

Attention Deficit Hyperactivity Disorder Symptoms Exhibiting in Primary and Upper Primary School Children

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Abstract: Attention deficit hyperactivity disorder (ADHD) is characterized by poor ability to attend to tasks by making careless mistakes and avoids sustained mental effort, motor over activity (eg, fidgets, has difficulty playing quietly) and impulsiveness (eg, blurts out answers, interrupts others) hurt a child's capacity to work socially, scholastically, and at home, keeping up relations and may likewise experience the ill effects of low confidence, indiscreet conduct, aggravated connections. To study the behavioural pattern among school children from primary and upper primary grade from different Government, Pvt aided and Pvt unaided schools exhibiting attention deficit hyperactivity disorder symptoms. This study was conducted in 10 primary/upper primary schools of Dharwad city which includes different Schools like Government/Private aided/unaided/ for students from 1st to 7th std both in Kannada and English medium Schools with a sample size of 140. Each subject was rated by teacher using Conner's Teacher rating scale revised (L). The results of the above table clearly shows that, a significant difference was observed in children with respect to hyperactivity scores ($F=4.5582$, $p<0.05$) and psychological problem ($F=9.2622$, $p<0.05$) at 5% level of significance. It means that, the children belonging to grade 01 and 02 have significant higher hyperactivity and psychological problem scores as compared to other grade children. But rests of the other variable on behavioral changes in different grades are similar ($p>0.05$). Problem behaviours in children are a serious challenge for parents, teacher's community and if not taken seriously a child may feel rejected leads to further disinterest in school and even greater underachievement and failure. Hence it is necessary to view the presenting symptoms of difficult behaviour in the context of a developmental framework to prevent further problems so that by intervening early problems can be assessed and treated.

Keywords: School Children, Behavioural problems, ADHD symptoms

1. INTRODUCTION

Schools play an important role in shaping each student to his individual to reach to maximum academic potential and is dedicated to helping children become expert problem solvers and solution-seekers and skills which suits the personal and professional aspect of a child's adult life. In addition to an academic skill it teaches problem solving which is an essential life skill the ability to analyze a situation, propose a solution and if not works be able to re-strategize to try again they also help children to learn to interact positively with their peers and teachers. By building healthy relationship skills and develop them further through interactions.

The child's problems are often multi-factorial and the way in they are communicated might be affected by a scope of variables including formative stage, disposition, adapting capacities of family and the nature and term of stress. Behaviour problems vary enormously such as Tantrums Inappropriate language or jokes, poor hygiene, Fighting, Underachievement at school, Inability to concentrate, Lying, Stealing, sleeping too much or too little frequent, Learning problem, Destructive behaviour, Delinquent behaviour, Underachievement, Difficulty concentrating, Inability to cope with everyday problems, not attending school for a variety of reasons, staying away from school, School refusal, non-attendance, Poor peer relationships etc. Thus the present article stresses on Children exhibiting ADHD symptoms in primary and upper primary classes.

Attention deficit hyperactivity disorder is characterized by poor ability to attend to tasks (eg, makes careless mistakes, avoids sustained mental effort), motor over activity (eg, fidgets, has difficulty playing quietly) and impulsiveness (eg, blurts out answers, interrupts others. For the analysis to be made, the condition must be obvious before the age of 7, display for >6 months, seen both at home and school and blocking the Childs working. They may understand what's expected of them but have trouble following through because they can't sit still, pay attention, or

focus on details of course, They are probably going to be pondering numerous components rather than one specific component act without considering and are hyperactive, and experience difficulty concentrating.

It hurts a Childs capacity to work socially, scholastically, and at home and come in conflict with relations emerging out of telling falsehoods, taking, obstinacy and requesting conduct may likewise experience the ill effects of low confidence, hasty conduct, aggravated connections and poor scholastic execution in school. He acts like a child younger than himself. He is the opposite of one who sits patiently in the corner painstakingly solving a puzzle and tolerating no interruptions and as nursery school student rushes quickly from activity to activity, and then seems at a loss for things to do.

Attention Deficit Hyperactivity Disorder ranges approximately three to seven percent children are having and often considered disobedient it doesn't mean the individual is bad but the thing is they don't have control over their mental range. The DSM-IV Diagnostic Manual reports that any single form or "type" of Attention Deficit Hyperactivity Disorder could be categorized under the diagnostic chapter of ADHD. This central list is then broken into ADHD Impulsive-Hyperactive Type, ADHD Inattentive Type, or ADHD Combined Type. The different styles impact activities in the accompanying four spheres:1) failure to attend.2) troubles in Impulse Control.3) issues with anxiety or hyperactivity 4) a condition which is yet to be announced "authoritatively" in the manuals of finding, however ought to be - that condition is being exhausted rapidly. Likewise, a group of related qualities may incorporate disorder, poor companion/kin relations, forceful conduct, poor self-idea/confidence, sensation-chasing conduct, wandering off in fantasy land, poor coordination, memory issues, relentless fanatical considering, and irregularity, the trademark.

The most basic trait is a lack of focused attention. It is not that children with ADHD do not attend, they attend to everything they are interrupted by stimuli and are easily distracted so they often get off task they are very sensitive emotionally as well as neurologically to their difficulties and failures. These youngsters frequently encounter unforgiving feedback. Self-perceptions are poor and over time these children may become increasingly more doubtful about their ability to cope with academic and social situations They regularly feel helpless, insufficient very discouraged. A large part of their inattentiveness comes from the inability to hold in mind what goal they have chosen or been assigned his reflects a deficiency in working memory which is hard to remember .On some days, he may complete all of his assigned work on others, none. At times he may be cooperative at other times, angry and defiant and most always moody. These disorders affect roughly 3% to 5% of all school-age children range 1-10% Roughly 3.5 million youngsters have ADHD. Most reports indicate a ratio of 3 or 4 boys to each girl affected with sex ratio from 3:1 to 9:1.

2. OBJECTIVE

To study the behavioural problems among school children exhibiting attention deficit hyperactivity disorder symptoms from primary and upper primary grades from different Government, Pvt aided and Pvt unaided schools.

3. HYPOTHESIS

There is no significant difference in behavioural problems with respect to school children exhibiting attention deficit hyperactivity disorder symptoms from primary and upper primary grades from different Government, Pvt aided and Pvt unaided schools.

4. METHODOLOGY

This study was conducted in 10 primary/upper primary schools of Dharwad city Which includes in different Schools from Government/Private, Aided/Unaided/ for students from 1st to 7th std both in Kannada and English medium Schools with a sample size of 140. Each subject was rated by teacher using self constructed questionnaire using Conner's Teacher rating scale revised (L) which covers broad range of behavioural problems related to ADHD. After the data had been collected on different variables related to behavioral aspect, it was processed and tabulated using Microsoft Excel - 2007 Software. Then, the data were analyzed with according to the objectives and hypothesis by inters of ANOVA using SPSS 20.0 statistical software and the results obtained thereby have been interpreted according to the hypothesis.

5. RESULTS

The results of the above table clearly shows that, a significant difference was observed between children exhibiting ADD symptoms with respect to hyperactivity scores ($F=4.5582$, $p<0.05$) and psychological issues ($F=9.2622$, $p<0.05$) at 5% level of significance. It means that, the children belonging to grade 1 and 2 have significant higher hyperactivity and psychological problem scores as compared to other children. But rests of the other variable, on behavioral symptoms from different grades are similar ($p>0.05$).

Results of ANOVA test between children of different grades exhibiting ADHD symptoms

Variables	Summary	Grades							F-value	p-value
		1	2	3	4	5	6	7		
	n	20	20	20	20	20	20	20		
Inattention	Mean	14.85	14.50	14.90	13.45	13.95	13.85	13.50	1.0338	0.4063
	SD	02.39	02.06	02.95	02.61	02.93	03.12	02.50		
Hyperactivity	Mean	08.65	08.35	07.15	06.40	06.85	05.85	06.25	4.5582	0.0003*
	SD	01.87	02.13	01.98	03.07	02.56	01.46	02.17		
Impulsivity	Mean	04.95	04.85	05.05	04.10	04.80	04.65	05.15	1.6124	0.1484
	SD	00.94	00.99	01.05	01.17	01.24	01.69	01.31		
Psychological issues	Mean	13.80	14.35	012.80	11.15	10.55	10.15	10.85	9.2622	0.0001*
	SD	01.88	02.80	03.58	02.21	02.52	01.57	02.21		
Peer issues	Mean	02.50	02.65	02.80	02.85	03.25	03.15	02.70	0.9417	0.4676
	SD	01.10	01.27	01.15	01.27	01.07	01.42	01.38		
Personality problem	Mean	15.70	15.40	14.90	14.60	15.00	14.30	14.40	0.5244	0.7890
	SD	02.79	03.97	02.99	02.19	02.90	03.36	03.78		
Academic issues	Mean	16.15	17.40	17.80	17.35	16.90	17.85	18.45	1.4471	0.2014
	SD	01.95	02.70	02.67	03.98	02.34	02.37	02.78		

* $p<0.05$

6. DISCUSSIONS

Thus the Present study results when analyzed with previous studies like NIMH (2007). Increasingly, teachers find challenging to address both the academic and behavioral concerns of students, and the prevalence of ADHD has magnified this challenge approximately 3-8% of school-aged children meet the criteria for the disorder placing at least one child with ADHD in every American classroom. India today (2011) It's a problem which is increasing gradually and posing a serious challenge for parent and child are desperate to find solutions for far more Indian children suffer from ADHD than a decade ago. The frequency of this issue, which brings about decreased capacity to focus, hyperactivity in children, has gone up by 11% since 2005 around 8-10% of all of school-going age experience the ill effects of ADHD there's a problem with attributing a proper number because ADHD is one of the most over-diagnosed and under-diagnosed condition as there is lack of awareness and they are branded mischievous or troublesome and punished.

YA Jogsan (2013) They experience difficulty getting along with peers and establishing friendships, as their behavior is aggressive and generally annoying about 15 to 30 percent of children with ADHD have a learning disability in math, reading, or spelling and about half of ADHD children are combined type comprises the majority. These children are more likely to develop conduct problems and oppositional behavior, Anil Shetty, B. Sanjeev Rai (2014) the predominance of Attention hyperactivity issue (ADHD) in kids ranges from 5-10% yet has not got sufficient consideration in nations like India. There are also several misconceptions and stigmas associated with ADHD. Educators could assume a huge part in recognizing and teachers have a lacking learning about ADHD.

Stanley I. Greenspan (2009) these children with ADHD have difficulty with visualizing Planning and sequencing motor actions are yet another problem area for many children.

Stephen P. Hinshaw Katherine Ellison (2016) children with ADHD, scholastic trouble is not kept to a specific subject but rather happens over various areas of study. In such children, weak organizational skills, lack of motivation, poor

behaviour in class, or an inability to get on with teachers or peers may be the cause of their poor grades. In a few children the real issue is poor execution under examination condition.

The results of the above table clearly shows that, a significant difference was observed between teachers opinion on behavioral changes with respect to hyperactivity scores ($F=4.5582$, $P=0.0003$ with mean- 6.25 and Sd as 2.17) and psychological problem ($F=9.2622$, $P=0.0001$ with mean-10.85 and Sd as 2.21) at 5% level of significance. It means that, the children belong to grade 1 and 2 have significant higher hyperactivity and psychological problem scores as compared to other children. But rests of the other variable on behavioural problems such as inattention ($F=1.0338$ $P=0.4063$ with mean -13.50 and Sd as 2.50 and impulsivity ($F=1.6124$, $P=0.1484$ with mean - 5.15 and Sd as 1.31 and peer issues($F=0.9417$ $P=0.4676$ with mean -2.70 and Sd as 1.38 and personality issues ($F=0.5244$ $P=0.7890$ with mean- 14.40 and Sd as 3.78 and academic issues ($F=1.4471$, $P=0.2014$ with mean as 18.45 and Sd as 2.78) are similar ($p>0.05$).from different grade children.

7. CONCLUSION

It's largely seen that there is lack of awareness and training among schools since many of these problems can be tackled by developing skills since a child doesn't have adequate skills by the time they enter school it may result in social rejection by both peers and teachers. This rejection leads to further disinterest in school and even greater underachievement and failure. Problem behaviours in children pose a serious challenge for parents, teachers community thus by intervening early problems can be prevented .Hence there is need to promote awareness and prevention method which responds to the wellbeing of individual students and thus the role of Schools in facilitating the development of a child is a matter of great concern.

REFERENCES

- [1] Anil Shetty, B. Sanjeev Rai (2014) Awareness and Knowledge of Attention Deficit Hyperactivity Disorders Among Primary School Teachers in India, International Journal of Current Research and Review, www.ejmanager.com.
- [2] A Bilbow- paying enough attention? Addiss www.addiss.co.uk/payingenoughattention.
- [3] Common Behavioural Problems in Children. ODD; CD; ADHD [https:// patient.info/ doctor/common-behavioural-problems-in-children](https://patient.info/doctor/common-behavioural-problems-in-children) Information about Common
- [4] Indiatoday(2011).ADHD: Getting back the focus: North News- India Today, indiatoday.intoday.in
- [5] NIMH (2014) Attention Deficit Hyperactivity Disorder www.nimh.nih.gov
- [6] National Council for Special Education (2012) The Education of Students with Challenging Behaviour arising from Severe Emotional Disturbance Behavioural Disorders Council for Special Education, www.ncse.ie N C S E policy Advice papers
- [7] Paul. H. Wender. (2000) Attention Deficit Hyperactivity Disorder In Children, Adolescents, And Adults by oxford university press
- [8] Rosenya Faith(2012) The School's Role in Influencing Child Development - The Kids Tips [https:// mom.me/kids/4978-what-schools-role-influencing-child-development](https://mom.me/kids/4978-what-schools-role-influencing-child-development)
- [9] Russell Barkley, (2016) - Managing ADHD In School The Best Evidence-Based Methods for Teachers by PESI publishing and media
- [10] Stanley I. Greenspan, Jacob (2009) Overcoming ADHD published as a Merloyd Lawrence book by da capo press- 2009-
- [11] Stephen p. Hinshaw Katherine Ellison (2016) ADHD: What Everyone Needs To know Oxford university press
- [12] YA Jogsan-(2013) Emotionl Maturity and Adjustment in ADHD ,omicsonline