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## TEACHERS KNOWLEDGE ABOUT BEHAVIORAL PROBLEMS AMONG SCHOOL CHILDREN'S

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**Abstract:** All young children behave badly from time to time, and occasional temper tantrums, aggression and defiance of authority are a normal part of growing up. Developing a consistent approach to diagnosis in the area of problem behavior is thus fraught with difficulty and not without controversy, since many 'problems or disorders' are hard to define and assign to a single medical condition or syndrome. India has 375 million children, more than any other in the world. There are more children under the age of 14 and above 14 in India than the entire of USA.

**Keywords:** Teachers knowledge, Behavioral problems of school children

### Introduction

Children are mirror of a nation. They are our future and our most precious resources. The quality of tomorrow's world and perhaps even its survival will be determined by the well-being, safety and the physical and intellectual development of children today. To predict the future of a nation, it has been remarked, one need not consult the stars; it can more easily and plainly be read in the faces of its children.<sup>1</sup>

All young children behave badly from time to time, and occasional temper tantrums, aggression and defiance of authority are a normal part of growing up. Developing a consistent approach to diagnosis in the area of problem behavior is thus fraught with difficulty and not without controversy, since many 'problems or disorders' are hard to define and assign to a single medical condition or syndrome. The term behavior refers to the way a person responds to a certain situation or experience. Behavior is affected by temperament, which is made up of an individual's innate and unique expectations, emotions and beliefs. Behavior 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.<sup>2</sup>



India has 375 million children, more than any other in the world. There are more children under the age of 14 and above 14 in India than the entire of USA. The numbers of children, who are coming out of their residence for schooling, are countless, just like stars in the sky or like drops of water in an ocean. For each of them, this particular school age is a formative period, physically as well as mentally. There are many problems faced by the children of this age and out of them behavioral problems are very important. Attention deficit is the most commonly seen behavioral disorder in children.<sup>3</sup>

The etiological factors for behavioral problems of children are usually biological risk factors, genetic risk factors, family relationship risks, experiential risks and socio environmental risk factors. A number of specific biological factors are associated with behavioral and developmental problems, mainly they contribute to behavioral & emotional difficulties. Prenatal exposure to alcohol, tobacco smoke & drugs also has been found to have an impact on neurocognitive process & is associated with a variety of behavioral problems. There are various behavioral disorders evident in children. Major concern of them is attention deficit hyperactivity disorder, temper tantrum, nail biting and thumb sucking.<sup>4</sup>

Attention Deficit Hyperactivity Disorder prevalence in children aged 18 and under found an overall pooled estimate of 7.2%. The US Census Bureau estimates 1,795,734,009 people were aged 5-19 worldwide in 2013. Thus, 7.2% of this total population is 129 million a rough estimate of the number of children worldwide who have Attention Deficit Hyperactivity Disorder. Based on Diagnostic Statistical Manual -IV screening of 11,422 adults for Attention Deficit Hyperactivity Disorder in 10 countries in the Americas, Europe and the Middle East, the estimates of worldwide adult ADHD prevalence averaged 3.4%. Study found the rate of ADHD diagnosis increased from 7.0% in 1997–1999 to 10.2% in 2012–2014. During this period, prevalence increased among non-Hispanic white children from 8.5% to 12.5%, among non-Hispanic black children from 5.5% to 9.6%, and among Hispanic children from 3.8% to 6.4%.<sup>5</sup>

When children behave with defiance, anger, and disrespect, teachers can be left feeling frustrated and angry themselves and resort to equally negative behaviors. It is important for to take a step back, try to determine underlying causes or problems, then guide them to positive



solutions. Once teachers look objectively at root causes for the children's actions, there are many things that can be done to turn the behaviors around. Often the cause will help determine what the resolution should be. If a child is having difficulty in a class, helpful ways to improve the classroom situation are warranted. Meetings with other teachers, extra help with homework, or even altering class schedules might be positive ways to counteract the frustration.<sup>6</sup>

Investing time in discovering the causes for the angry or defiant behaviors is time well spent for teachers. Children need to remain respectful of their teachers when they are calm, consistent, and model appropriate positive behaviors in their own lives. Children between six and twelve years should have widened their social horizon beyond the confines of their own home to schools. The kind of school a child attends is important to the development of a sense of industry and future achievements. In the primary school level students achieve behavioral, emotional, social and good academic levels.<sup>7</sup>

### **Need of the study**

The recent studies estimated that only about 50% of the psychosocial problems of the children are identified by their primary physician or parents, 12-25% of all American school-age children and 13% preschoolers have emotional/behavioral disorders. The psychosocial problems increased from 6.8% to 18.7%. Attention problems showed the greatest absolute increase (1.4%-9.2%) and emotional problems showed the increase (0.2-3.6%). The percentage of children with attention deficit/hyperactivity problems receiving medications increased from 32% to 78%. These increase in psychosocial problems were associated with increase in the proportions of single-parent families, parents get divorced, mothers employment and parent child relationship.<sup>8</sup>

At least 3% of school children suffer from serious emotional disturbances, such as depression, suicidal thoughts, psychosis and serious attention problems. Attention deficits and hyperactivity is the most common behavioral disorder of childhood. The prevalence of attention deficits and hyperactivity among pediatric out patients in New Delhi was 11.2%.



Sarkar, Kapur and Kaliaperumal (India) reported a prevalence rate of psychological disturbance of 10-54% in school going children of the age of group 6-12 years. In the present study, a higher prevalence of behavioral problems (33.7%) was observed in adolescent girls as compared to boys (27.5%). Also, whereas prevalence in boys shows a peak around 14-15 years followed by a steady decline to 26.3% by 18-19 years of age, girls show a continuous rise in behavioral problems with age, 43% girls having problems by 18-19 years. On analysis of pattern of emotional and behavioral problems in adolescents, it was found that internalizing syndrome (28.6%) was the most common problem amongst them followed by the neither internalizing nor externalizing (19.5%) group. In internalizing group, most (22.08%) of the students were noted to be anxious/ depressed. Social problem was observed to be the most frequent (9.3%) among neither internalizing nor externalizing group. Aggressive behavior was the commonest (11.8%) among externalizing group. Internalizing problems mainly anxiety and depression were commoner in females than males. 24.8% females were anxious / depressed compared to 19.7% males. More boys (18.4%) than girls (12%) were found to suffer from externalizing disorders. 13.3% males had aggressive behavioral problem as compared to 9.7 % females.

The emotional and behavioral problems found to be in 44% of the children. Anxiety related symptoms 67%, emotional problems, particularly depression 62% and conduct problems 49% were found. A big group of the population in any city/country is that of students and the life of students is becoming more and more stressful. Family is the nuclear of all social groups because of its functional importance of the child. It is where healthy habits are learnt by the child. According to Tyrer and Tyrer (1974) absenteeism in the later years of schooling is predictive of depression in adult hood.<sup>9</sup>

There is a growing recognition that schools may play a significant role in producing psychopathology, especially due to the formative influences of school as normal as well as pathological development. It therefore become imperative to view the school's system from the perspectives of primary, secondary and tertiary prevention with reference to the child's mental health.<sup>10</sup>



Teachers have an immense impact on young children's mental health. They enjoy a very important position in the formation of healthy mind in then as reported by UNESCO. There are almost 43 million teachers around the world at the primary and secondary levels. The size alone of the teacher population is of public health significance.<sup>11</sup>

It is in this context the importance of a teacher becomes vital in safeguarding the mental health of children. This is especially true in the case of Indian situation where there is considerable shortage of mental health facilities for children. Teacher's perception is essential in planning and implementing like skill education, mental health education, psycho social intervention and professional referral when necessary.<sup>12</sup>

Teachers have been utilized for school health programs in health status assessment and health education. Since there is considerable shortage at mental health professionals, schools teachers can make important contributions in the promotion of mental health of children. The opportunity that teachers have for interpersonal relationship greatly contribute to the mental health of children.<sup>13</sup>

### **Review of behavioral problems:**

- I. Literature related to behavioral problems
- II. Literature related to teachers knowledge about behavioral problems
- III. Literature related to effectiveness of teaching programme.

### **Literature related to behavioral problems:**

**Mohammad Gasim, Ahmed Ragaa**, et al. conducted a Study in Saudi to assess cognitive functions in children who were reported by their teachers and parents to exhibit learning and/or behavioral problems, especially in the field of attention. In connection with the scheduled school health examination in grade 4 in one municipality, 591 children were screened through questionnaires and interviews with the parents and teachers. Those with positive rating scores were subjected to further cognitive assessments, including the WISC III. A cluster analysis based on cognitive data was



performed. The result was about one third (175 children) of the population obtained a positive rating score, indicating significant behavioral and/or learning problems. Of these, 144 children were assessed. Cluster analysis revealed six clusters. Within these clusters, two large groups were identified: one group displayed generally low cognitive abilities and one group was dominated by attention deficit symptoms. It was found a surprisingly high number of positive rating scores in the cohort (30%). This could be explained, on the one hand, by known developmental disorders, such as mental retardation and learning disabilities, ADHD (Attention Deficit Hyperactivity Disorder) and pervasive developmental disorders, and, on the other hand, by prevalent milder cognitive dysfunctions that, in combination with inappropriate demands, seemed to lead to overt behavioral problems.<sup>16</sup>

**Aman Sobhy Sorour, et al.** conducted a cross sectional study in Saudi Arabia, to determine emotional and behavioral problem among school going children aged 5 to 11 years. The investigator took 1488 samples (700 parents of private school and 788 parents of community school children). Strength and Difficulties Questionnaire was filled out by parents and school teachers for the same children. Demographic data of parents, teachers and children were also collected using a separate Performa. Result was a total of 675 parents agreed to participate in the study. The response rate was 45.3%. Assessment of children's mental health was conducted using Strength and Difficulties Questionnaire (SDQ). Parents rated 34.4% of children as falling under the "abnormal category on SDQ, slightly higher estimates 35.8% were reported by the teacher.<sup>17</sup>

**Garg Sandeep, Pandya Arpan, Ravindra** conducted a study to examine the prevalence of features of attention deficit Hyperactivity disorder in a special school. The study also explores the reliability of the conners' teachers rating scale in this population in department of child guidance clinic. A simple size of 84 children between the age of 5 and 18 years were selected. The study resulted in a conclusion that attention deficit hyper activity disorder may be under diagnosed in children with in attention disorder. The conners' teachers rating scale was found to be internally reliable and had a normal distribution with our results. Overall 55.9% of participants had markedly elevated the scores for at least one of the target subscales, which were the 'Hyperactivity', in attention and the "ADHD Index" subscales of the conners teachers rating scales.<sup>18</sup>



**Gupta Indira** conducted a study was on 957 school children using Rutter B scale which was to be completed by the class teachers in Bangalore. One hundred and forty one children (14.6%) scored more than 9 points and were included in the second part of the study. Based on the instrument results and parental interview 45.6% of the children were estimated to have behavioral problems, of which 36.5% had significant problem. Only 117 and 124 children turned up and were included in the analysis. Based on the screening instrument results and parental interview, 45.6% of the children were estimated to have behavioral problems, of which 36.5% had significant problems. It was noticed that neither the screening instrument nor the interview was able to detect all the problems. Scholastic under- achievement was found to be associated with maximum problems. Scholastic under-achievement can be a useful starting point of identifying children with behavioral problems. Close cooperative between school teachers, parents, and health care providers is essential to ensure healthy development of children.<sup>19</sup>

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**EU Syed, SA Hussein, SE Haider** conducted a study on Emotional and Behavioral Problems of Primary School Children With and Without Learning Disabilities. The aim of this study was to investigate the behavioral and emotional problems of children with and without learning disabilities. The study sample consisted of 15 teachers and 424 primary school children with and without learning disabilities were selected from two governmental primary schools at Benisuef City, using case –control research design. Data were collected by the teachers using the Strengths and Difficulties Questionnaire (SDQ) for children and adolescents aged 4-16



years. The results conducted that the prevalence of total difficulties scores among primary school children with learning disabilities was 98.1% abnormal difficulties compared to 79.7% of normal children. Results also found that statistical significant differences were found between children with and without learning disability in all sub domains of emotional and behavioral disorders. This study documents that the high prevalence of difficulties among primary school children is an alarming condition that needs attention and early intervention. The study recommended that a periodic screening test should be provided for early detection of emotional and behavioral problems for children with learning disabilities.<sup>20</sup>

**Buckely S, et Al.** conducted a longitudinal study on prevalence of behavioral and emotional problems among six-years-old preschool going children. The sample consisted of 1887 preschool children who started primary level education within 6 months upon data collection. The sample represented the complete 1-year intake of all first year primary school children in a northern German town of 254,000 residents. The data were collected with standardized parent questionnaires. They found that the 6 months prevalence of behavioral and emotional symptoms was 12.4%. They concluded that level of psychopathology in preschool going children was already as high levels seen elsewhere in school going children.<sup>21</sup>

**Furniss T, Beyer T, Guggemons J.** conducted a study to determine prospectively the duration of non-nutritive sucking behaviors of children between 1 and 8 years of age and the effect of persistent habits on selected occlusal characteristics in the late deciduous dentition in college of Dentistry. A sample size of 797 children was selected by observation method. The study resulted in a conclusion that to intercept the development of cross bites and functional shifts, the developing occlusion should be observed in the deciduous dentition in children with prolonged digit or pacifier habits.<sup>22</sup>

**Sailaxmi B.** conducted an epidemiological study to find the prevalence psychiatric disorders, among children in urban and rural areas of Bangalore, India, with the background of the study that there are limited data on child mental health needs in our country. The results indicated a prevalence rate of 12.5% among school going children aged 0-16 year. The psychiatric morbidity among 0-3 year old children was 13.8% with the most common diagnosis





being breath holding spells, pica, behavior disorder, expressive language disorder and mental retardation. The prevalence rate in the 4-16 year old children was 12.0%. Enuresis, specific phobia, hyper kinetic disorders suffering and oppositional defiant disorder were the most frequent diagnosis. Assessment of felt treatment needs indicated that only 37.5% of the families perceived that their children had any problem. Physical abuse and parental mental disorder were significantly associated with psychiatric disorders.<sup>23</sup>

**Holmberg, L-De Geer, C Sward conducted a Study** in Srilanka to assess the rates and distribution of behavioral problems in a sample of school-aged children in Sri Lanka and to identify the factors, including cultural, religious, economic, academic and familial influences, which are associated with emotional and behavioral problems. This exploratory study of behavioral adjustment in Sri Lankan children has produced results generally consistent with other international literature. The presence of behavioral disorders in the Sri Lankan sample was associated with the male gender, low socioeconomic background and lower academic performance. Unique to this study were the interactions between the Tamil ethnic group, Hindu religion and the significantly higher level of reported behavioral problems compared with other ethnic groups, suggesting possible influences of the long-running 'ethnic crisis' in Sri Lanka and the desirability of further exploration of this phenomenon.<sup>24</sup>

**Sailaxmi B** conducted a study in Delhi, to assess the cognitive function in children with Attention-deficit disorder. The investigator took 30 children, out of that 15 are affected with attention deficit and remains are normal and administered varies performance test. A significant difference was obtained between the two groups in terms of behavioral manifestations of in Attention, hyperactivity and impulsivity. The children with attention deficit problem have many problems. The t- value calculated was 6.1, 4.29, and 3.59 respectively.<sup>23</sup>

**Holmberg L, et al.** conducted a Study in Ireland to assess cognitive functions in children who were reported by their teachers and parents to exhibit learning and/or behavioral problems, especially in the field of attention. In connection with the scheduled school health examination in grade 4 in one municipality, 591 children were screened through questionnaires and interviews with the parents and teachers. Those with positive rating scores were subjected to further cognitive assessments, including the WISC III. A cluster analysis based on cognitive data was performed. The result was about



one third (175 children) of the population obtained a positive rating score, indicating significant behavioral and/or learning problems. Of these, 144 children were assessed. Cluster analysis revealed six clusters. Within these clusters, two large groups were identified: one group displayed generally low cognitive abilities and one group was dominated by attention deficit symptoms. It was found a surprisingly high number of positive rating scores in the cohort (30%). This could be explained, on the one hand, by known developmental disorders, such as mental retardation and learning disabilities, ADHD (Attention Deficit Hyperactivity Disorder) and pervasive developmental disorders, and, on the other hand, by prevalent milder cognitive dysfunctions that, in combination with inappropriate demands, seemed to lead to overt behavioral problems.<sup>24</sup>

**Mohammad Gasim, Ahmed Ragaa, et al.** done a study on prevalence and risk factors of Mental Health problems among school children in United Arab Emirates to examine child psychiatric morbidity in an Arab culture. The investigator examined 3,278 school children aged 6 to 15 years using a two-stage epidemiological study in Al Ain District, United Arab Emirates. Children were screened using standardized questionnaires completed by parents and school physicians in the first stage, and a stratified random sample were interviewed by a child psychiatrist in the second stage. Result showed 23.9% of children were reported to have a mental health problem by either the parent or the school health physician. Boys were more often reported to be having problems than girls (1.8:1).<sup>25</sup>

**Sorour Sobhy Amany, et al.** conducted a study on Chinese primary school children to determine levels of behavior problem and to explore key determinants relevant to the Chinese context. The investigator examined 2,203 child-parent pairs and administered a child self-completion questionnaire to children aged 7-13 and Rutter Parent Scales to their parents in nine primary schools. Result showed that 13.2% of the children (16.4% of boys, 9.4% of girls) had a behavior problem. Girls manifest more emotional problems (5.3 vs. 2.3%) and boys more conduct problems.<sup>18</sup>

**Buckely S, et al.** conducted a study to examine the prevalence of features of attention deficit Hyperactivity disorder in a special school. The study also explores the reliability of the conners' teachers rating scale in this population in department of child guidance clinic. A simple size of 84 children between the age of 5 and 18 years were selected. The study resulted in a conclusion



that attention deficit hyper activity disorder may be under diagnosed in children with in attention disorder. The conners' teachers rating scale was found to be internally reliable and had a normal distribution with our results. Overall 55.9% of participants had markedly elevated the scores for at least one of the target subscales, which were the 'Hyperactivity', in attention and the "ADHD Index" subscales of the conners teachers rating scales.<sup>21</sup>

**Giovaninni S, et al.** conducted a Study in Sweden to assess cognitive functions in children who were reported by their teachers and parents to exhibit learning and/or behavioral problems, especially in the field of attention. In connection with then scheduled school health examination in grade 4 in one municipality, 591 children were screened through questionnaires and interviews with the parents and teachers. Those with positive rating scores were subjected to further cognitive assessments, including the WISC III. A cluster analysis based on cognitive data was performed. The result was about one third (175 children) of the population obtained a positive rating score, indicating significant behavioral and/or learning problems. Of these, 144 children were assessed. Cluster analysis revealed six clusters. Within these clusters, two large groups were identified: one group displayed generally low cognitive abilities and one group was dominated by attention deficit symptoms. It was found a surprisingly high number of positive rating scores in the cohort (30%). This could be explained, on the one hand, by known developmental disorders, such as mental retardation and learning disabilities, ADHD (Attention Deficit Hyperactivity Disorder) and pervasive developmental disorders, and, on the other hand, by prevalent milder cognitive dysfunctions that, in combination with inappropriate demands, seemed to lead to overt behavioral problems.<sup>26</sup>

### **Literature related to teachers knowledge about behavioral problems**

**Sandeep Garg, et al.** conducted a study on Effectiveness of Structured Teaching Programme on Selected Common Behavioral Problems of Children in selected schools at Vadodara. The result show them that in pretest, primary school teachers were having on average 49.40% knowledge regarding selected common behavioral problems of children and mean score was  $14.82 \pm 3.372$  and in posttest, average 75.83% knowledge regarding selected common behavioral problems of children and mean score was  $22.75 \pm 2.802$ . T calculated value is 33.233 which are more than the tabulated value of 2.00 at 0.05 level of significance.<sup>18</sup>



**Mohammad Gasim Ahmed Raga, et al.** conducted a study to assess the knowledge regarding behavioral problems of school children among mothers at Patteswaram rural community in Thanjavur District. A cross-sectional descriptive design was adopted for the study. 100 mothers were selected by using purposive sampling technique. All participants were given a questionnaire on behavioral problems administered 10 minutes to complete. The findings revealed that knowledge of mother shows that 61% of the mother had inadequate knowledge 37% of mothers had moderately, 2% of mother had adequate knowledge on behavioral problem. In conclusion mothers are having very poor knowledge regarding behavioral problems. The study findings reveals significance of behavioral deviation of a need to educate parent's on behavioral of children.<sup>25</sup>

**Giovannini S, et al.** conducted a study on parent-and-teacher-reported behavior problems of first graders. Parent's information about behavior, problems and life situation of children before and after first year of school were analyzed and compared with data from teacher reports. The results of the study contribute to the question how children deal and cope with the new situation coming to school. The findings of a high rate of attention problems at school and the close relationship between behavior problems and achievement lead to the conclusion that an early prevention of behavior problems is essential to promote school performance.<sup>26</sup>

**Hinshaw SP** conducted a study in Singapore to assess preschool teacher's knowledge, attitudes and practice on childhood developmental and behavioral disorders. This study sample was 503 pre-school teachers and they were selected randomly. The study results showed that teachers had less knowledge regarding behavioral disorders mainly attention deficit (45%) with median block-scores of (56%) respectively.<sup>27</sup>

**Theodra Papatheodorou, et al** conducted a study was undertaken in Greece by to investigate teachers' perceptions of children's behavior problems in nursery classes in Greece. A questionnaire developed in an earlier study was applied to a female teacher sample of 154, selected from nursery schools in cities, small towns and rural areas in three distinct geographic locations in Greece. The total sample of pupils in the study was 3.091 (boys N:1.568, girls



N:1.523) The overall prevalence rate identified by teachers for all behavior problems was 14.3 percent, with 2.1 percent perceived as 'very serious' and 5.8 percent 'serious' and 'very serious'. More boys than girls were perceived to have behavior problems in general (ratio 2:1) and conduct problems in particular.<sup>28</sup>

**Amy Handy, et al** conducted a study of two teachers working in one specialized setting explored their respective understandings of their practice with two young children in Queensland. A series of four interviews examined the history of their practice (past, current, emerging, and prospective). Differences in the practices of these teachers provide a basis for some tentative recommendation. This exploratory study demonstrated that teachers working intensively with students with Evidence Based Practice are drawing casually on recommended practice. A larger sampling of teacher practice in the Evidence Based Practice area is needed to further understand current practice so that guidelines for teachers in the field can be formulated and so that universities can establish appropriate training programs. As Evidence Based Practice is relevant to all mainstream teachers, there is a need for mainstream teachers to participate in training about Evidence Based Practice.<sup>29</sup>

### **Literature related to effectiveness of teaching programme.**

**Sailaxmi B** conducted a study in Salem to evaluate the effectiveness of planned teaching programme on knowledge of school teachers regarding management of hyperactive students. The sample selected for the study was cohort group of 40 teachers, teaching from 1st to 7th standard of selected private schools. A structured questionnaire with 40 items to assess the knowledge was prepared and pre-test was conducted on 1st day, after obtaining the written permission. Planned teaching programme in the same day after pre-test and the post-test was conducted on 9th day. The study result revealed mean difference between pre-test (14.6) and post-test score (30.5) and the difference was significant ( $t=16.03$ ,  $p<0.01$ ).<sup>23</sup>

**Bhanwara Priyesh** conducted a study on knowledge among teachers related to behavioral problem in school children in India. The study was conducted in selected schools of Pune city. In the present study the sample comprised of 60 people. A structured questionnaire knowledge regarding behavioral problem was prepared to study the sample. Descriptive and inferential statistics had been used to analyze the data obtained through interviews. The result show the



knowledge majority (93.34%) of the school teachers in pre-test of the experimental had an average knowledge score whereas in post-test a majority 75% of the school teachers had a good knowledge score. This study indicates that the planned teaching is effective in increasing the knowledge of teachers regarding behavioral problem.<sup>30</sup>

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