

Knowledge Regarding Behavioural Disorders in Children Among Teachers

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Abstract: Today's children are tomorrow's responsible citizens of the world. Nearly one in five children and adolescents has emotional and behavioral disorders at some point of time in their young lives, regardless of their geographic region or socio-economic status. Recent evidence by WHO indicates that by 2020 childhood neuropsychiatric disorders will rise proportionately by over 50%, and would be the fifth most common cause of morbidity, mortality and disability among children. Epidemiologically estimates suggest that approximately 14-20% of all children from birth to 18 years of age have some type of psychiatric disorders and about 3% to 5% have serious disorders. The objectives of the study were to assess the knowledge of teachers regarding behavioral disorders, to find out the association between selected socio-demographic variables with knowledge regarding behavioral disorders. The research design was descriptive. The sample size was 50 and random sampling technique was chosen. The study was done in community setting i.e. schools of Trivandrum district. The knowledge was assessed by using questionnaire and score was divided into three categories such as good, average and poor. Out of 50, 7 teachers had inadequate knowledge, 38 had moderate level of knowledge and 5 had adequate knowledge. The association between knowledge score and demographic variables were determined by chi-square formula. It was found that there is a significant association for knowledge score with education, income, years of experience and subjects being handled.

Index Terms - knowledge, teachers, behavioral disorders

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I. Introduction

Behavior is simple verbal and non-verbal communication. It is the conduct, actions and words that children employ as a signal, with which they express their thoughts, feelings, need and impulses. It is judged as to whether it meets social, cultural, and developmental and age appropriate standards¹. Behavior can be positive or negative, impulsive or planned, predictable or unpredictable, consistent or inconsistent and it can elicit a wide range of positive or negative responses from others².

Normal children are healthy, happy and well adjusted. This adjustment is developed by providing basic emotional needs along with physical and physiological needs for their mental well being. The emotional needs are considered as emotional food for healthy behavior. The children are dependent on their parents, so parents are responsible for fulfillment of the emotional needs³. Mental disorders in schools account to 3.12% in students. Even by conservative estimates 10% of the child population suffers from mental disturbances with serious associated impairments including learning problems, health problems and drug abuse at any given time. At least 3% of school age children suffer from serious emotional disturbances at any given point of time⁴.

II. Need and significance of the Study

Common behavioral problems of childhood are temper tantrum breath holding spell, thumb sucking, nail biting, enuresis, encopresis, pica, tics, and stuttering or stammering, delayed speech and attention deficit disorder⁵. The causes for all behavioral problems in preschool children are due to parents negligence poor supervision or poor attention, family conflict and maladjustment eg, too strict parents, rejection, sibling rivalry, unconscious anger and defiance in the child, insecurity, conflict or hostility, aggression, neurotic attitudes of the mothers⁶. These behavioral problems in children will be managed by adequate guidance to parents and teachers regarding how to tackle with problems and psychotherapy for the preschool children in extreme condition⁷.

Teachers reported that listening talking and counseling are taken as a first option to deal with child's behavioral problems. Teachers have an immense impact on young children's mental health. They enjoy a very important position in the formation of healthy mind in them as reported by UNESCO. There are almost 43 million teachers around the world at the primary and secondary levels. The size alone of the teacher population is of

public health significance. It is in this context the importance of a teacher becomes vital in safeguarding the mental health of children⁸.

Teachers can effectively deal with many of the problems in the area of mental health within resources available close to them. It is important to identify the disorders at an early stage by teachers provided they are trained to identify and detect those disorders.

III. Review Of Literature

A study was conducted about how will private practice Pediatricians can identify emotional or behavioral problems among children (No.3876) in Department of Child Psychiatry and Pediatrics. A sample size of 1 of 68 pediatricians who rendered an opinion about the presence of emotional behavioural problems was selected. The study resulted in a conclusion that a substantial number of children with behavioral problems in primary care are not being identified or treated.⁹

According to Ramesh P Adhikari 2015, the result suggests that addictive behavior not paying attention to studies, getting angry over small issues, fighting back, disobedience and stealing were the most commonly identified behavior related problems of children with these problems seen as interrelated and interdependent. The strategies reported by parents and teachers to manage child behavioral problems were talking, listening, consoling, advising and physical punishment¹⁰

A study on assessment of behavioural problems in children with intellectual disability showed Epidemiological data with high prevalence of emotional and behavioural problems in children with intellectual disability¹¹.

A study was conducted to assess the effectiveness of structured teaching program on knowledge regarding behavioral disorders in children showed a significant increase in level of knowledge of teachers thus facilitating the necessity of training programs for the enhancement of teacher's knowledge¹².

IV. Objectives of the study

1. To assess the knowledge regarding behavioural problems of children among teachers
2. To find out the association between knowledge on behavioural problems of children among teachers and selected demographic variables

V. Operational definitions

5.1 Knowledge

It refers to the correct responses to the structured knowledge questionnaire on behavioral disorders and the level of knowledge will be classified as inadequate, moderate and adequate knowledge.

5.2 Behavioral Disorders:

It refers to an abnormality of emotions, behaviour or relationship which is sufficiently severe and persistent to handicap the child in his social or personal functioning and to cause distress to the child, their care givers and to the people in the community.

5.3 Teachers:

It refers to people teaching student in the section of schools (Pre-KG to 8th Standard) in Trivandrum District with basic teacher training qualification.

VI. METHODOLOGY:

6.1 Research Approach

Quantitative research approach

6.2 Research Design

Descriptive design

6.3 Research Setting

The research was conducted in the selected schools in Trivandrum District

6.4 Accessible Population

Teachers

6.5 Method of Sampling

Purposive Sampling

6.6 Sample

Teachers who work in selected schools of Trivandrum district.

6.7 Sample size

The sample size was 50

6.8 Description of the tool

The tool was written in English. The tool used in the study consists of two sections.

- **Section A:** Socio-demographic variables
- **Section B:** Questionnaire to assess the knowledge of teachers regarding behavioral disorders

6.9 Ethical considerations:

- Ethical clearance was taken from the Ethical Review Committee.
- Informed consent was obtained from the teachers.

6.10 Variables:

- **Dependent variables** – Knowledge of teachers regarding behavioral disorders in children
- **Independent Variables** – Age, Religion, Education, years of experience, income, family type, residence, and number of children

6.11 Process of data collection

Formal administrative permission was obtained from the Deputy Director of Education, Trivandrum to conduct pilot study and the final study. The study assured anonymity and confidentiality of the scores.

VII. Results

- Majority (54%) of the teachers was in the age group of 36-40 years and majority of them (64%) were Hindus.
- Majority of teachers came from nuclear families (86%).
- Majority of teachers have passed NET (90%).

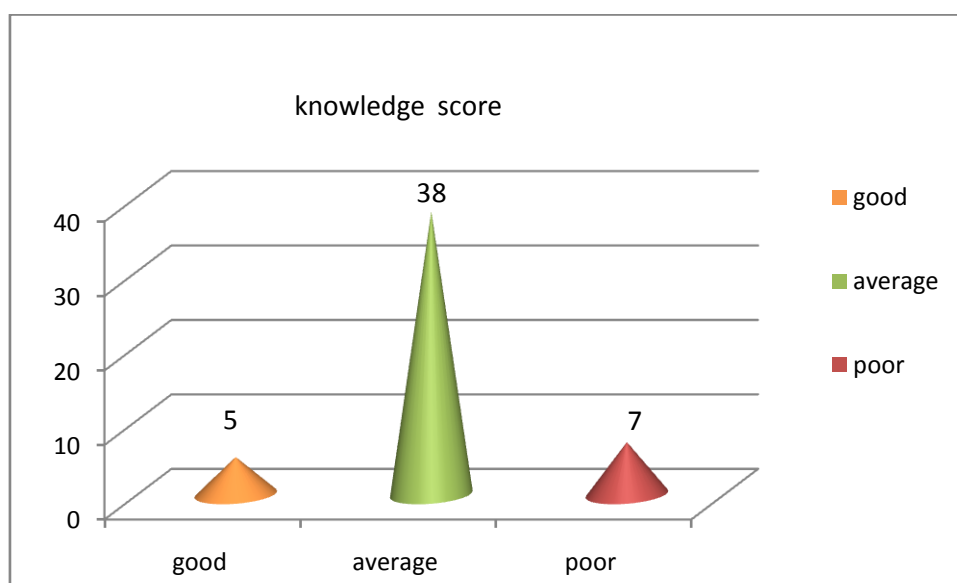


Figure 1: Distribution of samples based on Knowledge score

Figure 1 illustrates that 76% (n=38) of samples had moderate level of knowledge, 14% (n=7) had inadequate knowledge and only 10 % (n=5) of teachers had adequate knowledge regarding behavioral disorders

Table 1: Association between knowledge score and selected socio-demographic variables

Variables	Chi square value	df*	Inference
Education	16.234	1	A**
Income	11.223	6	A**
Experience	53.323	6	A**
Subjects being handled	11.226	4	A**
Religion	3.925	6	NA***

* degree of freedom

** Association at 0.5 level

*** No Association

Table 2 depicts that there is a significant association between knowledge score with the demographic variables of teachers such as income, experience, educational status and subjects being handled.

VIII. Conclusion

The study reveals inadequate knowledge of teachers on behavioral disorders, its manifestations and management. However, Educational status and experience was found to have a positive influence on the knowledge of teachers. So any training programs to improve the skills in identifying the behavioral disorders can be done.

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