CHAPTER VI

CONCLUSIONS AND SUGGESTIONS
This study aims at studying the perceptions of parents and teachers about behaviour problems of primary school children.

The specific objectives of the study are as follows.

1. To study the behavior problems of primary school children as perceived by the teachers and parents.

2. To compare the parents and teachers perception of children's behaviour problems.

3. To study the parents' teachers' perception of the causes of these problems.

4. To study and compare the family environment of these two groups of children (with problems and without problems).

5. To identify the levels of performance of these two groups of children (with problems and without problems) in scholastic and non-scholastic activities.

6. To assess the parents and teachers awareness of the need for professional help and guidance in such problems.

The universe consists of three groups of respondents in Mangalore city.
a) Teachers (N = 100).

b) Parents with children who have behaviour problems. (N = 100).

c) Parents with children who have no behaviour problems. (N = 100).

The sample was drawn from 50 schools out of the total 95 primary schools in Mangalore Corporation. The data was collected from a total of 300 respondents.

The following specific tools were employed to obtain the necessary information.

Tool No 1 : Children's Behaviour Questionnaire (Rutter 1967)

Tool No 2 : Questionnaire for teachers which covered details pertaining to information of the teacher and the school.

Tool No 3 : Questionnaire for teachers which determines the level of scholastic and non scholastic performance of the children.

Tool No 4 : A questionnaire administered for the parents to assess the family environment of the children.
Tool No 5 : A questionnaire to assess the behaviour problem traits among the children.

Tool No 6 : A questionnaire which was administered to all the three groups of respondents (teachers, parents of children with problems and parents of children without problems) with the aim of assessing their awareness regarding mental health services.

Tool No 7 : Case Vignettes: A total of 20 vignettes were given to the all the three groups of respondents. Each vignette was assessed through 7 questions.

The data was coded and computerized using the Statistical Package for Social Sciences (SPSS) and then analysed and conclusions were drawn.

MAJOR FINDINGS :

A. CHILDREN'S PROFILE:

1. Age and Religion :

Most of the children from both the groups belong to the age group of 8-11 years. Among the children with problems there are some children of 12 - 13 years. Among children with behaviour problems, boys exceed girls in 2:1 proportion.
Though a majority of the children are Hindus, there are more Muslim children in the group of children with problems.

2. The Overall Scholastic and Non Scholastic Performance:

The overall score for scholastic performance of children without problems is much higher than that of children with problems. This shows that there is a relationship between academic performance and behavior problems. It is also seen that children with problems do not take part in sports, dramatics and other extra-curricular activities as compared to the other group (CWP).

3. Behaviour traits in children:

Children with problems show a greater number of negative behavior traits than children without problems as made obvious by the mean score of 10.74 for children with problems as compared to 1.90 for children without problems.

B. INFORMATION ON FAMILY ENVIRONMENT OF THE CHILDREN WITH PROBLEMS AND CHILDREN WITHOUT PROBLEMS.

The mean score of the total family environment of the families of children without problems is 72.77 as compared to the mean score of 49.19 of children with problems highlighting that generally the family life
style of CWP is more conducive to a positive growth with more appropriate forms of reinforcement and disciplining patterns. It also signifies that the family environment of CWP is also more conducive for learning with better communication and support systems.

C. INFORMATION OF TEACHERS' CONTACT WITH SOCIAL WORKERS:

Eighty four out of 100 teachers have not had any contact with social workers or counsellors which has implications for further development of school social work.

D. PARENT - TEACHER PERCEPTION OF THE CAUSES OF BEHAVIOUR PROBLEMS:

1) A majority of the respondents of all the three groups feel that environment is one of the cause for behaviour problems (86 percent of teachers, 100 percent of parents of children with problems and 94 percent of parents of children without problems). These findings show that a majority of the respondents are aware of the importance of the environment as a precipitating factor for behaviour problems. At the same time seventy six percent of teachers, 95 percent of parents of children with problems and 80 percent of parents of children without problems feel that psychological reasons do cause behaviour problems.

2) A majority of parents of children with problems (80 percent) have
specified that physical causes such as fever, do not cause behaviour problems. Seventy one parents of children without behaviour problems also feel that physical reasons do not cause behaviour problems. But the teachers opinions on this topic are a little different as only 54 percent teachers feel that physical reasons do not cause behaviour problems thus showing that the teachers' level of understanding of behaviour problems is lower than the other two groups. Many people believe in religious/occult power and attribute behaviour problems or mental health problems to black magic, curses or other evil forces.

3) This is evident among the teachers where 70 percent believe that occult forces are important as compared to only 26 percent of parents of children with problems and 19 percent of parents of children without problems who concur with this view which again reflects on the lack of rational and scientific thinking among teachers.

E. KNOWLEDGE OF PSYCHOLOGICAL CLINICS/CENTRES AND MENTAL HEALTH PROFESSIONALS:

Forty five percent teachers and 41 percent of parents of children with problems know about psychological clinics/counselling centres which shows their awareness in this area, as compared to only 22 percent parents of children without problems who have knowledge of this area. Surprisingly the knowledge about mental health professionals among all the three groups of respondents is comparatively high as seventy five
percent of teachers, 79 percent parents of children with problems and 90 percent of parents of children without problems are aware of this aspect.

F. AWARENESS OF SCHOOL SOCIAL WORK:

School social work is currently gaining a lot of importance. But the findings show that the majority of all the respondents in the three groups (78 percent of teachers, 76 percent of parents of children with problems and 88 percent of parents of children without problems) are totally unaware of it. This lack of awareness reflects that school social work is either not very prevalent or lacks publicity in Mangalore. Only seventeen percent of teachers, 24 percent of parents of children with problems and 9 percent of parents of children without problems knew about the personnel involved in school social work. The findings on activities of school social work are a little better known than other aspects as the responses of 39 percent of teachers, 36 percent of parents of children with problems and 61 percent parents of children without problems show that they have a knowledge of school social work activities which is contradictory to the previous findings.

G. ABILITY TO DETECT THE BEHAVIOUR PROBLEMS:

To be able to detect the behaviour problems, knowledge about them is necessary. The findings show that 52 percent of teachers, 8 percent of parents of children with problems and 10 percent of parents of children
without problems feel they are capable of detecting of behaviour problems.

H. GENERAL AWARENESS OF BEHAVIOUR PROBLEMS:

The general awareness among the three groups regarding behaviour problems is somewhat on the same level, teachers scoring highest with a mean score of 11.70, parents of children with problems and parents of children without problems scoring 11.02 and 10.70 respectively.

Awareness of behaviour problems is higher among private school teachers and parents in general having a mean score of 13.5667 and at the same time the findings also show that teachers and parents of children in unisex schools, exclusively for boys or girls have a better awareness of child mental health problems and services (13.50 and 13.00 respectively) than parents and teachers of co-ed schools (10.50). Christian respondents show a higher level of awareness of behaviour problems with a mean score of 13.40 whereas Muslims fall much behind with a score of 9.11. The influence of education can be seen by the mean score of general awareness increasing as the level of education increases, with the score of 14.8696 for parents and teachers who have finished their post graduation whereby it is clearly evident that education does enhance one's knowledge and this can be due to formal and nonformal education. The higher the education, the better the occupation and higher the income. Similarly the knowledge of behaviour problems is higher among the respondents with higher incomes.
Parents of children with problems are better off in their awareness of behaviour problems than the other groups due to their personal experience. The findings prove this as the mean score of parents of children with problems is 11.02 which is higher than parents of children without problems (10.70).

I. AWARENESS OF PROFESSIONAL HELP:

Parents of children with problems have a better awareness of professional help (mean score 68.65) than parents of children without problems (mean score 65.72) whereas the teachers have a mean score of 67.79.

J. VIGNETTES SCORE:

Parents of children with problems score a higher mean score (164.35) than the teachers (162.91) and parents of children without problems (155.85) in the total vignette score showing a higher level of awareness of behaviour problems. Teachers have scored the highest in recognising conduct disorders and emotional disorders. Behaviours attributed to these disorders are all overt and disturb class room activities and thus catch the attention of the teachers. Parents of children with problems have a better understanding of behaviour disorders and epilepsy.

Some of the vignettes depicted normal behaviour where parents of children without problems have scored higher indicating that they are
capable of detecting and recognising normal behaviour patterns among children.

There is a positive correlation between the educational level of the teachers and their total vignette score showing that higher the education, the better the knowledge of behaviour problems depicted in the vignettes.

Among parents the educational level is positively correlated with three aspects ie, General awareness, total vignettes score and family environment which indicates the higher the education of parents, the better is the general awareness of behaviour problems. Similarly the higher the education the better the family environment indicating the importance of education in promoting better knowledge regarding behaviour problems.

The same trend can be seen when income is correlated with general awareness, total vignettes score and family environment. The income usually goes higher when the education is higher and as seen in previous para it is bound to positively effect the general awareness level, total vignettes score and family environment.

Total score of vignettes depicting emotional disorders, normal behaviour and epilepsy and specific learning disorders are the variables which collectively explain 75 percent of variance of teachers' awareness of professional help, whereas it is the score of vignettes depicting conduct disorders, psychosis and emotional disorders, normal behaviour along with
income and educational level which collectively explain 90 percent of variance of parents awareness of professional help.

These are in brief the major findings of the study which depict parents and teachers' perception of behaviour problems among primary school children.

LIMITATIONS OF THE STUDY:

There have been certain limitations faced by the researcher.

The study has not studied variations and differences in the teachers' training. The researcher had to depend entirely on parents' answers about their families which could not be confirmed through other sources or through observation. Some of parents were hesitant to specify any problems of their children for fear of social stigma.

SUGGESTIONS FOR FURTHER RESEARCH:

1. Similar studies can be replicated in other big cities/small towns and villages in India. Besides throwing light on differences in perceptions of child mental health problems and awareness of mental health services in different places, they could reveal the reasons for these variations.

2. A study can be planned to focus on the services provided by social workers in schools specially in cities like Bombay and Delhi.
3. The existing field work programmes in school social work can be studied in our country for an understanding of present status of field work, to suggest measures for improvement of the same.

4. School Mental Health projects could be undertaken and evaluated.

5. Research on innovative programmes could be planned and implemented in rural schools to improve the scholastic performance and self esteem of the students.

6. Programmes for family life education and personality development need to be planned, implemented, monitored in schools and colleges.

7. It is important to identify the essentials of mental health and incorporate them in teacher training programme at TCH., B Ed., and M Ed., levels. In the early stages of such programmes research inputs are required.

8. It is worth focusing on mental health aspects of pre-school children in urban and rural areas (Kindergarten and Anganawadi centres).

9. Parents and teachers being the most important persons in the world of children, it is essential to help them understand their own mental health status and the mental health status of children. Thus various programmes have to be planned for parents and teachers in schools, communities and Mahila Mandals.

The overall health and well being of children requires attention from
parents, educatores and mental health professionals. Most children and adolescents will have emotional and behavioural disorders at sometime in their young lives regardless of their creed or socio-economic status. It is the families and schools which are the strongest institutions in the life of a child, and parents and teachers are the significant people who can alleviate the stress in a child's life, deal with psycho-social problems encountered by children, and enhance the mental health.

General awareness about behaviour problems needs to be given through the mass media, so that people having a better perception of them are led to take timely professional help for children who need it. This would ensure a better quality of life for children and contribute towards a healthy society.