

Demographic Effects on Behavioral Problems among Learning Disabled Children in Coastal Districts of Andhra Pradesh

Subhashini Akurathi*

Department of Psychology, Andhra University, Visakhapatnam, India

ABSTRACT

The present study was undertaken in an attempt to identify the behavioral problems among learning disabled children. The sample consisted of 450 (age 6-8 years) learning disabled children from various centers. The Aberrant behavior checklist was administered to the parents of the children uniformly. Data were analyzed by using analysis of variance. Results revealed that place of residence and income have had a significant impact on the behavioral problems specifically lethargy and inappropriate speech. Results are discussed in the light of previous findings and implications for the learning-disabled children and their parents.

Keywords: Learning disabilities; Behavioral problems; Place of living; Socio economic status

INTRODUCTION

Learning disabilities are problems with abilities as time planning lifestyles beyond teachers and can affect relationships with family, friends those effects on Cultural or financial disadvantages. People with disabilities are regularly appears to be a gap between the individual's manageable and real skill can also be unable to reveal the degree expected from their chronological age [1-3]. Dyscalculia; is a particular mastering task affects a person's ability to recognize negatively as well as thinking and writing at the equal time [4].

Behavioral characteristics among learning disable children

According to DSMI VI, irritability is a behavior that depicts the characteristics like screaming, crying in anger, striking out and stamping feet, grizzly or whiny. They always complain about childishly. They cry with little provocation. They get upset over minor matters they are overly sensitive for minor Irritability [5]. Various symptoms of irritability and should be present disruptive level. Injures self, Aggressive to others. Screams inappropriately. Temper tantrums, Irritable. The symptoms of lethargy are Inaction, indifference, inertia, languor, lassitude, listlessness, sleepiness, sloth, slowness, sluggishness, stupor, torpidity, torpor.

Always shows stereotypic behavior with refuse to obey simple orders from others. They always join in late and want the group's

attention. They are overactive and physically restless. The children have a lack of concentration, unmotivated and limited attention span [6]. They are excessively energetic and physically overactive. Six or more symptoms of hyperactivity and should be present for four (4) weeks to the disruptive level. Children with inappropriate speech demonstrate qualitative differences in social interaction and often have difficulty establishing and maintaining relationships.

Hassan Described the inappropriate speech of children with behavior disorders [7]. These children typically show pronominally reversal, perseveration, mixed-up words and meanings. Roland attributed the speech disorders of these children to an in the ability to generalize; he suggested that the underlying cause might be a neurological one, as inappropriate speech occurs not only in behavior disorders but also in more obvious cases of brain damage. The children may articulate well and have large vocabularies, but much of what they say is inappropriate to the situation. Talks like a "broken record" Often attention-seeking. Vocal stereotypy; Vocalizes certain words, phrases or sentences repeatedly, maybe echolalia. Inappropriate speech Type; Three or more symptoms of inappropriate and should be present for four4 weeks to the disruptive level. Talks excessively, repetitive speech, talks self loudly.

Correspondence to: Subhashini Akurathi, Department of Psychology, Andhra University, Visakhapatnam, India, E-mail: siddharth010105@gmail.com

Received date: July 06, 2020; **Accepted date:** July 21, 2020; **Published date:** July 28, 2020

Citation: Akurathi S (2020) Demographic Effects on Behavioral Problems among Learning Disabled Children in Coastal Districts of Andhra Pradesh. Int J Phys Med Rehabil. 8: 560. DOI: 10.35248/2329-9096.20.08.560

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REVIEW OF LITERATURE

According to the descriptive statistic study results indicated emotional and behavioral problems among learning disabled children [8]. The study found that children with Neuro lingual Disorder had greater situation those are the consequence no longer stunning that youth Learning Disability may develop avoidant [9]. The parents may feel bewildered and guilty and blame their teens of affairs is rife viable for damage to the already fragile self-esteem of the toddler with Learning Disabled children [10]. Learning Disabilities and behavior Problems [11] focuses on the implications of the findings in child psychopathology hyperactivity. Results identified very distinct behavior and emotional problems among hyper active children.

Poverty level associated with higher levels of Developmental disabilities, the findings revealed children at 8 years of age were having Externalizing behavior problems significant associations with Anxiety and depression also with drawl from social situations. The study was indicated that lack of a sense of self-confidence likely to associated with families of lower parental monthly income groups. Low family income may be especially salient in both the early onset of serious behavior problems. According to a study, there is a greater prevalence of disordered behavior amongst families belonging to the lower economic strata of society. Research on poverty has been identified Socioeconomic disadvantage causes behavioral problems among intellectually disabled children. A variety of socio-demographic factors have been implicated in the etiology of child behavior problems [12-16].

Objectives

- To assess the behavioral problems among learning disabled children as on the place of living.
- To assess the behavioral problems among learning disabled children as on Socioeconomic Status.

Hypotheses

Hypothesis -1 there is a significant difference in the behavioral problems among learning disabled children as on Place of Living.

Hypothesis -2 there is a significant difference in the behavioral problems among learning disabled children as on Parental monthly Income.

METHOD

Sample

The participants for the present study included children diagnosed with a Learning disability as per the diagnostic criteria of DSM-IV TR. These children attend special schools across Coastal Districts of Andhra Pradesh. The age ranged from 6-to 15 years boys included 450 Learning disabled children.

Tools: The Aberrant behavior checklist was developed [17]. The Aberrant behavior checklist is a symptom checklist for assessing

the effects of treatment and as an instrument for assessing behavior in intellectually disable child Adult.

Administration: 10 to -15 minutes min. The checklist has 58 items that are divided into five subscales: I. Irritability, Agitation, Crying (15 items); II. Lethargy, Social Withdrawal (16 items); III Stereotypic Behavior (7items); IV, Hyperactivity, Non-compliance (16 items); and V, inappropriate Speech (4 items).

The researcher used a Telugu translation of the ABC Aberrant Behavior Checklist. The translation was developed [18]. The checklist can be responded to by selecting any of the four potions. 0 indicates not at all a problem, 1 indicates the behavior is a problem, but slight in degree, 2 indicates the problem is moderately serious, 3 indicates the problem is severe in degree. The Aberrant Behavior Checklist (ABC) in Telugu version was completed by the mothers. The checklists filled by the respective parents are collected and the scoring procedure is don Statistical computations after the quantification of data, various statistical measures such as Descriptive statistics, ANOVA have been used for present study with the help of SPSS 21 package.

RESULTS

RH: there is a significant difference in the behavioral problems among learning disabled children as on Place of Living.

NH: There is no significant difference in the behavioral problems among learning disabled children as on Place of Living.

Table 1: Results of Descriptive statistics for behavioral problems of the Learning disability as on the place of living.

Dependent Variable	Place of living	N	Mean	SD	FF-value
Lethargy	Rural	258	15.5	10.75	
	Urban	144	18.65	9.13	4.55* ^a
	Semi urban	42	16.57	8.44	
Inappropriate speech	Rural	258	3.53	3.02	
	Urban	144	4.4	3.15	3.63* ^a
	Semi urban	42	3.81	3.13	

* Correlation is significant at the 0.05 level (2-tailed).

The above Table 1 inferences the behavioral problems of the Learning disability based on the place of living. The mean score (M=18.65) of Urban children is higher than the mean score (M=16.57) of semi-urban children and the mean score (M=15.50) of rural children in predominantly Lethargy. The F-Value was significant at 0.05 levels. Therefore, it can be inferred that there is a significant influence of place of living on Learning disability children lethargic behavior problem. The

mean score (M=4.40) of Urban children is higher than the mean score (M=3.81) of semi-urban children and the mean score (M=3.53) of rural children in predominantly in the inappropriate speech. The F-value was significant at the 0.05 level it was inferred that there was a significant influence of place of living on learning disability children inappropriate behavior problem.

Research Hypothesis -2 there would be a significant difference in the behavioral problems among learning disabled children as on Parental monthly Income.

Null Hypothesis -2: There is no significant difference in the behavioral problems among learning disabled children as on Parental monthly Income.

Table 2: Results of Descriptive statistics for behavioral problems of the Learning disability as on the Parental Income

Dependent Variable	Parental income	N	Mean	SD	FF-value
Inappropriate speech	Up to Rupees 2500	135	3.21	2.52	
	Rs2501-5000	171	3.96	3.25	4.59**
	Above Rupees 5000	138	4.3	3.31	

* Correlation is significant at the 0.05 level (2-tailed).

The above table obtained results on the computation of ANOVA concerning inappropriate speech the mean of the children with intellectual disability in the Table 2 shows that the mean score (M=4.30) of children with parental monthly income above Rupees 5000 is higher followed by the mean score (3.96) of children with a parental monthly income of 2,501 to 5,000, and mean score (M=3.21) of children with parental monthly income ranging from above Rupees 5,000 and FF-value is 4.59, which is significant at 0.05 level. Hence there is a significant difference between learning disabled children parental socio-economic groups and behavioral problems.

DISCUSSION

The findings of the present study indicated that urban children with learning disability facing behavioral problems than other group children. Rural learning disabled Children suffering from more moderately severe problems than semi-urban children. Moderate problems are high in semi-urban children than rural children. Urban children with learning disability facing severe stereotype problems than other groups. Rural learning-disabled children facing more irritability than semi-urban children.

The significant differences observed between the children with learning disability from rural, urban and semi-urban for behavioral problems. Findings indicated urban children are suffering from more hyperactivity than other groups of children. Secondly Lethargy and irritability also commonly high in urban children. In rural children, hyperactivity and irritability were

higher than urban children Semi-urban children have more lethargy and stereotype problems than rural children.

Up to 2,500 parental monthly income group children with learning disabled have severe hyperactivity than other income groups. 2,500 to 5,000 parental monthly income group children with a learning disability have severe stereotype problems at a severe level than other groups. Above 5,000 parental monthly income group, children with intellectually disabled don't have any severe behavioral problems. In moderately severe level, up to 2,500 parental monthly income group children with intellectually disabled have more stereotype problems than other groups. Rupees 2500 to Rupees 5,000 parental monthly income group children with learning disabilities have more inappropriate speech and hyperactivity than other groups. Above 5,000 parental monthly income group, children with a learning disability suffer from inappropriate speech problems.

Up to Rupees, 2,500 monthly income group children have more hyperactivity than other groups at a moderate level. Above Rupees, 5,000 parental monthly income groups' children have more hyperactivity than Rupees 2,500 to-Rupees 5,000 parental monthly income group children. In a normal level, up to Rupees 2,500 monthly income group, children don't have any stereotype problems. Above half of the Rupees 2,500 to Rupees 5000 parental monthly income group, children don't have irritability and stereotype problems. Above Rupees 5,000 monthly income group, children don't have stereotype problems.

CONCLUSION

There is a significant difference among children with a learning disability based on their place of living and rural area children have the high mean score concerning their Behavioral Problems than that of Semi-urban and urban area children with intellectual disability. There is a significant difference among children with a learning disability based on their place of living and rural area children have the high mean score for their Behavioral Problem of Irritability than that of Semi-urban and urban area children with intellectual disability.

There is a significant difference among children with a learning disability based on their parental monthly income and up to Rupees.2500 parental monthly income of children has the high mean score for their Behavioral Problems than that of Rupees. 2501 to 5,000 and above. Rupees 5,000 parental monthly income of children with intellectual disability. There is a significant difference among children with an intellectual disability based on their parental monthly income and up to Rupees.2500 parental monthly income of children has a high mean score concerning their Behavioral Problem of Stereotypy than that of Rupees.2501 to 5,000 and above Rupees. 5,000 parental monthly income of children with a learning disability.

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