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A study to assess the effectiveness of video assisted teaching on knowledge regarding neonatal resuscitation among nursing student, Odisha

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Abstract

Background: Resuscitation refers to the act of reviving or restoring life. In newborns, resuscitation involves a unique set of challenges compared to that of adults or older infants. This is because the newborn must undergo rapid and significant physiological changes, shifting from receiving oxygen through the placenta in a fluid-filled womb to breathing air independently within the first few minutes to hours after birth.

Methodology: Quantitative approach with true experimental research design was adopted. Total 50 schizophrenic patients were selected for the study using purposive sampling technique. Subjects were randomly assigned into group. Video assisted teaching regarding neonatal resuscitation was given to GNM nursing students. The video was organized as meaning of resuscitation, definition of neonatal resuscitation, equipment of resuscitation, component of resuscitation, initial step of resuscitation, Apgar score, bag and mask ventilation, chest compression, endotracheal intubation, Resuscitation medication, Post resuscitation care. The tools used to collect the data were as follows: (1) Demographic questionnaire (2) VIDEO assisted teaching on neonatal resuscitation (3) Multiple choice close ended questionnaires to assess the GNM 2ND YEAR student's knowledge regarding neonatal resuscitation. Baseline assessment was done on the 1st day, then pre-test was done & Pre-test was conducted by assessment of knowledge through questionnaire. Video assisted teaching was administered to the students. Post-test was conducted by questionnaire. The data was recorded for further analysis. Post-test was conducted after the group received intervention. The data analysed using descriptive and inferential statistics with SPSS 21 version.

Result: The average percentage score on the pre-test assessing knowledge of neonatal resuscitation among GNM 2nd year nursing students was 38%, with a standard deviation of 4.18. These results indicated that the majority of students had inadequate knowledge, and none demonstrated adequate understanding of the topic. Only 12% showed a moderate level of knowledge before the intervention. After the implementation of a video-assisted teaching program, the mean post-test score increased to 75.55%, with a standard deviation of 5.69. Post-test results showed that 72% of students had moderately adequate knowledge, while 28% demonstrated adequate knowledge. Importantly, no students remained in the inadequate knowledge category after the intervention. A Chi-square test showed a significant association between students' age and their knowledge scores, with a Chi-square value of 17.132, indicating that age had a meaningful influence on the improvement of knowledge levels.

Conclusion: Thus, the training regarding video assisted teaching was effective in improving level of knowledge regarding neonatal resuscitation among nursing students.

Keywords: Video assisted teaching, knowledge, neonatal resuscitation, nursing student

Introduction

A newborn holds immense value not just for the parents and family, but also for the community, the nation, and the world as a whole. Children form the cornerstone of nation's health and prosperity. Ensuring good health is crucial. A new-born, often referred to as a neonate, is delicate and entirely reliant on others for survival from the very first minute of life. The neonatal period, which comprises the first four weeks after birth, is marked by rapid developmental changes and the potential for significant health challenges ^[1].

Birth of a baby is a special moment of joy demanding rapid physiological adjustments. Most babies go through the transition successfully as a matter of routine but 10% of these may vary in need for degrees of assistance and opportunity lost to provide needed assistance

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at this time would be a crucial impediment for saving these babies ^[2].

The normal neonate continues to adapt to extra uterine life in the first weeks after delivery but remains vulnerable to airway obstruction. The survival of a newborn depends on its ability to adjust to life outside the womb. Extra uterine life presents a challenge to the newborn baby, where the most important challenges are those in the heart and lungs at birth. However continued adaptations are necessary in the first weeks of life as the baby assumes independence from the maternal and placental nurturing which was before birth ^[3].

Resuscitation refers to the act of restoring life, essentially reviving an individual from an apparent state of death. Birth is a critical and potentially risky event for newborns, as it involves significant changes across all body systems. The newborn must successfully adapt to this life transition. Resuscitating a newborn poses unique challenges compared to resuscitating adults or older infants. This is because the newborn must rapidly shift from relying on placental oxygen exchange in a fluid-filled womb to breathing air independently, which demands significant physiological adjustments within the first few minutes to hours after birth ^[4].

The first few moments of a newborn's life can be the most critical. If needed, effective emergency care during this transition can prevent lifelong consequences. Proper resuscitation requires essential equipment and knowledge of necessary protocols before delivery. Prior knowledge of the gestational age of the newborn is helpful in anticipating the need for resuscitation. Low birth weight and premature delivery predispose infants to the need for resuscitative efforts ^[5].

India accounts for nearly 0.9 million newborn deaths per year i.e. 30% of global neonatal deaths. Two major causes of these deaths are birth asphyxia and sepsis. One effective measure to prevent these deaths is to have skilled birth attendants in neonatal resuscitation. Unfortunately, most nursing staff and other health care providers have never received any intensive training in neonatal resuscitation and have traditional beliefs regarding this. A nationwide training programme on neonatal resuscitation in China decreased intrapartum related deaths from 7.5 to 3.4 per 10, 000 ^[6].

The worldwide neonatal death toll is estimated at 5 million, with approximately 3.2 million of these deaths taking place within the first week after birth. Almost a quarter of the burden of neonatal mortality is shared by India with three babies dying every minute, and every fourth baby born being low birth weight. The problems faced by neonates vary significantly in different parts of the Globe and even among developing nations there is much heterogeneity in the causes of neonatal morbidity and mortality ^[7].

The birth of healthy newborn baby is one of the finest gifts of nature. Every year 245 million children are born out of which 8 million deaths are neonatal deaths. In India about 2-3 million babies are born every year (45 babies per min) and of these 15 million die during first 28 days of life. The overall neonatal mortality in our country is 46 per 1000 live births. To achieve reduction in neonatal mortality, it is mandatory for specific programmes and strategies ^[8].

Neonatal resuscitation is a challenging procedure that demands specialized knowledge and skills, often carried out in high- stress and emotionally intense situations. The effective implementation of neonatal resuscitation depends

on adequate knowledge, regular practice of the required skills, and confidence in performing them ^[9].

Kaur Rajwinder *et al.* (2016) carried out an experimental study to evaluate the effectiveness of a Structured Teaching Programme (STP) on knowledge related to neonatal resuscitation among GNM intern students at a selected nursing college in Jalandhar, Punjab. A total of 60 students were selected using a convenient sampling method. During the pre-test, the majority of GNM interns, 47 (78.3%), demonstrated good knowledge, 12 (20%) had average knowledge, and only 1 (1.7%) showed poor knowledge. In the post-test, most students-54 (90%)-exhibited good knowledge, while 6 (10%) had average knowledge, and none (0.0%) displayed poor knowledge about neonatal resuscitation. ^[10]

Thomas Saj *et al.*, (2017) conduct a qualitative research approach had been used, with one group pre-test post-test experimental design was used to evaluate the effectiveness of the audio visual learning package on knowledge and skills regarding cardiopulmonary resuscitation among final year pharmacy diploma students. The study resulted that pre-test data depicts that, majority of students, 38(65.52%) had poor level of knowledge about CPR, whereas 20(34.48%) of students had good level of knowledge and none 0 (0%) of students had Excellent knowledge regarding Adult Cardio Pulmonary Resuscitation (CPR) before administration of Video Assisted Teaching ^[11].

Mohammed Samah Abdelalla *et al.*, (2016) conducted a quasi-experimental study to assess the knowledge, skill and behaviours necessary for effective neonatal resuscitation. A total number of 35 nurses and 25 intern nursing student worked at neonatal intensive care unit, benha university sampling technique? The study resulted that at baseline the nurses were higher in skill confident and satisfaction than intern nursing student. Meanwhile post immediate the score improved in two groups thus there were correlation between confident skill and satisfaction of nurses that intern nursing students with their age. There was statically significant difference in the nurse's post immediately ^[12].

Methods & materials

Quantitative approach with pre experimental one group pre-test and post-test research design was adopted to test the effect of video assisted teaching regarding neonatal resuscitation among GNM nursing students. The present study was carried out in the VISWASS SCHOOL & COLLEGE of Nursing, Bhubaneswar, Odisha. Students of GNM 2ND YEAR studying in VISWASS SCHOOL & COLLEGE of Nursing, Students Willing to participate in the study and Students who are present during the period of data collection were included in this study. Students are not willing to participate and not available during the period of data collection were excluded from the study. Total 50 GNM nursing students were selected for the study by using purposive sampling technique. Subjects were randomly assigned to the group (n=50). Before conducting study, ethical permission was taken from the Institutional Ethical Committee (IEC). The tools used to collect the data were as follows: (1) Demographic questionnaire (2) Self structured interview questions on personal hygiene. The following tools were used for the present study. VIDEO assisted teaching on neonatal resuscitation and multiple choice close ended questionnaires to assess the GNM 2ND YEAR student's knowledge regarding neonatal resuscitation. The

video was organized as Meaning of resuscitation, Definition of neonatal resuscitation, Equipment of Resuscitation, Component of Resuscitation, Initial step of Resuscitation, Apgar score, Bag and Mask ventilation, Chest compression, Endotracheal intubation, Resuscitation medication, Post resuscitation care. The scoring pattern of the tool awards one mark for each correct answer and zero marks for each incorrect answer. The total possible score is 30, with a minimum score of 0. Reliability of the structured interview schedule was done through test- retest method among 10 samples. Reliability was computed using Karl Pearson's Correlation Coefficient Method. The reliability was found to be $r=0.97$. On 1st day, sample was selected. Detailed

information about study was given to the students. Pre-test was conducted by assessment of knowledge through questionnaire. Video assisted teaching was administered to the students. Post-test was conducted by questionnaire. The data was recorded for further analysis. The intervention here is the application of media to the group. The post-test was administered following the intervention provided to the group. The data analysed using descriptive and inferential statistics with SPSS 21 version. The study period was from March 2017 to November 2018.

Result

Table 1: Sociodemographic Variables of the Group N=50

Sl. No	Demographic Variables	Categories	Frequency (f)	Percentage (%)
1	Age	a) 18-22 years	40	80
		b) 23-25 years	10	20
2	Sex	a) Male	10	20
		b) Female	40	80
3	Marital Status	a) Married	7	14
		b) Unmarried	43	86
4	Educational Status (+2)	a) Arts	27	54
		b) Science	17	34
		c) Commerce	6	12
5	Type of Family	a) Single Parent Family	8	16
		b) Nuclear Family	28	56
		c) Joint Family	8	16
		d) Extended Family	6	12
6	Place of Residence	a) Urban	23	46
		b) Rural	27	54
7	General Educational Status	a) Illiterate	6	12
		b) Literate	44	88

The above table-1 revealed that frequency (F) and percentage (%) distribution of participants according to according to age, sex, marital status, educational

qualification, types of family, place of residence, educational status.

Table 2: Aspect wise mean, median, SD, range, pre-test knowledge score regarding Neonatal Resuscitation among Nursing Students. N= 50

Sl. No	Aspect of knowledge item	No of item	Max score	Mean	Mean%	Median	Range (H-L)	Standard deviation (SD)
1.	Meaning of neonatal resuscitation	03	03	2.44	81.3	3	3-0	0.76
2.	Resuscitation equipment	01	01	0.76	76	1	1-0	0.43
3.	Component of resuscitation	01	01	.68	68	1	1-0	0.47
4.	Initial steps of resuscitation	05	05	2.14	42.8	5	4-0	1.22
5.	Apgar score	03	03	1.1	36.6	3	2-0	0.70
6.	Bag and Mask ventilation	04	04	1.14	28.5	4	4-0	1.03
7.	Chest compression	07	07	1.52	21.7	6	4-0	1.19
8.	Endotracheal intubation	02	02	0.44	22	2	2-0	0.61
9.	Resuscitation medication	03	03	0.8	26.6	3	3-0	0.92
10.	Post resuscitation care	01	01	0.38	38	1	1-0	0.49

The above table shows that the overall mean percentage in pre-test knowledge score regarding neonatal resuscitation among nursing student is 38% with SD of 4.18.

Table 3: Frequency (F) and Percentage (%) Distribution of Level of Pre-test Knowledge Regarding Neonatal Resuscitation among Gnm 2nd Year Nursing Students. N=50

Level Of Knowledge	Number	Percentage
Inadequate (<50%)	44	88
Moderately Adequate (50-75%)	6	12

The table above indicates that, in the pre- test, the majority of Gnm 2nd year nursing students had inadequate knowledge

about neonatal resuscitation, and none demonstrated an adequate level of knowledge.

Table- 4: Aspect wise mean, mean percentage, median, range and standard deviation of the post-test knowledge scores on neonatal resuscitation among Gnm 2nd year nursing students. N= 50

Sl No	Aspect of knowledge item	No. of Item	Max. Score	Mean	Mean %	Median	Range (H-L)	Standard deviation (SD)
1.	Meaning of neonatal resuscitation	3	3	3	100	3	3-1	0.3
2.	Resuscitation equipment	1	1	0.92	92	1	1-0	0.26
3.	Component of resuscitation	1	1	0.84	84	1	1-0	0.36
4.	Initial steps of resuscitation	5	5	3.56	71.2	4	5-2	0.8
5.	Apgar score	3	3	1.96	65.3	3	3-1	0.7
6.	Bag and Mask ventilation	4	4	2.7	67.5	2	4-2	0.72
7.	Chest compression	7	7	3.98	56.85	4	7-2	1.07
8.	Endotracheal intubation	2	2	1.4	70	1	2-1	0.48
9.	Resuscitation medication	3	3	2	66.6	2	3-1	0.63
10.	Post resuscitation care	1	1	.82	82	1	1-0	0.37

The above table shows that the overall average percentage of knowledge scores in the post-test regarding neonatal resuscitation among GNM 2ND year students is 75.55% with SD of 5.69.

Table 5: Frequency (F) and Percentage (%) Distribution of Level of Post-test Percentage of Knowledge Regarding Neonatal Resuscitation among Gnm2nd Year Students. N=50

Level of Knowledge	Number	Percentage
Moderately Adequate (50-75%)	36	72
Adequate (>75%)	14	28

The table above shows that, in post- test, the majority of respondents had a moderate level of knowledge, and none of them exhibited inadequate knowledge regarding neonatal resuscitation.

Table 6: Enhancement of Knowledge with Pre-test and Post-test Scores. N=50

Sl No	Aspects of knowledge items	Max. score	Pre-test		Post-test		Enhancement in mean score
			Mean	Mean%	Mean	Mean%	
1.	Meaning of neonatal resuscitation	3	2.44	81.3	3	100	18.7
2.	Resuscitation equipment	1	0.76	76	0.92	92	16
3.	Component of resuscitation	1	0.68	68	0.84	84	16
4.	Initial steps of resuscitation	5	2.14	42.8	3.56	71.2	28.4
5.	Apgar score	3	1.1	36.6	1.96	65.3	28.7
6.	Bag and Mask ventilation	4	1.14	28.5	2.7	67.5	39
7.	Chest compression	7	1.52	21.7	3.98	56.85	35.15
8.	Endotracheal intubation	2	0.44	22	1.4	70	48
9.	Resuscitation medication	3	0.8	26.6	2	66.6	40
10.	Post resuscitation care	1	0.38	38	0.82	82	44

The above table reveals that enhancement of knowledge regarding neonatal resuscitation with pre-test and post-test scores.

Table 7: Level of Knowledge Regarding Neonatal Resuscitation among Gnm 2nd Year Students. N=50

Level of Knowledge	(<50%)		(50-75%)		(>75%)	
	f	%	f	%	f	%
Pre-test	44	88	6	12	0	0
Post-test	0	0	36	72	14	28

The table above indicates that, during the pre- test, the majority of respondents (88%) had inadequate knowledge, while only 12% demonstrated moderately adequate knowledge about neonatal resuscitation. However,

following the video- assisted teaching session, the post- test results showed that 72% of respondents had moderately adequate knowledge and 28% had adequate knowledge, with none displaying inadequate knowledge in the post-test.

Table 8: Impact of video assisted instruction on neonatal resuscitation N=50

Sl No	Aspect Of Knowledge Items	Pre-test		Post-test		T Value	Df	P Value Inference
		Mean	SD	Mean	SD			
1.	Meaning of neonatal resuscitation	2.44	0.76	3	0.3	36.8	49	<0.0001s**
2.	Resuscitation equipment	0.76	0.43	0.92	0.26	17.1	49	<0.0001s**

3.	Component of resuscitation	0.68	0.47	0.84	0.36	18.9	49	<0.0001s**
4.	Initial steps of resuscitation	2.14	1.22	3.56	0.8	51.7	49	<0.0001s**
5.	Apgar score	1.1	0.70	1.96	0.7	47.7	49	<0.0001s**
6.	Bag and Mask ventilation	1.14	1.03	2.7	0.72	69.1	49	<0.0001s**
7.	Chest compression	1.52	1.19	3.98	1.07	86.1	49	<0.0001s**
8.	Endotracheal intubation	0.44	0.61	1.4	0.48	68.7	49	<0.0001s**
9.	Resuscitation medication	0.8	0.92	2	0.63	50.9	49	<0.0001s**
10.	Post resuscitation care	0.38	0.49	0.82	0.37	35.9	49	<0.0001s**

$p \leq 0.05$ statistically significant

The above table it indicates the effectiveness of video assisted teaching regarding neonatal resuscitation. Therefore, it shows that video assisted teaching is effective in increasing the knowledge regarding neonatal resuscitation among Gnm 2nd year nursing student.

The chi- square test was applied to determine the association between post-test knowledge and selected sociodemographic variables. A significant association was observed with age in years (Chi- square = 17.132).

Discussion: Aspect wise mean, median, SD, range, pre-test knowledge score regarding Neonatal Resuscitation among Nursing Students.

The highest mean percentage is 81.3% with SD of .76 in the aspects of meaning of neonatal resuscitation, 76% with SD of .43 in aspect of equipment, 68% with SD of .47 in aspect of component, 36.6% with SD OF .70 In aspect of apgar score, 42.8% with SD of 1.22 in aspect of initial step of neonatal resuscitation, 38% with SD of .38 in aspect of post resuscitation care, 28% with SD of 1.17 in aspect of chest compression, 28.5% with SD of 1.03 in aspect of bag & mask ventilation, 26.6% with SD of .92 in aspect of resuscitation medication, 22% with SD OF .61 in aspect of endotracheal intubation. The overall mean percentage in pre-test knowledge score regarding neonatal resuscitation among nursing student is 38% with SD of 4.18.

The pre-test knowledge scores indicate that the majority (88%) of Gnm 2nd year nursing students had inadequate knowledge, while only 12% had a moderate level of knowledge, and none demonstrated adequate knowledge regarding neonatal resuscitation.

The distribution aspect wise mean% of post-test knowledge scores regarding neonatal resuscitation among Gnm 2nd year students

The study shows that in the post-test, the highest the mean percentage is 100% with SD Of 0.3 in aspect of meaning of neonatal resuscitation, 92% with SD Of 0.26 in aspects of equipment of neonatal resuscitation, 84% with SD of 0.36 in aspect of component of neonatal resuscitation, 82% with SD of 0.37 in aspect of post resuscitation care, 71.2% with SD 0.8 in aspect of initial step of neonatal resuscitation, 70% with SD 0.48 in aspect of endotracheal intubation, 67.5% with SD 0.72% in aspect of bag & mask ventilation, 66.6% with SD 0.63 in aspect of resuscitation medication, 65.3% with SD 0.7 in aspect of apgar score, 56.85% with SD 1.07 in aspect of chest compression. The overall mean percentage in the post-test knowledge scores regarding neonatal resuscitation among GNM 2ND year students is 75.55% with SD of 5.69.

The study indicates that, in the post-test, the majority of respondents (72%) had a moderate level of knowledge, (28%) demonstrated adequate knowledge, and none showed inadequate knowledge regarding neonatal resuscitation.

Finding related to effectiveness of video assisted teaching regarding neonatal resuscitation

The study shows that the overall mean post-test knowledge score was 21.18 with a standard deviation of 5.69, which is higher than the overall mean pre-test score of 11.4 with a standard deviation of 7.82 among GNM 2nd year nursing students. The statistical analysis using a paired t-test yielded a value of $t = 114.3$, which was found to be significant ($p = 0.0001$). Therefore, the research hypothesis (H1) is accepted, indicating that video-assisted teaching was effective in improving knowledge about neonatal resuscitation. This indicates that the structured instructional Module (SIM) was effective in improving the knowledge of Gnm 2nd year nursing students on neonatal resuscitation

Results pertaining to the relationship between post-test knowledge scores and selected demographic variables.

There was association between post-test knowledge score and selected demographic variables reveals that, there was no significant association between the post-test knowledge score and selected demographic variable like sex ($\chi^2 = 0.86$), marital status ($\chi^2 = 0.11$), educational background ($\chi^2 = 2.14$), type of family ($\chi^2 = 0.013$), place of residence ($\chi^2 = 1.08$), education status of parent ($\chi^2 = 0.0078$) at 0.05 level of significance where as highly significance exist between the post-test knowledge score and their age in year ($\chi^2 = 17.132$) Hence the association which was found in respect to these selected demographic variables were a true association not by chance.

Limitation of the study

Study sample were limited to the nursing student study in GNM 2nd year. The study was limited to participants who were both willing to participate and present during the data collection period. The sample size was relatively small, consisting of 50 Gnm 2nd year nursing students. A large sample could have allowed for better generalization of the findings.

Nursing Implication

Preventive strategies can be implemented by a broader group of nursing students based on their demographic characteristics, highlighting the need for proper education and training in neonatal resuscitation.

Conclusion

Result proved that video assisted teaching was effective in improving the knowledge of the Gnm 2nd year Nursing Student regarding neonatal resuscitation. A significant difference was observed between the pre-test and post-test knowledge scores, with the substantial mean difference highlighting the effectiveness of video- assisted teaching. The area wise analysis further supported the effectiveness of the video- assisted teaching method.

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Ethics Approval

Approval of research problem & objectives by the research committee. Approval for conducting study from Institutional Ethics Committee of Institute of Medical Sciences. Participants were not to be harmed physically, psychologically emotionally. Information of participants was confidential. Participant's right, of autonomy was maintained.

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