"A pre-experimental study to assess the effectiveness of video awareness program regarding attention deficit hyperactivity disorder among primary school teachers at SGRR School, Bombay Bagh, Dehradun"

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Abstract: *A pre-experimental research design that is one group pre-test and post-test design was adopted. A total of 30 samples were selected using purposive sampling technique. Standardised knowledge questionnaire scale (KADDS) was used to assess the effectiveness of ADHD among primary school teachers at SGRR school Bombay Bagh, Dehradun. Pre-test was done on the first day followed by the video awareness programme on second day and the effectiveness of program was then evaluated by comparing the knowledge score in pre-test and post-test with the help of descriptive and inferential statistics. The purpose of the study is to assess the effectiveness of a video awareness program in enhancing ADHD knowledge and teaching strategies among primary school teachers. The Conceptual Framework was based on general system model by Ludwig Von Bertalanffy (1967). The post test results depict that 3 (10%) teachers were in the age group (1) 25-30 years, 11(37%) were in 30-35 years, 16 (53%) were in more than 35 years. (2) All 30 (100%) primary school teachers were females. (3) Out of 30 primary school teachers, 7 (23%) were graduates and 23 (77%) were postgraduates. (4) Out of 30 primary school teachers, 7 (23.4%) were having an experience in teaching of 1-5 years, 18 (60%) were having 6-10 years, 1 (3.2%) were having 11-15 years and 4 (13.4%) were having more than 15 years. (5) Out of 30 primary school teachers 6 (20%) were having a previous experience with ADHD child and 24 (80%) were not having any previous experience. (6) Out of 30 primary school teachers only 1(3%) were having a special training in child psychology and 29 (97%) were not having. (7) Out of 30 primary school teachers 11(37%) were attended a conference on ADHD and 19(63%) were not attended any conference on ADHD. The results show that in pre-test out of 30, 7 (23.33%) were having poor knowledge, 19 (63.33%) were having average knowledge and 4 (13.33%) were having good knowledge regarding ADHD. In post-test all 30 (100%) were having good knowledge regarding ADHD. The result show that the mean value of pre-test knowledge score was 17.3 less than the post-test knowledge score of 30.54 and standard deviation value of pre-test score was 5.63 which is more than post -test score was 1.85. The results of this study showed that video awareness programme regarding ADHD was effective for primary school teachers in enhancing their knowledge.*

Key Words: *Effectiveness, knowledge, ADHD, video awareness, primary school teachers.*

1. INTRODUCTION:

Childhood is a broad term usually applied to the phase of human development between infancy and adulthood. Childhood is the time during which human beings develop their physical bodies and their mental abilities. It is further divided into two phases: early childhood (2 to 6 years) and late childhood (7-12years). From the age of three to six a child's thinking develops, perception is more acute, attention, memory, and reasoning all expand. Through these changes the child's creativity blossoms, and learning is rapid. Psychological needs during childhood including love, recognition, security acceptance, encouragement, protection, discipline, nutrition. Children are the most precious and potential unit of the country. Proper nourishment in childhood both physically and psychologically helps them to develop as a productive and adjustable adult who is useful to the society and country. Children in this modern era are forced to be the victims of psychological disorders. They are grown up with undue pressures from the school, social and cultural

environment. The surging trends in the family and society indirectly affect the psychological development of the children[1]. Attention deficit hyperactivity disorder is one of the greatest common neurobehavioral disorders of childhood and can affect the academic achievement, well-being, and social interactions of children.[2]

1.1 NEED AND SIGNIFICANCE OF STUDY:

Attention Deficit Hyperactivity Disorder is a condition of the brain that makes it difficult for children to control their behaviour. It is one of the most common chronic conditions of childhood. It affects 4% to 12% of school-aged children. About 3 times more boys than girls are diagnosed with ADHD. ADHD includes 3 behaviour symptoms: inattention, hyperactivity, and impulsivity. ADHD is one of the most studied conditions of childhood, but the cause of ADHD is still not clear currently. The most popular current theory of ADHD is that ADHD represents a disorder of "executive function." This implies dysfunction in the prefrontal lobes so that the child lacks the ability for behavioural inhibition or self-regulation of such executive functions as nonverbal working memory, speech, affect, emotion, motivation, and arousal. This study examined the video awareness programme regarding ADHD among primary school teachers at SGRR school, Bombay Bagh, Dehradun by using of standardized knowledge questionnaire scale (KADDS).

2. LITERATURE REVIEW:

The literature reviewed for the present had been presented under the following heading:

1) Literature related to Etiology

Yuyang Luo & Dana Weibman (2019) the study of Attention-deficit/hyperactivity disorder (ADHD) is a neurodevelopmental disorder that affects approximately 8%–12% of children worldwide. Throughout an individual's lifetime, ADHD can significantly increase risk for other psychiatric disorders, educational and occupational failure, accidents, criminality, social disability and addictions. No single risk factor is necessary or sufficient to cause ADHD. The multifactorial causation of ADHD is reflected in the heterogeneity of this disorder, as indicated by its diversity of psychiatric comorbidities, varied clinical profiles, patterns of neurocognitive impairment and developmental trajectories, and the wide range of structural and functional brain anomalies. Although evidence-based treatments can reduce ADHD symptoms in a substantial portion of affected individuals, there is yet no curative treatment for ADHD. Several theoretical models of the emergence and developmental trajectories of ADHD have been proposed, aimed at providing systematic guides for clinical research and practice. We conducted a comprehensive review of the status of research in understanding the heterogeneity of ADHD in terms of etiology, clinical profiles and trajectories, and neurobiological mechanisms. We suggest that further research focus on investigating the impact of the etiological risk factors and their interactions with developmental neural mechanisms and clinical profiles in ADHD. Psychiatric and behavioural comorbidities, such as depression, anxiety disorder, bipolar disorder, substance use, and personality disorders, often co-occur with ADHD and result in increased difficulties for appropriate diagnoses and treatments. [3]

Leena Gaikwad & Sravani Lagala (2020) did a review of literature and tried to consolidate the existing community-based evidence on the prevalence of Neurodevelopmental Disorders, risk factors, and co-morbidities among children in India. And the prevalence of ADHD in India was found to be 63-144 per 1000 children. Most of the researchers have focused on the treatment or the interventional strategies for ADHD and the diagnosis was often made using DSM or other Western scales available. There is indeed a paucity of research studies which focused on the comprehensive diagnosis of ADHD. Hence, the investigator aims to devise a tool to diagnose ADHD in a comprehensive way. [4]

Bruna Santos da Silva & Eugenio Horacio Grevet (2023) the study of Attention-deficit/hyperactivity   disorder (ADHD) causes attention problems and hyperactive or impulsive behaviours that seriously affect the daily life of the person. As a common mental developmental disorder, the number of published studies on the subject is large and the relationship is complex. This article attempts to categorise the relevant studies by reviewing those related to ADHD. Forty-six studies are included in this paper, which are broadly categorised into three areas: etiology, pathology and consequences and treatment. These categories do not exist in isolation but are interrelated and interact with each other. It concludes with an outlook on future research in relation to the limitations of the current studies. [5]

2) Literature related to Sign and Symptoms:

Margreet ten Have & Denise Bijlenga (2018) The aim of this study was to examine whether ADHD is a dimensional trait in the adult general population. We studied whether an increased number of ADHD symptoms was associated with higher comorbidity, exposure to risk factors (childhood abuse and parental psychopathology), and disability. We ascertained whether even low numbers of ADHD symptoms were associated with an increased burden of disease. Data

were used from the second wave of the Netherlands Mental Health Survey and Incidence Study 2 (NEMESIS-2, $N = 5303$). NEMESIS-2 is a nationally representative face-to-face survey on mental health of the Dutch general population. ADHD symptoms, mental comorbidity, and disability were assessed using the Adult ADHD Self-Report Scale Screener, the Composite International Diagnostic Interview version 3.0, and the Medical Outcomes Study Short Form Health Survey, respectively. Dose-response relationships were found between the number of ADHD symptoms and Axis I and II mental disorders; exposure to risk factors; and mental and physical disability. Our study supports the notion that ADHD is a dimensional trait in the adult general population. Even low numbers of symptoms were associated with an increased burden of disease, and therefore these should be identified and treated. [6]

May Simon Weissenberger & Martin Anders (2020) reviewed that attention deficit hyperactivity disorder (ADHD) is one of the most common neurodevelopmental disorders, affecting individuals in all stages of their lives and leading to a variety of negative quality of life outcomes. The disorder is associated with marked differences related to time perception and time perspectives, and this area of research is currently becoming more prominent and gaining ground in showing new aspects of ADHD that were considered secondary (i.e., time perception differences, affective differences). In this study, we looked at ADHD symptoms in adults, correlated lifestyles, and time perspectives as defined by the Zimbardo Time Perspective Inventory (ZTPI). The ZTPI is a useful standardized scale to measure one's time perspective anchoring in the categories of past positive, past negative, present fatalistic, present hedonistic, and future oriented. This is the first study on adult ADHD and time perspectives conducted in the Czechia. [7]

3) Literature related to Prevention:
Lai-Chu See & Kuo-Yu Chao (2021) Knowledge of attention-deficit hyperactivity disorder among the public, parents, and primary school teachers. We compared the knowledge of attention-deficit hyperactivity disorder (ADHD) among the public, parents of children with ADHD, and primary school teachers and identified factors associated with ADHD knowledge in each group, separately. Secondary data analysis was made on the pre-lecture data from those (122 from the public, 64 parents of children with ADHD, and 515 primary school teachers) attending education lectures by the Department of Public Health, New Taipei City Government, Taiwan, 2014. ADHD onset age was least known in these 3 groups. Knowledge of ADHD was significantly better among teachers (test score, 75.3%) than among parents (65.5%) and the public (59.2%). Among the public, the test score significantly decreased with age and was worst in those who did not know their friends or relatives with ADHD. Among parents, service workers, and retired/unemployed knew significantly less about ADHD than housewife did. Among teachers, men knew significantly less than women; those who taught children with ADHD knew significantly more than those who did not. Primary school teachers knew more about ADHD than parents and the public. Factors associated with ADHD knowledge varied among the 3 groups. [8]

Hosseinnia, Maede & Mazaheri (2024) Educational intervention of parents and teachers for children with attention deficit hyperactivity disorder. Educating parents and teachers is very important in managing child behaviour, so the present study investigates the effect of parent-teacher educational intervention on reducing ADHD symptoms in children. This quasi-experimental study with a randomized control group before and after. The multi-stage cluster sampling method was used in this study. Seventy-two children and their parents and teachers participated in this study. They were selected using the multistage cluster sampling method and randomly divided into two groups of test and control. Data collected by CSI-4 questionnaire and researcher-made questionnaires (knowledge, attitude, practice) of parents and teachers. Parents and teacher in test group participated in training sessions. Student's ADHD symptoms were assessed before and after the educational intervention. In this study, the mean (SD) age of the parents was 37.28 (6.24) and the age of the teacher was 45.50 (6/45). Covariance test show that, two months after the intervention, based on parent and teacher report, the mean total score of attention was increase significantly only in test group students. Also, the mean total of hyperactivity score was decreased significantly only in test group students ($P < 0.001$). Also, the score of knowledge, attitude, and practice of parents as well as teachers 2 months after the intervention was significantly higher than the control group ($P < 0.001$). Parents and teachers training and developing appropriate strategies to increase their awareness, attitude, and practice can diminish ADHD symptoms in all three aspects including inattention and reduce the side effects of ADHD. Planning in educating parents and teacher is essential to prevent impulsive and hyperactive behaviours. [9]

3. OBJECTIVES / AIMS:
- To assess the pre-test level of knowledge regarding ADHD among primary school teachers at selected school in Dehradun.

- To evaluate the effectiveness of video awareness program regarding ADHD among primary school teachers at selected school in Dehradun.
- To determine the association between post-test knowledge score with their selected socio demographic variable among primary school teachers.

4. RESEARCH METHOD / METHODOLOGY:

The research design selected for this study was pre-experimental "one group pre-test and post-test design" which is best suited to assess the effectiveness of video awareness program regarding ADHD among primary school teachers at SGRR School, Bombay Bagh, Dehradun.

One group pre-test-post-test design. The design is represented as: 01 X 02

Keys words:
01-Assessment of knowledge score before the administration of video awareness programme regarding ADHD.
02-Assessment of knowledge score after the administration of video awareness programme regarding ADHD.
X- Intervention (administration of video awareness programme regarding ADHD among primary school teachers.

Schematic representation of the study design is depicted as

Group	Pre-test	Intervention	Post-test
Primary school teachers in SGRR School, Bombay Bagh, Dehradun.	Knowledge score before the administration of video awareness programme regarding ADHD. (01)	Administration of video awareness programme regarding ADHD (X).	Knowledge score after the administration of video awareness programme regarding ADHD (02).

Research variables under study
According to **Chinn and Kramer**, A variables are anything that has quantity and quality that varies. In other words, variables are qualities, properties, or characteristics of person, things and situations that change and vary. Variables are concepts at different level of abstraction that are concisely defined to promote their measurement or manipulation within study.
There are two types of variables: **dependent and independent variables**. In this present study, variables are independent and dependent.
  1. **Independent variables:** The variables that are purposely manipulated or changed by the researcher is also called manipulated variables. It is manipulated, measured and selected by the experimental for the purpose of providing observable changes in the behavioural measures. In the present study independent variables is video awareness programme.
  2. **Dependent variables:** It is presumed effect or response because of independent variable, which researcher wants to predict or explain. In this study dependent variables were the knowledge score of primary school teachers regarding video awareness programme.
  3. **Demographic Variables:** It includes age, sex, educational status, experience in teaching, previous experience with ADHD child, any special training in child psychology, any conference attended on ADHD.

Research setting of the study
According to the **Polit and Hungler** (1999), setting is the physical location and condition in which data collection takes place in a study". The selection of an appropriate setting is important because the setting can influence the way people behave or feel how they respond. The personal study was conducted at Shri Guru Ram Rai School, Bombay Bagh, Dehradun.

Criteria for selecting the setting
- Economy of time.
- Researcher's familiarity with the settings.
- Availability of the sample subjects.

- Feasibility of conducting the study.
- Easy access of subjects.
- Administration approval and expectation of co-operation for the study.

Population
According to the **Polit and Hungler (2009)**, Population is the aggregation of all the units in which a researcher is interested. In other words, population is the set of people or entities to which the results of a research are to be generalized. The population for the study consists of primary school teachers teaching in SGRR School, Bombay Bagh, Dehradun.

Sample
According to the **Polit and Hungler (2009)**, sample may be defined as representative unit of a target population, which is to be worked upon by researchers during their study. In other words, sample consists of a subset of units which comprise the population selected by investigators or researchers to participate in their research project. In present study sample were primary school teachers in SGRR School, Bombay Bagh, Dehradun.

Sample size
30 Primary school teachers who are teaching in SGRR School, Bombay Bagh, Dehradun.

Sampling technique
According to the **Polit and Hungler** (2009), Sampling is the process of selecting a representative part of the population. Thus, a carefully carried out sampling process helps to draw a sample that represents the characteristics of the population from which the sample is drawn, there are several techniques of sampling. Basically, sampling techniques are classified in two broad categories, that is probability and non-probability sampling techniques. For this present study 30 primary school teachers who were teaching in SGRR School, Bombay Bagh, Dehradun were selected by using purposive sampling technique method.

Inclusive criteria
- Primary school teachers who were teaching in SGRR School, Bombay Bagh, Dehradun.
- Primary school teachers who were willing to participate in the study.
- Primary school teachers who were available at the time of data collection.

Exclusive criteria
- Primary school teachers who are not willing to participate.
- Primary school teachers who are not present at time of data collection.

Data collection tool and techniques:
According to the **Polit and Hungler** (2009), data collection tool is the device that a researcher uses to collect the data. The type of data collection tool required depends upon the nature of the data to be gathered to answer the research questions.
Based on the objectives of the study the following data collection tool was selected to obtain necessary data.

Sr. No.	TOOL	PURPOSE	TECHNIQUE
1.	A standardized knowledge questionnaire scale (KADDS). Section 1- selected socio demographic variables. Section-II Standardized knowledge questionnaire scale (KADDS).	To assess the effectiveness of video awareness programme regarding ADHD among primary school teachers.	Paper and pencil.

Development of the tool

According to **Treece and Treece (1986)** stated that the instrument selected in research should be the vehicle that would best obtain the data for drawing a conclusion pertinent to the study and to the study knowledge in the discipline.

A standardized knowledge questionnaire scale (KADDS) was used to fulfil the objectives of the study a careful search of literature such as books, journals, electronic media, where carry out material was obtained to frame questions. The tool was prepared with suggestions given by 6 experts from Mental Health Nursing department in different college. Tool was modified and tested later for content validity and reliability and final tool was prepared.

Description of tool

An extensive review of research and non- research literature, peer group discussions and taking the opinion of experts. The Standardized knowledge questionnaire scale (KADDS) consists of two parts.

Section-I Socio demographic variables

It comprised of 7 items seeking information on demographic characteristics of the primary school teachers with their Age, sex, educational status, experience in teaching, previous experience with ADHD child, any special training in child psychology, any conference attended.

Section-II Standardized knowledge questionnaire scale (KADDS).

The KADDS is a questionnaire to measure a person's expertise on attention deficit hyperactivity disorder (ADHD). It was developed by **Sciutto and colleagues (2000)** to assess existing and missing knowledge and misconceptions among parents of children with ADHD, their teachers and educators, and other educational and clinical professionals. The questionnaire can also be used by students and other adults. The KADDS contains **36 statements** on ADHD, which covers teachers' knowledge in three areas: 1) general knowledge of ADHD-15 items, 2) symptoms and diagnosis of ADHD -9items, and 3) treatment of ADHD-12 items. This section consists of standardized knowledge questionnaire scale (KADDS) to assess the knowledge of ADHD among primary school teachers at, SGRR School, Bombay Bagh, Dehradun. This part of tools consists of 36 questions. Each option carries different marks: -

Correct answer- 1
Incorrect answer- 0
Do not know- 0

The response of primary school teachers was categorized into three categories: poor, average, good. Maximum score is 36 and minimum score is 0.

Score	Remark
00-12	Poor
13-24	Average
25-36	Good

Poor: - The primary school teachers who are having no knowledge regarding ADHD.
Average: - The primary school teachers who are having little knowledge regarding ADHD.
Good: - The primary school teachers who are having more knowledge regarding ADHD.

Description of video awareness program

The researcher designed and developed a comprehensive video awareness program for primary school teachers regarding ADHD after reviewing research and non- research literature, discussion with experts and personal experience. A criteria list was prepared based on reviewing the existing literature. Nowadays the prevalence of ever diagnosed attention-deficit/hyperactivity disorder (ADHD) was 11.3% in children ages 5–17 years, with boys (14.5%) having a higher prevalence than girls (8.0%). So, a video awareness program can be an effective way to educate and support primary school teachers regarding ADHD. The area covered in the important tasks of discussed with primary school teachers in 3 days.

DAY-1: Introduction about research study, after 5mins took pretest by using of standardized knowledge questionnaire (KADDS) regarding ADHD.
DAY-2: Assist to video awareness program regarding ADHD among primary school teachers.
Content of video awareness program are:
- Define ADHD.
- Explain epidemiology of ADHD.

- Discuss causes of ADHD
- Enlist clinical features of ADHD.
- Classify the types of ADHD.
- Explain the diagnosis of ADHD.
- Describe how to deal with an ADHD child as a teacher.
- Understand prevention of ADHD.

DAY-3: Post test by using of standardized knowledge questionnaire (KADDS) regarding ADHD.

Content validity of tool

According to **Treece and Treece (1986)** defined validation is, refers to 'an instrument or test actually testing what it is supposed to be testing'.

According to **Polit and Hungler**, Validity refers to the degree to which an instrument measures what is supposed to be measuring.

The prepared instrument given for content validity includes statement of the problem, objectives of the study, blueprint of the tool and evaluation criteria checks list and outline of content was submitted to 6 experts ie., Mental Health Nursing experts, modifications were made on the had recommendations and suggestions of experts. After consultation with the guide, final tool was reframed. The experts were requested to validate the tools based on standardized knowledge questionnaire scale (KADDS) and to give suggestions, on the adequacy and relevancy of contents, the final questionnaire was prepared after incorporation the experts suggestions.

Try out of the study

After obtaining administrative approval, the standardized knowledge questionnaire scale (KADDS) was administered to 10 primary school teachers of SGRR School, Patel Nagar, Dehradun. This was done to check the items for clarity relevance and the nature of the response from the students who will be like final study subjects. It was found unambiguous. On an average 30 mins were taken by each subject to complete the questionnaire.

Reliability of the tool

Reliability is defined as the ability of an instrument to create reproducible results therefore reliability is concerned with consistency of the measurement tools. After the try out 10 primary school teachers the reliability tool was established by using Cronbach's Alpha formula. Reliability of the tool was **0.9**. That mean the tool was reliable of the study.

Pilot study

A pilot study is referred to a small-scale preliminary try out of the method to be used in a large study, which acquaints the researcher with problems that can be corrected in proportion for the large study or is done to provide the researcher with an opportunity to try out the procedure, methods, and tools of data collection. Pilot study is a trial study carried out before a research design is finalized to assist in defining the research question or to test feasibility, reliability and validity of the proposed study design.

According to **Polit and Hungler,** "Pilot study is a small-scale study conducted to test the plan and method of a research study"

Pilot study procedure

After taken a formal permission approved from SGRR School, Patel Nagar, Dehradun. The pilot study was conducted on 10 primary school teachers by using purposive sampling method. The 10 samples were selected according to inclusive and exclusive criteria. On day 1 pretest was conducted, on day 2, I started to conduct video awareness programme and day 3 the post test was administered.

Problems faced during the pilot study

There were no problems faced during the pilot study within the 3days, for 10 primary school teachers regarding ADHD after administration of video awareness program.

Ethical considerations

For the current study the investigator took into consideration the ethical issue. There were no ethical issues confronted while conducting the study.

◆ The selected study was accepted by research committee and written permission was taken from principal of SGRR School, Bombay Bagh, Dehradun.

◆ The purpose of study was explained to the respondents and the researcher assured them that their responses will be kept confidential, and anonymity would be maintained.

◆ Written consent from primary school teachers was taken. The samples of study were assured of maintaining anonymity and confidentially of their information.

Procedure for data collection
Formal written permission was obtained from the concerned authorities for conducting the main study. Data collection was done within the duration of 2 week. The 30 samples were selected from primary school teachers based on inclusive criteria and exclusive criteria by using purposive sampling technique. The purpose of the study explained and reassured confidentiality, consent have taken from the subject prior to study. The pre-test by using of standardized knowledge questionnaire (KADDS) regarding ADHD was done. Assisted to the video awareness program regarding ADHD among primary school teachers. And then post-test by using of standardized knowledge questionnaire (KADDS) regarding ADHD was done.

Plan for data analysis
1. Frequency and percentage distribution to analyse the socio demographic variables among primary school teachers regarding ADHD.
2. Mean median and standard deviation to assess the effectiveness of video awareness programme among primary school teachers.
3. T-test would be used to assess the effectiveness of video awareness programme among primary school teachers regarding ADHD.
4. Chi square test would be used to find out association between post-test knowledge score with their selected socio demographic variables.
The data obtained was planned to be analyse based on objectives and hypothesis of the study using descriptive and interferential statistics. Analyses data is represented in the form of tables, graphs and figures.

Descriptive statistics: - Frequency and distribution of percentage were used to analyse the demographic variable among primary school teachers regarding ADHD such as age, sex, educational status, experience in teaching, previous experience with ADHD child, any special training in child psychology, any conference attended on ADHD.
* Mean and standard deviation were used to assess the effectiveness of video awareness programme regarding ADHD among primary school teachers.
* Paired t-test would be used to assess the effectiveness of video awareness programme regarding ADHD among primary school teachers.
* Chi-square would be used to find association between the post-test knowledge with their selected demographic variables.
* Level of significance is set at 0.05 to interpret the hypothesis and finding.

5.ANALYSIS:

The collected data were tabulated and presented according to the objectives under the following sections: -
Section1: - Findings on selected socio demographic variables among primary school teachers.
Section2: - Findings related to pre-test and post-test level of knowledge score regarding ADHD among primary school teachers before and after administration of video awareness program.
Section3: - Findings related to effectiveness of video awareness program regarding ADHD among primary school teachers.
Section4: - Findings related to association between post-test level of knowledge score and selected socio demographic variables among primary school teachers.

SECTION-I
FINDINGS ON SELECTED SOCIO DEMOGRAPHIC VARIABLES OF PRIMARY SCHOOL TEACHERS.
Here socio demographic variables represent the frequency and percentage distribution of primary school teachers in terms of age, sex, educational status, experience in teaching, previous experience with ADHD child, any special training in child psychology, any conference attended on ADHD.

Table:1 Frequency and percentage distribution of primary school teachers according to selected socio demographic variables.

N=30

Sl. No.	Sample characteristics	Frequency (f)	Percentage (%)
1.	**AGE (in years)**		
	• 25-30 years	3	10%
	• 30-35 years	11	37%
	• More than 35 years	16	53%
2.	**GENDER**		
	• Male	0	0%
	• Female	30	100%
3.	**EDUCATIONAL STATUS**		
	• Undergraduate	0	0%
	• Graduate	7	23%
	• Postgraduate	23	77%
4.	**EXPERIENCE IN TEACHING**		
	• 1-5 years	7	23.4%
	• 6-10 years	18	60%
	• 11-15 years	1	3.2%
	• More than 15 years	4	13.4%
5.	**PREVIOUS EXPERIENCE WITH ADHD CHILD**		
	• Yes	6	20%
	• No	24	80%
6.	**ANY SPECIAL TRAINING IN CHILD PSYCHOLOGY**		
	• Yes	1	3%
	• No	29	97%
7.	**ANY CONFERENCE ATTENDED ON ADHD**		
	• Yes	11	37%
	• No	19	63%

Table 1: The data shows the percentage of 30 primary school teachers according to the various factors include like age, sex, educational status, experience in teaching, previous experience with ADHD child, any special training in Child psychology and any conference attended on ADHD.

Results depicts that 3 (10%) teachers were in the age group (1) 25-30 years, 11(37%) were in 30-35 years, 16 (53%) were in more than 35 years. (2) All 30 (100%) primary school teachers were females. (3) Out of 30 primary school teachers, 7 (23%) were graduates and 23 (77%) were postgraduates. (4) Out of 30 primary school teachers, 7 (23.4%) were having an experience in teaching of 1-5 years, 18 (60%) were having 6-10 years, 1 (3.2%) were having 11-15 years and 4 (13.4%) were having more than 15 years. (5) Out of 30 primary school teachers 6 (20%) were having a previous experience with ADHD child and 24 (80%) were not having any previous experience. (6) Out of 30 primary school teachers only 1(3%) were having a special training in child psychology and 29 (97%) were not having. (7) Out of 30 primary school teachers 11(37%) were attended a conference on ADHD and 19(63%) were not attended any conference on ADHD.
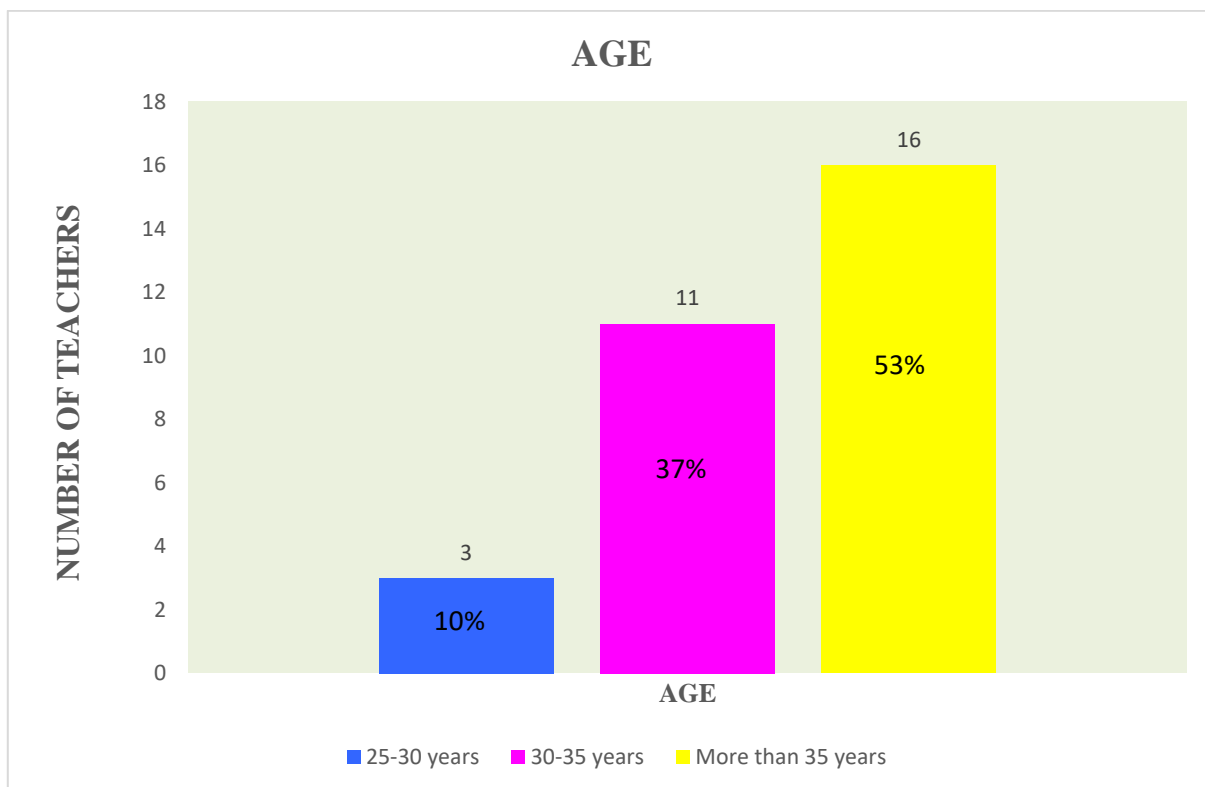
Fig: -3 Bar graph representing the frequency and percentage distribution of Age of primary school teachers.
Fig: 3 represents the frequency and percentage distribution of age of primary school teachers. Bar graph represents that 03 (10%) teachers were in the age group of 25-30 years, 11(37%) were in the age group of 30-35 years and 16 (53%) were in the age group of more than 35 years.
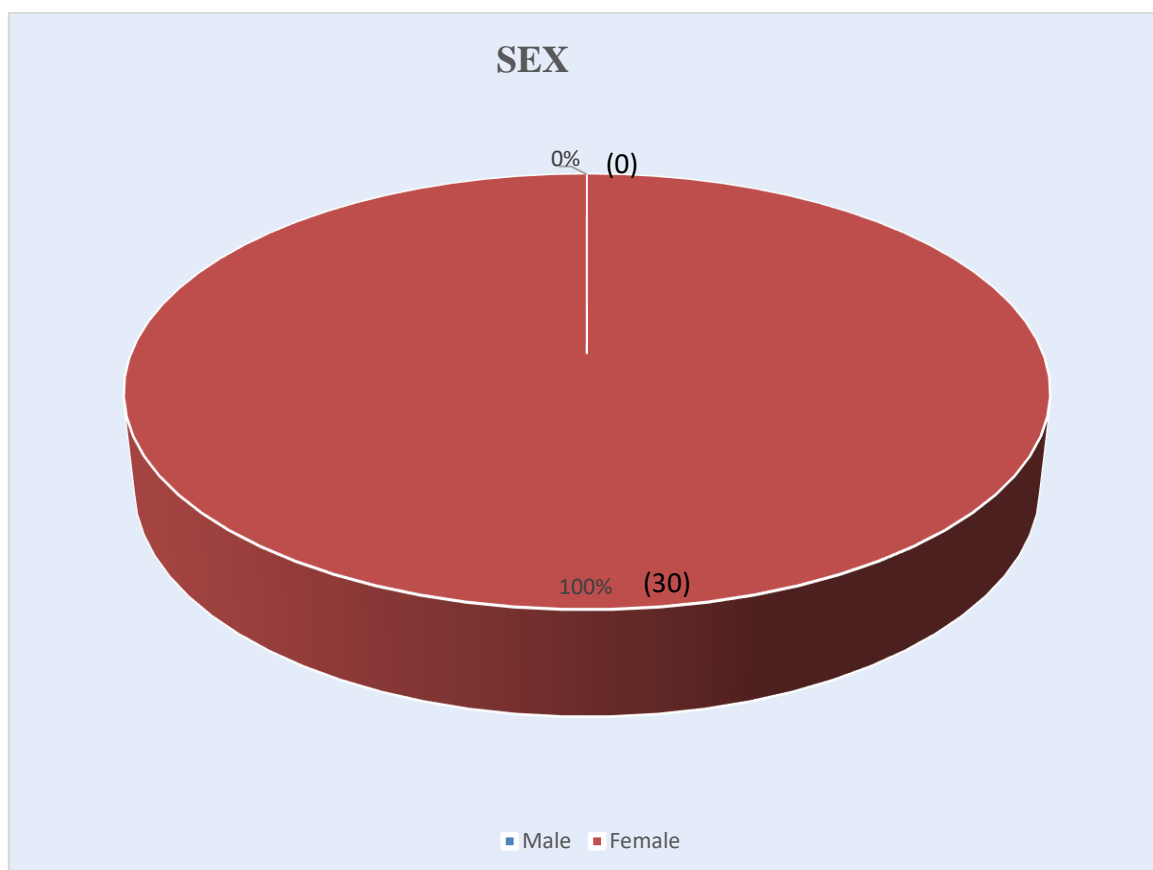

Fig: -4 Pie chart representing Sex distribution of primary school teachers.

Fig :4 depicts the frequency and percentage distribution of sex of the primary school teachers. The results depict that out of 30 (100%) primary school teachers all were females.
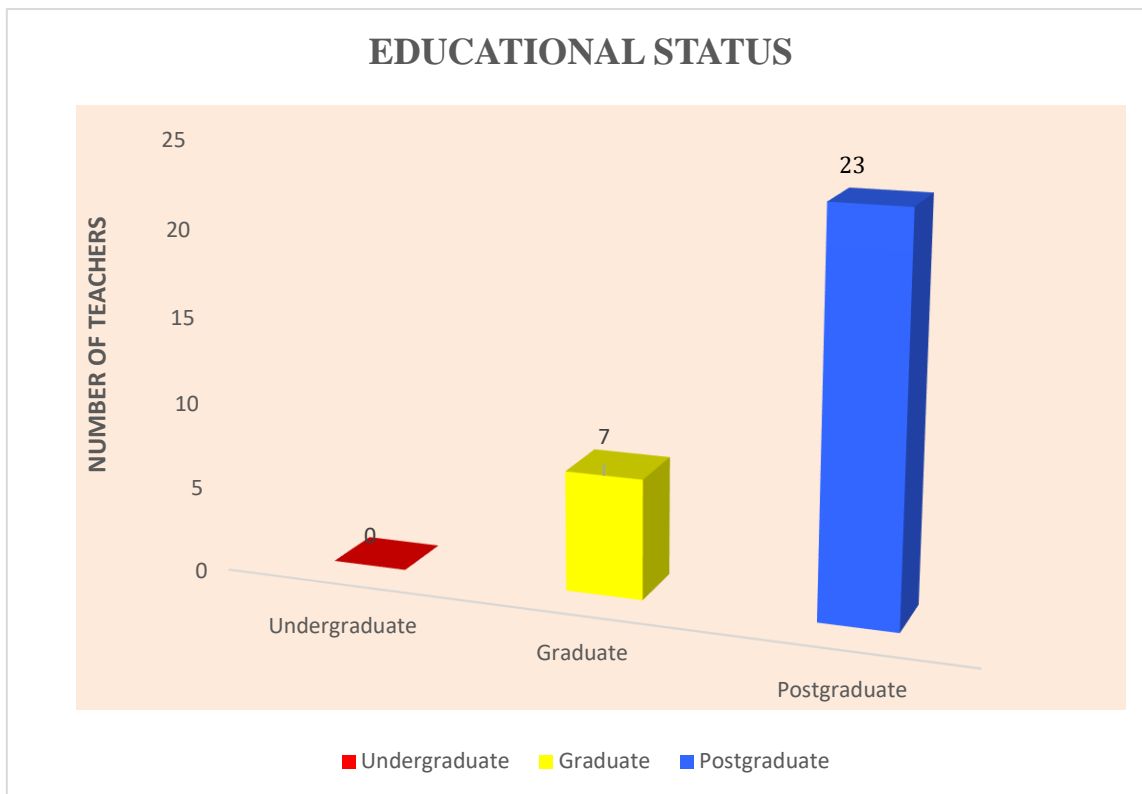

Fig: -5 3D Clustered Column representing frequency and percentage distribution of teacher's educational status.

Fig: 5 depicts frequency and percentage distribution of teachers based on their educational status. It depicts that out of 30 primary school teachers, 7 (23%) were graduates and 23 (77%) were postgraduates.
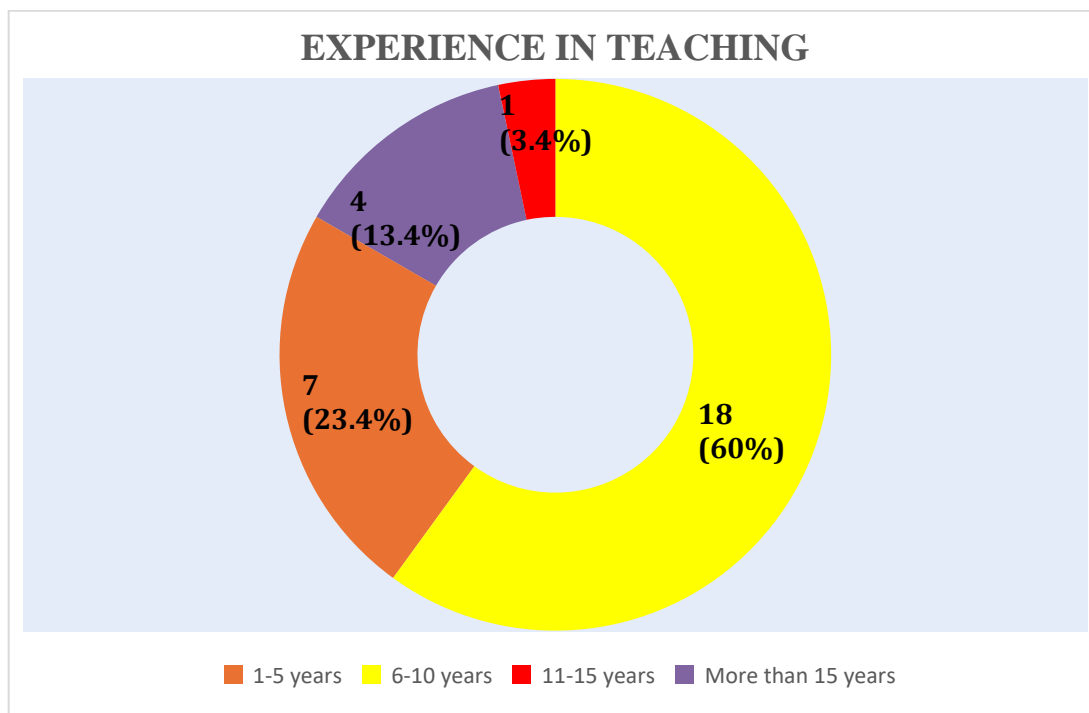

Fig: -6 Sunburst chart representing frequency and percentage distribution of teacher's experience in teaching.

Fig: 6 depicts the frequency and percentage distribution of teachers based on their experience in teaching. It depicts that Out of 30 primary school teachers, 7 (23.4%) were having an experience in teaching of 1-5 years, 18 (60%) were having 6-10 years, 1 (3.4%) were having 11-15 years and 4 (13.4%) were having more than 15 years.
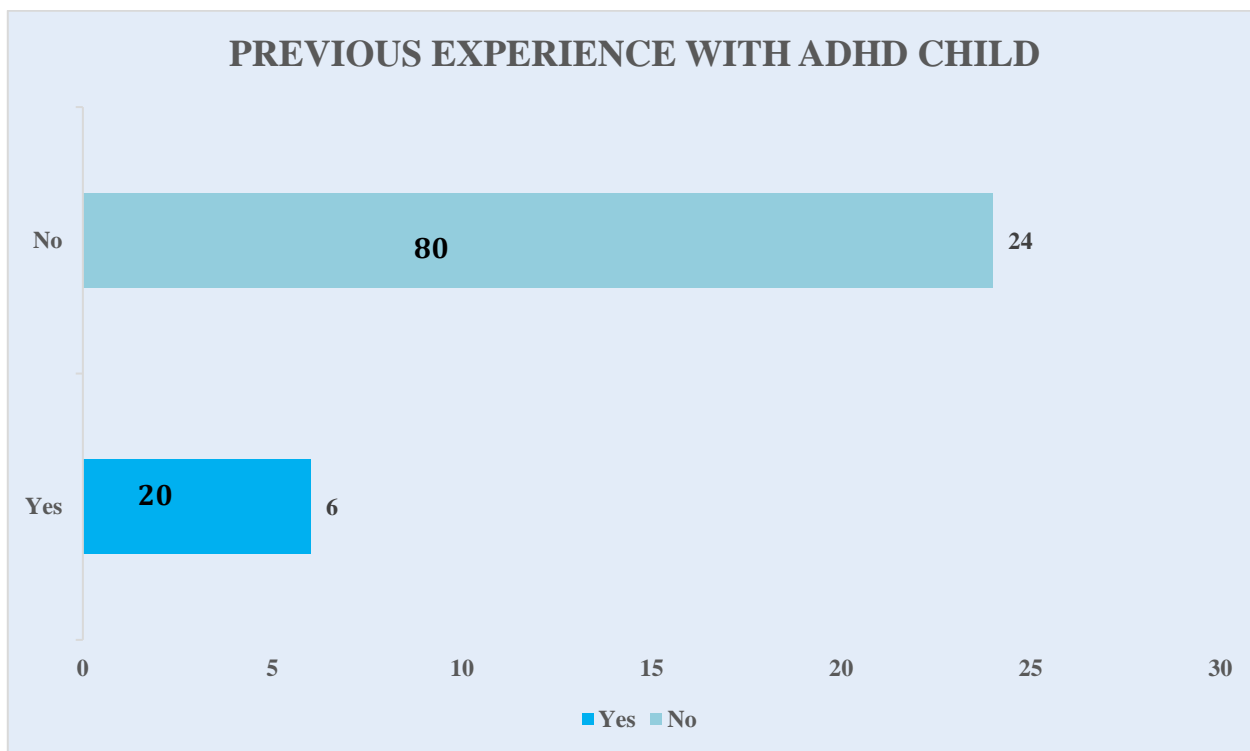

Fig: -7 Clustered Bar representing frequency and percentage distribution of teacher's previous experience with ADHD child.

Fig: 7 depicts the frequency and percentage distribution of teacher's previous experience with ADHD child. It shows that out of 30 primary school teachers 6 (20%) were having a previous experience with ADHD child and 24 (80%) were not having any previous experience with ADHD child.

Fig: -8 3D Pie Chart representing frequency and percentage distribution of teachers having any special training in child psychology.

Fig: 8 depicts the frequency and percentage distribution of teachers having any special training in child psychology. It shows that out of 30 primary school teachers only 1(3%) were having a special training in child psychology and 29 (97%) were not having any special training in child psychology.
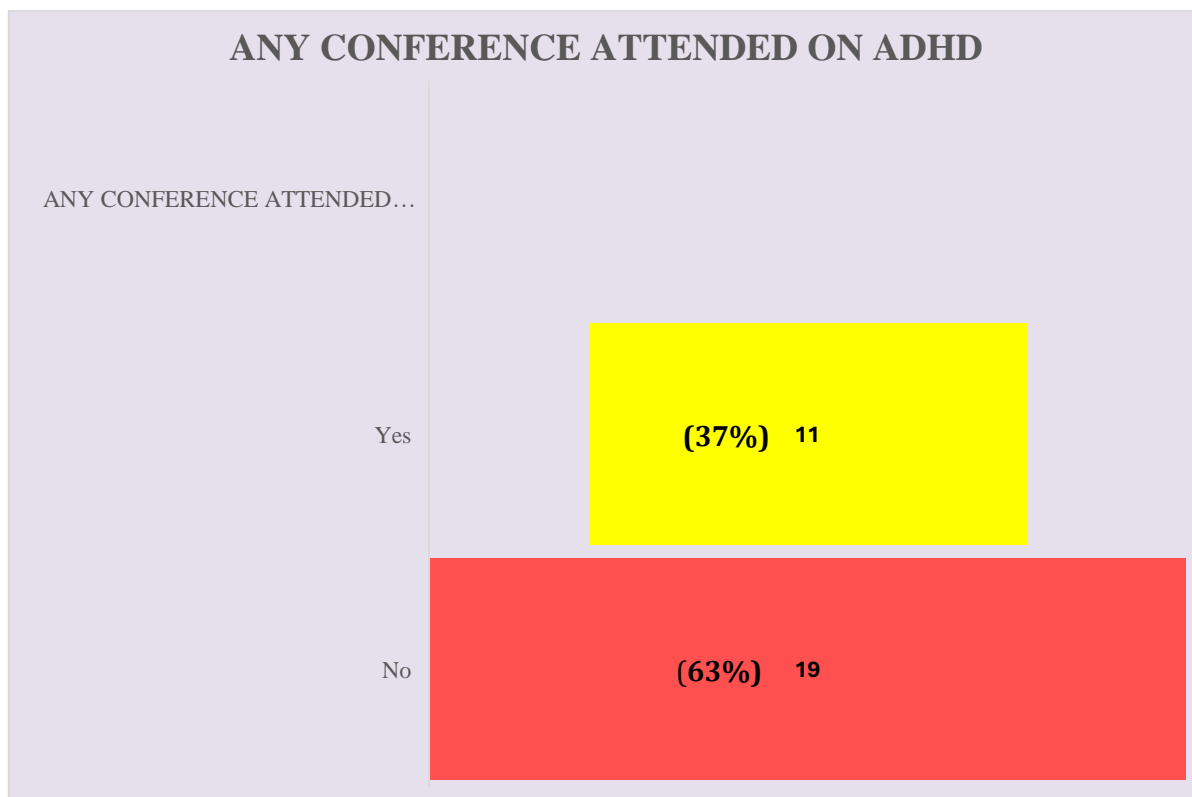

Fig: -9 Funnel Chart representing frequency and percentage distribution of teachers having any conference attended on ADHD.

Fig: 9 depicted the frequency and percentage distribution of teachers having any conference attended on ADHD. It shows that out of 30 primary school teachers 11(37%) were attended a conference on ADHD and 19 (63%) were not attended any conference on ADHD.

SECTION-II
FINDINGS RELATED TO PRE-TEST AND POST-TEST LEVEL OF KNOWLEDGE SCORE REGARDING ADHD AMONG PRIMARY SCHOOL TEACHERS BEFORE AND AFTER ADMINISTRATION OF VEDIO AWRENESS PROGRAM.
This section described the analysis, description and interpretation of data frequency of video awareness programme regarding ADHD among primary school teachers. The pre-test and post-test knowledge score were obtained through a standardised knowledge questionnaire scale (KADDS) and interpreted by using descriptive and inferential statistics.

Table-2 Frequency and percentage distribution of primary school teacher's level of knowledge in pre-test and post-test.   **N= 30**

LEVEL OF KNOWLEDGE	SCORE RANGE	PRETEST		POSTTEST	
		FREQUENCY	PERCENTAGE (%)	FREQUENCY	PERCENTAGE (%)
POOR	0-12	7	23.33%	0	0%
AVERAGE	13-24	19	63.33%	0	0%
GOOD	25-36	4	13.33%	30	100%

Maximum score=36
Data presented in Table 2 shows that in pre-test 23.33% of teachers having poor knowledge, 63.33% having average knowledge and 13.33% having good knowledge regarding an ADHD. In post-test 100% of teachers having good knowledge regarding an ADHD.
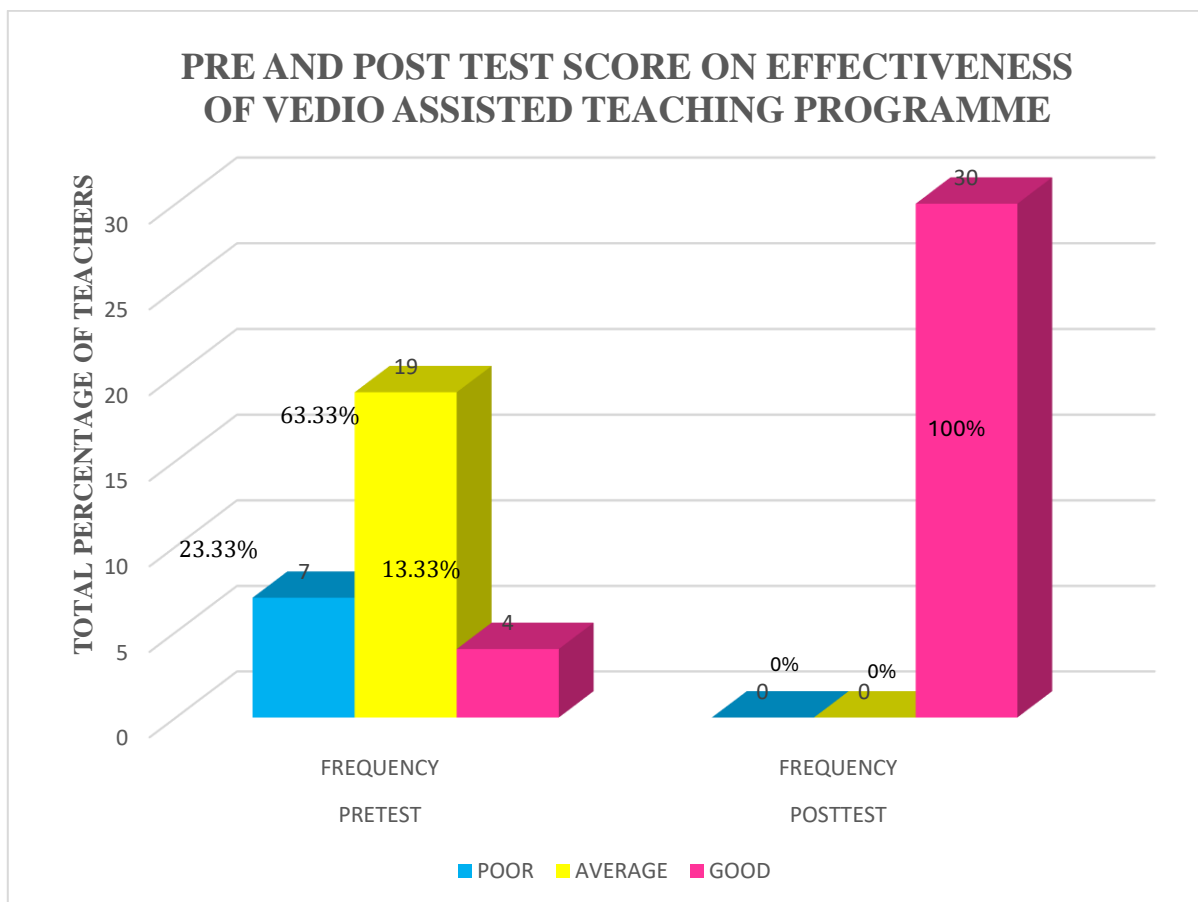
Fig: - 10 3D Clustered column graph showing the pre-test and post-test score regarding effectiveness of video awareness program regarding ADHD among primary school teachers.

Fig: 10 depicted a clustered column graph showing the pre-test and post-test score regarding effectiveness of video awareness program regarding ADHD among primary school teachers. The results showed that in pre-test out of 30, 7 (23.33%) were having poor knowledge, 19 (63.33%) were having average knowledge and 4 (13.33%) were having good knowledge regarding ADHD. In post-test all 30 (100%) were having good knowledge regarding ADHD.

SECTION-III
FINDINGS RELATED TO EFFECTIVENESS OF VEDIO AWARENESS PROGRAM REGARDING ADHD AMONG PRIMARY SCHOOL TEACHERS.

Table-3 Mean and S.D of primary school teachers before and after the administration of video awareness program regarding ADHD.

N=30

Level of knowledge	Mean	Mean Difference	Standard deviation	Degree of freedom	Calculate "t" value	Table value	Level of significance (0.05)
Pre-test	17.3		5.63				
		13.24		29	13.08	2.04	Significant
Post-test	30.54		1.85				

Table: -3 depicted that the mean value of pre-test knowledge score was 17.3 less than the post- test knowledge score of 30.54. It shows that video awareness program regarding ADHD was effective. The mean difference is 13.24 and the standard deviation of post-test is 1.85. The degree of freedom is 29. The calculated t-value is 13.08 which is greater than table value that is 2.04. Hence this accepts the research hypothesis (H1) and rejected null hypothesis (H0).
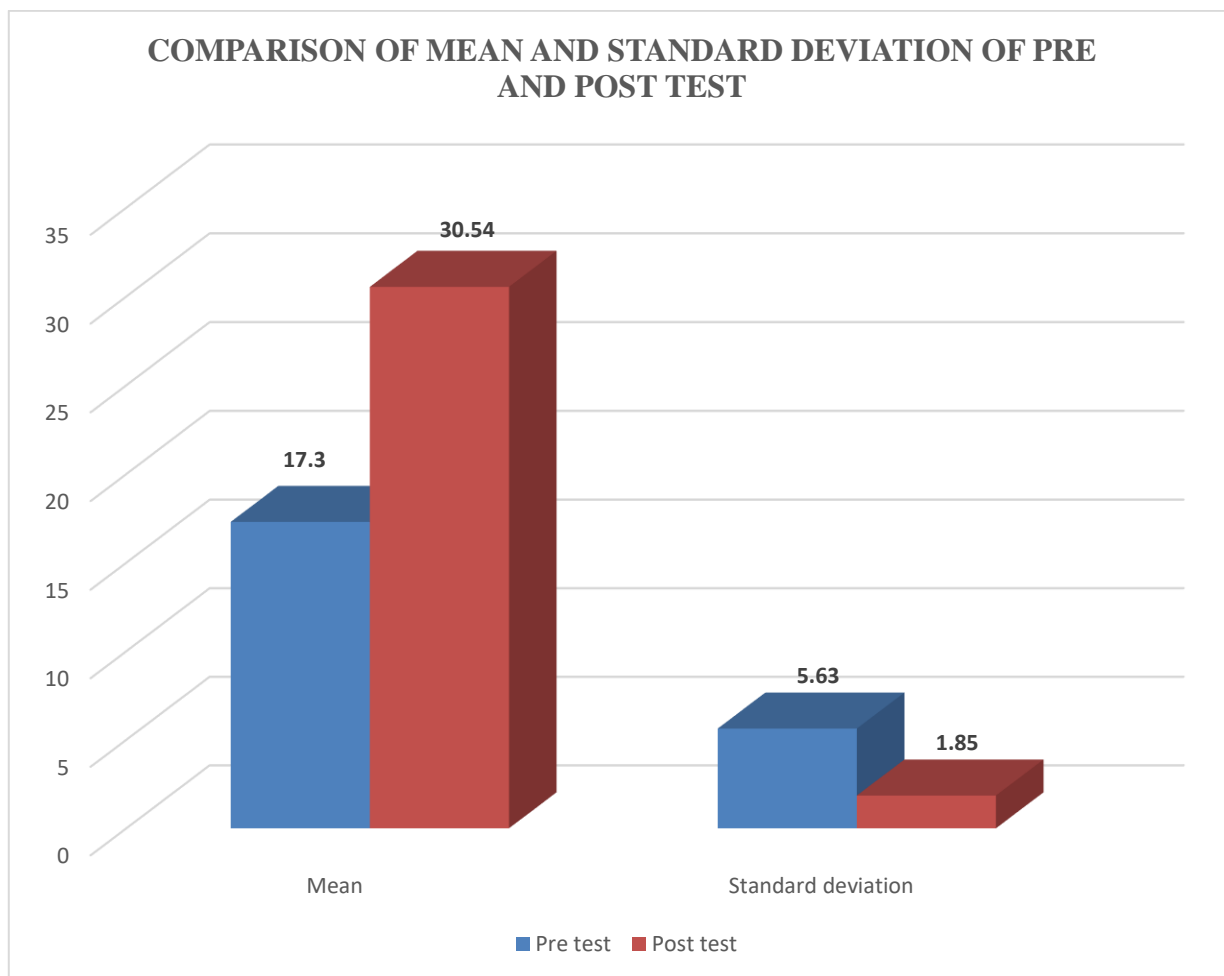
Fig11: - A column graph representing mean and standard deviation of pre and post test score.

Fig 15: - showed a column graph representing mean and standard deviation of pre and post test score. The graph depicting the result of mean and standard deviation of pre and post-test knowledge score regarding the effectiveness of video awareness program regarding ADHD among primary school teachers.

The result showed that the mean value of pre-test knowledge score was 17.3 less than the post- test knowledge score of 30.54 and standard deviation value of pre-test score was 5.63 which is more than post -test score was 1.85. It shows that video awareness program regarding ADHD was effective.

SECTION IV
FINDINGS RELATED TO ASSOCIATION BETWEEN POST-TEST LEVEL OF KNOWLEDGE SCORE WITH THEIR SELECTED SOCIO DEMOGRAPHIC VARIABLE AMONG PRIMARY SCHOOL TEACHERS.

The data in the section illustrated the association between post-test knowledge with their selected socio demographic variables in terms of age, sex, educational status, experience in teaching, previous experience with ADHD child, any special training in child psychology, any conference attended on ADHD.

To find out the significant association between post -test knowledge score with their selected socio demographic variables was accepted H2, the following research hypotheses were formulated.

Table 4 Association between post test score with their selected socio-demographical variables

N=30

Demographic variables	Poor		Average		Good		Df	Chi square χ^2	Table value	Level of significance
	f	%	f	%	F	%				
AGE	0	0	0	0	3	10	2	7.966	5.991	S

• 25-30 years	0	0	0	0	11	37			
• 30-35 years	0	0	0	0	16	53			
• More than 35 years									
SEX	0	0	0	0	0	0			
• Male							1	1	3.841	NS
• Female	0	0	0	0	30	30			
EDUCATIONAL STATUS	0	0	0	0	0	0			
	0	0	0	0	7	23	2	1.177	5.991	NS
• Undergraduate	0	0	0	0	23	77			
• Graduate									
• Postgraduate									
EXPERIENCE IN TEACHING	0	0	0	0	7	23			
• 1-5 years	0	0	0	0	18	60	3	20.657	7.815	S
• 6-10 years	0	0	0	0	1	3			
• 11-15 years	0	0	0	0	4	13			
• More than 15 years									
PREVIOUS EXPERIENCE WITH ADHD CHILD	0	0	0	0	6	20			
	0	0	0	0	24	80	1	0.12	3.841	NS
• Yes									
• No									
ANY SPECIAL TRAINING IN CHILD PSYCHOLOGY	0	0	0	0	1	3			
	0	0	0	0	29	97	1	14.68	3.841	S
• Yes									
• No									
ANY CONFERENCE ATTENDED ON ADHD									
• Yes	0	0	0	0	11	37			
• No	0	0	0	0	19	63	1	0.764	3.841	NS

Table 4 shows that the **chi square** value of selected socio demographic variables i.e. age is 7.966 greater than the tabulated value 5.991 at 0.05 level of significant, sex is 1 lesser than the tabulated value 3.841 at 0.05 level of significant, educational status is 1.177 lesser than table value 5.991 at 0.05 level of significant, experience in teaching is 20.657 greater than table value 7.815 at 0.05 level of significant, previous experience with ADHD child is 0.12 lesser than table value 3.841 at 0.05 level of significant, any special training in child psychology is 14.68 greater than table value 3.841 at 0.05 level of significant, any conference attended on ADHD is 0.764 which is lesser than table value 3.841 at 0.05 level of significant.

The result shows that the selected socio demographic variables in age, experiences in teaching, any special training in child psychology are significance at 0.05 level of significant. And the area of selected socio demographic variable sex, educational status, previous experience with ADHD child, any conference attended on ADHD are non-significance as the calculated values are lesser than the table values at 0.05 level of significant.

6. RESULTS AND DISCUSSION:

A report finding is never sufficient to convey its significance. The chapter deals with the discussion of the study finding and the results. The discussion brings the right report closure. This is the most important section of any research report. The discussion is done in accordance with the objectives of the study and hypothesis. The statement of the study is **"A pre-experimental study to assess the effectiveness of video awareness program regarding attention deficit hyperactivity disorder among primary school teachers at Shri Guru Ram Rai School, Bombay Bagh, Dehradun."**

OBJECTIVES OF THE STUDY: -
- To assess the pre-test level of knowledge regarding ADHD among primary school teachers at selected school in Dehradun.
- To evaluate the effectiveness of video awareness programme regarding ADHD among primary school teachers at selected school in Dehradun.
- To determine the association between post-test knowledge score with their selected socio demographic variable among primary school teachers.

Objective1: - To assess the pre-test level of knowledge regarding ADHD among primary school teachers at selected school in Dehradun.

Data presented in Table 2 shows that in pre-test 23.33% of teachers having poor knowledge, 63.33% having average knowledge and 13.33% having good knowledge regarding an ADHD. In post-test 100% of teachers having good knowledge regarding an ADHD. Fig: 10 depicts a clustered column graph showing the pre-test and post-test score regarding effectiveness of video awareness program regarding ADHD among primary school teachers. The result shows that in pre-test out of 30, 7 (23.33%) were having poor knowledge, 19 (63.33%) were having average knowledge and 4 (13.33%) were having good knowledge regarding ADHD. In post-test all 30 (100%) were having good knowledge regarding ADHD.

Objective2: - To evaluate the effectiveness of video awareness programme regarding ADHD among primary school teachers at selected school in Dehradun.

Table: -3 depicts that the mean value of pre-test knowledge score was 17.3 less than the post- test knowledge score of 30.54. It shows that video awareness program regarding ADHD was effective. The mean difference is -13.24 and the standard deviation of post-test is 1.85. The degree of freedom is 29. The calculated t-value is -13.08 which is greater than table value that is 2.04. hence this accepts the research hypothesis (H1) and rejected null hypothesis (H0). Fig 15: - shows a column graph representing mean and standard deviation of pre-test and post- test score. The graph depicting the result of mean and standard deviation of pre - test and post-test knowledge score of effectiveness of video awareness program regarding ADHD among primary school teachers. The result shows that the mean value of pre-test knowledge score was 17.3 less than the post- test knowledge score of 30.54 and standard deviation value of pre-test score was 5.63 which is more than the post -test knowledge score was 1.85. It shows that video awareness program regarding ADHD was effective.

Objective3: - To determine the association between post-test knowledge score with their selected socio demographic variable.

Table 4 shows that the **chi square** value of selected socio demographic variables i.e. age is 7.966 greater than the tabulated value 5.991 at 0.05 level of significant, sex is 1 lesser than the tabulated value 3.841 at 0.05 level of significant , educational status is 1.177 lesser than table value 5.991 at 0.05 level of significant, experience in teaching is 20.657 greater than table value 7.815 at 0.05 level of significant, previous experience with ADHD child is 0.12 lesser than table value 3.841 at 0.05 level of significant, any special training in child psychology is 14.68 greater than table value 3.841 at 0.05 level of significant, any conference attended on ADHD is 0.764 which is lesser than table value 3.841 at 0.05 level of significant.

The result shows that the selected socio demographic variables in age, experiences in teaching, any special training in child psychology are significance at 0.05 level of significant. And the area of selected socio demographic variable sex, educational status, previous experience with ADHD child, any conference attended on ADHD are non-significance as the calculated values are lesser than the table values at 0.05 level of significant.

7. CONCLUSION / SUMMARY: The findings of this study have been discussed with reference to the objectives and hypothesis. The pretest knowledge score of primary school teacher's regarding ADHD showed that primary school teachers have less knowledge about attention deficit hyperactivity disorder. This indicates the need for imparting necessary education and information regarding selected common behavioural problems of children such as attention deficit hyperactivity disorder. Video awareness programme regarding ADHD was effective for primary school teachers in enhancing their knowledge. They got deeper understanding of ADHD, its impact on students and effective strategies for support. They understood that early identification and intervention could significantly improve outcomes for students with ADHD.

8. LIMITATIONS:
- Knowledge of ADHD among primary school teachers.
- Study is limited to 30 samples.

- Study conducted at selected settings.
- Study was limited to the experience of the researcher.

9. RECOMMENDATIONS:

The study recommended the following: -

- A similar study may be replicated on a large group.
- A comparative study may be done to check the effectiveness of video awareness programme
- A similar study can be done in other area, on primary school teachers specially to improve their knowledge about ADHD.
- A similar study can be done for comparison of knowledge among rural and urban population.

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