Effectiveness Of Training Program on Knowledge Regarding Child Behavioural Disorders Among Teachers in Selected School.

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***Abstract*—According to the World Health Report, approximately 15% of children worldwide suffer from serious emotional disturbances. In India, ICMR reports a 12.5% prevalence of mental and behavioral disorders among children. These conditions often manifest as attachment difficulties, anxiety, and ADHD, significantly impacting healthy development and increasing the risk of long-term antisocial behavior, low self-esteem, and academic failure. As children are the primary resources for a nation's future, their psychological well-being is paramount. Primary school teachers play a critical role in identifying these early warning signs.**

Objectives: This study aimed to assess the effectiveness of a planned teaching program on the knowledge of primary school teachers regarding child behavior disorders.

Methods: pre-experimental one-group pre-test post-test design was employed. A sample of 56 teachers from Zilla Parishad schools was selected using a non- probability purposive sampling technique. Data were collected via a structured questionnaire covering demographic variables and behavioral knowledge. Statistical analysis was performed using descriptive and inferential statistics, including frequency distribution and t-tests.

Results: The demographic profile revealed that 51.79% of participants were male, 46.43% fell within the 25–30 age bracket, and 41.07% held B.Ed. qualifications. Prior to the intervention, teachers exhibited a lack of comprehensive knowledge regarding complex psychopathologies. The pilot study (n=6) yielded a significant t-score of 14.46. In the main study, the mean knowledge score increased significantly from a pre-test value of 15.98 to a post-test value of 20.01 following the training program.

Conclusion: The findings indicate that the planned teaching program was highly effective in enhancing teachers' understanding of child behavior disorders. Given the significant knowledge gain, such training programs are essential tools for equipping educators to support the mental health and intellectual development of school-going children.

***Index Terms*—Training program, knowledge assessment, child behavior disorders, quasi-experimental, primary school teachers.**

I. INTRODUCTION

School plays a crucial and formative role in the spheres of cognitive, language, emotional, social and moral development of children. There is now growing recognition that school have a significant role in promoting mental health. Teachers are powerful groups who have in their process of education studied the nature of individual growth. This has equipped them to be in opposition to shape and reshape behaviours that are warranted. nearly one in five children and adolescent was have emotional and behaviour disorders at some time in their youth. Mental disorders in school amount to 3.12 % in students. Even by conservative estimates 10% of child populations suffer from mental disturbance with serious associated impairment including learning problem, health problem and during abuse given any time. At least 3% of school age children suffers from emotional disturbances at any given point of time.

Children are the valuable possession of parents and future nation makers. A healthy child contributes to a healthy and prosperous society. The behavioural

problem of children these days undertake different dimensions due to changes of lifestyle of human being identification of behavioural problem, and its early intervention will go a long way in improving quality of life of these children.

The term of behaviours refers to the way a person responds to a certain situation or experience. Behaviour is affected by temperament which is made up of an individual's innate and unique expectations, emotions and beliefs. Behaviour can also be influenced by a range of social and environmental factors including parenting, practices, gender, and exposure to new situations, general life events and relationships with friends and siblings. Today's children are tomorrow's responsible citizens of the world. There is a great to emphasize on children these days because of the recognition that a very substantial proportion of the world's population, 35-45% constitute young children. The future of our country depends on positive mental health of our young people. However, nearly one in five children and adolescent have emotional and behaviour disorders at some point of time in their young lives, regardless of their geographic region or socioeconomic status. Mental health disorders are very common in childhood, and they include disorders pica, attention deficit hyperactive disorder (ADHD) or development (autism spectrum) disorders and temper tantrum. While low- intensity naughty, defiant and impulsive behaviours from time to time, losing one's temper, destruction of property, and deceitfulness/ stealing in the preschool children are regarded as normal, extremely difficult and challenging behaviours outside the norms for the age and the level of development, such as unpredictable, prolonged, and /or destructive tantrums and severe outbursts of temper loss are recognized as behaviour disorders.

Community studies have identified that more than 80% of preschoolers Have mild tantrums sometimes but a similar proportion, less than 10% was have daily tantrums, regarded as normative misbehaviours at this age. Challenging behaviours and emotional difficulties are more likely to be recognized as "problem" rather than "disorders" during the first 2 year of life.

1.1. Objective

- To assess the knowledge of schoolteachers regarding child behaviour disorder in school going children.
- To evaluate the effectiveness of training program on knowledge regarding child behavioural disorder of schoolteacher.
- To find association between pre-test knowledge of schoolteacher regarding child behavioural disorder with their selected demographic variable.

II. METHODS

In this research study, pre-experimental one-group pre-test post-test design was be used. In this research study, the consist of 56 schoolteachers, calculate based on previous studies. A research design can be defined as the preparation of conditions, for the collection and analysis of data in such a manner, which aims at combining relevance to the research purpose with economy in procedure. In other words, the design arrangement of a research project is commonly known as the "research design". Besides, the decisions like what, where, when, how, etc., in regard to a research study, creates a research design. In fact, the research design is the conceptual structure within which research is conducted. Moreover, it comprises the outline for the collection, measurement and analysis of data.

Questionnaire for assessing knowledge. to whom the pre-test was conducted. After 7 days, the post Sample size is the number of observations included in a study or experiment. It is the number of individuals, items, or data points selected from a larger population to represent it statistically. 51

In this research study, the consist of 56 schoolteachers, calculate based on previous studies.

Sampling techniques are the methods used to select a subset of individuals, items, or data points from a larger group (called a population) to study or analyze

Sampling technique:

In this study, non-probability purposive sampling technique was be used.52 for selecting the participants. Teachers who are available in the selected schools and fulfil the inclusion criteria was l be approached by the researcher. who are willing to participate was be enrolled in the study after obtaining informed consent. the use of convenient sampling was facilitating recruitment of participants within the available study setting and period.

Data collection tools and techniques:
The research tool has been prepared to effectiveness of training program on knowledge regarding child behaviors disorders among teachers in selected schools. The steps selected for preparing the tool. Review of related literature, Preparation of the blueprint, Consultation with experts from related fields, Review of related literature Related literature from books, journals, articles, published and unpublished research studies were reviewed to develop the tool. Preparation of the blueprint is made on the basis of structured questionnaire.

Tool preparations: The tool consist of questionnaire, and the tool was divided into two sections.
Section 1: Demographic profile
Section 2: Knowledge on child behavioural disorders and effectiveness of training program.

Section 1: Demographic profile includes the following: Age, Gender, Religion, Education, 0Types of school. Monthly income, Source of knowledge, Previous knowledge regarding child behaviours disorders.

Data analysis: The data collected was analyzed with the help of guidance of statistical guidance of statistical experts. Chi square method is issued to find out association between knowledge of teachers related to child behaviours disorders. The analysis included descriptive inferential statistics. The collected data is planned to be organized and tabulated by using descriptive statistics like mean, standard deviation and mean percentage. Effectiveness of training program was analyzed by the correlation of pretest and post-test knowledge score. The analysis was done on the objective and hypothesis to be tested. Items related to background variables would be analyzed in terms of frequency and percentage.

Softer Used: MS Excel and Minitab 17 The level of significance was be set at: $p < 0.05$

III. RESULT

This section presents the percentage-wise distribution of the analysis and interpretation of data collected from 60 parents of toddlers residing in a selected rural area to assess the effectiveness of an information booklet regarding prevention and risk reduction of Attention-Deficit/Hyperactivity Disorder (ADHD). The study was conducted using a quantitative pre-experimental one-group pre-test and post-test research design. Table 4.1 shows the distribution of the 60 parents according to their selected demographic characteristics. The largest proportion of parents were above 35 years (36.7%), followed by those below 25 years (25.0%). The majority of participants were female (96.7%) and were mothers of the toddlers (96.7%). Regarding education, the largest proportion were graduates (43.3%), while 23.3% had secondary education and 20.0% had higher secondary education. In terms of occupation, the majority were homemakers (65.0%). More than half of the participants belonged to nuclear families (51.7%). Regarding number of children, 45.0% had two children. The largest proportion of toddlers were 3 years old (40.0%). Importantly, 63.3% of parents had not previously received information regarding ADHD, while only 36.7% had previous information. Among those reporting previous information, healthcare professionals and newspapers/magazines were each reported by 8.3%, followed by internet/social media (6.7%), family/friends and Anganwadi/school (5.0% each), and television/radio (3.3%). Only 15.0% had previously consulted a professional regarding child development or behaviour. Overall, the demographic findings indicate that there was a substantial information gap regarding ADHD among the parents, supporting the need for an educational intervention such as the information booklet. Table 4.6 reveals that before administration of the information booklet, 40 (66.7%) parents had moderately adequate knowledge regarding prevention and risk reduction of ADHD. Seventeen parents (28.3%) had inadequate knowledge, while only 3 (5.0%) had adequate knowledge. These findings indicate that the majority of parents had insufficiently developed knowledge before the educational intervention

Section I: Deals with analysis of demographic data of the teachers at selected school in terms of frequency and percentage.

Table 2: Frequency & percentage distribution of the teachers at selected school

Sr. No.	Variable	Groups	Frequency	Percentage
1	Age (in years)	Below 25	6	10.71
		25-30	26	46.43
		30-35	14	25.00
		Above 35	10	17.86
2	Gender	Male	29	51.79
		Female	27	48.21
3	Religion	Hindu	27	48.21
		Muslim	16	28.57
		Christian	12	21.43
		Other	1	1.79
4	Qualification	D.Ed.	19	33.93
		B.Ed.	23	41.07
		Others	14	25.00
		None	0	0.00
5	Types of school	Zillah parishad	56	100
		CBSE	0	0.00
		Specialized government school	0	0.00
		None of these	0	0.00
6	Year of experience	1 to 3	6	10.71
		4 to 7	23	41.07
		8 to 12	17	30.36
		More than 12	10	17.86
7	What grade do you teach?	1 standard	2	3.57
		1 and 2 standards	20	35.71
		3, 4 and 5 standards	21	37.50
		6 and 7 standards	13	23.21
8	What is your monthly income?	30 thousand	19	33.93
		40 thousand	13	23.21
		50 thousand	18	32.14
		more than 50 thousand	6	10.71
9	Source of knowledge regarding child behavior disorder	Social media	7	12.50
		Health worker	29	51.79
		Friends	13	23.21
		Others	7	12.50
10	Previous knowledge	Yes	56	100.00
		No	0	0.00

Section II: Deals with analysis of data related to assessment of knowledge regarding child behavioral disorder among teachers at selected school in terms of frequency and percentage.

Table 14: General assessments of Knowledge PRE Test

Variable	Groups	Score	Pre Test	
			Frequency	Percentage
Knowledge	Poor	0-8	0	0.00
	Average	9-16.	32	57.14
	Good	17-23	20	35.71
	Excellent	24-30	4	7.14
Knowledge	Minimum		9	
	Maximum		25	
	Average (SD)		15.98 (3.65)	

At the time of pretest, assessment of the knowledge regarding child behavioural disorder among teachers at selected school, no one of them had poor, 57.14% average knowledge, 35.71 of them had good and 7.14% had excellent knowledge. Average knowledge score at the time of pretest was 15.98 with standard deviation of 3.65. The minimum score of knowledge was 9 with maximum score of 25

Table 15: General assessments of Knowledge POST Test

Variable	Groups	Score	Pre Test	
			Frequency	Percentage
Knowledge	Poor	0-8	0	0.00
	Average	9-16.	13	23.21
	Good	17-23	23	41.07

	Excellent	24-30	20	35.71
Knowledge	Minimum		13	
	Maximum		28	
	Average (SD)		20.01 (4.46)	

The time of pretest, assessment of the knowledge regarding child behavioral disorder among teachers at selected school, no one of them had poor, 23.21% average knowledge, 41.07 of them had good and 35.71% had excellent knowledge. Average knowledge score at the time of pretest was 20.01 with standard deviation of 4.46. The minimum score of knowledge was 13 with maximum score of 28.

Table 16: General assessments of Knowledge- PRE & POST test

Variable	Groups	Score	Pre Test		Post Test	
			Frequency	Percentage	Frequency	Percentage
Knowledge	Poor	0-8	0	0.00	0	0.00
	Average	9-16.	32	57.14	13	23.21
	Good	17-23	20	35.71	23	41.07
	Excellent	24-30	4	7.14	20	35.71
Knowledge	Minimum		9			
	Maximum		25			
	Average (SD)		15.98 (3.65)			

IV. GENERAL ASSESSMENTS OF KNOWLEDGE: PRE & POST TEST.

For assessment purpose total score of knowledge regarding child behavioral disorder among teachers at selected school was divided in to four groups like poor (0-8 score), average knowledge (9-16 score), good (17-23 score) and excellent knowledge (24-30 score).

- Pre Test: At the time of pretest, assessment of the knowledge regarding child behavioral disorder among teachers at selected school, no one of them had poor, 57.14% average knowledge, 35.71 of them had good and 7.14% had excellent knowledge. Average knowledge score at the time of pretest was 15.98 with standard deviation of 3.65. The minimum score of knowledge was 9 with maximum score of 25.
- Post Test: At the time of post-test, assessment of the knowledge regarding child behavioral disorder among teachers at selected school, no one of them had poor, 23.21% average knowledge, 41.07 of them had good and 35.71% had excellent knowledge. Average knowledge score at the time of pretest was 20.01 with standard deviation of 4.46. The minimum score of knowledge was 13 with maximum score of 28.

Section: III Deals with analysis of data related to the effectiveness of training program on knowledge regarding child behavioral disorder among teachers at selected school.

Table 17: Comparison of the pre and post-test Knowledge (paired t test)

Group	Frequency	Mean	S.D.	t value	P value
Pre Test	56	15.98	3.65	14.46	0.000
Post Test	56	20.01	4.46		

The comparisons of pretest and post-test mean of knowledge regarding child behavioral disorder among teachers at selected school were done by paired t test. The pretest average score was 15.98 with standard deviation of 3.65. The post-test average score was 20.01 with standard deviation of 4.46. The test statistics value of paired t test was 14.46 with p value 0.00. The p value less than 0.05, hence reject the null hypothesis. That means there is significant difference in pre and post-test knowledge. Shows that, training program on knowledge regarding child behavioral disorder among teachers at selected school was effective.

Section IV: Deals with analysis of data related to the association between pretest knowledge of schoolteachers regarding child behavior disorder with their selected demographic variable.

V. ASSOCIATION OF KNOWLEDGE SCORE IN RELATION TO DEMOGRAPHIC VARIABLES

Table 18: Association of Knowledge with demographic variables

Variable	Groups	Knowledge Pre		Chi Square	d. f.	p value	Significance
		below Md	Above Md				
Age (in years)	Below 25	6	0	9.08	3	0.028	Significant
	25-30	12	14				
	30-35	6	8				
	Above 35	8	2				
Gender	Male	18	11	0.59	1	0.44	Not Significant
	Female	14	13				
Religion	Hindu	19	8	10.89	3	0.012	Significant
	Muslim	10	6				
	Christian	2	10				
	Other	1	0				
Qualification	D.Ed.	13	6	1.51	2	0.47	Not Significant
	B.Ed.	12	11				
	Others	7	7				
	None	0	0				
Types of school	Zilla parishad	32	24	Cannot compute Chi-Square			
	CBSE	0	0				
	Specialized government school	0	0				
	None of these	0	0				

VI. ASSOCIATION OF KNOWLEDGE SCORE IN RELATION TO DEMOGRAPHIC VARIABLES

Table 19: Association of Knowledge with demographic variables

Variable	Groups	Knowledge Pre		Chi Square	d. f.	p value	Significance
		below Md	Above Md				
Year of experience	1 to 3	6	0	9.57	3	0.023	Significant
	4 to 7	11	12				
	8 to 12	12	5				
	More than 12	3	7				
What grade do you teach?	1 standard	1	1	0.33	3	0.95	Not Significant
	1 and 2 standards	11	9				
What is your monthly income?	3, 4 and 5 standards	13	8	2.22	3	0.52	Not Significant
	6 and 7 standards	7	6				
	30 thousand	13	6				
	40 thousand	6	7				
Source of knowledge regarding child behavior disorder	50 thousand	9	9	3.36	3	0.33	Not Significant
	more than 50 thousand	4	2				
	Social media	4	3				
	Health worker	14	15				
Previous knowledge	Friends	8	5	Cannot compute Chi-Square			
	Others	6	1				
	Yes	32	24				
	No	0	0				

VII. ASSOCIATION OF KNOWLEDGE SCORE IN RELATION TO DEMOGRAPHIC

Variables: The chi square test was used to see association between pretest knowledge of schoolteachers regarding child behavior disorder with their selected demographic variables. The test was conducted at 5% level of significance. Significant Association: For the demographic variables age, religion and years of experience, the p value of association test with pretest knowledge was less than 0.05. That means, the knowledge regarding child

behavior disorder among schoolteachers was associated with these demographic variables. Concluding that, there was significant association of these demographic variables with the pretest knowledge. No Significant Association: For the demographic variables gender, qualification, grade etc., the p value of association test with pretest knowledge was less than 0.05. That means, the knowledge regarding child behavior disorder among schoolteachers was associated with these demographic variables. Concluding that, there was no significant association of these demographic variables with the pretest knowledge.

VIII. DISCUSSION

This chapter presents brief summary of the study and its significant findings. It also includes the implications and recommendations for further study. The aim of study was, effectiveness of training program on knowledge regarding child behavioral disorder among teachers at selected school. The design used for study was pre-experimental one-group pre-test post-test design. The study was conducted at selected school. The sample size of study was 56 teachers at selected school. The reliability of the knowledge tool was determined to split half Method of Reliability; the tool was administered to 6 samples. Reliability of the knowledge tool was found to be 0.86. The pilot study was conducted, to assess the feasibility of the study and to decide the statistical analysis and practicability of research. It was found feasible.

The results of the study have been organized according to the objectives of the study.

Objective 1. To assess the knowledge of schoolteachers regarding child behavior disorder in school going children.

At the time of pretest, assessment of the knowledge regarding child behavioral disorder among teachers at selected school, no one of them had poor, 57.14% average knowledge, 35.71 of them had good and 7.14% had excellent knowledge. Average knowledge score at the time of pretest was 15.98 with standard deviation of 3.65. The minimum score of knowledge was 9 with maximum score of 25. At the time of post-test, assessment of the knowledge regarding child behavioral disorder among teachers at selected school, no one of them had poor, 23.21% average knowledge, 41.07 of them had good and 35.71% had excellent knowledge. Average knowledge score at the time of pretest was 20.01 with standard deviation of 4.46. The minimum score of knowledge was 13 with maximum score of 28. Similar study was conducted to assess the effectiveness of planned teaching programme on knowledge regarding childhood behavioural disorders among selected school's teachers of district mandi (H.P)". Pre-experimental one group pretest- post-test research design) under non probability convenient sampling technique was used to assess the knowledge regarding childhood behavioural disorders among selected school's teachers of district mandi (H.P)". Population of the study consisted of (N=60) school's teachers in selected Schools of district mandi who meet the inclusion criteria. Demographic data profile sheet was used for assessment of demographical variables such as Age in years, Gender, Marital Status, Types of family, Place of residence, Education, Teaching Experience, Area of working, Having Children between Age Group. Self-Structured knowledge Questionnaire was used to assess the knowledge regarding childhood behavioural disorders among selected school's teachers. The self-structured knowledge questionnaire consists of 25 questions which right answers was documented as one mark and wrong answer was documented as zero marks. Objective 2. To evaluate the effectiveness of training program on knowledge regarding child behavior disorder of schoolteacher. The comparisons of pretest and post-test mean of knowledge regarding child behavioral disorder among teachers at selected school were done by paired t test. The pretest average score was 15.98 with standard deviation of 3.65. The post-test average score was 20.01 with standard deviation of 4.46. The test statistics value of paired t test was 14.46 with p value 0.00. The p value less than 0.05, hence reject the null hypothesis. That means there is significant difference in pre and post-test knowledge. The similar study was conducted Using a pre-experimental one-group pre-test post-test design, researchers selected 150 teachers through non-probability purposive sampling. Data collection involved a demographic baseline profile and a self-administered knowledge questionnaire to evaluate initial understanding. After the pre-test, the teaching program was delivered, with a follow-up post-test conducted seven days later to measure improvement. The results demonstrated a significant surge in

proficiency: the mean knowledge score rose from a pre-test level of 39.57% to a post-test level of 71.26%. Statistical analysis yielded a "t" value of 27.174, which far exceeded the critical table value at the 0.05 significance level. These findings confirm that the planned teaching program was highly effective in enhancing teachers' knowledge. By equipping educators with these insights, they are better prepared to identify and support school-aged children struggling with behavioral challenges. Objective 3. To find out association between pre-test knowledge of school teacher regarding child behaviour disorder with their selected demographic variables. For the demographic variables age, religion and years of experience, the p value of association test with pretest knowledge was less than 0.05. That means, the knowledge regarding child behavior disorder among schoolteachers was associated with these demographic variables. behaviours disorders were found to be effective in term of increasing knowledge of teachers from selected school. This indicates that is effective method of impairing information and effectively increasing knowledge of teachers regarding child behaviours disorders. I concluded that teachers gain their knowledge by pretest and post-test Concluding that, there was significant association of these demographic variables with the post-test knowledge. For the demographic variables gender, qualification, grade etc., the p value of association test with pretest knowledge was less than 0.05. That means, the knowledge regarding child behavior disorder among schoolteachers was associated with these demographic variables. Concluding that, there was no significant association of these demographic variables with the post-test knowledge.

IX. RECOMMENDATIONS

The present study findings relevant that the training program were effective in improving knowledge of parents regarding child behaviors disorders among teachers in selected school. So, the following recommendations were framed for future study. Similar study can be done using information booklet. A study can be conducted to compare the knowledge levels among teachers in selected school. A study to assess the structured teaching program on behavioural disorders and its management among primary school.

X. CONCLUSION

There was lack of knowledge among teachers from selected school regarding child behaviours disorders. The knowledge regarding child behaviours disorders was found to be effective in term of increasing knowledge of teachers from selected school. This indicates that is effective method of impairing information and effectively increasing knowledge of teachers regarding child behaviours disorders.

I concluded that teachers gain their knowledge by pretest and post test scores. that is pretest score 15.98 and post-test 20.01. so, from this research study, researcher able to develop effectiveness of training program on knowledge regarding child behaviors disorders among teachers. Now at the end, it would be concluded that this is effective in bring out this change.

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