Enlightening Anganwadi Teachers and Parents of Preschoolers on Attention Deficit Hyperactive Disorder (Adhd)

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Abstract: Attention Deficit Hyperactive Disorder is a prevalent, chronic, and pervasive childhood disorder characterized by developmentally inappropriate activity level, impulsivity, and inability to sustain attention and concentration. The sample chosen for the present study consisted of 40 parents having young children (0-5 yrs) and 65 anganwadi teachers through purposive sampling. The study was conducted to Enlighten Anganwadi teachers and Parents of preschoolers on Attention Deficit Hyperactive Disorder. The remote areas of Ernakulam district (Kadavanthra, Kaloor and Perumpalam) was chosen for the study. The sample chosen for the present study consisted of 40 parents having young children (0-5 yrs) and 65 anganwadi teachers through purposive sampling. The tool used for the study was a questionnaire prepared on the basis of the prepared booklet, a pre and post questionnaire (self designed) to check the level of awareness in ADHD before and after the awareness programme. Results indicate that the level of awareness among them on ADHD was zero percent. The effectiveness of awareness program was positively reflected in the responses of the selected samples and it may be concluded that the awareness programme was beneficial to the selected sample and the level of awareness on ADHD among them had improved.

I. Introduction

Attention Deficit Hyperactive Disorder is a prevalent, chronic, and pervasive childhood disorder characterized by developmentally inappropriate activity level, impulsivity, and inability to sustain attention and concentration. The characteristic features of children and adolescents with attention deficit hyperactivity disorder (ADHD) are excessive motor activity, inattention, and impulsiveness. The contemporary concept of ADHD as defined in the DSM-IV-TR is relatively new. However, an analysis of historical literature suggests that children having symptoms of inattention, hyperactivity, and impulsivity have previously been described by several authors during the last 200 years. The clinical characterizations, underlying concepts, and nomenclature of the described dysfunctions have changed over the time. Many of the historical descriptions are, however, consistent with the modern diagnostic criteria for ADHD (American Psychiatric Association, 2000).

Children with ADHD are always ‘on the go’. They:

- often talk incessantly
- frequently blurt out in appropriate comments
- often act impulsively
- rarely pause to think before they act
- sometimes endanger themselves by taking unnecessary risks

In 2011, the Centers for Disease Control and Prevention reported that the percentage of children in the United States who have ever been diagnosed with ADHD is now 9.5 percent. Boys are diagnosed two to three times as often as girls. In order for a diagnosis of ADHD to be considered, the person must exhibit a large number of symptoms, demonstrate significant problems with daily life in several major life areas, and have had the symptoms for a minimum of six months. What makes ADHD different from other conditions is that the symptoms are excessive, pervasive, and persistent. That is, behaviours are more extreme, show up in multiple settings, and continue showing up throughout life.

Aim

To enlighten anganwadi teachers and parents of preschoolers on Attention Deficit Hyperactive Disorder.

General Objective

- To check the level of awareness of the selected sample on Attention Deficit Hyperactive Disorder
**Specific Objective**
- To prepare a booklet on Attention Deficit Hyperactive Disorder
- To disseminate aspects and teach the various aspects related to ADHD to the selected sample and check the level of awareness

**II. Methodology**

The remote areas of Ernakulam district (Kadavanthra, Kaloor and Perumpalam) was chosen for the study. The sample chosen for the present study consisted of 40 parents having young children (0-5 yrs) and 65 anganwadi teachers through purposive sampling.

The study was conducted in three phases:
- Phase 1: Pilot study and preparation of tools
- Phase 2: Administration of questionnaire and awareness programme for parents
- Phase 3: Administration of questionnaire and awareness programme for teachers

The collected data was consolidated and tabulated. The results are interpreted in the form of percentage to find out the difference in the level of awareness before and after the programme.

**III. Results And Discussion**

The results of the study entitled “Enlightening Anganwadi Teachers and Parents of preschoolers on Attention Deficit Hyperactivity Disorder (ADHD)” are given under the following subheadings.

- **Development of Power Point Presentation on ‘Attention Deficit Hyperactive Disorder**
  The information package consisted of 32 slides pertaining to various topics related to ADHD.

- **Conduct of the Awareness programme on ‘Attention Deficit Hyperactive Disorder’**

- **Age Distribution of Parents and Teachers**

  Nearly half of the respondents (both parents and teachers) fell in the age between 25-35. The age range of 46-55 had 48 percent respondents, in the Anganwadi teacher category. About 17 percent subjects coming under the age range of 36-45 years.
As regards the awareness of teachers on ADHD, none of them were aware of any of the concepts related to ADHD. However, it was interesting to note that their awareness had improved after they were given a class on the same. Seventy percent came to know that it is not a common childhood behaviour and 63 percent understood that ADHD persisted in adults too. It was satisfying to note that all of them (100%) became aware of the symptoms, causes and the age at which the symptoms appear. The same pattern was seen in the case of the parents too.
As regards the awareness of teachers on environmental factors in the causation of ADHD, none of them were aware of any factors before the programme. Table 3 indicates that eighty-one percent understood that food additives do not play any role in causing ADHD and all of them (100%) believed that ADHD can be treated. Eighty-nine percent felt that hyperactivity is a significant problem in children with ADHD. Seventy-seven percent felt that children with ADHD understood verbal directions as well as peers. The same pattern was seen in the case of the parents too.

### Knowledge of the Milestone Pattern of Children with ADHD

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Teachers (n=65) %</th>
<th>Parents (n=40) %</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Pre test</td>
<td>Post test</td>
</tr>
<tr>
<td></td>
<td>Y N D</td>
<td>Y N D</td>
</tr>
<tr>
<td>Feel that mother’s mental status during pregnancy causes ADHD in children</td>
<td>- - 100</td>
<td>34 66 -</td>
</tr>
<tr>
<td></td>
<td>- - 100</td>
<td>- - 100</td>
</tr>
<tr>
<td></td>
<td>5 95 -</td>
<td>50 50 -</td>
</tr>
<tr>
<td>Feel that type of delivery plays a role in causing ADHD</td>
<td>- - 100</td>
<td>58 42 -</td>
</tr>
<tr>
<td></td>
<td>- - 100</td>
<td>- - 100</td>
</tr>
<tr>
<td></td>
<td>50 50 -</td>
<td>50 50 -</td>
</tr>
<tr>
<td>There is significant difference in milestones of children having ADHD</td>
<td>- - 100</td>
<td>62 38 -</td>
</tr>
<tr>
<td></td>
<td>- - 100</td>
<td>- - 100</td>
</tr>
<tr>
<td></td>
<td>98 2 -</td>
<td>- - 98 2 -</td>
</tr>
<tr>
<td>Feel that children with ADHD having feeding problem in infancy</td>
<td>- - 100</td>
<td>75 25 -</td>
</tr>
<tr>
<td></td>
<td>- - 100</td>
<td>- - 100</td>
</tr>
<tr>
<td></td>
<td>98 2 -</td>
<td>- - 98 2 -</td>
</tr>
<tr>
<td>Feel that ADHD children are difficult to cuddle</td>
<td>- - 100</td>
<td>77 23 -</td>
</tr>
<tr>
<td></td>
<td>- - 100</td>
<td>- - 100</td>
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<tr>
<td></td>
<td>88 12 -</td>
<td>- - 88 12 -</td>
</tr>
</tbody>
</table>
As regards the awareness of parents on differences seen during the development of children with ADHD, it is noted from the above table that none of them were aware of any developmental differences in children with ADHD. Ninety five percent felt that the mother's mental status during pregnancy do not cause ADHD in children and 66 percent teachers felt for the same. Ninety three percent understood that children with ADHD have difficulty in establishing a sleep pattern and children with ADHD have trouble in making and keeping friends. It was interesting to note that all of them (100%) became aware that children with ADHD have difficulty in concentrating in one activity for a long time and also that gender differences is a factor for children to get affected with ADHD. The same pattern was seen in the case of teachers too.

- **Knowledge of the Behavioural Issues exhibited by Children having ADHD**

  Knowledge of the Teachers on Behaviour Issues exhibited by children having ADHD

  ![](image)

  Knowledge of the Parents on Behaviour Issues exhibited by children having ADHD

  ![](image)

  About the behaviour issues exhibited by children having ADHD, none of them were aware of any unwanted behaviour before the programme. Fifty percent teachers believed that children with ADHD have stealing behaviour and 72 percent parents agreed with the same. About 65 percent teachers and 85 percent parents reported that children with ADHD show running away behaviour. About 74 percent felt that the children with ADHD were physically cruel to others and 68 percent felt that children with ADHD are cruel to animals.
too. Seventy eight percent believed that children having ADHD were truant and 77 percent mentioned that these children are lazy. The same pattern was seen in the case of the parents too.

IV. Summary And Conclusion

The study entitled “Enlightening Anganwadi Teachers and Parents of Preschoolers on Attention Deficit Hyperactive Disorder (ADHD)” was conducted in Ernakulum district using 65 Anganwadi teachers and 40 parents, having children in the age group of 0-5 years, with the help of self designed Questionnaire, Booklet and Power Point Presentation.

The main aim of the study was to check the level of awareness among people in rural areas on Attention Deficit Hyperactive Disorder (ADHD) and improve their knowledge on the same. Results indicate that the level of awareness among them on ADHD was almost nil prior to the education programme. The effectiveness of awareness program was positively reflected in the responses of the selected sample. All the respondents selected were from the remote areas of Ernakulam city, so it is believed that they could pass on the information gained by them to others as well. It may be concluded that the awareness programme was beneficial to the selected sample and the level of awareness on ADHD among them had improved.

Bibliography