



Assess The Knowledge Regarding Learning Disability Of Children Among School Teachers In Selected School

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ABSTRACT

Background:

Today's children are tomorrow's citizens. They are in a continuous process of growth and development. Any alteration in its course leads on to developmental disorders. Of the developmental disorders learning disability plays a significant role as a silent handicap among children. It is estimated that 4-5% of students in school have learning disability.

Objectives

1. To assess the level of knowledge of teachers regarding learning disabilities among children.
2. To associate the knowledge of school teachers with selected socio demographic variables.
3. To correlate the knowledge and attitude of teachers regarding learning disability.
4. To develop a 'Self Instructional Module on Learning Disabilities 'for teachers.

Method

A descriptive research design was adapted to conduct the study. Target population was primary school teachers in Sasaram Rohtas. A structured questionnaire for knowledge and attitude scale for attitude assessment was used. Tool consisted of

1. Socio demographic Variables
2. Knowledge Questionnaire
3. Attitude Statements

Expert opinion and pilot study was conducted for the purpose of validity and reliability of the tool and was found to be feasible and valid. 60 samples were selected from the target population by convenient sampling. Data was collected and analyzed using mean, median, percentage, SD, Chi square and Coefficient correlation and presented in the form of tables and diagrams.

Results

The study revealed that major portion (35%) of primary school teachers belonged to the age group 30-35 and of these 93% were females. Majority of them (75%) possessed B.Ed degree. Nearly half of them (48.33) had less than 5 years of teaching experience. 91.67% studied child psychology in their curriculum but very few (8%) had opportunity to attend in service educations on problems of learning. No teachers had opportunity to teach such children. Chi square revealed a significant association ($P < 0.05$) between knowledge and Educational qualification.

Conclusion

Significant association was identified between attitude and age of the subjects also. The study revealed that none of teachers had excellent knowledge on learning disability but almost all (98.3%) had highly favourable attitude towards such children. A positive correlation

($r = +0.83$) was identified between knowledge and attitude of teachers towards children with learning disability. A Self Instructional Module was developed and distributed among the teachers to improve their knowledge on this aspect.

INTRODUCTION

The Hindu philosophy places teacher on a pedestal - even above God and just after the parents. Children spend most part of their working hours in school with teachers who play an important role in moulding their future. A teacher is responsible for the integrated all round development of a child. Like a gardener, he provides all suitable conditions for their best growth.

According to Mahatma Gandhi, 'Education means an all round drawing out of the best in child and men – body, mind and spirit'¹. Only an efficient and an understanding teacher can identify the capacities, strength, and weakness innate in each student.

Jones Elizabeth Pryce states that children are at school for a large part of their vital time for the emotional and physical development. School provides a setting for the development of friendship, socialization and for the introduction and reinforcement of behavior². Change of behavior in the desired direction is termed as learning. Learning is a very complex brain function of understanding, recalling, and utilization of this knowledge in the future. The capacity to learn varies from individual to individual even among children of the same age and intellectual ability. Without proper knowledge and perception regarding this reality, all parents and teachers force the children to come out with first rank. The quality of children's life solely depends on the type of family environment, school and neighborhood³ - Dr. R. Parthasarathy. Unhealthy social surrounding can put them into stress and can increase their vulnerability to develop emotional disorders. Devivasigamani reported a

prevalence rate of 20-33 % of psychiatric disorders in school children in Indian setting. Among them Learning Disorder constitute 3-7%³.

The term “Learning Disability” came to use in the 1960’s. Learning Disability is also termed as “Specific Academic Skill Disorder” or “Specific Learning Disability”⁴.

National Joint Committee on Learning Disability defines Learning Disability as “ A heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning or mathematical abilities”⁵.

The 4th version of Diagnostic and Statistical Manual (DSM-IV) of mental disorders refers these disabilities as learning disorders rather than academic skills disorders and mentioned under the section called “disorders first diagnosed in infancy, childhood or adolescence”⁴.

According to UNESCO records (1998) in European countries, the percentage of students learning in special schools ranges between 2.5 and 4.5 and 10 – 15 % of the school age population is in special educational need, which includes defects of speech, major behavioral problems, and various forms of Learning Disabilities. 4.5% of students (2.8 million) in schools had been identified as having learning disabilities.

Ethnic/racial breakdown of students with learning disability underscore the fact that it is a serious national problem and cannot be attributed to poverty, immigration or locality⁶.

Identification of disorder prior to school age is difficult due to the instability of results obtained from formal testing procedures. Teachers are the first person to notice that the child is not learning as expected. They often exhibit some challenging behaviors also. There is no magic bullet to cure Learning Disability. Shaw and Mac Guire stated that for students with Learning Disabilities skills such as “Planning, Monitoring, Regulating and Scheduling” are difficult⁷. These students require continuous help to adapt to learning situations. Selvin in an analysis of challenging behaviors among people with Learning Disability suggest that these children are a major challenge for

teachers and members of caring families⁷. The successes of these children are determined by the response of the school personnel to the needs of these children.

The previous studies indicate the need for a multidisciplinary approach and empowerment for the care of the learning disabled children⁷. Maximum improvement can be achieved only by the combined effort of Medical and allied professionals, parents, and teachers. These beliefs permeated and guided the role of teachers - from assessment to evaluation. According to National Centre for Learning Disorder, “Teachers are the essential link between children with learning disorder and the interventions that help them. There is no student with learning disorder who cannot learn, if a teacher has received appropriate training and is willing to spend time , using his/ her expertise to reach and teach that child” . It supports the value of team work in all aspects for caring people with Learning Disability⁸.

Trained teachers who have positive attitude and practical knowledge concerning individual needs (physical, emotional & intellectual) and problems can prevent and manage emotional and psychosocial problems of young children. Abdal Haqq stated that ‘Teachers need to be trained to identify students who need intervention , to handle problems in class room, to locate sources of help for students , to take part in the collaborative process and to view themselves as part of a team effort to address the academic , social and healthy development of students³.

It is seen that even with increased resources child and adolescent mental health services alone are unlikely to be able to meet the needs of children with behavioral and psychological problems. Hence the schools form the logical point of intervention for child mental health professionals. As reported by UNESCO (1998), there are almost 43 million teachers out of which 23.9 million in primary school level. The size alone of the teacher population is of public health significance⁶.

In a country like India where resources are very limited, better and efficient utilization of the available resource is the only solution for the problem. Realization of this reality paved the way for the 9th conference of Central Council of Health and Central Family Welfare Council to declare

that “The teachers should be trained for observing and screening students for defects and deviations from normal health to maintain effective surveillance and for providing supportive health education for the prevention of health problems by developing desirable health habits”⁹.

PROBLEM STATEMENT

A Descriptive Study To Assess The Knowledge Regarding Learning Disability Of Children Among School Teachers In Selected School At Rohtas.

OBJECTIVES

1. To assess the level of knowledge of teachers regarding learning disabilities among children
2. To associate the knowledge of teachers with selected socio demographic variables.
3. To correlate the knowledge and attitude of school teachers regarding learning disability.
4. To develop a 'Self Instructional Module' on learning disability for teachers.

MATERIALS AND METHODS

Material and Methods:

Research approaches

The research approaches was descriptive research approach. Research design-

Research design is typical descriptive research design. Research setting –

The study was conducted at selected rural area of Sasaram. Sample technique -

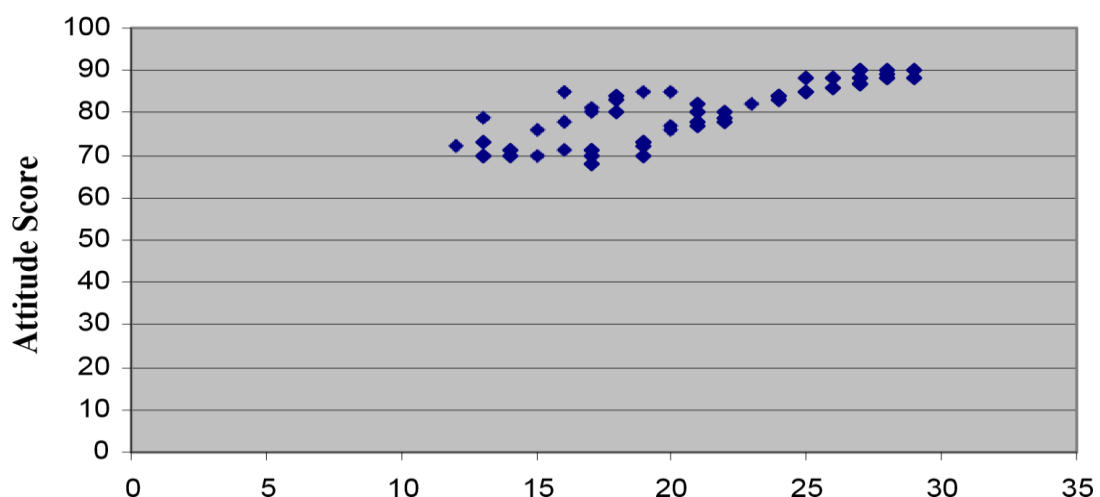
Convenient sampling technique Target population-

The population for the present study is teachers of Primary schools in Sasaram, Rohtas. Sample size-

Number of sample size is 60. Inclusion criteria-

- Teachers who are teaching in standard 1 to 5 .
- Teachers of selected private schools in Sasaram, Rohtas .
- Teachers who know English
- Teachers who are willing to participate in the study. Exclusion criteria-
- Teachers who are teaching in schools for physically or mentally challenged children.

MAJOR FINDINGS OF THE STUDY



Scattered diagram representing the correlation between knowledge and attitude score of school teachers regarding learning disability

Knowledge Score

Scattered diagram shows that there is positive correlation between knowledge of teachers regarding learning disability and their attitude towards such children.

Correlation Coefficient is found to be +0.833 with test of significance 6.3. Hence H3 is accepted at $P < 0.05$.

IMPLICATION FOR PRACTICE

The findings of the study have implications on the field of nursing education, nursing practice and nursing research.

CONCLUSION

The study was a Descriptive type to assess the knowledge and attitude of schoolteachers regarding learning disability among children in selected schools at Sasaram, Rohtas. It was conducted in five selected schools during the period 17-10-05 to 31-10 -05. Analysis was done and the following conclusions were drawn.

Majority of the primary school teachers had inadequate knowledge on learning disability. Most of the subjects possessed highly favourable attitude towards learning disabled children. Educational qualification of teachers and their knowledge regarding learning disability was found to be significantly associated. Other socio demographic variables had no significant association with knowledge of teachers on learning disability.

Age of the teachers had significant association with attitude. Other socio demographic factors have no significant association with attitude of the teachers.

There is significant positive correlation between knowledge and attitude of teachers on learning disability.

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