introduction and objectives: Bringing a baby into the world can be an emotional roller coaster ride. During the nine months of pregnancy, feelings can wax and wane between excitement, joy, fear, and frustration. In the end, for most women it is a wonderful or at least, a rewarding, experience. As a result, they lose right of healthy life just after one or two deliveries and pregnancy becomes threat to their life instead of joy of motherhood. Scientific observations now claim that exercises even during pregnancy do not disturb the motherhood but on the contrary help enjoying joy of health, easy pregnancy and balanced growth of baby in the womb followed by a comfortable delivery. Child birth is surely the greatest act performed by women. It can be a great emotional experience. The physical and psychological aspects can't be separated. For a number of women labors is a time of apprehension of fear and agony. But with a proper antenatal preparation the majority women can have and labor that is easy and painless and women can actually enjoy the labor and experience a sense of fulfillment.

Methods: A Quasi experimental design was used with the evaluative approach, to assess the effectiveness of Video assisted teaching program on preventing the complications of minor disorders of pregnancy, data was collected from who were selected using simple random technique at selected hospitals in Bangalore.

Results: shows Aspect wise Mean Pretest and Posttest skill on prenatal yoga. In the pre-test, skill scores were considerably less compared to post-test performance in all the aspects of skill under study. The findings showed that the enhancement of mean skill percentage score is 83.8% found in the aspect of skill on prenatal yoga, mean skill of 73.6% found in the aspect of relax the muscles and nerves, 94.2% found in the aspect of Dhruv asana, 85% found in the aspect of performs padmasana or shavasana, 81.7% found in the aspect of Ananda Madi asana, 85.7% found in the aspect, padadirasana, 85.2% found in the aspect Aswaththasana, 88% found in the Hastothasana 86.7% found in the skandasana, 90% found in the chakki chalasana 41.8% found in aspect Makaras Ana. Aspect of, However the overall pre-test mean

knowledge score was 83.8% on prenatal yoga. and the overall post-test mean knowledge score was 85.5%. The statistical paired “t” test of 30.70 reflected significance in the enhancement of knowledge score for all the selected aspects at $P < 0.05$.

Conclusion: The study proved that there was significant association between posts level of knowledge and selected demographic variables like education, occupation, residential area, monthly income and age of onset of prenatal yoga but there was no significant association between the posttest level of knowledge and selected demographic variables like age, religion, dietary pattern and type of family.

Keywords: Effectiveness, Video assisted Teaching Program, Prenatal yoga, Primigravida mother, Skill, Knowledge.

Introduction

Bringing a baby into the world can be an emotional roller coaster ride. During the nine months of pregnancy, feelings can wax and wane between excitement, joy, fear, and frustration. In the end, for most women it is a wonderful or at least, a rewarding, experience.

Birth is a miracle and each baby is life's perfect creation. Pregnancy is often a time of hope for the future. Process of pregnancy and child birth are very much a personal journey. Each woman experiences the beauty of creating and giving birth to a child. The journey motherhood is a beautiful life of passage.

There are few happier moments in a woman's life than successfully giving birth to a healthy baby. Attaining motherhood transforms a woman forever and extracts out a personalizing dormant for years deep within her. Preparing for pregnancy and living through those fantastic nine months, moment by moment, is an experience that a woman can never forget in her life time. Pregnancy, the stage of conceiving another life within,

leading to the birth of the of the baby can be broadly classified into three periods-pre during and post pregnancy. Each period has its own significance, characteristics and complications. Various phases during pregnancy bring about a lot of changes in a woman's life at all levels, physical, mental, emotional and social.

To bear a child is undeniably the ultimate dream of the majority of women. It is an almost divine fulfilment that the women hope to attain through this of procreation. Fear and apprehensions often could the mind, the moment pregnancy is confirmed.⁴ Under modern lifestyle of comforts, maternity is growing tough and complicated day by day as women in modern leave all exercises and even normal physical activities as soon as pregnancy is confirmed. Even newly wedded women are bound to face the consequences of such comforts in the form of frequent complications and caesarean deliveries. Few minor disorders are common during pregnancy, but these disorders are not life threatening. Such disorders are nausea, vomiting, heartburn, pica, excessive salivation, constipation, backache, muscle cramps, insomnia and carpel tunnel syndrome. These disorders are due to hormonal changes, accommodation changes, metabolic changes and postural changes.

As a result, they lose right of healthy life just after one or two deliveries and pregnancy becomes threat to their life instead of joy of motherhood. Scientific observations now claim that exercises even during pregnancy do not disturb the motherhood but on the contrary help enjoying joy of health, easy pregnancy and balanced growth of baby in the womb followed by a comfortable delivery. Child birth is surely the greatest act performed by women. It can be a great emotional experience. The physical and psychological aspects can't be separated. For a number of women labor is a time of apprehension of fear and agony. But with a proper antenatal

preparation the majority women can have and labor that is easy and painless and women can actually enjoy the labor and experience a sense of fulfilment.

Yoga creates an environment of dynamic peacefulness and harmony within. On a physical level it strengthens and tones various parts of the body and improves flexibility, stamina and mobility. Primary goal of yoga is to gain balance and control in one's life. To free one from confusion and distress. To provide a sense of calm that comes from the practice of yogic exercises and the practice of breath control. Biologically it does a balancing act on different systems of the body, helps increase vitality, strengthens immunity, detoxifies the body and improves all biological processes and brain functioning. Mentally, it increases sensory awareness improves concentration levels, clear the thought process and relaxes the mind, focuses attention and frees the spirit.

Yoga provides individual with their own way to connecting with their true selves. Such is the flexibility and adaptability of yoga that it transcends all barriers of place, religion, faith, caste, and creed and establishes connection with everyone who wants to embrace it for well-being. Self-actualization or identification with the pure consciousness is the pinnacle of achievement and ultimate aim of being a yogi, one who observes and practices all aspects of yoga in daily life.

The science of yoga can be safely and effectively applied during all stages of life for enlightened and problem free living and pregnancy is no exception to this. Yoga, if practiced regularly under restraint and guidance, is known to have an immensely positive impact during all phases of pregnancy. The process of pregnancy will never be the same again if yogic techniques are applied and practiced correctly. The entire experience of pregnancy will then be as pleasant as the outcome itself.

Pregnancy yoga is a great form of exercise, both for mind and body and regarding for the birth of the baby. Yoga practice during the pregnancy requires modifications from typical yoga practice.

During the pregnancy the mother can practiced different types of yoga. Mainly Dhruva Sana, Ananda madir asana, Padadirasana, Ashwatthama, Hastothasana, Skandhas ana, Chakki chalasana and, makaras Ana. Dhruva Sana will protects against the painful labour and fatigue. This asana adds a lot of muscular and nervous strength reduces the stretch marks and strengthens the legs and carry the baby comfortably. Ananda madir asana and padadirasana helps to prevent the morning sickness in the first trimester.

Ashwatthama will reduces the heartburn or gastric troubles and it supplies proper oxygen to the foetus. Hastothanasana helps to improve the digestion. Skandhas Ana will prevent the constipation in the second trimester. Chakki Chalasana is excellent toning the nerves and organs of the pelvis and abdomen and good exercise for relieving back pain. Makar asana will helps to prevent the insomnia in the third trimester.

Prenatal yoga is a great way to cultivate strength, flexibility and stamina all of will help the women feel to great throughout the pregnancy as well as prepare the mind and body for labor and motherhood along with breathing exercises and relaxation techniques. The prenatal yoga focuses on poses that help ease the discomforts associated with pregnancy and prepare the body for child birth. Yoga is often recommended by doctors to pregnant patients and it is often possible to be specialist yoga units.

Materials and method

The methodology of research indicates the general pattern of organizing the procedure for gathering valid and reliable data for the purpose of investigation (Polit

and Hungler). Research methodology is the systemic way to solve the research problem (1990). It consists of all general and specific activities from identification of the problem to final interpretation, direction and conclusion. The role of methodology is to carry on the research work in a scientific and valid manner.

This section deals with the description of the methodology and different steps undertaken for gathering and organizing data for investigation. It includes research approach, research design, setting, sample, criteria for sample selection, sampling technique, development and description of the tools, development of structured teaching program, pilot study, data collection procedure, plan for data analysis and protection of human subjects.

The present study aims to assess the effectiveness of video assisted teaching programme on knowledge and skill regarding prenatal yoga among primigravida mothers in selected maternity units, Bangalore.”

Research Approach

A research approach tells the researcher what data to be collected and how to analyze it. It also suggests possible conclusion to be drawn from the data.

Table 1: Outline of study design

Group	Day 1	Day 1	Day 1
	Pre – test (O ₁)	Intervention(X)	Post – test (O ₂)
Primigravida mothers selected maternity clinics Bangalore.	Administration of structured knowledge questionnaire and the checklist.	Administration of video assisted teaching programme on knowledge and skill regarding prenatal yoga among primigravida mothers in selected maternity units, Bangalore	Administration of structured knowledge questionnaire and checklist.

O₁:Administration of Structured knowledge questionnaire to assess knowledge and skill regarding prenatal yoga among primigravida mothers in selected maternity units, Bangalore.

In view of the nature of the problem selected for the study and objectives to be accomplished, an evaluative research approach was considered as appropriate for the present study.

An evaluative approach will be used to evaluate the effectiveness of video assisted teaching programme among primigravida mothers admitted in selected maternity clinics, Bangalore.

Research Design

Research design provides the back bone structure of the study.

It determines how the study will be organized, when the data will be collected and when the interventions if any are to be implemented.

Quasi experimental design: (O₁ X O₂) was adopted for this study.

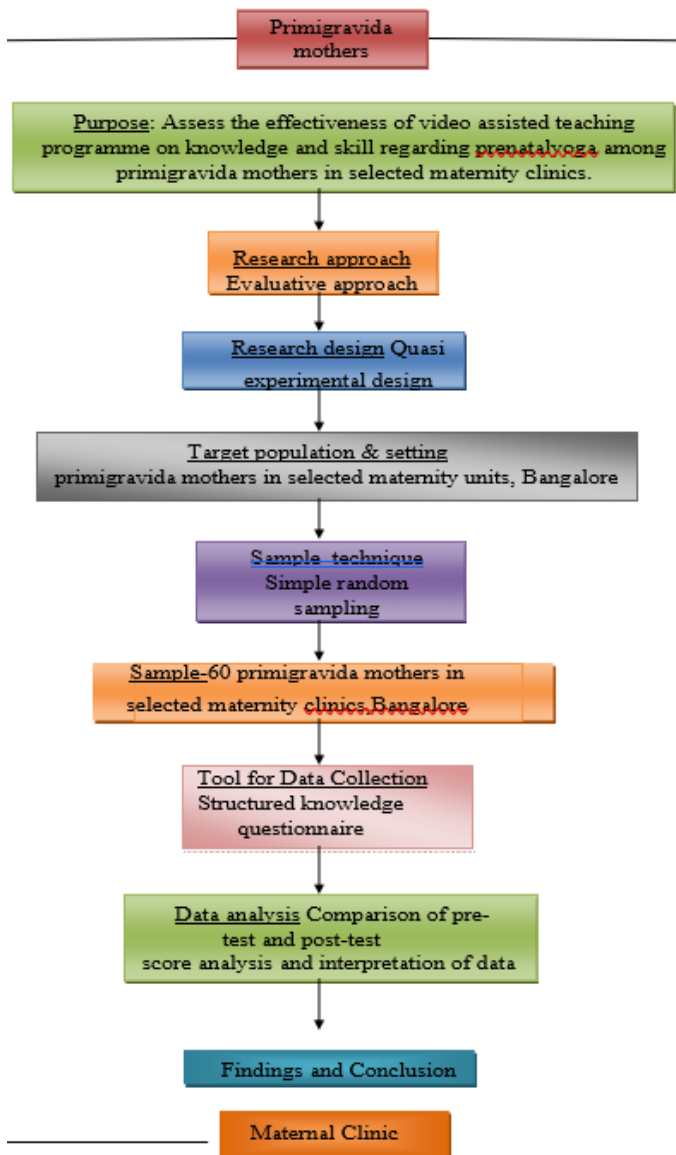
O₁ – Pre-test —X – Video assisted teaching programme
O₂ - post test

The pre-experimental design consists of pre-test and post-test observations made on different days with only one of selected group and without a control group.

X: Administration of structured teaching programme on prenatal yoga among primigravida mothers admitted in selected maternity clinics in Bangalore.

O₂:Administration of Structured knowledge questionnaire after video assisted teaching programme on 1st day to

assess knowledge and skill. regarding prenatal yoga among primigravida mothers in selected maternity units, Bangalore.”



Variables under study

Variable is “An attribute of a person or object that varies, that is taken on different values”(Polit & Hungler).

The following variables were used in this study

Research variables

- Independent Variable: video assisted teaching programme.
- Dependent Variable: level of knowledge and skill on

prenatal yoga

Demographic variables

Age, educational status, occupation, religion, residential area, dietary pattern, number of visits, type of family, monthly income, and any previous information.

Setting of the study

The setting is the location, where the study is conducted. The investigator selected 2 settings for the present study was maternity clinics which is situated in Bangalore. These settings were selected for this study because of the availability of the participants and feasibility of conducting the study.

Population

The term population refers to the aggregation or totality of all the object, subject or members that confirm to a set of specification. In this present study population consists of primigravida mothers with in 12th weeks of pregnancy.

Sample

Sample consists of the population selected to participate in a research study. The number of units or subjects gathered for inclusion in the study is called sample size. In this present study sample consists of primigravida mothers in selected maternity clinics Bangalore, who meet the inclusion criteria.

Sampling Technique

Sampling technique refers to the process of selecting the portion of population to represent the entire population. In this study, simple random sampling technique was adopted and selected 60 patients.

Criteria for Sample Selection

Sampling criteria is that which specifies the characteristics that the sample of the population must possess. The following criteria are used in the present study to select samples.

Inclusion Criteria

Primigravida mothers

1. those available at the time of data collection.
2. who are willing to participate in the study.
3. who can understand the kannada and English
4. 12th week of pregnancy.

Exclusion Criteria

Primi gravida mothers

1. primigravida mothers who have physically and mentally disabled.
2. who have undergone training and practicing prenatal yoga.

Data Collection Instruments

The instruments are a vehicle that could best obtain data pertinent to the study and at the same time adds to the body of knowledge and skill in the discipline.

In this study the data collection instruments are Self-administered questionnaires and check list.

Method of collection of data

Structured knowledge questionnaire and check list.

Development of the tool

Data collection is the gathering of information needed to address a research problem. Tools are the procedures or instruments used by the researcher to collect the data. In this present study self-administered knowledge questionnaires were used for collecting the data after an extensive review of literature and discussion with experts; questionnaire was developed to assess the knowledge and skill regarding prenatal yoga among primigravida mothers in selected maternity clinics, Bangalore. Data was collected by structured knowledge questionnaire and checklist. The tool used in the present study consisted of 3 parts.

Description of the tool

- Part-I: Demographic data.
- Part-II: Structured knowledge questionnaire.
- Part-III: Check list

Part I: Demographic data

It contains

Age, educational status, occupation ,religion ,residential area ,dietary pattern, number of visits, type of family, monthly income, and any previous information of prenatal yoga.

Part II: Structured knowledge questionnaire

The structured questionnaire regarding prenatal yoga consisted of 30 multiple choice questions under the aspects such as general information, types of prenatal yoga during first, second and third trimester benefits of prenatal yoga during pregnancy, delivery and post pregnancy. Each question has 4 responses. Score 1 was given for correct response and score 0 was given for wrong answer.

Part III: Check list

The check list is used to assess the performance skill among primigravida mothers.

The resulting scores were ranged as follows

1. Adequate knowledge- above 75%
2. Moderately adequate knowledge- 51 -75%
3. Inadequate knowledge- below 50%

Preparation of the Blue Print

A blue print was prepared to the construction of structured questionnaire based on which the items were developed. It depicted the distribution of 30 items according to content area. Structured knowledge questionnaire include three domains:

Knowledge:18 (53.14%)

Comprehension: 6 (23.33%)

Application: 6 (23.33%)

Content validity of the tool

Structured knowledge questionnaire was developed by the investigator based on the review of literature. Seven experts evaluated the tool for content validity. The

experts were five nurse educators specialized in maternity nursing, one Physician and one statistician to establish content validity. Correction and modification were incorporated and there was 100% agreement among experts regarding the tool.

Pilot Study

Pilot study was conducted in Yasvanthpura Hospital Bangalore from 25-04- 2013 to 1-05-2013. The investigator obtained prior permission from the authority. The topic was explained and confidentiality was assured and the investigator collected data from 6 participants with the purpose of finding feasibility of the study before starting the main study. Video assisted teaching programme was given on the same day after administering pre-test and was followed by day post- test with the same tool. The tool and video assisted teaching programme were found to be reliable, feasible and practicable. Data analysis was done using descriptive and inferential statistics.

Testing of the Tools Reliability of the tool

The reliability of the tool was established by split half method. The tool was administered to 6 subjects and the test was first divided into two equivalent halves, correction of half test was found using Karl Pearson correlation co-efficient formula and the significance of the correlation was tested by using probable error. The reliability co-efficient of the whole test was then estimated by Spearman's Brown Prophecy formula. The reliability was 0.90 So the tool was found to be reliable.

Video assisted Teaching Programme.

Teaching plan is guide for the teacher because it helps to cover the topic comprehensively with proper sequence of points.

The content includes general information, types of prenatal yoga, prenatal yoga for the first, second and third trimester, benefits of prenatal yoga, do's and don't's

of prenatal yoga, aching section last for 45 minutes. The method of teaching adopted was lecture cum discussion method. The visual aids were video and PowerPoint presentation.

Data collection process

The investigator has planned to select Yasvanthpura Hospital to conduct the study. Prior to data collection investigator obtained permission from the concerned authorities. Participants were selected by using simple random sampling technique. An informed consent was obtained from each patients participating in this study. Pre-test was conducted. The video assisted teaching programme was conducted after pre test on the same day. Post test was conducted on the same day after pretest using the same questionnaire and check list to evaluate the effectiveness of video assisted teaching programme.

Method of data analysis and interpretation:

The data obtained will be analysed by using descriptive inferential statistics.

- The investigator will use appropriate statistical techniques for data analysis and present data in the form of tables, graphs and diagrams.
- Demographic variables will be analyzed by frequency and percentage distribution.
- Level of knowledge will be analyzed by Mean, median and standard deviation
- Parametric test: Paired 't' test will be used to determine significant difference between pre- test and post-test knowledge scores.
- Correlation coefficient r will be used to determine the relationship between knowledge and skill
- Non parametric test: Chi square will be used to find out association between demographic variables and level of knowledge regarding prenatal yoga among primigravida mothers.

Protection of human rights

The proposed study was conducted after the approval of Dissertation committee of the college. Permission was obtained from Yasvanthpura Hospital Bangalore. The oral consent of the participant was obtained before the data collection. Assurance was given to the participants regarding the confidentiality.

Summary

This chapter had dealt with research approach, research design, variables, settings, population, sample and sampling technique, criteria for sample selection, development and description of the tool, testing of the tool, pilot study, data collection process, plan for data analysis and protection of human rights.

Results

The data themselves do not provide us with answers to our research questions. Ordinarily the amount of data collected in a study is extensive to be reliably described by mere perusal. In order to meaningfully answer the research questions, the data must be presented and analyzed in same orderly, so that relationship can be described. Analysis is described as categorizing, ordering, manipulating and summarizing the data to obtain answer to research questions.

The purpose of analysis is to reduce the data to an intelligible and interpretable form so that relation of research can be studied. This section presents the analysis and interpretation of data collection from 60 samples, of primigravida mothers to assess the effectiveness of structured teaching program regarding prenatal yoga. The data collected from the primigravida mothers before and after the structured teaching program was organized, tabulated, analyzed and interpreted by using descriptive and inferential statistics. The data collection was done based on the objectives of the study.

The main objectives of the study were

1. To assess the level of knowledge and skill regarding prenatal yoga among primigravida mothers before and after video assisted teaching programme.
2. To assess the effectiveness of video assisted teaching programme on knowledge and skill regarding prenatal yoga among primigravida mothers.
3. To assess the relationship between knowledge and skill of primigravida mothers regarding prenatal yoga
4. To determine the association between the level of knowledge and skill regarding prenatal yoga among primigravida mothers and selected demographic variables.

Organization of Findings

The analysis of the data are organized and presented under the following headings.

Section- 1

Demographic Characteristics of Respondents.

Section-2a

Overall and Aspect wise Pre-test level of

Section – 2b

Overall and Aspect wise Post-test level of Knowledge and Skill of Respondents on Prenatal Yoga

Section- 3a

Association between Demographic variables with Pre and Post-test level of Knowledge of Respondents on Prenatal Yoga

Section- 3b

Association between Demographic variables with Pre and Post-test level of Skill Respondents on Prenatal Yoga.

Section 1: Demographic Characteristics of Respondents

Table 2: Classification of Respondents by Personal Characteristics . n=60

Characteristics	Category	Respondents
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		Number	Percent
Age Group (years)	Less than 20	12	20.0
	21-30	43	71.7
	31-40	5	8.3
Educational status	Primary	14	23.3
	Secondary	30	50.0
	Graduate	10	16.7
Occupation	Others	6	10.0
	Private	27	45.0
	Government	13	21.7
	Self employed	13	21.7
	Others	7	11.6

antenatal visits of primigravida mother	<Two	14	23.3
	Two	40	66.7
	>Two	6	10.0
Knowledge regarding prenatal yoga	Newspaper	17	28.3
	Education by health personal	12	20.0
	Television	23	38.3
	Health information pamphlets/booklets	8	13.4
Total		60	100.0

Table: 2 shows that the majority of respondents 43(71.7%) belongs to the age group of 21-30 years where as 12(20.0%) belongs to less than 20 years and 5(8.3%) belong to 31- 40 years.

In relation to educational qualification, the majority of the respondents 30(50%) were educated up to secondary school, where as 14(23.3) were educated up to primary school ,and 10(16.7%) were graduate and 6(10%)

In relation to occupational status, the majority of respondents 27(45%) were working as private employee, whereas 13(21.7%) were working in government, and 13(21.7%) were self-employed, and 7(11.6%) were others.

In relation to the regularity in antenatal visit ,majority of the respondents 40(66.7%) were gone two visits, whereas 14(23.3%) less than two visits and 6(10%) more than two visits.

In relation to the source of information regarding prenatal yoga 23(38.3%) got from television, and 25(41.7%) got from health personal and 17(28.3%) newspaper whereas 8(13.4%) got information from pamphlets/booklets.

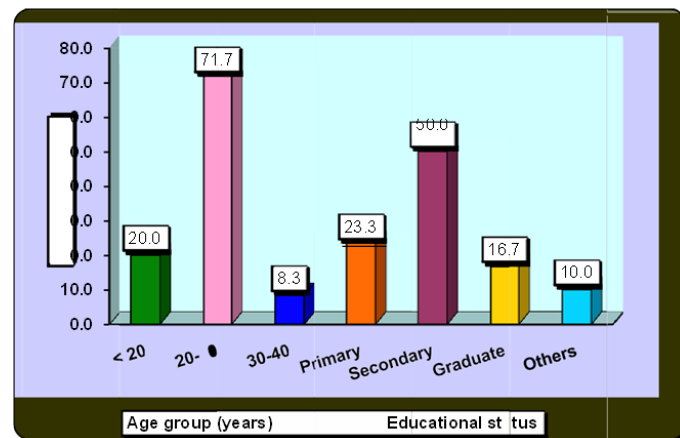


Fig 1: Classification of Respondents by Age group (years) and Educational status

The bar diagram shows majority of respondents 43 (71.7%) belongs to the age group of 21-30 years where as 12(20.0%) belongs to less than 20 years and 5 (8.3%) belong to 31- 40 years. In relation to educational qualification, the majority of the respondents 30(50%) were educated up to secondary school, where as 14(23.3) were educated up to primary school ,and 10(16.7%) were graduate and 6(10%)

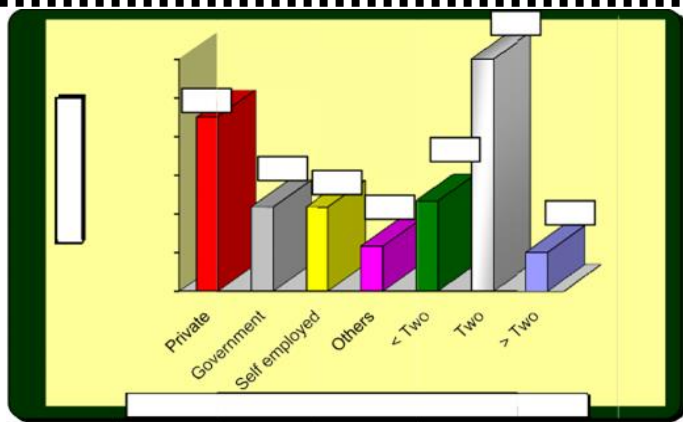


Figure 2: Classification of Respondents by Occupation and Antenatal visits of Primigravida

In this fig shows regularity in antenatal visit ,majority of the respondents 40(66.7%) were gone two visits, whereas 14(23.3%) less than two visits and 6(10%) more than two visits, and the source of information regarding prenatal yoga 23(38.3%) got from television, and 25(41.7%) got from health personal and 17(28.3%) newspaper whereas 8(13.4%) got information from pamphlets/booklets

Table 3: Classifications of Respondents by Related Characteristics n=60

Characteristics	Category	Respondents	
		Number	Percent
Religion	Hindu	37	61.7
	Muslim	10	16.7
	Christian	7	11.6
	Others	6	10.0
Residential area	Urban	53	88.3
	Rural	7	11.6
Dietary Pattern	Vegetarian	36	60.0
	Non-Vegetarian	12	20.0
	Mixed diet	12	20.0
Type of Family	Nuclear family	39	65.0
	Joint family	21	35.0
Monthly income	Rs.3000-6000	12	20.0
	Rs.6001-10000	25	41.7

	Above Rs.10001	23	38.3
Total		60	100.0

Table 3: shows that Majority of respondents 37(61.7%) were Hindus, whereas 10(16.7%) were Muslims, and 7(11.6%) were Christian, 6(10.0) were others.

In relation to place of residence, the majority of respondents 53(88.3%) were from urban, whereas 7(11.6%) were from rural area.

In relation to dietary pattern, majority of respondents 36(60%) vegetarian, whereas12 (20%) were non-vegetarian and mixed diet.

In relation to the type of family, majority 39(65%) belongs to nuclear family whereas 21(35%) belongs to joint family.

In relation to the family income, majority of respondents 25(41.7%) were earning between Rs.3, 001-6, 000, whereas 18(30%) were earning less than 3000, and 17(28.3%) of respondents earning above Rs 6001. n=60

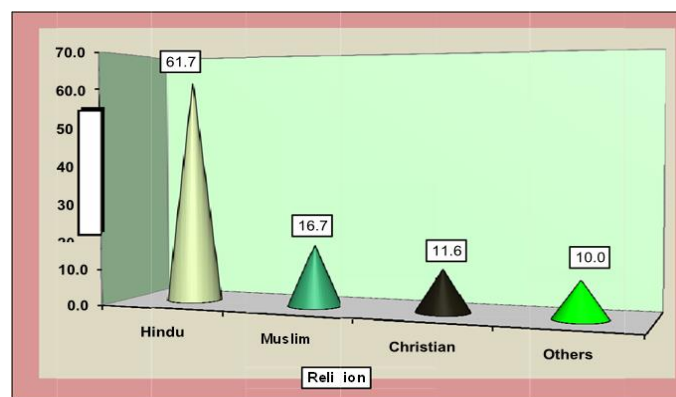


Fig 3: Classification of Respondents by Religion.

The above graph depicts distribution of the respondents according TO their religion, 37(61.7%) were Hindus, whereas 10(16.7%) were Muslims, and Christian and6(10%). 7(11.6%) WERE n=6

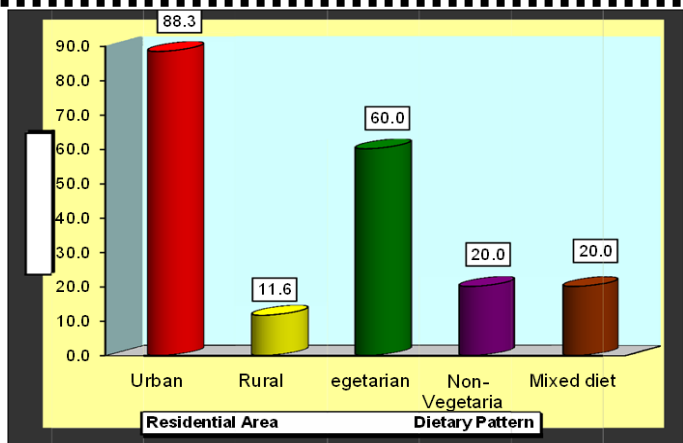


Fig 4: Classification of Respondents by Residential area and Dietary Pattern

The above graph depicts distribution of respondents by residential and the majority of respondents 53 (88.3%) were from urban, whereas 7 (11.6%) were from rural area and the distribution dietary pattern, majority of respondents 36 (60%) vegetarian, whereas 12 (20%) were non-vegetarian and mixed diet.

Section 2a: Overall and Aspect wise Pre-test Knowledge and Skill Scores of Respondents on Prenatal Yoga

Table 4: Aspect wise Pre-test Mean level of Knowledge of Respondents on Prenatal Yoga n=60

No.	Knowledge Aspects	Statements	Max.Score	Respondents Knowledge		
				Mean	SD	Mean (%)
I	Information about Prenatal Yoga	4	4	2.00	0.9	50.0
II	Yoga during first Trimester	4	4	1.20	0.8	30.0
III	Prenatal Yoga during Second Trimester	3	3	0.92	0.6	30.6
IV	Prenatal Yoga during Third Trimester	3	3	0.77	0.6	25.6
V	Prenatal Yoga during Pregnancy	4	4	1.33	0.7	33.3
VI	Prenatal Yoga during Child delivery	4	4	0.92	0.6	22.9
VII	Prenatal Yoga during Post Pregnancy	4	4	1.42	0.8	35.4
VIII	Yoga work outs during first trimester	2	2	0.62	0.5	30.8
IX	Do's and don't's prenatal Yoga	2	2	0.88	0.6	44.2
	Combined	30	30	10.05	3.2	33.5

Table 4 showed that aspect wise pre-test mean knowledge of primigravida mothers indicates that the mean knowledge of 50.0% found in the aspect of information about prenatal yoga and SD was 0.9, 30% found in the aspect of prenatal yoga during first trimester and SD was 0.8, 30.6% found in the aspect of prenatal yoga during second trimester, and SD was 0.6, 25.6% found in the aspect of prenatal yoga during third trimester and SD was 0.6, 33.3% found in the aspect of prenatal yoga during pregnancy and SD was 0.7. 22.9% found in the aspect of prenatal yoga during child delivery and SD was 0.6, 35.4% found in the aspect prenatal yoga during post pregnancy and SD was 0.8, 30.8% found in the aspect of yoga workouts during pregnancy.

44.2% found in the aspect of Do's and Don'ts of prenatal yoga and SD was 0.6 however the overall pre-test mean knowledge score was 33.5% and SD was 3.2.

Table 5: Classification of Respondents on Pre-test level of Knowledge on Prenatal Yoga n=60

Knowledge Level	Category	Respondents	
		Number	Percent
Inadequate	≤ 50 % Score	48	80.0
Moderate	51-75 % Score	12	20.0
Adequate	> 75 % Score	0	0.0
Total		60	100.0

Table 5 depicts that 48(80%) of the primigravida mothers had inadequate knowledge, 12(20%) had moderate knowledge and none had adequate knowledge.

Table 6: Aspect wise Pre-test Mean level of Skill of Respondents on Prenatal Yoga n=60

No.	Skill Aspects	Statements	Max.Score	Respondents Skill		
				Mean	SD	Mean (%)
I	Relaxation of muscle and Joints	7	7	3.80	2.1	54.3
II	Dhruvasana	10	10	4.32	2.2	54.0
III	Performs Padmasana or Shavasana	1	1	0.45	0.5	45.0
IV	Anada Madirasana	6	6	2.53	1.7	42.7
V	Padadirasana	7	7	2.82	1.7	40.2
VI	Ashwathasana	9	9	3.73	2.5	41.5
VII	Hastothanasana	5	5	2.25	1.5	45.0
VIII	Skandasana	7	7	2.50	1.8	35.7
IX	Chakkichalanasana	9	9	3.47	2.4	38.0
X	Makarasana	5	5	1.75	1.7	35.0
	Combined	66	66	27.62	5.5	41.8

Table 6 showed that aspect wise pre-test mean skill of primigravida mothers indicates that the mean skill of 54.3% found in the aspect of relaxation of muscles and Joints and SD was 2.1, 54% found in the aspect of Dhruvasana and SD was 2.2, 45% found in the aspect of Performs Padmasana or Shavasana and SD was 0.5, 42.7% found in the aspect of Anada Madirasana and SD was 1.7, 40.2% found in the aspect of Padadirasana and SD was 1.7. 41.5% found in the aspect of Ashwathasana and SD was 2.5, 45% found in the aspect of Hastothanasana and SD was 1.5, 35.7% found in the aspect of Skandasana and SD was 1.8. 38% found in the aspect of chakkichalanasana and SD was 2.4 and 33.1% found in the aspect of Makarasana and SD was 1.7

However the overall pre-test mean knowledge score was 41.8% and SD was 5.5.

Table 7: Classification of Respondents on Pre-test level of Skill on Prenatal Yoga n= 60

Skill Level	Category	Respondents	
		Number	Percent
Poor	≤ 50 % Score	44	73.3
Fair	51-75 % Score	16	26.7
Good	> 75 % Score	0	0.0
Total		60	100.0

Table 7: depicts that 44(73.3%) of the primigravida mothers had poor skill, 16(26.7%) had moderate skill and none had good skill.

Section 2b: Overall and Aspect wise Post-test Knowledge and Skill Scores of Respondents on Prenatal Yoga.

Table 8: Aspect wise Post-test Mean level of Knowledge on Prenatal Yoga n=60

No.	Knowledge Aspects	Statements	Max.Score	Respondents Knowledge		
				Mean	SD	Mean (%)
I	Information about Prenatal Yoga	4	4	3.62	0.5	90.4
II	Yoga during first Trimester	4	4	3.27	0.5	81.7
III	Prenatal Yoga during Second Trimester	3	3	2.32	0.7	77.2
IV	Prenatal Yoga during Third Trimester	3	3	2.48	0.6	82.8

V	Prenatal Yoga during Pregnancy	4	4	3.10	0.7	77.5
VI	Prenatal Yoga during Child delivery	4	4	3.40	0.6	85.0
VII	Prenatal Yoga during Post Pregnancy	4	4	2.72	1.0	67.9
VIII	Yoga work outs during first trimester	2	2	1.58	0.5	79.2
IX	Do's and don't's prenatal Yoga	2	2	1.57	0.5	78.3
	Combined	30	30	24.05	2.1	80.2

Table 8 showed that aspect wise post-test mean knowledge of primigravida mothers indicates that the mean knowledge of 90.4% found in the aspect of information about prenatal yoga and SD was 0.5, 81.7% found in the aspect of prenatal yoga during first trimester and SD was 0.5%, 77.2% found in the aspect of prenatal yoga during second trimester, and SD was 0.7, 82.8% found in the aspect of prenatal yoga during third trimester and SD was 0.6, 77.5% found in the aspect of prenatal yoga during pregnancy and SD was 0.7. 85% found in the aspect of prenatal yoga during child delivery and SD was 0.6, 67.9% found in the aspect prenatal yoga during post pregnancy and SD was 1.0, 79.2% found in the aspect of yoga workouts during pregnancy and SD was 0.5, 78.3% found in the aspect of Do's and Don'ts of

prenatal yoga and SD was 0.6. However the overall post-test mean knowledge score was 80.2% and SD was 2.1.

Table 9: Classification of Respondents on Post-test level of Knowledge Prenatal Yoga n =60

Knowledge Level	Category	Respondents	
		Number	Percent
Inadequate	≤ 50 % Score	0	0.0
Moderate	51-75 % Score	16	26.7
Adequate	> 75 % Score	44	73.3
Total		60	100.0

Table 9 depicts that 44(73.3%) of the primigravida mothers had adequate knowledge, 16(26.7%) had moderate knowledge and none had inadequate knowledge

Table 10: Aspect wise Post-test Mean level of Skill on Prenatal Yoga n=60

No.	Aspects	Statements	Max.Score	Respondents Skill			
				Mean	SD	Mean (%)	SD (%)
I	Relaxation of muscle and Joints	7	7	5.15	2.1	73.6	30.2
II	Dhruvasana	10	10	7.53	2.0	94.2	25.6
III	Performs Padmasana or Shavasana	1	1	0.85	0.4	85.0	36.0
IV	Anada Madirasana	6	6	4.90	1.4	81.7	22.9
V	Padadirasana	7	7	6.00	1.2	85.7	17.0
VI	Ashwatthasana	9	9	7.67	1.6	85.2	18.1
VII	Hastothanasana	5	5	4.40	0.8	88.0	15.3
VIII	Skandasana	7	7	6.07	1.1	86.7	15.8
IX	Chakkichalanasana	9	9	8.10	1.0	90.0	10.6
X	Makarasana	5	5	4.65	0.6	93.0	12.1
	Combined	66	66	55.32	4.4	83.8	6.7

Table 10 showed that aspect wise post-test mean skill of primigravida mothers indicates that the mean skill of 73.6% found in the aspect of relaxation of muscles and Joints and SD was 2.1, 94.2% found in the aspect of Dhruvasana and SD was 2.0, 85.0% found in the aspect of Performs Padmasana or Shavasana and SD was 0.4, 81.7% found in the aspect of Anada Madirasana and SD was 1.4, 85.7% found in the aspect of Padadirasana and SD was 1.2. 85.2% found in the aspect of Ashwatthasana and SD was 1.6, 88% found in the aspect of Hastothanasana and SD was 0.8, 86.7% found in the aspect of Skandasana and SD was 1.1. 90.0% found in the aspect of chakkichalanasana and SD was 1.0 and 93.0% found in the aspect of Makarasana and SD was 0.6

Table 12: Aspect wise Mean Pre-test and Post-test level of Knowledge on Prenatal Yoga. N=60

No.	Knowledge Aspects	Respondent Skill (%)						Paired 't' Test
		Pre test		Post test		Enhancement		
		Mean	SD	Mean	SD	Mean	SD	
I	Information about Prenatal Yoga	50.0	21.6	90.4	12.3	40.4	24.4	12.83*
II	Yoga during first Trimester	30.0	18.9	81.7	12.9	51.7	22.5	17.80*
III	Prenatal Yoga during Second Trimester	30.6	20.6	77.2	23.4	46.7	30.2	11.98*
IV	Prenatal Yoga during Third Trimester	25.6	20.7	82.8	19.9	57.2	30.1	14.72*
V	Prenatal Yoga during Pregnancy	33.3	18.2	77.5	17.0	44.2	23.2	14.76*
VI	Prenatal Yoga during Child delivery	22.9	16.1	85.0	14.7	62.1	19.3	24.92*
VII	Prenatal Yoga during Post Pregnancy	35.4	19.1	67.9	24.8	32.5	28.1	8.96*
VIII	Yoga work outs during first trimester	30.8	24.5	79.2	26.5	48.3	35.6	10.51*
IX	Do's and don't's prenatal Yoga	44.2	32.0	78.3	25.0	34.2	37.4	7.08*
	Combined	33.5	10.6	80.2	7.1	46.7	10.7	33.81*

* Significant at 5% level, $t(0.05, 59df) = 1.96$

Table 12 Showed that aspect wise post-test mean knowledge of primigravida mothers indicates that the mean knowledge of 90.4% found in the aspect of information about prenatal yoga and SD was 0.5, 81.7% found in the aspect of prenatal yoga during first trimester and SD was 0.5, 77.2% found in the aspect of

.However the overall post-test mean skill score was 83.8% and SD was 4.4

Table 11: Classification of Respondents on Post-test level of Skill on Prenatal Yoga

N=60

Skill Level	Category	Respondents	
		Number	Percent
Poor	≤ 50 % Score	0	0.0
Fair	51-75 % Score	13	21.6
Good	> 75 % Score	47	78.4
Total		60	100.0

Table 11 depicts that 47(78.4%) of the primigravida mothers had good skill, 13(21.6%) had moderate skill and none had poor skill.

prenatal yoga during second trimester, and SD was 0.7, 82.8% found in the aspect of prenatal yoga during third trimester and SD was 0.6, 77.5% found in the aspect of prenatal yoga during pregnancy and SD was 0.7. 85% found in the aspect of prenatal yoga during child delivery and SD was 0.6, 67.9% found in the aspect prenatal yoga during post pregnancy and SD was 1.0, 79.2% found in

the aspect of yoga workouts during pregnancy and SD was 0.5, 78.3% found in the aspect of Do's and Don'ts of prenatal yoga and SD was 0.6 However the overall post-test mean knowledge score was 80.2% and SD was 2.1

Table 13: Over all Pre-test and Post-test Mean Knowledge on Prenatal Yoga. N=60

Aspects	Max. Score	Respondent knowledge			Paired 't' Test
		Mean	SD	Mean (%)	
Pre test	30	10.05	3.2	33.5	33.81 *
Post test	30	24.05	2.1	80.2	
Enhancement	30	14.00	3.2	46.7	

* Significant at 5% level, t (0.05,59df) = 1.96

Table 13 Illustrates that the mean post-test knowledge score (24.05) was greater than the mean pre-test knowledge score (10.05) the mean enhancement between pre-test and post- test knowledge score was 14.00. It was evident that a comparison of pre-test and post-test level of knowledge score among primigravida mothers using paired "t" test (33.81) to determine the effectiveness of video assisted teaching programme on prenatal yoga shows a statistical significance at 5% level for 59 degrees of freedom.

Table 14: Over all Pre-test and Post-test level Skill on Prenatal Yoga. N=60

Aspects	Max. Score	Respondents' knowledge			Paired 't' Test
		Mean	SD	Mean (%)	
Pre test	30	27.62	5.5	41.8	35.36 *
Post test	30	55.32	4.4	83.8	
Enhance ment	30	27.70	6.1	42.0	

* Significant at 5% level, t (0.05,59 df) = 1.96

Table 14: Illustrates that the mean post-test skill score (83.8) was greater than the mean pre-test skill score

(55.32) the mean enhancement between pre-test and post-test knowledge score was 30. It was evident that a comparison of pre-test and post-test level of knowledge score among primigravida mothers using paired "t" test (35.36) to determine the effectiveness of video assisted teaching programme on prenatal yoga shows a statistical significance at 5% level for 59 degrees of freedom.

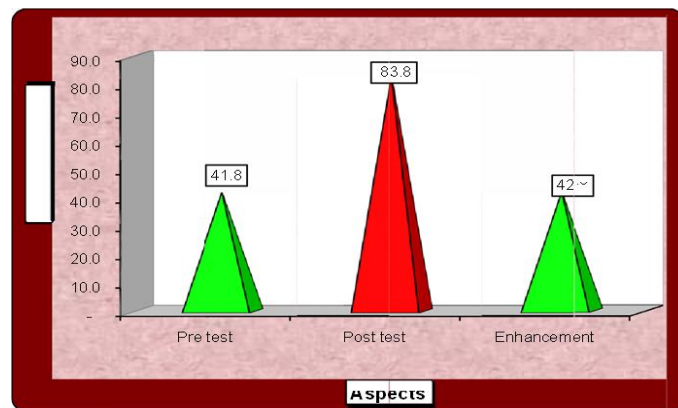


Fig 5:

Fig 7 Over all Pre-test and Post-test level Skill on Prenatal Yoga The above graph depicts mean post-test skill score (83.8) was greater than the mean pre- test skill score (55.32) the mean enhancement between pre-test and post-test knowledge score was 30. It was evident that a comparison of pre-test and post-test level of knowledge score among primigravida mothers using paired "t" test (35.36) to determine the effectiveness of video assisted teaching programme on prenatal yoga shows a statistical significance at 5% level for 59 degrees of freedom.

Table 15: Correlation between knowledge and skill. N=60

Aspects	Max. Score	Responent's Knowledge		Responent's Skill		Correlation 'r'
		Mean	SD	Mean	SD	
Pre-test	30	10.05	3.2	27.62	5.5	0.73*
Post-test	30	24.05	2.1	55.32	4.4	
Enhance ment	30	14.00	3.2	27.70	6.1	

Table 15 The mean post-test knowledge score (24.05) is greater than the mean pre-test knowledge score (10.05) and the mean post-test skill score (55.32) is greater than the mean pre-test skill score (27.62). The weak positive correlation between the knowledge and skill.

Table 16: Aspect wise Mean Pre-test and Post-test Skill on Prenatal Yoga. N=60

No.	Skill Aspects	Respondent Skill (%)						Paired 't' Test
		Pre test		Post test		Enhancement		
		Mean	SD	Mean	SD	Mean	SD	
I	Relaxation of muscles and Joints	54.3	29.4	73.6	30.2	19.3	24.1	6.20*
II	Dhruvasana	54.0	27.5	94.2	25.6	40.2	34.9	8.92*
III	Performs Padmasana or Shavasana	45.0	50.2	85.0	36.0	40.0	49.4	6.27*
IV	Anada Madirasana	42.7	28.4	81.7	22.9	39.4	29.3	10.42*
V	Padadirasana	40.2	24.0	85.7	17.0	45.5	24.5	14.39*
VI	Ashwatthasana	41.5	27.4	85.2	18.1	43.7	24.5	13.82*
VII	Hastothanasana	45.0	30.3	88.0	15.3	43.0	28.2	11.81*
VIII	Skandasana	35.7	25.6	86.7	15.8	51.0	28.3	13.96*
IX	Chakkichalanasana	38.0	26.4	90.0	10.6	51.5	26.0	15.34*
X	Makarasana	35.0	33.1	93.0	12.1	58.0	31.4	14.31**
	Combined	41.8	8.3	83.8	6.7	42.0	9.2	35.36*

* Significant at 5% level, t (0.05,59df) = 1.96

Table 16 shows Aspect wise Mean Pre-test and Post-test skill on prenatal yoga. In the pre-test, skill scores was considerably less compared to post-test performance in all the aspects of skill under study. The findings showed that the enhancement of mean skill percentage score is 83.8% found in the aspect of skill on prenatal yoga, mean skill of 73.6% found in the aspect of relax the muscles and nerves, 94.2% found in the aspect of Dhruvasana, 85% found in the aspect of performs padmasana or Shavasana, 81.7% found in the aspect of Ananda Madirasana

,85.7% found in the aspect ,padadirasana, 85.2% found in the aspect Aswatthasana,88% found in the Hastothasana 86.7% found in the skandasana,90% found in the chakki chalasana 41.8% found in aspect Makarasana. Aspect of, However the overall pre-test mean knowledge score was 83.8% on prenatal yoga. and the overall post-test mean knowledge score was 85.5%.The statistical paired "t" test of 30.70 reflected significance in the enhancement of knowledge score for all the selected aspects at P=<0.05.

Section 3 A : Association between Demographic variables with Pre and Post-test level of Knowledge on Prenatal Yoga.

Table 17: Association between Demographic variables and Pre- test level of Knowledge on Prenatal yoga. n=60

Demographic Variables	Category	Sample	Knowledge Level				χ ² Value
			Inadequate		Moderate		
			N	%	N	%	
Age Group (years)	Less than 20	12	9	75.0	3	25.0	1.46

	20-30	43	34	79.1	9	20.9	NS
	30-40	5	5	100	0	0.0	
General Educationalstatus	Primary	14	11	78.6	3	21.4	2.98 NS
	Secondary	30	22	73.3	8	26.7	
	Graduate	10	9	90.0	1	10.0	
	Others	6	6	100	0	0.0	
Occupation	Private	27	23	85.2	4	18.8	3.54 NS
	Government	13	8	61.5	5	38.5	
	Self employed	13	11	84.6	2	15.4	
	Others	7	6	85.7	1	14.3	
No. of antenatal visits of primigravida mother	<Two	14	8	57.1	6	42.9	6.70 *
	Two	40	34	85.0	6	15.0	
	>Two	6	6	100	0	0.0	
Knowledge regarding prenatal yoga	Newspaper	17	15	88.2	2	11.8	2.54 NS
	Health personal	12	9	75.0	3	25.0	
	Television	23	19	82.6	4	17.4	
	Health information	8	5	62.5	3	37.5	
Religion	Hindu	37	29	78.4	8	21.6	0.25 NS
	Muslim	10	8	80.0	2	20.0	
	Christian	7	6	85.7	1	14.3	
	Others	6	5	83.3	1	16.7	
Residential area	Urban	53	42	79.3	11	20.7	0.16 NS
	Rural	7	6	85.7	1	14.3	
Dietary Pattern	Vegetarian	36	27	75.0	9	25.0	1.67 NS
	Non-Vegetarian	12	10	83.3	2	16.7	
	Mixed diet	12	11	91.7	1	8.3	
Type of Family	Nuclear	39	28	71.8	11	28.2	4.49 *
	Joint	21	20	95.2	1	4.8	
Monthly income	Rs.3000-6000	12	11	91.7	1	8.3	6.86 *
	Rs.6000-10000	25	16	64.0	9	36.0	
	Above Rs.10000	23	21	91.3	2	8.7	
Combined		60	48	80.0	12	20.0	

* Significant at 5% Level, NS : Non-significant

Table 17 The association between demographic variables such as educational status, monthly income and

residential area knowledge level of Pre-test on prenatal yoga among primigravida mothers were significant at 0.05 levels. Hence H₂ stating that there is a significant

association between level of knowledge and selected demographic variables such as educational status, monthly income and residential area and is rejected for

age, occupation, regularity in antenatal visit, source of information, Religion, type of family and dietary pattern in the pre-test.

Table 18: Association between Demographic variables and Post-test level of Knowledge on Prenatal Yoga. N=60

Demographic Variables	Category	Sample	Knowledge Level				χ^2 Value
			Moderate		Adequate		
			N	%	N	%	
Age Group (years)	Less than 20	12	2	16.7	10	83.3	8.14 *
	20-30	43	10	23.3	33	76.7	
	30-40	5	4	80.0	1	20.0	
General Educational status	Primary	14	2	14.3	12	85.7	2.14 NS
	Secondary	30	10	33.3	20	66.7	
	Graduate	10	2	20.0	8	80.0	
	Others	6	2	33.3	4	66.7	
Occupation	Private	27	6	22.2	21	77.8	2.98 NS
	Government	13	5	38.5	8	61.5	
	Self employed	13	2	15.4	11	84.6	
	Others	7	3	42.9	4	57.1	
No. of antenatal visits of primigravida mother	<Two	14	1	7.1	13	92.9	7.65 *
	Two	40	11	27.5	29	72.5	
	>Two	6	4	66.7	2	33.3	
Knowledge regarding prenatal yoga	Newspaper	17	6	35.3	11	64.7	2.25 NS
	Health personal	12	2	16.7	10	83.3	
	Television	23	7	30.4	16	69.6	
	Health information	8	1	12.5	7	87.5	
Religion	Hindu	37	10	27.0	27	93.0	0.38 NS
	Muslim	10	3	30.0	7	70.0	
	Christian	7	2	28.6	5	71.4	
Residential area	Urban	53	11	20.8	42	79.2	8.12 *
	Rural	7	5	71.4	2	28.6	
Dietary Pattern	Vegetarian	36	10	27.8	26	72.2	0.91 NS
	Non-Vegetarian	12	2	16.7	10	83.3	
	Mixed diet	12	4	33.3	8	66.7	
Type of Family	Nuclear	39	14	35.9	25	64.1	4.86 *

	Joint	21	2	9.5	19	90.5	
Monthly income	Rs.3000-6000	12	4	33.3	8	66.7	1.65 NS
	Rs.6000-10000	25	8	32.0	17	68.0	
	Above Rs.10000	23	4	17.4	19	82.6	
Combined		60	16	26.7	44	73.3	

* Significant at 5% Level, NS: Non-significant

Table 18 shows the Association between Demographic variables and Post- test.

Knowledge level on prenatal yoga.

The association between demographic variables such as age, source of information, religion, type of family, residential area, knowledge level of Post-test prenatal yoga among primigravida mothers were significant at

0.05 levels. Hence H₂ stating that there is a significant association between level of knowledge and selected demographic variables is accepted for demographic variables such as, age, source of information, religion, type of family, residential area, and is rejected for educational status, occupation, regularity in antenatal visit, monthly income and dietary pattern in the post-test.

Section 3B : Association between Demographic variables with Pre and Post-testlevel of Skill on Prenatal Yoga

Table 19: Association between Demographic variables and Pretest level Skill onPrenatal Yoga. N=60

Demographic Variables	Category	Sample	Skill Level				χ ² Value
			Poor		Fair		
			N	%	N	%	
Age Group (years)	Less than 20	12	5	41.7	7	58.3	8.70 *
	20-30	43	34	79.1	9	20.9	
	30-40	5	5	100	0	0.0	
General Educational status	Primary	14	12	85.7	2	14.3	1.46 NS
	Secondary	30	21	70.0	9	30.0	
	Graduate	10	7	70.0	3	30.0	
	Others	6	4	66.7	2	33.3	
Occupation	Private	27	15	55.6	12	44.4	8.60 *
	Government	13	11	84.6	2	15.4	
	Self employed	13	11	84.6	2	15.4	
	Others	7	7	100	0	0.0	
No. of antenatal visits of primigravida mother	<Two	14	11	78.6	3	21.4	3.07 NS
	Two	40	27	67.5	13	32.5	
	>Two	6	6	100	0	0.0	
Knowledge regarding prenatal yoga	Newspaper	17	10	58.8	7	41.2	2.95 NS
	Health personal	12	9	75.0	3	25.0	
	Television	23	18	78.3	5	21.7	

	Health information	8	7	87.5	1	12.5	
Religion	Hindu	37	26	70.3	11	29.7	2.84 NS
	Muslim	10	9	90.0	1	10.0	
	Christian	7	4	57.1	3	42.9	
	Others	6	5	83.3	1	16.7	
Residential area	Urban	53	37	69.8	16	30.2	2.88 NS
	Rural	7	7	100	0	0.0	
Dietary Pattern	Vegetarian	36	25	69.4	11	30.6	2.61 NS
	Non-Vegetarian	12	8	66.7	4	33.3	
	Mixed diet	12	11	91.7	1	8.3	
Type of Family	Nuclear	39	25	64.1	14	35.9	4.86 *
	Joint	21	19	90.5	2	9.5	
Monthly income	Rs.3000-6001	12	8	66.7	4	33.3	1.01 NS
	Rs.6001-10001	25	20	80.0	5	20.0	
	Above Rs.10000	23	16	69.6	7	30.5	
Combined		60	44	73.3	16	26.7	

* Significant at 5% Level, NS: Non-significant.

Table 19 The association between demographic variables such as educational status, monthly income and residential area knowledge level of Pre-test on prenatal yoga among primigravida mothers were significant at 0.05 levels. Hence H₂ stating that there is a significant

association between level of skill and selected demographic variables such as educational status, monthly income and residential area and is rejected for age, occupation, regularity in antenatal visit, source of information, Religion, type of family and dietary pattern in the primary gravid mothers.

Table 20: shows the Association between Demographic variables and Pre-test level of skill on prenatal yoga. N=60

Demographic Variables	Category	Sample	Skill Level				χ^2 Value
			Fair		Poor		
			N	%	N	%	
Age Group (years)	Less than 20	12	3	25.0	9	75.0	0.10 NS
	20-30	43	9	20.9	34	79.1	
	30-40	5	1	20.0	4	80.0	
General Educational status	Primary	14	1	7.1	13	92.9	4.64 NS
	Secondary	30	7	23.3	21	76.7	
	Graduate	10	2	20.0	8	80.0	
	Others	6	3	50.0	3	50.0	
Occupation	Private	27	3	11.1	24	88.9	3.24 NS
	Government	13	4	3.8	9	63.2	

	Self employed	13	4	30.8	9	69.2	
	Others	7	2	28.6	5	71.4	
No. of antenatal visits of primigravida mother	<Two	14	3	21.4	11	78.6	0.55 NS
	Two	40	8	20.0	32	80.0	
	>Two	6	2	33.3	4	66.7	
Knowledge regarding prenatal yoga	Newspaper	17	3	17.7	14	82.3	62.5 *
	Health personal	12	1	8.3	11	91.7	
	Television	23	6	26.1	17	73.9	
	Health information	8	3	37.5	5	62.5	
Religion	Hindu	37	8	21.6	29	78.4	0.72 NS
	Muslim	10	3	30.4	7	70.0	
	Christian	7	1	14.3	6	85.7	
	Others	6	1	16.7	5	83.3	
Residential area	Urban	53	8	15.1	45	84.9	11.56 *
	Rural	7	5	71.4	2	28.6	
Dietary Pattern	Vegetarian	36	7	19.4	29	80.6	1.24 NS
	Non-Vegetarian	12	2	16.7	10	83.3	
	Mixed diet	12	4	33.3	8	66.7	
Type of Family	Nuclear family	39	12	30.8	27	69.2	5.44 *
	Joint family	21	1	4.8	20	95.2	
Monthly income	Rs.3000-6000	12	2	16.7	10	83.3	8.82 *
	Rs.6000-10000	25	10	40.0	15	60.0	
	Above Rs.10000	23	1	8.7	21	91.3	
Combined		60	13	21.7	47	78.3	

* Significant at 5% Level, NS: Non-significant

Table 20 The association between demographic variables such as age, source of information, religion, type of family, residential area, knowledge level of Post-test on prenatal yoga, among primigravida mothers were significant at 0.05 levels.

Hence H₂ stating that there is a significant association between level of knowledge and selected demographic variables is accepted for demographical variables such as, age, source of information, religion, type of family, residential area, and is rejected for educational status,

occupation, regularity in antenatal visit, monthly income and dietary pattern in the post-test.

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