To Study the Effectiveness of Parents and Teachers Counselling in Improving the Scholastic Performance of Children Showing the Symptoms of ADHD

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ABSTRACT

This study's sample of children did not consist of officially diagnosed instances of ADHD; rather, they exhibited comparable behavioural signs. Researchers must adhere to certain guidelines when choosing a representative sample of youngsters to participate in this study. Using the criteria of the DSM-IV (1994) categorization to identify youngsters exhibiting signs of ADHD seemed more genuine to the current investigator. Once the investigator obtained the children's addresses from the school records, they phoned their parents to question about their daily activities, any behavioural issues at home, and the kids' academic achievement in relation to their performance in school. We identified 60 children with moderate symptoms of ADHD and randomly divided them into three groups after collecting relevant information from their parents and teachers about their behaviour and activities. We then compared the similarities in their behaviour to the symptoms of ADHD as classified by the DSM-IV. From the ages of 6 to 10, all of the children who participated were boys. Separate tests were given for the letter symbol substitution task and the vowel cancellation test. Without consulting the kids' instructors or parents, we evaluated their performance. Counselling was provided to the instructors, parents, and students in each of these three groups individually, and then the students' performance was evaluated.

Keyword: Children, Behavioural, Home, Cancellation, Parents

INTRODUCTION

Many people rely on the manual's definitions, including medical professionals, researchers, and insurance administrators. Approximately 3% of children who are of school age are affected by autism spectrum disorder (ADHD). The reason why HPV affects boys at a rate three times higher than females is still a mystery. Each child has their own unique personality, temperament, and amount of energy, and they all develop at various speeds. There comes a moment in every child's life when they have trouble focusing, behave impulsively, or become sidetracked. These typical variables might sometimes be confused with attention deficit hyperactivity disorder (ADHD).

Consequently, keep in mind that a child's hyperactivity-impulsivity and inattention symptoms should correspond to their developmental stage. In contrast, symptoms of Attention Deficit/Hyperactivity Disorder (ADHD) persist throughout time and manifest in different settings. They make it harder for kids to succeed in school, socialize, and even at home. If a youngster exhibits symptoms at home but never in public or with adults other than parents, a diagnosis of attention deficit hyperactivity disorder (ADHD) cannot be made. Also, it's easy to mistake ADHD symptoms for those of other conditions, such as learning difficulties or emotional challenges, which call for different approaches to therapy. There is no foolproof way to diagnose attention deficit hyperactivity disorder (ADHD), making a diagnosis a challenging undertaking.

Development occurs at a quick and profound rate throughout childhood. At a pace never before seen in human history, children acquire the knowledge and abilities they need to thrive in their environment the moment they are born. This is such an impressive feat! Most children have learned the sophisticated cognitive operations needed to comply with regulations by the end of their first decade of life. These operations include controlling their impulses, staying focused on adults even when distracted, and sitting still when bored. Children are expected to follow adults' commands, remain focused in class, and play properly with their classmate's, therefore developing self-control is a crucial developmental challenge (Mischel, Shoda, & Rodriguez, 1989).

Still, self-control presents its own set of difficulties for kids who suffer from Attention Deficit/Hyperactivity Disorder (ADHD). Even though they mean well, some kids have a hard time following adults' direction, therefore they're called

"problem children" or "rule breakers." People used to think these kids were morally or psychologically flawed because they refused to comply (Still, 1902). But now we know that neurological dysfunction is only one of several variables that explain why children with ADHD don't comply.

Classification, an etiology, effects, and management of Attention Deficit/Hyperactivity Disorder are the aims of this unit. Among mental illnesses, attention deficit hyperactivity disorder (ADHD) stands out in that the vast majority of individuals have strong feelings towards the condition, maybe because of its more contentious aspects. Where relevant, we will go over some of the contentious opinions of social critics, laypeople, and disorder researchers. Our goal in bringing these debates to light is to provide you the information you need to decide for yourself whether or not the condition is real.

Teachers sometimes notice or believe that a student may have attention deficit hyperactivity disorder (ADHD) before anybody else. Reason being, symptoms of ADHD usually have an impact on academic performance or create disturbances in the classroom. Educators spend several months of the year in close proximity to their students.

Teachers get to know their students' usual behaviours in classroom scenarios that demand focus and self-control since they interact with a wide variety of pupils. Therefore, kids may consult the school psychologist or the parents when they see anything out of the ordinary.

Need of the Study

Parents need to understand their own emotional and other reactions to the stress inherent in having a hyperactive child at home. They need to acquire new skills to handle the unique problems presented by their child. They should learn to anticipate the situation that can allow behavioral problems to appear (for e.g., visits to the market, visitors coming home) and to be planed ahead so that it will minimize disruption. Parents should maintain a diary about the behaviour and activities of the child and their mal-treatment to understand the wrong behaviour of parents with child. They should offer the educational game to the child and must give some time to their children when they play because it helps to maintain the relationship and develop understanding between parents and the child. They should provide the ways to burn off excess energy. Chocolates, toffees and artificial flavors should be avoided because it seems to increase hyperactivity.

REVIEW OF LITERATURE

Mahmoodi, Nasrin et.al. (2019). Researchers and psychologists have begun to give more and more attention to attentiondeficit hyperactivity disorder (ADHD), one of the most prevalent diagnoses in recent years. Because of how the illness is structured, it impacts not just the child's health but also the parents' emotional well-being. Purpose: This research aimed to examine the impact of parent-child relationship-based group therapies on the emotional health of parents whose children (ages 6-11) suffer from attention deficit hyperactivity disorder. Research Approach: Participants were chosen at random from the educational districts of Tehran; the mothers of thirty children diagnosed with attention deficit hyperactivity disorder (ADHD) participated in the study as either pharmacotherapy, combined (pharmacotherapy and family-oriented intervention) or family-oriented. The study used a quasi-experimental design with pre- and post-tests. While the drug treatment group got nothing but medicine, the combined and family-oriented groups met for ten sessions to work on parentchild relationships. Two rounds of the Mental Health Scale were administered to all participants: before and after the intervention. We used covariance analysis to look at the data. Results: Parents of children with ADD/ADHD in the combined and family-oriented groups reported significantly better mental health after participating in an educational programme focused on the parent-child interaction. The results show that therapists can help the parents of children with ADHD and ADD by using interventions that focus on the parent-child relationship and pharmacotherapy, which is a combined method. This approach improves the mental health of the parents.

Amel, Afsaneh Karbasi et.al. (2018). Background Often unnoticed by parents, attention deficit hyperactivity disorder (ADHD) is a leading cause of hyperactivity, inattention, academic failure, emotional difficulties, and behavioural issues in primary and preschool-aged children. The purpose of this study was to examine the effects of parent-based cognitive-behavioral therapy (CBT) on the symptoms of attention deficit hyperactivity disorder (ADHD), including restlessness, impulsivity, and attention deficit disorder (ADD), as well as on overweight and self-esteem in children and adolescents in Isfahan who were between the ages of 6 and 11. Procedures and Supplies Forty children, ranging in age from 6 to 11, were included in this quasi-experimental research. All of them had attention deficit hyperactivity disorder (ADHD) and were overweight or obese, defined as being heavier than the 85th percentile for their age, height, and sex. In 2015, these children were sent to the Isfahan child and adolescent psychiatric clinic at Ali Asghar Hospital by their parents. While the other patients in the experimental group underwent cognitive behavioural therapy (CBT) sessions, twenty patients in the control group received just ADHD medication and no further intervention. Body mass index (BMI), ADHD conners' test, and

Coppersmith Self-Esteem Scale were the instruments used for analysis. We used analysis of variance with repeated measurements to analyses the data. Final Product Children who were overweight or obese and had attention deficit hyperactivity disorder (ADHD) showed a considerable improvement in their symptoms and self-esteem after receiving cognitive behavioural therapy (CBT) from their parents. Additionally, the findings demonstrated a noteworthy impact on the symptoms of ADHD, overweight, and self-esteem in children who were overweight and had ADHD (P < 0.001). Last thoughts As an additional therapy option, parent-focused CBT may help obese ADHD children with their symptoms, body mass index (BMI), and self-esteem.

OBJECTIVES OF THE STUDY

Following objectives will be used in this study: -

- 1. To probe that to what extent counselling may be effective in dealing with the problems of children showing the symptoms of ADHD
- 2. To ascertain the effectiveness of parents and teachers counselling in improving the scholastic performance of children showing the symptoms of ADHD.

RESEARCH METHODOLOGY

Research is an ongoing effort that aims to find new information and add to our organized corpus of knowledge using scientific and methodical methods. Actually, research is a kind of artistic inquiry into scientific matters. Research is defined as "a thorough investigation or inquiry particularly through search for new facts in any branch of knowledge" in the Advanced Learner's Dictionary of Current English. For research in the social sciences to be scientifically sound and yield useful conclusions, researchers must exercise extreme caution when formulating their research questions and design their studies to ensure objectivity and rigour.

It is essential for researchers to exercise caution while following protocol, making sure to use a sufficient sample approach, use standardized instruments, and apply proper statistical methods for data analysis. When doing scientific study in the field of psychology, it is crucial to adhere to these guidelines. Research is defined by D. Slesinger and M. Stephenson (quoted in the 1930 Encyclopaedia of Social Sciences) as "the act of establishing, expanding, correcting, or verifying knowledge by means of the manipulation of objects, ideas, or symbols," regardless of whether the goal is to build theory or practice an art form. Therefore, research is an innovative way to add to the body of knowledge in order to progress it.

Research is the process of seeking knowledge by means of investigation, analysis, comparison, and experimentation. The research process is a methodical one that begins with stating the problem, then moves on to developing a hypothesis, gathering relevant facts or data, and finally drawing conclusions that may be solutions to the problem at hand or broad theoretical frameworks. The goal of research, as acknowledged by all sciences, is to use observations as a foundation for answering questions of interest. Edward (1968) explained that research is not about making random observations, but rather focusing on those that are relevant to the question at hand. Research, then, is an innovative effort to increase the body of knowledge by adding something new to it. Investigating hypotheses by direct observation, comparison, and experimentation is an ongoing process.

RESULT AND DATA INTERPRETATION

Table 6.1 Showing the Impact of both Parent's and Teacher's Counselling on Performance of Children on Letter Symbol Substitution Task. (Group-Ill, N = 20)

| | Mean | S.D | t | |
|--------------------------|-------|------|------------|--|
| Pre-counselling session | 48.75 | 6.71 | | |
| Post-counselling session | 58.05 | 5.35 | - 13.28*** | |

Significantat 0.01

The purpose of this study was to administer the Letter Symbol Substitution Task to students and compare their results with those of students whose parents or instructors had received counselling recommendations. When dealing with these students' issues at home and in the classroom, both parents and teachers made use of the counselling advice offered to them.

Table 6.2 Showing the Scholastic Performance of Children Before and After Counselling of their Teachers (Group-I, N = 20)

| S.N | Scholastic Performance of children in half-yearly examination before giving counselling to their Teachers. | Scholastic Performance of the children in annual examination after counselling of their Teachers. |
|-----|---------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|
| 1 | 40% | 41.8% |
| 2 | 39.1% | 42.1% |
| 3 | 35% | 43.2% |
| 4 | 38% | 40% |
| 5 | 36% | 38.5% |
| 6 | 40% | 42.1% |
| 7 | 32% | 35% |
| 8 | 30% | 35% |
| 9 | 39% | 44.3% |
| 10 | 35% | 39% |
| 11 | 32.2% | 36.5% |
| 12 | 31.2% | 34% |
| 13 | 33% | 38% |
| 14 | 34.5% | 39% |
| 15 | 35% | 37% |
| 16 | 36% | 40% |
| 17 | 35% | 38% |
| 18 | 32% | 36% |
| 19 | 31% | 36% |
| 20 | 30% | 37% |

Without consulting with their instructors, we extracted the students' academic performance from their half-yearly report cards. That is, according to Table. After the yearly test results were announced, the academic performance of the same students was reviewed in the school records once again to determine the impact of teacher counselling on the students' academic performance.

The children's academic performance improved noticeably in the second part of the research. This finding indicates that the teacher's advice had an effect on the students' overall academic performance as well as their performance on the tasks. The results suggest that the students' behaviour has changed for the better as a result of the counselling they received from their

teachers. This is supported by their increased performance on two tasks and their higher percentage of marks on the annual exam, which prove their academic success.

Table 6.3 Showing the Average % of Marks of all the Children in Group-I Before and After Counselling of their Teachers.

| Average % of marks of | Average % of marks of |
|-----------------------|-----------------------|
| children before | children after |
| counselling of their | counselling of their |
| parents. | parents |
| 37.2 % | 46.20 % |

The average percentage of marks for children without teacher counselling was 34.7 percent, whereas the average percentage for children with teacher counselling was 38.5 percent, according to Table (Group-I). While the difference is not statistically significant, the trend of the results shows that teacher counselling does have an effect on students' performance, as it is evident from the fact that the percentage of marks in the annual examination increased to 38.6%.

Table displays the academic performance of the students in this group as measured by their performance on half-yearly and annual exams both before and after parental therapy. It is clear from the greater percentage of marks provided in Table that the parental counselling had an influence on improving the academic performance of this group of children when compared to their peers. Parental counselling was also discovered to increase self-efficacy, which in turn improved the academic performance of these students, according to the pattern of the results.

The results show that the kids will behave differently when it comes to their daily schoolwork and accomplishments if their parents handle them well and follow the counselling advice. This should lead to a positive change in their performance. The study's findings provide credence to the idea that parental therapy might improve students' test-taking skills, which in turn leads to increased achievement on yearly assessments.

| Table 6.4 Showing the Scholastic Performance of Children Before and After Counselling of their Parents |
|--------------------------------------------------------------------------------------------------------|
| (Group-II, N = 20 $)$ |

| S.N | Scholastic Performance of children in half-yearly examination before counselling of their Parents and teachers (both). | Scholastic performance of the children in annual examination after counselling of their Parents and teachers (both). |
|-----|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| 1 | 56% | 60.4% |
| 2 | 33.5% | 38.5% |
| 3 | 32.6% | 50.8% |
| 4 | 35.9% | 48.9% |
| 5 | 42.2% | 46% |
| 6 | 34.1% | 43.5% |
| 7 | 35% | 39% |
| 8 | 47.3% | 50% |
| 9 | 36.8% | 39.5% |
| 10 | 32.2% | 40.6% |
| 11 | 33.6% | 49.5% |
| 12 | 52.6% | 64% |
| 13 | 26.9% | 39.5% |
| 14 | 34.9% | 45% |
| 15 | 56% | 66% |
| 16 | 32.6% | 40% |
| 17 | 45% | 55.5% |
| 18 | 46.1% | 59.9% |
| 19 | 50% | 60% |
| 20 | 43.2% | 50.2% |

CONCLUSION

Additional training on how to deal with children who have attention deficit hyperactivity disorder (ADHD) requirements. In particular, parents need to understand the significance of avoiding stressful conditions that often cause their children problems, such as being overstimulated, acting irritably, or being very tired. It is necessary to educate the majority of parents on the need of establishing reasonable boundaries for their children's conduct and establishing regular routines for their children's daily activities.

A total dependence on narcotics may diminish the enthusiasm and engagement of parents and educators in discovering alternative methods to assist these youngsters, making parental participation all the more crucial. There is a lot of stress that comes with having a hyperactive kid at home, and parents need to be aware of how they respond emotionally and otherwise. In order to deal with the specific challenges their kid brings, they will need to learn new things. Students should be taught to recognize when certain situations may arise that might lead to behavioural issues, such as going to the market or having guests around, and to prepare ahead of time so that these situations are less disruptive.

A parent may get insight into their own abusive conduct towards their kid by keeping a journal detailing the child's daily activities and any instances of mistreatment. Parents should provide their children with educational games and spend quality time with them as they play. This helps parents and children stay connected and fosters understanding. They need to make available means of dissipating surplus energy. If you want to keep your ADD in check, stay away from sweets like chocolate, toffee and artificial flavors.

REFERENCES

- [1]. Staff, anouck & oord, saskia & oosterlaan, jaap & hornstra, rianne & hoekstra, pieter & hoofdakker, barbara & luman, marjolein. (2022). Effectiveness of specific techniques in behavioral teacher training for childhood adhd behaviors: secondary analyses of a randomized controlled microtrial. Research on child and adolescent psychopathology. 50. 10.1007/s10802-021-00892-z.
- [2]. Daley, david & tarver, joanne & sayal, kapil. (2020). Efficacy of a self-help parenting intervention for parents of children with attention deficit hyperactivity disorder in adjunct to usual treatment -small scale randomised controlled trial. Child care health and development. 10.1111/cch.12825.
- [3]. Ogundele, michael & ayyash, hani. (2023). Adhd in children and adolescents: review of current practice of non-pharmacological and behavioural management. Aims public health. 10. 35-51. 10.3934/publichealth.2023004.
- [4]. Bhasin, vijyeta & srinivasan, p. & deaver, uma. (2018). Effectiveness of various teaching programs on knowledge and attitude regarding attention deficit hyperactivity disorder (adhd) and learning disabilities (ld) of children among primary school teachers: a systematic review. 320.
- [5]. Wennberg, birgitta & janeslätt, gunnel & kjellberg, anette & gustafsson, per. (2018). Effectiveness of time-related interventions in children with adhd aged 9–15 years: a randomized controlled study. European child & adolescent psychiatry. 27. 10.1007/s00787-017-1052-5.
- [6]. Miller, carlin & brooker, brianne. (2017). Mindfulness programming for parents and teachers of children with adhd. Complementary therapies in clinical practice. 28. 10.1016/j.ctcp.2017.05.015.
- [7]. Azeem, asmaa & faiz, zikra & siddique, muhammad & shabbir, muhammad & warraich, waqar. (2021). School psychologists' perspectives about effectieness of behavior therapy for children with attention deficit hyperactivity disorder in pakistan. Humanities & social sciences reviews. 9. 1142-1155. 10.18510/hssr.2021.93113.
- [8]. El-nagger, nahed & abo elmagd, manal & hbrahim, hanan. (2017). Effect of applying play therapy on children with attention deficit hyperactivity disorder. Journal of nursing education and practice. 7. 104. 10.5430/jnep.v7n5p104.
- [9]. Faizah, nur & listiana, aan & kurniati, euis. (2017). Behavior management to improve social skills and academic achievement of children with attention deficit/hyperactivity disorder (adhd). 10.2991/icece-16.2017.62.
- [10]. Victory, erinn & aman, emily & druskin, lindsay & mcneil, cheryl. (2021). Parent-child interaction therapy as a treatment for attention-deficit/hyperactivity disorder in preschool-aged children.
- [11]. Doffer, dominique & dekkers, tycho & hornstra, rianne & oord, saskia & luman, marjolein & leijten, patty & hoekstra, pieter & hoofdakker, barbara & groenman, annabeth. (2022). Sustained improvements by behavioural

parent training for children with attention-deficit/hyperactivity disorder: a meta-analysis into longer-term child and parental outcomes. 10.31234/osf.io/cymva.

- [12]. Lawson, gwendolyn. (2017). Do parent and teacher report of adhd symptoms in children differ by ses and racial status?. Journal of psychopathology and behavioral assessment. 39. 10.1007/s10862-017-9591-0.
- [13]. Reilly, colin & atkinson, patricia & das, krishna & chin, richard & aylett, sarah & burch, victoria & gillberg, christopher & scott, rod & neville, brian. (2014). Parent- and teacher-reported symptoms of adhd in school-aged children with active epilepsy. Journal of attention disorders. 21. 10.1177/1087054714558117.
- [14]. Mo, yuen & chan, tak mau. (2021). Involvement of parents of children with adhd in schools: implications for social work practice. Journal of social work. 22. 146801732110300. 10.1177/14680173211030029.