



## A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON ATTITUDE REGARDING SELECTED BEHAVIORAL DISORDERS OF PRIMARY SCHOOL CHILDREN AMONG PRIMARY SCHOOL TEACHERS IN SELECTED SCHOOLS AT NAGAU

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### Abstract

**Background:** Behavioral disorders of children lead to abnormality in their Personality, emotions or behavior, which is dangerous and affect to him, family and society. Behavioral disorders are caused by multiple factors like faulty parental attitude, inadequate family environment (broken families, low socio economic status, lack of love and affection), mentally and physically sick or handicapped, influence of social relationship, influence of mass media, and influence of social change. Children with 6-12 years of age spend large amount of time in school settings. School is the place where growing children come to grips with their emotional integration into the larger society. Schools are aiming the full support of families and community to provide comprehensive mental health to the children. School can act as a safety net to protect the children from hazards that affect their learning and promote psychological wellbeing of the children. **Methods:** Quantitative research approach was utilized to assess the adequacy of structured teaching programme. Pre experimental research design [one group pre -test – post -test] was used to evaluate the attitude regarding selected behavioral disorders of primary school children among 300 primary school teachers in selected schools at Nagaur. **Results:** In the pre test, majority of subjects 250 (83.33%) had unfavorable attitude and 50 subjects (16.67%) had moderately favorable attitude and in the post test after imparting structured teaching programme majority of sample 250 (83.33%) had favorable attitude and 50 samples (16.67%) had moderately favorable attitude regarding selected behavioral disorders of primary school children among primary school teachers. The mean improvement attitude score was 26.66. The calculated paired t value was  $t = 26.718$  was found to be statistically significant at  $P < 0.001$  level.

**Key word-** Behaviour, Primary School Children, Teaching Programme, emotional disorders.

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## INTRODUCTION

Normal children are healthy, happy and well adjusted. This adjustment is maintained by full filling physical and physiological needs of child as well as by providing emotional support for their mental wellbeing. The emotional needs are considered as fuel for healthy adaptive behavior. The children are dependent on their parents in all manners, so they are responsible for fulfillment of these needs, either emotional or others. Every child should have sense of security about protection and loving care from parent and family members. Parents especially mothers should be aware about needs and demand of their children.<sup>1</sup>

Behavior problem are abnormality of emotion, behavior or relationship that is sufficiently severe and persistent to handicap the child in his/her social or personal functioning or to cause distress to the child, his/her parents or to the community.

Primary school age is the period between 6-12 years. Early childhood is the crucial period of personality and behavior formation. The school period is an exciting period of transition from limited language

ability, primarily sensory motor engagement with the surrounding environment to mastery of communication, a high degree of motor activity and a significant competence in self-regulation, expanding cognitive, behavior and emotional changes and heightened ability to empathies with others.<sup>2</sup>

In worldwide, the prevalence rate of behavioral disorders is 16% and 12.3% conduct disorder, 9.6% attention deficit hyperactivity disorder, 8.4% emotional disorders, 0.5% scholastic disorders, 1.8% adjustment disorder, 1.3% pervasive developmental disorder.<sup>3</sup> In India, the prevalence rate of behavioral problems is 43.1% and 14.5% conduct disorder, 29.7% attention deficit hyperactivity disorder, 12.5% emotional disorder, 7.1% scholastic disorders, 2% adjustment disorder, 9.5% pervasive developmental disorder.<sup>4</sup>

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Behavioral problems among children may be due to genetic factors, psychological factors or environmental factors of the particular child, general Practitioners, community practitioners including teachers are seeing many children with behavioral problems. Most of these problems are treatable, if they are identified early.

### MATERIAL AND METHODS

In the present study, A quantitative, pre-experimental, one group pre-test post-test research approach was used to assess effectiveness of structured teaching programme on attitude regarding selected behavioral disorder of primary school children among primary school teachers in selected school at Nagaur. These primary schools of Nagaur were selected on the basis of expected availability of primary school teacher, giving permission to conduct the study and convenience in terms of distance. The population under study was primary school teachers in selected primary school of Nagaur,

Rajasthan. Sample of 300 primary school teacher selected by non-probability convenient sampling method. Two sections of tools were used to measure variable under study. Section 1 socio-demographic variables, section 2 attitude scale. The reliability of the structured questionnaire was 0.91. Since the score is certain; the tool was viewed as higher, genuinely reliable for the present assessment.

### RESULT

The analysis and interpretation of data of this study are based on data collected through attitude scale regarding selected behavioral disorders of primary school children. The results were computed using both descriptive and inferential statistics based on the objectives of the study. The data obtained will be analyzed using frequency, percentage, mean, median, mean percentage, standard deviation in terms of descriptive and inferential statistics.

**Table 1: Frequency and percentage distribution of primary school's teachers according to baseline characteristics (N=300)**

S.N.	Socio-demographic variables	Categories	Frequency	Percentage
1.	Age (yrs)	21-30	25	8.33
		31-40	175	58.33
		41-50	75	25.00
		51-60	25	8.33

2.	Gender	Male	120	40.00
		Female	180	60.00
3.	Educational status	BSTC	45	15.00
		B.Ed.	180	60.00
		M.Ed.	45	15.00
		Other	30	10.00
4.	Years of teaching experience	0-5 years	80	26.66
		6-10 years	120	40.00
		11-15 years	60	20.00
		> 16 years	40	13.33
5.	Previous sources of Information	Newspaper	10	3.33
		T.V/ internet/ media	225	75.00
		Workshop/s eminar/conf erence	65	21.66
		Other	00	0.00

Table-1 indicates the frequency and percentage distribution of age, gender, educational status, year of teaching experienced and previous sources of information.

Regarding age, majority of primary school teacher 58.33% (175) belong to the age group of 31-40 years, 25% belong to age group 41-50, 8.33% (25) belong to age group 21-30 and 8.33% (25) belong to age group 51-60. Regarding gender, majority

of primary school teacher 60% (180) were female and 40% (120) were male.

With respect to educational status majority of primary school teacher 60% (180) were B.Ed., 15% (45) were BSTC and same were M.Ed., 10% (30) were other education.

With regard to year of teaching experience majority of primary school teacher 40% (120) had 6-10 years experience, 26.66 (80) had 0-5 years experience, 20% (60) had 11-15 years

experience and 13.33 (40) had more than 16 years experience.

Regarding previous sources of information majority of primary school teacher 75% (225) had information from

T.V/ internet/ media, 21.66 (65) had information from Workshop / seminar / conference, 3.33% (10) had information from Newspaper.

**Table 2 : Frequency and percentage distribution of pre-test and post-test level of Attitude regarding selected behavioural disorders of primary school Children among primary school teachers (N= 300)**

Attitude	Unfavorable (< 50%)		Moderately Favorable (50 - 75%)		Favorable (>75%)	
	No.	%	No.	%	No.	%
<b>Pretest</b>	250	83.33	50	16.67	0	0
<b>Post Test</b>	0	0	50	16.67	250	83.33

Table -2 shows that in the pretest, majority of subjects 250 (83.33%) had unfavorable attitude and 50 subjects (16.67%) had moderately favorable attitude whereas in the post test majority of sample 250(83.33%) had favorable attitude and 50 samples (16.67%) had moderately favorable attitude regarding selected behavioral disorders.

**Table -3: Comparison of pre-test and post-test attitude scores regarding Selected Behavioral disorders of primary school children (N=300)**

Attitude	Mean	S.D.	Mean Improvement score	Paired t Value
<b>Pretest</b>	20.0	7.42	26.66	t = 26.718** p = 0.000, S
<b>Post Test</b>	46.66	7.58		

\*\*p<0.001, S = Significant

The table 3 shows that in the pretest, the mean score of attitude was 20.0 with S.D. 7.42 whereas in the post test the mean score of attitude was 46.66 with S.D. 7.58. The mean improvement score was 26.66. The calculated paired t value was = 26.718 was found to be statistically significant at P < 0.001 level. This clearly shows that the structured teaching programme on attitude regarding selected behavioral disorders of primary school children among primary school teachers had significant improvement in their level of attitude in the posttest.

**Table 4: Chi-square test demonstrating the relationship between pre-test attitude scores and demographic variable N=300**

S. No	Variable	Pre-test Attitude scores		$\chi^2$ (Chi-Square) Chi-Square	f	Level of significance
		< mean	> mean			
1	<b>Age (in years)</b>					
	20-25	20	05	<b>35.1429</b>	3	<b>YES</b>
	26-30	135	40			
	31-35	30	45			
	36-40	15	10			
2	<b>Sexual orientation</b>					
	Male	85	35	<b>1.5625</b>	1	<b>No</b>
	Female	115	65			
3	<b>Instructive status</b>					
	Bachelor of science	25	20	<b>13.125</b>	3	<b>YES</b>
	Bachelor of education	115	65			
	Master of education	32	13			
	Others	28	02			
4	<b>Periods of educating experience</b>					
	0-3 Years	68	12	<b>47.55</b>	3	<b>YES</b>
	4-6 Years	55	65			
	7-10 Years	40	20			
	11 or more Years	37	03			
5	<b>Past wellsprings of Information</b>					
	Print media	06	04	<b>53.6923</b>	2	<b>YES</b>
	Web search	175	50			
	Webinars	19	46			
	Others	0	0			

From table 4 it is evident that the segment factors, for example, Gender, the determined chi square worth is not exactly

the basic incentive at  $p < 0.05$  level of hugeness, So null hypothesis is accepted and research hypothesis is rejected. In Demographic variables such as Age,

educational status, year of teaching experiences and sources of information data on chosen Behavioral clutters, the determined chi square worth is higher than the basic incentive at  $p < 0.05$  level of centrality, So null hypothesis is rejected and research hypothesis is accepted.

### RECOMMENDATIONS

- The similar study can be undertaken with larger samples to validate and generalize the findings of the study.
- The present study can be conducted among similar and different setting.
- Evidence based nursing practice must take more prominent so as to build mindfulness among open with respect to selected behavioral disorders in youngsters.
- A similar study among urban and rural teacher on knowledge, attitude and practice on in regards to selected behavioral disorders in kids can be directed.

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