



### Short Communication

## Knowledge of Teachers Regarding Attention Deficit Hyperactivity Disorder (ADHD)

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Available online at: [www.isca.in](http://www.isca.in), [www.isca.me](http://www.isca.me)

Received 30<sup>th</sup> April 2018, revised 28<sup>th</sup> June 2018, accepted 2<sup>nd</sup> July 2018

### Abstract

*Attention Deficit Hyperactivity Disorder (ADHD) is a psychiatric disorder characterised by low level of attention and high level of activity which affect school performance of children. The aim of the present study was to assess the knowledge of primary school teachers regarding ADHD among children. This cross sectional study was done on 47 teachers who were selected by convenient sampling technique from three randomly selected primary schools. Data was collected by self prepared tool, tool has two sections: Section I socio-demographic variables and section II was structured knowledge questionnaire regarding ADHD. Result shows that most of the teachers 62% had average knowledge regarding ADHD.*

**Keywords:** Knowledge, teachers, ADHD.

### Introduction

Attention-Deficit Hyperactivity Disorder is a common disorder among children and the prevalence rate is high among primary school children<sup>1</sup>. It is characteristic of children especially preschoolers that they are hyperactive and have less ability to pay attention on a task. This quality of children makes difficult to diagnose Attention-Deficit Hyperactivity Disorder (ADHD)<sup>2</sup>. World widely the incidence of ADHD among children is from 5 to 10%<sup>3</sup>. The prevalence rate of ADHD in India is about 10 – 20%. It can be estimated that at least one child in a class is susceptible of ADHD. Diagnosis of ADHD is more common among boys (6-9%) then in girls (2-3%)<sup>4</sup>.

As ADHD found in young children but it can be continue with age. There are many studies which show that 50% children suffering with ADHD continue to have same symptoms till their young adulthood<sup>5</sup>. ADHD is a brain disorder manifested by high level of activity and low level of attention. A child suffering with ADHD have problem in focusing attention on a particular task and not able to sit in a place for long time. A child may faces problem in following directions given by teachers or parents. This behaviour of child affects school performance. There is no complete cure of ADHD but through medication the symptoms of ADHD can be reduced. Psychotherapy plays an important role in improving the behaviour of child. Parents and teachers are the persons who can help in early identification of the problems and in improving the behaviour of child<sup>6</sup>.

As children spent their maximum time in schools and are in direct contact with their teachers; so teachers have an important role in assessing the symptoms of ADHD in children and can

help in early diagnosis. To assess the symptoms of ADHD, a teacher should be well equipped with the knowledge of same<sup>7</sup>. Children who have ADHD need more attention than the other and in school teachers can contribute in the modification of behaviour of child by paying extra attention<sup>8</sup>. There are many researches which show that teachers are the main referral source of the ADHD among children. Not only diagnosing but they are also responsible for implementing and evaluating interventions for ADHD in the classroom<sup>9</sup>. Thus, teachers play central roles in reporting symptoms, advising parents to seek assessment, and assisting children with ADHD to improve academic and social performance.

But there are many evidences which also shows that teachers has less knowledge of ADHD and they tend to have misperceptions about the nature, course, causes and outcomes of ADHD<sup>10</sup>. There is need to improve teacher's knowledge regarding ADHD among children so that they can pay special attention to the affected child which helps child to improve school performance and self esteem<sup>11</sup>.

### Materials and methods

A cross sectional study was done on 47 randomly selected teachers from primary schools, Dehradun, Uttarakhand. Data was collected by administering tool to the participants. Before collecting data the purpose of the study was explained to the participants and written consent was obtained. Tool consist two sections: Section one includes socio-demographic characterises and section two consist structured knowledge questionnaire regarding general information, symptoms and diagnosis of ADHD among children. Tool was prepared by the investigators

and content validity was ensured by experts. Ethical permission was obtained from the ethical committee of parent institute and principals of the selected schools. Data was collected and analyzed by descriptive and inferential analysis.

## Results and discussion

**Sample characteristics:** In this study out of 47 participants only one was male and majority of the participants 98% were females. Majority of the participants 72% were between the age group of 20- 35 years and about qualification, most of teachers 60% had master degree, 38% had bachelor degree and only 2% had doctoral degree. 35% participants said that they did not have any previous knowledge regarding ADHD. Regarding location of the schools, one third teachers were from school located in sub-rural area and only 25% teachers were from school located in rural area. Majority of the participants 90% had less than 10 years of teaching experience and only 10% had more than 10 years of experience.

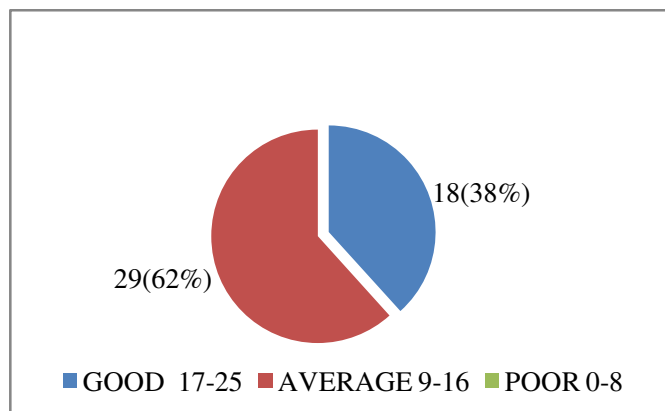
**Knowledge of teachers regarding ADHD:** Data presented in Table-1 shows range, mean and median of obtained score. Obtained range of knowledge score was 10 to 22 (maximum score 25) with mean  $16 \pm 2.6$  and 16 median.

**Table-1:** Mean with standard deviation and median of knowledge score. (N=47)

Knowledge score	Range	Mean $\pm$ SD	Median
	10-22	$16 \pm 2.6$	16

Maximum possible score-25.

Figure-1 depicts level of teacher's knowledge about ADHD. Most of the teachers 62% had average knowledge and 38% had good knowledge regarding ADHD. No one found in the category of poor knowledge. This result was supported by a study done by Anto Riya and Jacob Vineetha<sup>12</sup> with the aim to assess the effectiveness of instructional module on knowledge of teachers regarding ADHD. Result shows that in pre-test majority of the participants had average knowledge regarding ADHD.



**Figure-1:** Knowledge of teachers regarding ADHD.

Table-2 shows responses of teacher's regarding ADHD. There was 24 items with two options that is true and false.

**Table-2:** Response of teachers to items.

Items	True	False
ADHD child is hyperactive and unable to pay attention	41 (87%)	6 (13%)
ADHD is common in school children	13 (28%)	34 (72%)
ADHD child is more obedient	19 (40%)	28 (60%)
ADHD can be transmitted from parents to child	20 (42%)	27 (58%)
Symptoms of ADHD disappeared after puberty	32 (28%)	15 (32%)
Child with ADHD can adjust himself in any situation	36 (76%)	11 (24%)
ADHD can be diagnosed	40 (86%)	7 (14%)
Child with ADHD can shift from one task to another before completing	38 (80%)	9 (20%)
ADHD child has poor school performance	17 (36%)	30 (64%)
Disturb/ Broken family can be a risk factor for ADHD	30 (64%)	17 (36%)
Child with ADHD is more talkative	34 (72%)	13 (28%)
Child with ADHD is easily distracted by stimuli	37 (78%)	10 (22%)
ADHD is commonly found in children less than seven years	24 (51%)	23 (49%)
Child with ADHD may be aggressive	25 (53%)	22 (47%)
Child with ADHD is unable to sit and play at a place	27 (57%)	20 (43%)
Child with ADHD have trouble sitting straight on chair	35 (74%)	12 (25%)
Child with ADHD is ready to listen every time	38 (80%)	9 (20%)
Child with ADHD has habit of stealing	25 (53%)	22 (47%)
Type of ADHD are attention deficient and hyperactivity	37 (78%)	10 (22%)
For diagnosis child should have same symptom in school as well as at home	38 (80%)	9 (20%)
Child with ADHD is always in motion	19 (40%)	26 (60%)
Child with ADHD difficulty in organizing task and activities	33 (70%)	14 (30%)
Child with ADHD shows symptoms of depression	29 (61%)	18 (39%)
Child with ADHD should be referred to special school	37 (78%)	10 (22%)

**Association of knowledge with selected socio-demographic variables:** There was statistically non-significant association between knowledge and selected socio-demographic variables such as, age of teachers (0.254), educational status (0.037), location (0.004) and teaching experience (0.324) at  $p < 0.05$  level of significance. Chi-square was computed to find association between knowledge and selected socio-demographic variables.

## Conclusion

According to the finding of the study it can be concluded that most of the teachers had average knowledge regarding ADHD among children and to improve their knowledge an information booklet was prepared and distributes to the teachers.

**Recommendation:** As most of the teachers had average knowledge about ADHD and teachers can play a major role in early diagnosis of ADHD among children because they are in close contact with them, so to improve the knowledge of teachers teaching programme can be introduced.

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