

## A descriptive study to assess the knowledge and attitude of primary school teachers regarding learning disabilities among children in selected schools of district Pulwama Kashmir

Syed Arifa<sup>1,\*</sup>, Syed Shahid Siraj<sup>2</sup>

<sup>1,2</sup>Tutor, <sup>1</sup>Bibi Halima college of Nursing and Medical Technology Kaka sarai, Karan-Nagar, <sup>2</sup>Islamic university of science and technology, Srinagar, Jammu and Kashmir, India

**\*corresponding Author: Syed Arifa**

Email: andrabi927@gmail.com

---

### Abstract

**Introduction:** In India, around 13-14% of all school children suffer from learning disorders. Unfortunately, most schools fail to lend a sympathetic ear to their problems. As a result, these children are branded as failures. The study was conducted with the aim to identify and analyse the knowledge and attitude of primary school teachers regarding learning disabilities among children in selected schools of district Pulwama Kashmir. Identifying the knowledge and attitude of school teachers will help to assess degree of awareness about learning disability among primary school teachers and the attitude they show towards learning disabled children so that recommendation can be made to arrange a special training programme to educate the teachers regarding identification and management of learning disabilities.

**Materials and Methods:** Quantitative descriptive design was used to assess the knowledge and attitude of primary school teachers regarding learning disabilities among children in selected schools of district Pulwama. Convenient sampling technique was used to collect data from teachers who fulfilled the inclusion criteria. Data was collected using self-administered Structured knowledge questionnaire and Attitude scale. The tool was validated by 11 experts. Reliability of the tool was established by using Karl Pearson's correlation coefficient ("r" = 0.83). Pilot study was conducted on 6 teachers in government boys primary school, Poochal Pulwama. The main study was conducted on 60 primary school teachers from 8 selected schools at district Pulwama from 16-11-15 to 05-12-15. Ethical clearance was obtained and study was found ethically exempted. Data was analyzed using descriptive and inferential statistics.

**Results:** The result of the study revealed that majority of teachers 73.3% had moderate knowledge on learning disability, 20.0% had inadequate knowledge regarding learning disability and only 6.7% teachers had adequate knowledge on the subject. Also, majority of the teachers 93.3% had Most favorable attitude towards children with learning Disability. Only 6.7% teachers showed Favorable attitude and none (0%) had Unfavorable attitude level towards the children with learning disability. It was also found that there was significant correlation between knowledge of teachers regarding learning disability and their attitude towards such children.

Further, no significant association found between selected demographic variables i.e. Age, Sex, Marital Status, Educational Qualification, Years of Experience of study subjects with their Knowledge scores, however Marital status and Age of teachers and their attitude towards learning disability was found to be significantly associated. Other demographic variables had no significant association with attitude of teachers towards learning disability.

**Conclusion:** The findings of the study concluded majority of the primary school teachers had moderate knowledge on learning disability and most of the teachers possessed Most favourable attitude towards children with learning disability.

**Keywords:** Knowledge, Attitude, Teachers, Learning disability, School.

---

### Introduction

Teaching-learning process is as old as human being. If the teaching-learning process is effective, the learner is able to make the best use of the things in the world around him. So the acquisition of knowledge, skills, and attitudes which enable us to adjust ourselves in effective manner to the environment may be said to be the aim of teaching and learning.<sup>1</sup>

Learning is essential to replenish knowledge. In the light of knowledge explosion it is assumed that a student gains one fourth knowledge directly from the teacher, another one fourth through his own effort, next one fourth from experiences and the remaining one fourth will remain unfilled not only during the student period but also throughout the life. A good teacher is always aware about this designated role of student and prepare them to take up their responsibilities in an order to ensure fruitful learning. Knowledge regarding some facts or truths about learning will help the teacher to prepare the students to handle their responsibilities in an admirable way.<sup>2</sup>

Learning disabilities, or learning disorders, are an umbrella term for a wide variety of learning problems. A learning disability is not a problem with intelligence or motivation. Kids with learning disabilities aren't lazy or dumb. In fact, most are just as smart as everyone else. Their brains are simply wired differently. This difference affects how they receive and process information. Simply put, children and adults with learning disabilities see, hear, and understand things differently. This can lead to trouble with learning new information and skills, and putting them to use. The most common types of learning disabilities involve problems with reading, writing, math, reasoning, listening, and speaking.<sup>3</sup>

The term 'learning disability' came to use in the 1960s<sup>4</sup>. National Joint Committee on Learning Disorder defines learning disorder as "a heterogeneous group of disorder manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning or mathematical abilities".<sup>5</sup>

Learning disability (LD) sometimes called a learning difference, learning disorder, or learning difficulty is a classification including several disorders in which a person has difficulty learning in a typical manner. Learning disabilities arise from neurological differences in brain structure and function and affect a person's ability to receive, store, process, retrieve or communicate information. This disorder can make it problematic for a person to learn as quickly or in the same way as someone who is not affected by a learning disability. People with a learning disability have trouble performing specific types of skills or completing tasks if left to figure things out by themselves or if taught in conventional ways. While the specific nature of these brain-based disorders is still not well understood, considerable progress has been made in mapping some of the characteristic difficulties of LD to specific brain regions and structures.<sup>6</sup>

Learning Disabled children is the largest category of students receiving special education services. There are 2.4 million American public school students (approximately 5 percent of the total public school enrollment) identified with learning disabilities under the Individuals with Disabilities Education Act (IDEA). Forty-two percent of the 5.7 million school-age children have all kinds of disabilities who receive special education services are served in this category. The number of students identified with LD has declined by 18 percent between 2002 and 2011, while total special education has declined by just 3 percent. Two-thirds of students identified with LD are male.<sup>6</sup>

US Department of education, in a survey among children enrolled in Public schools identified that approximately 5% of them are affected by learning disability, of this reading disability constitute 3-15%. Over 40% of the 4th grade students perform below basic levels on National Assessment of Educational Progress. The study concluded that for about 275 of American children, learning to read is a much more formidable challenge and for at least 20-30% of these youngsters reading is one of the most difficult task that they will have to master throughout their life.<sup>7</sup>

The WHO had declared that 1 in 5 children in the world have handicap, it is a 'serious obstacle to child's development'. In industrialized countries such as United States, a prevalence rate for childhood chronic illness and disabilities has been estimated at 10%. According to Dr. Prasad. M, prevalence rate of 20-33% of psychiatric disorders in school children has been reported in Indian setting. 7% of them are developmental disorders. Among them, learning disorder constitute 1 in 10 children. In India, ever section of the school is likely to have around 15-25% of students, who are not able to maintain a satisfactory scholastic performance in school.<sup>8</sup>

In India, around 13-14% of all school children suffer from learning disorders. Unfortunately, most schools fail to lend a sympathetic ear to their problems. As a result, these children are branded as failures. Samir Parikh, a Child Psychiatrist, opines that learning disorder is not a disease but it's a lifelong problem and presents challenges that need

to be overcome every day. He argues that with proper diagnosis, appropriate education, hardwork and support from family, friends, teachers and others, they can lead a successful and productive life.<sup>9</sup>

Identification of disorder prior to school age is difficult due to the instability of results obtained from formal testing procedures. Teachers are the first person to notice that the child is not learning as expected. Shaw and Mac stated that for students with a learning disorder, 'planning, monitoring, regulating and scheduling' are difficult. These students require continuous help to adapt learning situations. Selvin in an analysis of challenging behaviours among people with learning disorder suggests that these children are a major challenge for teachers and members of caring families. The success of these children is determined by the response of the school personnel to the needs of these children.<sup>10</sup>

Parents and teachers, who are unaware about learning disabilities, may label the otherwise bright and creative child as lazy and disinterested. Even in cities, schools are hostile towards learning disabilities at large; and ignorant about characteristic features and specific academic difficulties. The lack of necessary facilities for identification, along with delay in referral and remediation results in severe damage to their self-esteem and motivation to study leading to a vicious cycle of academic, emotional and behavioral problems. There looms a large degree of ignorance among school teachers about the diagnosis of learning disabilities, resulting in a hostile attitude towards the child.<sup>23</sup> The researcher therefore has chosen this study as an opportunity to assess degree of awareness about learning disability among primary school teachers and the attitude they show towards learning disabled children so that recommendation can be made to arrange a special training programme to educate the teachers regarding identification and management of learning disabilities so that teachers can incredibly enhance their knowledge regarding identification of learning disabilities in child.

Many eminent people like Winston Churchill, Einstein, Isaac Newton, Thomas Alva Edison and many popular Hollywood actors had learning disabilities in their childhood. So if children with learning disability are not identified and remedied, we will be guilty of losing great men of eminence for future. Many times, because of the punishment given by teachers and parents, such children use their skills in different way and may turn out to be criminals and anti-social elements.<sup>11</sup>

### Objectives of the Study

1. To assess the of knowledge of school teachers regarding learning disabilities among children.
2. To assess the attitude of school teachers towards children with learning disabilities.
3. To correlate the knowledge and attitude of school teachers regarding learning disability.
4. To associate the knowledge and attitude of school teachers with selected demographic variables. (i.e. Age, Sex, Marital Status, Educational Qualification, Years of Experience at 0.05 level of significance)

## Hypotheses

1. **H<sub>1</sub>**: There is significant correlation between knowledge and attitude of school teachers regarding learning disability at  $p \leq 0.05$  level of significance.
2. **H<sub>2</sub>**: There is significant association between knowledge of school teachers regarding learning disability with selected demographic variables i.e. Age, Sex, Marital Status, Educational Qualification, Years of Experience at  $p \leq 0.05$  level of significance.
3. **H<sub>3</sub>**: There is significant association between attitude of school teachers towards learning disability with selected demographic variables i.e. Age, Sex, Marital Status, Educational Qualification, Years of Experience at  $p \leq 0.05$  level of significance.

## Conceptual Framework

A conceptual framework is the processor of a theory. It provides broad perspectives for nursing practice, research and education. Conceptual framework plays several interrelated roles in the progress of science. In nursing, conceptual model identify concepts and describe their relationships to the phenomena of central concern to the discipline. It helps to conceptualize and plan care. Their overall purpose is to make scientific findings meaningful and generalizable.

Polit and Hungler state that "A conceptual framework is an interrelated concept on abstractions that are assembled together in some rational scheme by their virtue of their relevance to a common theme. It is a device that helps to stimulate research and the extension of knowledge by providing both direction and impetus"

The conceptual model used for the present study is Sister Callista Roy's Adaptation theory (Roy and Obloy 1979; Roy 1989). The Roy's adaptation model focuses on the response to the adaptive system to a constantly changing environment. Adaptation is the central feature and a core concept of the model. Problems in adaptation arise when the adaptive system is unable to cope with or respond to constantly changing stimuli from the internal and external environments in a manner that maintains the integrity of the system.

The person is identified as a bio psycho social being and as an adaptive system. System is defined as 'a set of parts connected to function as a whole for some purpose, and it does so by virtue of the interdependence of its parts'. Adaptive means that 'human system has the capacity to adjust effectively to changes in the environment and in turn affect the environment' (Andrews and Roy 1991). In the present study adaptive system is the teacher who has to adapt effectively to the problems and difficulties of children with learning disabilities to manage them properly.

The adaptive system has two major internal control processes called the regulator and cognator subsystems. The regulator subsystem responds automatically through neural, chemical and endocrine coping processes. The cognator subsystem responds to inputs from internal stimuli that involve psychological, social, physical, and physiological factors. Regulator cognator activity of the teachers towards

children with learning disability is influenced by his demographic factors and knowledge and attitude of the teachers towards children with learning disabilities.

Regulator and cognator activity is manifested through coping behaviors in 4 adaptive or response modes.

### Physiological mode

This is associated with the way the person responds as a physical being to stimuli from environment. Behavior in this mode is the manifestation of the physiological activities of all the cells, tissues, organs, and systems comprising the human body. In the present study physiological mode include features of increased stress and teacher decreases stress by being patient and taking rest.

### Self-concept mode

Self-concept mode encompasses perception of the physical self and the personal self. It focuses on the need for psychic integrity that is 'the need to know who one is, so that one can be or exist with a sense of unity'. In this study, confidence in guiding learning disabled children and enhanced job satisfaction are included in self-concept mode.

### Role function mode

This emphasizes the need for social integrity, that is 'need to know who one is in relation to others so that one can act'. Roles are classified as primary, secondary and tertiary. The primary role determines the majority of behaviors engaged in by the person during a particular period of life. Secondary roles are those that a person assumes to complete the task associated with a developmental stage and primary role. Tertiary roles are related primarily to secondary roles and represent ways in which individuals meet the role associated obligations. Role function modes of coping behaviours for the present study include arranging school health programmes, Counselling for parents and students and Referral Services.

### Interdependence role

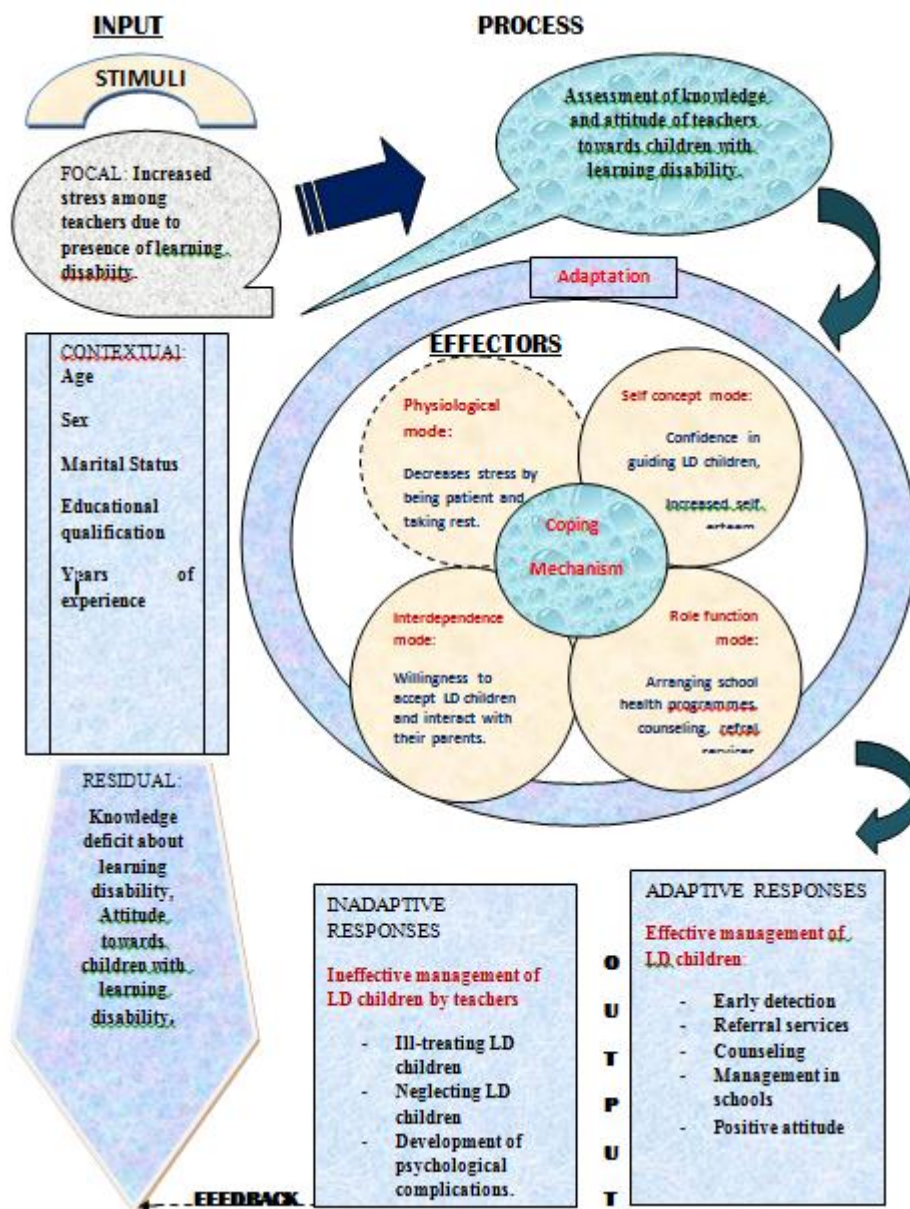
This also emphasizes the need for social integrity. Interdependence is a 'way of maintaining integrity that involves the willingness and ability to love and to accept love and respect given by others.' Here willingness of the teachers to accept the learning disabled children as such and willingness to interact with their parents were with coping behaviours.

Environment is defined as all conditions, circumstances and influences that surround and affect the development and behaviour of the person. Environment is viewed as constantly changing and has internal and external components. The internal and external environments in the form of stimuli are the inputs into the adaptive system.

The person and environment are in constant interaction with each other. The responds to environmental stimuli are adaptive or ineffective. Teachers are in constant contact with the changing environment of handling different types of students. If not able to cope effectively, they develop problem in handling children with disabilities.

The nurse determines what demands are causing problems for teachers in identifying and managing children with learning disabilities and assess how well they are

adapting to them. Nursing is directed at helping those who had ineffective responds towards such children.<sup>26</sup>



Key: \* \_\_\_\_\_ \* Included in the study \* - - - - \* Not included in the study. Fig. 1: Conceptual framework based on Roy's adaptation theory

**Materials and Methods**  
**Study Design and Setting**

The study was designed in the form of non-experimental descriptive type with the objective of describing the knowledge and attitude of primary school teachers regarding learning disability among children. This study was conducted in eight selected government schools at district pulwama, kashmir which run primary section. The study was conducted in the following schools:

- Government primary school, Atmanz, pulwama.
- Government primary school, Lelehar, pulwama.
- Government primary school, Marvel, pulwama.
- Government primary school, Sathergund, pulwama.

**Sample Size and Sampling Method**

The sample for the present study comprised of 60 primary school teachers from selected schools at Pulwama, Kashmir. The convenient sampling technique was adopted to select the sample for the present study.

All the teachers who were teaching standard 1 to 5 in selected government schools of Pulwama district and were

willing to give consent to participate in the study were included in the sample. Teachers who were teaching in private schools and teachers teaching in schools for physically or mentally challenged children were excluded from the study.

### **Data Collection Tool and Technique**

For data collection, tool was used which consisted of three sections:

#### **Section I**

Demographic data seeking information about age, gender, marital status, educational qualification, years of experience (5 items).

#### **Section II**

Structured Knowledge Questionnaire related to general aspects of learning disability, clinical features and diagnosis and management of children with learning disability (30 items).

#### **Section III**

Structured Attitude scale to assess the attitude of teachers towards children with learning disability (30 items).

A prior written permission was obtained from the Headmasters of all the eight schools selected for study. Study was conducted between 16-11-15 to 04-12-15. After self-introduction, nature and objectives of study was explained to the participants to obtain maximum co-operation. Anonymity and confidentiality were assured to them. Written Consent was obtained from the participants and they were made comfortable. 60 primary school teachers from 8 selected schools were included in the study and self-administered tool was distributed during their lunch break to avoid disturbance in their routine classes. An average of 4-5 teachers were made to fill the tool daily and approximately 30-40 min were allowed for them to

complete it. At the end of successful data collection, conveyed thanks to the headmasters and teachers.

### **Data Management and Analysis**

The tool had pre coded responses. During data collection, the researcher ensured completeness, legibility and accuracy of the data. Since the tool had three sections. Section I was about Demographic data seeking information about age, gender, marital status, educational qualification, years of experience (5 items). Section II included Structured Knowledge Questionnaire related to general aspects of learning disability, clinical features, diagnosis and management of children with learning disability (30 items). All correct answers carried 1 mark and wrong answers carried 0 mark. Section III included Structured Attitude scale to assess the attitude of teachers towards children with learning disability (30 items). The items were rated against a 3 point scale such as – Always, sometimes and Never where score given was 3, 2 and 1 respectively. The negative items had reverse scoring. Out of 30 items, 11 were negative statements.

The data analysis was planned based on the objectives and hypothesis of the study. The collected data was analyzed using descriptive and inferential statistical analysis. The collected data was coded and transformed into master sheet for statistical analysis. The level of knowledge and attitude of primary school teachers regarding learning disability among children were analyzed using mean, median, mean difference, range and standard deviation. Mean, SD, Mean percentage was calculated to describe the demographic variables. Chi square test was done to identify the association between research and demographic variables. Karl Pearson's Correlation Coefficient was used to find out the relation between knowledge and attitude. The data was interpreted and presented in the form of tables and diagrams.

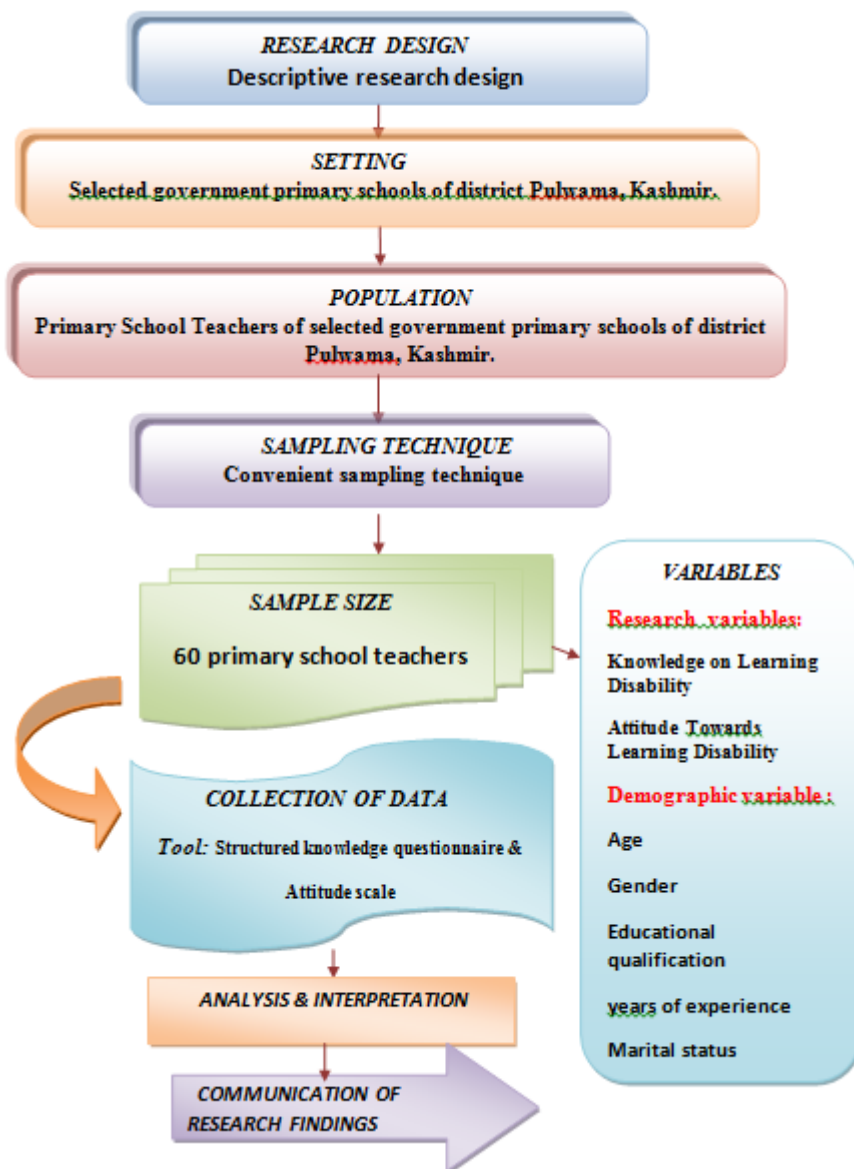


Fig. 2: Schematic representation of Research Methodology

**Ethical and Cultural Considerations**

Ethical approval was sought from ethical committee of parent institution to conduct research study. Permission was taken from the principals of selected schools of district Pulwama to conduct the study. Written informed Consent was sought from primary school teachers of selected schools before data collection.

**Results**

**Demographic Variables**

In the present study it was found that out of 60 primary school teachers:-

- Most 27 (45%) belonged to age group 41-50 years.
- Most 34 (57%) were males.
- Most 40 (66%) were post graduates.
- Most 21 (35%) were having 6-10 years of experience.
- Majority 55 (92%) were married.

**Knowledge scores of primary school teachers**

The findings revealed that most of school teachers 44 (73.3%) had moderate knowledge on learning disability. Out of 60 school teachers,12 (20.0%) had inadequate knowledge regarding learning disability and only 4 (6.7%) school teachers had adequate knowledge on the subject.

**Attitude Scores of Primary School Teachers**

The findings revealed that majority of school teachers 56 (93.3%) had Most favorable attitude towards children with learning Disability. Only 4 (6.7%) school teachers showed Favorable attitude and none (0%) had Unfavorable attitude level.

**Correlation of Knowledge and Attitude Scores of rimary School Teachers**

It was found that there was significant correlation between knowledge of school teachers regarding learning

disability and their attitude towards such children. Correlation Coefficient was found to be +0.60 with table value 0.254 (P <0.001). Hence the null hypothesis (H<sub>01</sub>) which states that there is no significant correlation between knowledge and attitude of school teachers regarding learning disability at p ≤ 0.05 level of significance was rejected.

**Association of knowledge and attitude of primary school teachers with selected demographic variables. (i.e. age, sex, marital status, educational qualification, years of experience)**

The association of demographic variables with knowledge scores by using Chi Square Test revealed that

statistically no significant association was found between demographic variables i.e. Age, Sex, Marital Status, Educational Qualification, Years of Experience of school teachers with their Knowledge scores (p ≤ 0.05).

The association of demographic variables with Attitude scores by using Chi Square Test revealed that statistically significant association was found between age (p ≤ 0.012) and marital status (p ≤ 0.000) of school teachers with their attitude scores; while no association was found between Gender, educational qualification and years of experience of school teachers with their attitude scores (p ≤ 0.05).

**Table 1: Frequency and percentage distribution of study subjects by their Demographic Variables.**

Demographic Variables		Percentage (%)	Frequency (F)
Age	21-30 Years	7	4
	31-40 Years	38	23
	41-50 Years	45	27
	Above 50	10	6
Gender	Male	57	34
	Female	43	26
Educational qualification	10+2	12	7
	Graduate	20	12
	Post-graduate	67	40
	Phd	2	1
Years of experience	Upto 5 Years	17	10
	6-10 Years	35	21
	11-15 Years	25	15
	16 Years and Above	23	14
Marital status	Married	92	55
	Unmarried	7	4
	Divorced/ separated	0	0
	Widow/widower	2	1

**Table 2: Frequency and Percentage distribution of study subjects according to their knowledge score on learning Disability. n=60**

Knowledge Level	Frequency	Percentage
Adequate knowledge 24-30(>75%)	4	6.7
Moderate knowledge 16-23(≥ 50-75%)	44	73.3
Inadequate knowledge 0-15(<50%)	12	20.0

**Table 3: Mean and SD distribution of knowledge score of study subjects on various areas of learning disability. n=60**

Areas	Mean ± SD	Median Score	Maximum	Minimum	Range	Mean Percentage
General Aspects of Learning Disability	7.08 ± 1.53	7	12	4	8	59.03
Clinical Features & Diagnosis of Learning Disability	5.80 ± 1.92	6	10	2	8	58.00
Management of Learning Disability	5.95 ± 1.51	6	8	2	6	74.38

**Table 4: Frequency and Percentage distribution of study subjects according to the Attitude score on Learning Disability. n=60**

Attitude Level	Frequency	Percentage
Most favourable attitude 68-90(>75%)	56	93.3
Favourable attitude 46-67(50-75%)	4	6.7
Unfavourable attitude 0-45(<50%)	0	0.0

**Table 5: Mean and Correlation between Knowledge score and Attitude score of study subjects regarding learning disability. n=60**

Pearson's Correlation	Knowledge Score	Attitude Score
Mean	18.8	76.5
SD	3.651	5.510
N	60	
Correlation	0.60	
Table Value	0.254	
P Value	<0.001	
Result	Significant	

Table 5 shows that there was significant correlation between knowledge of school teachers regarding learning disability and their attitude towards such children.

Correlation Coefficient was found to be +0.60 with table value 0.254 (P <0.001).

**Table 6: Association of knowledge scores of study subjects with their selected demographic variables. n=60**

Variables		Levels of knowledge			Chi Square Test	P Value
		Adequate	Moderate	Inadequate		
Age	21-30 Years	0	4	0	10.263	0.114
	31-40 Years	3	17	3		
	41-50 Years	0	21	6		
	Above 50	1	2	3		
Gender	Male	2	25	7	0.086	0.958
	Female	2	19	5		
Educational Qualification	Phd	0	1	0	1.414	0.965
	M.Phil.	0	6	1		
	Post-graduate	3	29	8		
	Graduate	1	8	3		
Years Of Experience	Upto 5 Years	0	9	1	8.112	0.230
	6-10 Years	3	16	2		
	11-15 Years	0	11	4		
	16 Years and Above	1	8	5		
Marital Status	Married	3	41	11	6.942	0.139
	Unmarried	1	3	0		
	Divorced/ separated	0	0	0		
	Widow/widower	0	0	1		

**Key: NS = Not Significant**

The data in the Table 6 indicates that no significant association was found between Demographic variables i.e. Age, Sex, Marital Status, Educational Qualification, Years of

Experience of school teachers with their Knowledge scores (p ≤ 0.05).



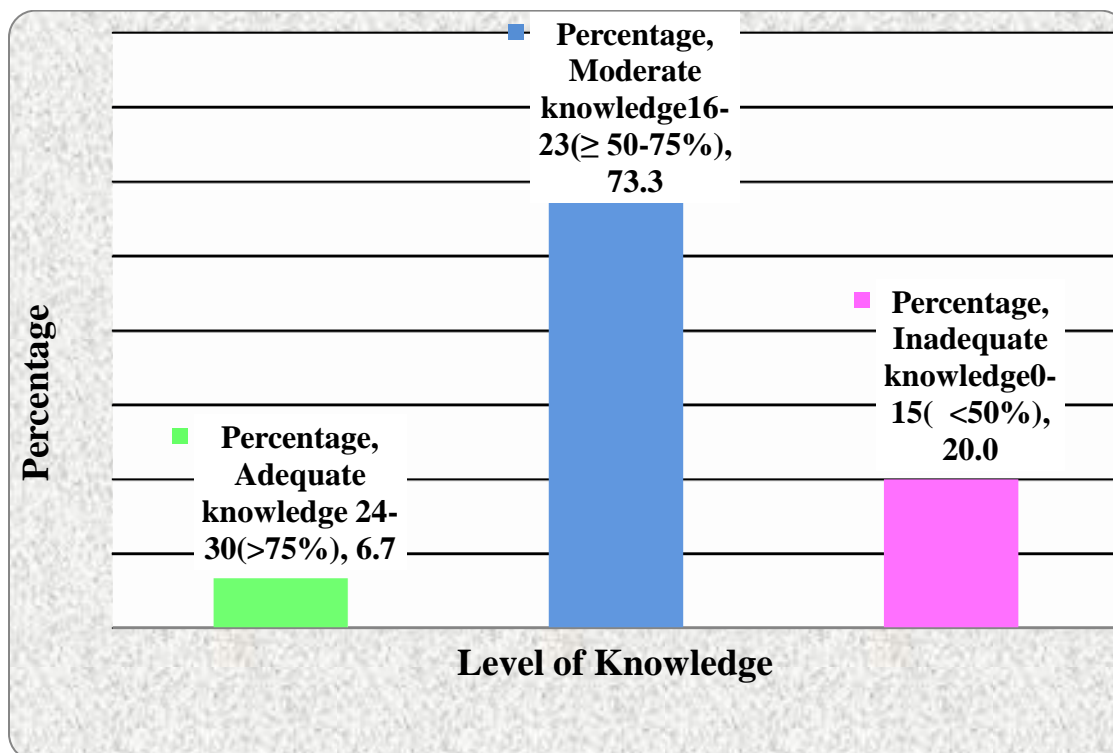
**Table 7: Association of Attitude scores of study subjects with their selected demographic variables. n=60**

Variables		Levels of Attitude			Chi Square Test	P Value
		Most Favourable	Favourable	Un favourable		
Age	21-30 Years	0	4	0	10.950	0.012*
	31-40 Years	3	17	3		
	41-50 Years	0	21	6		
	Above 50	1	2	3		
Gender	Male	2	25	7	3.283	0.070 NS
	Female	2	19	5		
Educational Qualification	Phd	0	1	0	0.956	0.812  NS
	M.Phil.	0	6	1		
	Post-graduate	3	29	8		
	Graduate	1	8	3		
Years of Experience	Upto 5 Years	0	9	1	7.643	0.054  NS
	6-10 Years	3	16	2		
	11-15 Years	0	11	4		
	16 Years and Above	1	8	5		
Marital Status	Married	3	41	11	16.972	0.000*
	Unmarried	1	3	0		
	Divorced/ separated	0	0	0		
	Widow/widower	0	0	1		

Key: \* = significant NS = Not Significant

Table 7 shows that significant association was found between age ( $p \leq 0.012$ ) and marital status ( $p \leq 0.000$ ) of school teachers with their attitude scores; while no

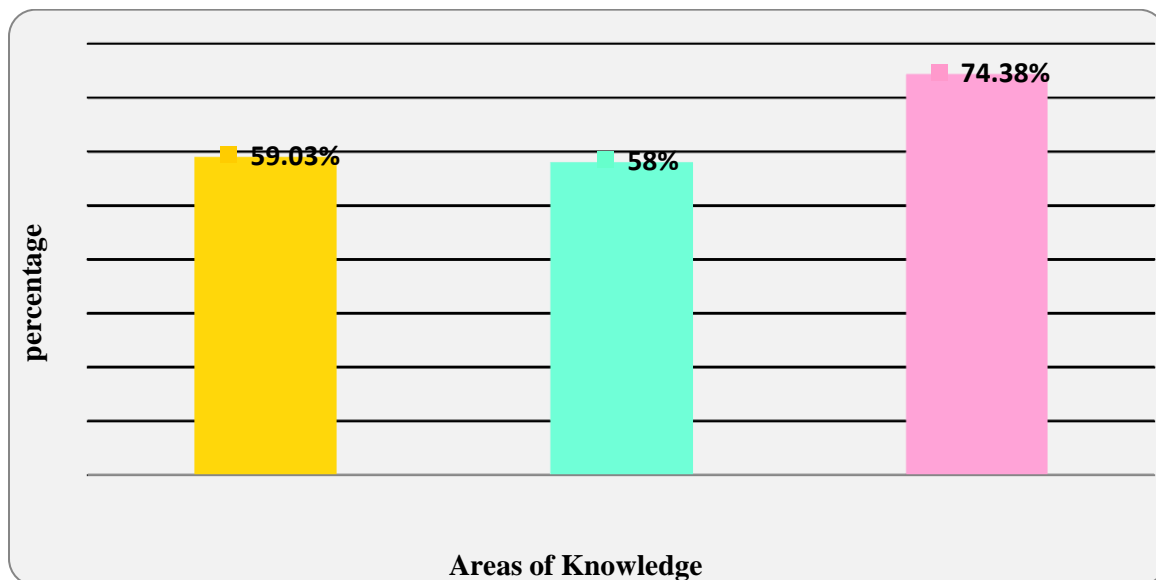
association was found between gender, educational qualification and years of experience of school teachers with their attitude scores ( $p \leq 0.05$ ).



**Fig. 1: Bar diagram showing percentage distribution of study subjects according to their knowledge scores regarding learning disability among children.**

Fig. 1 indicates that, most of school teachers 44 (73.3%) had moderate knowledge on learning disability. Out of 60 school teachers, 12 (20.0%) had inadequate

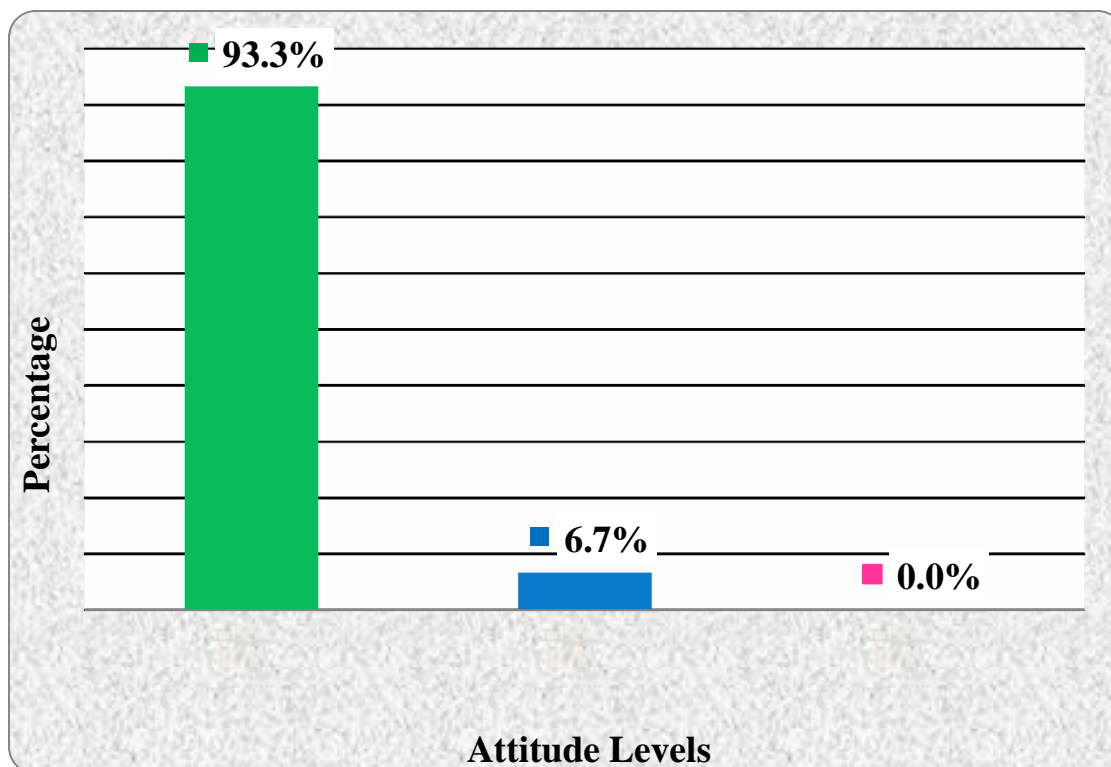
knowledge regarding learning disability. Only 4 (6.7%) school teachers had adequate knowledge on the subject.



**Fig. 2: Bar diagram representing the mean percentage score on various areas of knowledge of study subjects regarding learning disability.**

Fig. 2 shows that mean score percentage for knowledge of school teachers regarding Management of learning disability was high (74.38%). They were found to have the least knowledge (58.0%) on idea regarding clinical features

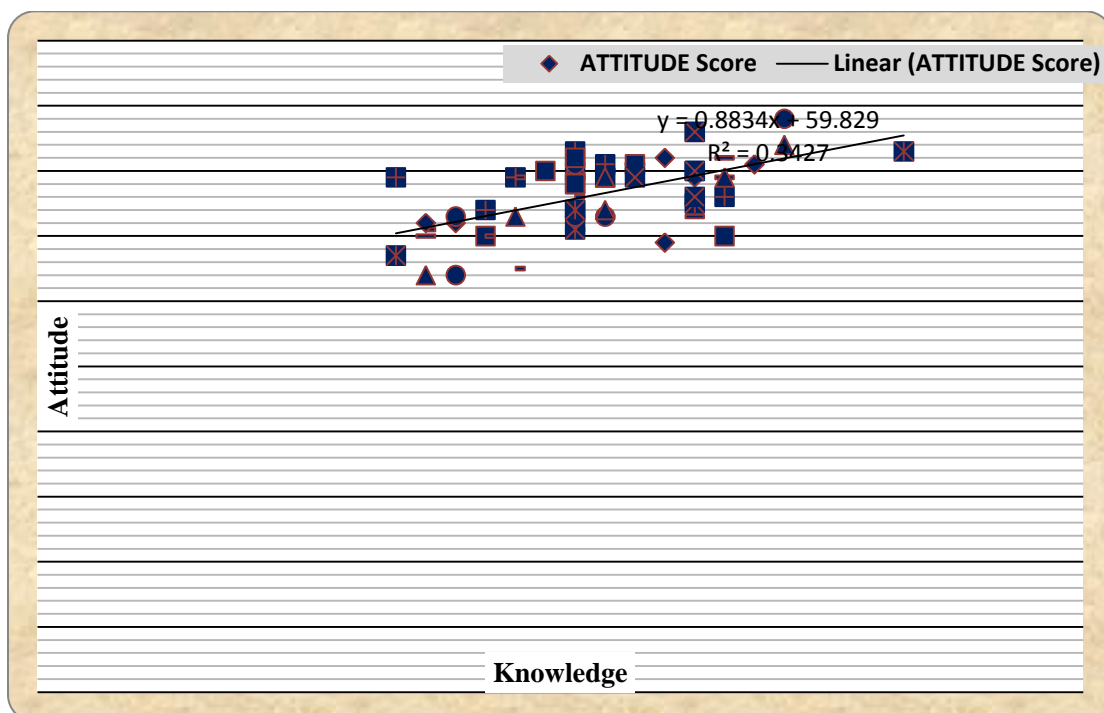
and diagnosis of learning disability. The mean score percentage for knowledge regarding general aspects of learning disability was 59.03%.



**Fig. 3: Bar diagram Showing percentage distribution of study subjects according to their attitude scores towards children with learning disability.**

Fig. 3 shows that majority of school teachers 56(93.3%) had Most favorable attitude towards children with learning

Disability. Only 4 (6.7%) school teachers showed Favorable attitude and none (0%) had Unfavorable attitude level.



**Fig. 4: Scattered diagram representing the correlation between knowledge and attitude score of study subjects regarding learning disability.**

Fig. 4 shows that there is significant correlation between knowledge of school teachers regarding learning disability and their attitude towards such children. Correlation Coefficient was found to be +0.60 with table value 0.254 (P <0.001).

**Discussion**

**Knowledge of school teachers regarding learning disabilities among children**

It was found that most of school teachers 44 (73.3%) had moderate knowledge on learning disability. Out of 60 school teachers, 12 (20.0%) had inadequate knowledge regarding learning disability and only 4 (6.7%) school teachers had adequate knowledge on the subject. It was also found that mean score was 18.83, median was 18.5, standard deviation was 3.65. The findings revealed that majority of teachers were having moderate knowledge regarding learning disability among children.

The study findings are similar to the findings of a descriptive study conducted by Bhavya, Bhavya S, Chinnu CM, Joseph CE, Thomas D et al (2015) to assess the knowledge and attitude of teachers regarding specific learning disabilities among children. The study was conducted among 50 school teachers in selected schools at Mangalore. The sampling technique used was convenient sampling technique and data was collected using structured

knowledge questionnaire and attitude scale. Results revealed that majority of teachers (64%) had average knowledge regarding specific learning disability and majority of teachers (94%) had a most favourable attitude towards children with specific learning disabilities.

The present study findings are in conformity with the findings of a study conducted by Princy R (2005) to assess knowledge and attitude of school teachers regarding learning disabilities among children in selected schools at Bangalore. This descriptive study was conducted among 60 primary school teachers selected by Convenient sampling technique from selected schools at Bangalore. A structured questionnaire for knowledge and attitude scale for attitude assessment was used. The results revealed that majority of the teachers (58.33%) had average knowledge on learning disability, 41.67% of teachers had poor knowledge regarding learning disability and none of the teachers possessed good knowledge on the subject.

Attitude of school teachers towards children with learning disabilities

It was found that majority of school teachers 56 (93.3%) had Most favorable attitude towards children with learning Disability. Only 4 (6.7%) school teachers showed Favorable attitude and none (0%) had Unfavorable attitude level. It was also found that mean score was 46.47, median was 78, standard deviation was 5.51. The findings revealed that majority of teachers were having Most favorable attitude towards children with learning Disability.

The study findings are similar to the findings of a cross-sectional study conducted by Kalyani M, Dr. Biswas M, Dr. Reddemma K (2015) to Assess Knowledge And Attitude of Trainee School Teachers Towards Identification and Management of Specific Learning Disabilities Children in Selected Training Institutions of Odisha". The study was carried out on 269 trainee school teachers at V.S.S, Medical College Hospital, Burla. The results revealed that all of the teachers had inadequate knowledge but 94.80% had favourable attitude towards children with Specific Learning Disabilities (SpLD).

The study findings are consistent with the findings of the study conducted by Mathew, Binu (2012) to assess the Knowledge and Attitude of School Teachers Regarding Learning Disabilities Among Children in Selected Schools at Bhilai C.G. This descriptive study was conducted among 60 primary school teachers selected by Convenient sampling technique from selected schools at Bhilai. A structured questionnaire for knowledge and attitude scale for attitude assessment was used. The study revealed that none of teachers had excellent knowledge on learning disability but almost all (98.3%) had highly favourable attitude towards such children.

These findings are also supported by a study conducted by Waternberg N, Geva K, Brook U (2005) to assess knowledge and attitude of high school teachers regarding attention deficit hyperactivity disorder and learning disabilities. The study was conducted among 46 high school teachers from selected schools in Israel. The results revealed that 74% teachers have relatively low knowledge but most of the teachers have favourable attitude towards the children with learning disability.

### **Correlation of knowledge and attitude of school teachers regarding learning disability**

It was found that there was significant correlation between knowledge of school teachers regarding learning disability and their attitude towards such children. Correlation Coefficient was found to be +0.60 with table value 0.254 ( $P < 0.001$ ). Hence the null hypothesis ( $H_{01}$ ) which states that there is no significant correlation between knowledge and attitude of school teachers regarding learning disability at  $p \leq 0.05$  level of significance was rejected.

The study findings are supported by a study conducted by Mathew, Binu (2012) to assess the Knowledge and Attitude of School Teachers Regarding Learning Disabilities among Children in Selected Schools at Bhilai C.G. This descriptive study was conducted among 60 primary school teachers selected by Convenient sampling technique from selected schools at Bhilai. A structured questionnaire for knowledge and attitude scale for attitude assessment was used. The study revealed that none of teachers had excellent knowledge on learning disability but almost all (98.3%) had highly favourable attitude towards such children. A positive correlation ( $r = +0.83$ ) was identified between knowledge and attitude of teachers towards children with learning disability.

The findings of the study are also supported by the study conducted by Princy R (2005) to assess knowledge and attitude of school teachers regarding learning disabilities among children in selected schools at Bangalore. This descriptive study was conducted among 60 primary school teachers selected by convenient sampling technique from selected schools at Bangalore. A structured questionnaire for knowledge and attitude scale for attitude assessment was used. The study revealed that a positive correlation ( $r = +0.833$ ) was identified between knowledge and attitude of teachers towards children with learning disability.

Association of the knowledge and attitude of school teachers with selected demographic variables. (i.e. age, sex, marital status, educational qualification, years of experience at 0.05 level of significance)

The association of demographic variables with knowledge scores by using Chi Square Test revealed that statistically no significant association was found between demographic variables i.e. Age, Sex, Marital Status, Educational Qualification, Years of Experience of school teachers with their Knowledge scores ( $p \leq 0.05$ )

The association of demographic variables with Attitude scores by using Chi Square Test revealed that statistically significant association was found between age ( $p \leq 0.012$ ) and marital status ( $p \leq 0.000$ ) of school teachers with their attitude scores; while no association was found between Gender, educational qualification and years of experience of school teachers with their attitude scores ( $p \leq 0.05$ ).

The study findings are comparable to the findings of a descriptive study conducted by Bhavya, Bhavya S, Chinnu CM, Joseph CE, Thomas D et al (2015) to assess the knowledge and attitude of teachers regarding specific learning disabilities among children. The study was conducted among 50 school teachers in selected schools at Mangalore. The sampling technique used was convenient sampling technique and data was collected using structured knowledge questionnaire and attitude scale. Results revealed that there was no significant association between knowledge score and selected demographic variables such as age, gender, educational qualification, years of experience, marital status, child psychology in curriculum, in service education, family history of learning disabilities. There was a significant association between attitude score and few demographic variables such as gender, educational qualification, child psychology in curriculum.

The findings of the study are also comparable to the study conducted by Princy R (2005)<sup>52</sup> to assess knowledge and attitude of school teachers regarding learning disabilities among children in selected schools at Bangalore. This descriptive study was conducted among 60 primary school teachers selected by Convenient sampling technique from selected schools at Bangalore. A structured questionnaire for knowledge and attitude scale for attitude assessment was used. The results revealed that statistically significant association was found between educational qualification ( $p \leq 0.5$ ) of study subjects with their knowledge

scores while no association was found between knowledge score and other variables. The results also revealed that statistically significant association was found between age ( $p \leq 0.5$ ) of study subjects with their attitude scores while no association was found between attitude score and other variables.

From the above findings it is evident that no association was found between knowledge scores and any of the selected demographic variables of primary school teachers. This may be due to lack of timely provision of in-service education programmes for school teachers or due to non-handling of children with learning disability. Hence, it is suggested that rigorous updation programmes in terms of education and management of children with psychological problems be carried out for school teachers in educational settings.

### Conclusion

The following conclusions were drawn on the basis of the findings of the study:

Most of the school teachers had moderate knowledge on learning disability.

Majority of the school teachers possessed most favourable attitude towards children with learning disability.

There is significant correlation between knowledge of school teachers regarding learning disability and their attitude towards such children.

No significant association was found between selected demographic variables i.e. Age, Sex, Marital Status, Educational Qualification, Years of Experience of school teachers with their Knowledge scores which indicate that these variables probably have no effect on their knowledge.

Marital status and Age of school teachers and their attitude towards learning disability was found to be significantly associated. Other socio demographic variables had no significant association with attitude of school teachers towards learning disability which indicate that sex, Educational Qualification and Years of Experience probably have no effect on their attitude scores.

On the basis of the findings of study, following recommendations have been made:-

1. A similar study can be replicated on a large sample to generalize the findings.
2. A study can be conducted by including additional demographic variable.
3. A similar study can be conducted among parents of school children.
4. A comparative study can be arranged among teachers in urban and rural schools.
5. A study can be done to analyse the practice of teachers towards learning disabled children.
6. A pre experimental study to evaluate the effectiveness of planned teaching program on knowledge regarding learning disability among teachers can be undertaken.
7. A study can be carried out to evaluate the efficiency of various teaching strategies like Self Instructional module, Pamphlets, Leaflets and Computer assisted

Instruction on knowledge regarding learning disability among teachers.

8. A study may be conducted among school teachers on other mental health problems like Conduct Disorders, Attention Deficit Hyper active Disorders, and emotional Problems etc.
9. A concentrated effort should be made to increase the awareness among the school teachers regarding their role in school mental health services.

### Acknowledgement

No deed can find the reality without the grace of Almighty. I would like to express deepest sense of everlasting gratitude to the "Almighty Allah" for giving me strength and showering His marvellous blessings during the whole study.

I express my profound respect and deep gratitude to Prof. (Dr.)Mehmooda Regu, Principal, Mader-e-Maherban Institute of Nursing Sciences & Research (MMINSR), SKIMS Soura, for her support, valuable suggestions and guidance to carry out the study.

I record my sincere thanks to Mrs. Santosh Kaur, Associate professor Mader-e-Maherban Institute of Nursing Sciences & Research (MMINSR) for her support, valuable suggestions and guidance to carry out the study.

I record my sincere thanks to all the members of research committee for their keen interest, sustained guidance & critical comments & encouragement for this study.

I extend my genuine gratitude to all the experts who have given their valuable guidance and suggestions towards validating the tool and in preparing the final draft for the study.

I express my humble thanks to Headmasters of selected schools for granting me permission to conduct this study.

I owe personal debt of gratitude to all the primary school teachers who have enthusiastically participated in the study and without their cooperation the study would not have been possible.

My deepest and sincere gratitude to my beloved parents, my grandparents, my sister, my brother, my nephew, my niece & my friends for their prayers, love, affection, constant support, encouragement & their great help throughout my study.

**Conflict of Interest:** None.

### References

1. Basavanthappa BT. Nursing education. 2<sup>nd</sup> ed. New Delhi:Jaypee publications; 2009: 409.
2. Sannkanarayan B, Sindhu B. Learning and teaching nursing. 3rd ed. Kerala: Brainfill publications; 2009: 9.
3. Learning disabilities. Available from URL [http://www.helpguide.org/mental/learning\\_disabilities.htm](http://www.helpguide.org/mental/learning_disabilities.htm) [Cited on 09-11-2015].
4. American Psychiatric Association. DSM-IVTM. 4th ed. New Delhi: Jaypee Publishers; 2000.
5. Students with Learning Disability. Available from <http://ctl.unl.edu/tfi/14.html>. [Cited on 10-11-2015].

6. Cortiella, Candace and Horowitz, Sheldon H. The State of Learning Disabilities: facts, trends and emerging issues. 3<sup>rd</sup> ed. New York: national Center for learning Disabilities; 2014.
7. Division for Learning Disabilities (DLD): The Council for Exceptional Children, 2001, January 2005. Available from URL <http://www.didceg.org> [cited on 11-11-2015].
8. Shelton D. Child Mental Health Policy. *J Paediatr Nurs* 2000;15:115-117.
9. Sadaket M. Learning Disabilities in India, August 2009, Available from URL <http://learning disabilities india/edu.com>. [cited on 14-11-2015].
10. Sines D, Selvin E. The role of community nurses for people with learning disabilities: working with people who challenge. *Int J Nurs Studies* 2005;42:415-427.
11. Jose J. Learning disability – a growing concern for parents. *Health Action*. 2009:7-8.

**How to cite this article:** Arifa S, Siraj SS, A descriptive study to assess the knowledge and attitude of primary school teachers regarding learning disabilities among children in selected schools of district Pulwama Kashmir, *J Paediatr Nurs Sci*, 2019;2(1):19-32