A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE OF CONDUCT DISORDER OF CHILDREN AMONG UPPER PRIMARY SCHOOL TEACHERS IN SELECTED SCHOOL TIRUPATI.

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ABSTRACT:

Conduct disorder (CD) is a mental health condition which starts in childhood and can cause detrimental effects well into adulthood. The research approach adopted for this study is quantitative approach. The research design adopted for the study was quasi-experimental design with one group pre-test post-test design. The sample consists of the 60 Upper Primary School teachers from selected schools at Tirupati. The pre-test knowledge was assessed using self structured questionnaire. The planned teaching programme was given to the study participants on the same day. The post test knowledge was also assessed using the same questionnaire on day 07. The results shows that 80% had adequate knowledge and 20% had moderate knowledge. The calculated' value (t=25.91). The result clearly showed that the structured teaching programme had significant improvement in the knowledge of teachers on conduct disorders among children.

KEYWORDS: Knowledge, Conduct disorder, School teachers

INTRODUCTION:

Today's society is complex and ever-changing. As children grow they must learn not only to cope with current demands, but also to prepare for the many unexpected events they will face in their tomorrows. Conduct disorder is one of the most frequently diagnosed disorders of childhood and adolescence. Currently, 2 to 6 %, or from 1 to 4 million children and adolescents in the United States have

Conduct Disorder. Research has found prevalence rates of Conduct Disorder from 6 to 16% for boys and 2 to 9% for girls.Conduct problems of children lead to abnormality in their emotions or behavior which is severe and cause distress to the child, family and community. Conduct 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.

Upon school entry, behavioral and academic problems likely to result in frequent discipline from the teacher and peer rejection. This leads to fewer opportunities to practice both academic and school skills and proper parents and child school involvement. Teachers may misunderstand the reason for lack of parental involvement and more critically to the parent, further avoiding the bonds between the home and school. Moreover, teacher may lack the knowledge, skills, and recourses to assist children with behavior problems and their families.Management is by treating underlying psychiatric condition if any, family therapy, parental training and counseling is a useful intervention for many of the behavioral problems. Spending 15-30 minutes daily for a positive child-parent interaction is useful. Generally, mothers are expected to perform this role.

STATEMENT OF THE STUDY

"A study to assess the effectiveness of structured teaching programme on knowledge of conduct disorder of children among upper primary teachers in selected school Tirupati."

OBJECTIVES OF THE STUDY

- To assess the pre-existing knowledge of upper primary school teachers on conduct disorder of children among upper primary school teachers in selected schools Tirupati.

- To evaluate the effectiveness of structured teaching programme on conduct disorder of children among upper primary school teacher's.

- To find out the association between the knowledge of the upper primary school teacher's regarding conduct disorder of children with selected demographic variables.

MATERIALS AND METHODS:

The quantitative research approach with one group pre and post was adopted for this study. The present study was conducted in the selected private schools Tirupati. the population were the upper primary school teachers and the sample of 60 upper primary school teachers using simple random sampling (lottery method) techniques who fulfill the inclusion criteria, from the selected schools at Tirupati, after obtaining formal permission from the institution ethical board. The selected five schools were approached to obtain permission. The total 60 upper primary school teachers were selected. On day 1, after explaining the purpose of the present study and obtaining consent. The demographic data were collected from the teachers which include age, gender, religion, income, years of experience in teaching, source of information.

The self structured questionnaire was provided to the teachers to assess their knowledge regarding the conduct disorders. The questionnaire contains 30 multiple choice questions which covers definition, incidence, types, classification,etiology, clinical manifestations, diagnosis, management, and prevention of conduct disorders. The total 45 minutes were allotted to the participants to answer the questionnaire. Each correct response carries one mark and wrong response carries 0 marks.

Score interpretation: 0-15-Inadequate knowledge; 16-22- Moderate knowledge; 23-30- Adequate knowledge. On the same day, the planned teaching programme was provided to the participants for45 minutes and on the 7th day the post test was conducted using the same questionnaire.

DESCRIPTION OF INTERVENTION

The teaching programme planned for about 45 minutes which covers the sub topic of definition and meaning of conduct disorder, major causes of the disorder and high-risk group. It also includes the primitive and late signs and symptoms exhibited by the children with conduct disorder. The major aspect includes the identification and management of the children and how to preventthe conducts disorders by the teachers.

RESULTS

Distribution of demographic variables:

(n=60)

Demographic Variables		Frequency (f)	Percentage (%)
Age	18- 30 years	20	33.3%
	31- 40 years	25	41.7%
	>40 years	15	25.0%
Sex	Male	26	43.3%
	Female	34	56.7%
Religion	Hindu	44	73.3%
	Muslim	5	8.3%
	Christian	11	18.3%
Type of family	Nuclear family	39	65.0%
	Joint family	14	23.3%
	Extended family	7	11.7%
Type of employment	Private employee	44	73.3%
	Contract basis	16	26.6%
Place of residence	Rural	1	1.6%
	Urban	47	78.3%
	Semi urban	12	20.0%
Years of experience	<5 years	17	28.3%
	5-15 years	29	48.3%
	>15 years	14	23.3%
Monthly income	<Rs.10000	10	16.7%
	Rs.10000-20000	26	43.3%
	>Rs.20000	24	40.0%
Heard about conduct disorders before	Yes	18	30.0%
	No	42	70.0%

Source of information	Nil	42	70.0%
	Family members	7	11.7%
	Friends	3	5.0%
	Mass media	3	5.0%
	Health personnel	5	8.3%

Pre-test and Post-test level of knowledge on conduct disorder.

In pre-test, 47(78.3%) had inadequate knowledge level, 13(21.7%) had moderate knowledge. Post test result shows that majority of teachers 48(80%) had gained adequate knowledge, 12(20%) had moderate knowledge.

Knowledge score of upper primary school teachers	Level of knowledge						Mean	SD	T value	P value
	Inadequate (<50%)		Moderate (51-75%)		Adequate (>75%)					
	N	%	N	%	N	%				
Pre-test	47	78.3%	13	21.7%	0	0.0%	13.03	3.73	25.91	0.001
Post-test	0	0.0%	12	20.0%	48	80.0%	24.28	3.91		

*significant at P≤0.O5** highly significant at P≤0.01 *** very high significant at P≤0.001

Association between the post test levels of knowledge with the selected demographic data of the study participants.

n=60

Demographic Variables		Post-test level of knowledge				Total	Chi-square test
		Moderate		Adequate			
		n	%	n	%		
Age	18-30 years	11	52.4%	10	47.6%	21	χ^2= 6.316* P=0.043
	31-40 years	7	29.2%	17	70.8%	24	
	>40 years	2	13.3%	13	86.7%	15	
Gender	Male	8	30.8%	18	69.2%	26	χ^2= 0.136 P=0.713
	Female	12	35.3%	22	64.7%	34	
Religion	Hindu	13	29.5%	31	70.5%	44	χ^2= 1.930 P=0.381
	Muslim	3	60.0%	2	40.0%	5	
	Christian	4	36.4%	7	63.6%	11	
Type of family	Nuclear family	12	30.8%	27	69.2%	39	χ^2= 0.758 P=0.684
	Joint family	6	42.9%	8	5701%	14	
	Extended family	2	28.6%	5	71.4%	7	
Type of employment	Private employee	10	22.7%	34	77.3%	44	χ^2= 8.352** P=0.004
	Contract basis	10	62.5%	6	37.5%	16	
Place of residence	Rural	0	0.0%	1	100.0%	1	χ^2= 2.266 P=0.322
	Urban	14	29.8%	33	70.2%	47	
	Semi urban	6	50.0%	6	50.0%	12	
Years of experience	<5 years	5	29.4%	12	70.6%	17	χ^2= 0.536 P=0.765
	5-15 years	11	37.9%	18	62.1%	29	
	>15 years	4	28.6%	10	71.4%	14	

Monthly income	<Rs.10000	5	50.0%	5	50.0%	10	χ^2= 1.514 P=0.469
	Rs.10000-20000	8	30.8%	18	69.2%	26	
	>Rs.20000	7	29.2%	17	70.8%	24	
Heard about conduct disorders before	Yes	11	5709%	8	42.1%	19	χ^2= 7.548** P=0.006
	No	9	22.0%	32	78.0%	41	
Source of information	Nil	13	31.0%	29	69.0%	42	χ^2= 2.293 P=0.682
	Family members	4	57.1%	3	42.9%	7	
	Friends	1	33.3%	2	66.7%	3	
	Mass media	1	33.3%	2	66.7%	3	
	Health personnel	1	20.0%	4	80.0%	5	

* Significant at P≤0.05 * *highly significant at P≤0.01 ** *very high significant at P≤0.001

There was a statistically significant association between the knowledge score and the socio demographic variables i.e, age in year significantly at p≤0.05 level, type of employment and heard about conduct disorder highly significant at p≤0.01.

DISCUSSION

The results according to pre-test scores showed that out of 60 samples, majority of teachers 78.3% had inadequate, and remaining 21.7% of them had moderate knowledge on conduct disorder. The results according to post-test knowledge scores showed that out of 60 samples, majority of teachers 80% had adequate knowledge of conduct disorder and remaining 20% of them had moderate level of knowledge regarding conduct disorder. The researcher revealed that in post-test, there was a statistically significant association between the knowledge score and the socio demographic variables i.e, age in year significantly at p≤0.05 level, type of employment and heard about conduct disorder highly significant at p≤0.01.

CONCLUSION

The conduct disorder has markable prevalence. It needs to be noted in younger age instead correcting delinquency. There are lots of ways to misguiding the students with their hidden talent. This study may help to parents and the second parents i.e. teachers can improve their perspective to handling the children with conduct disorders. Scheduling frequent Parent-Teacher meeting to identify the problems earlier and to provide counseling to the students. The study reveals that the experience of the teachers and their participation in in-service education regarding child psychiatry had influence on the knowledge score of the school teachers. So the health education during training regarding conduct disorder of children are very much essential for teachers to promote the child's behavior in good manner, health personnel's who working in schools should take the responsibility to improve the knowledge of teachers in the area of conduct disorder among children. So the teachers should given more importance to the behavioral modification of the children.

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