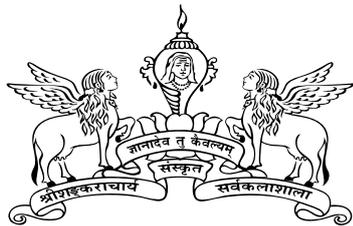


Psychosocial Problems and Management in Public Funded Schools in Kerala



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Jose Antony and Vineesh TV

May 2019

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Psychosocial Problems and Management in Public Funded Schools in Kerala

Conducted by

**The Department of Social Work
Sree Sankaracharya University of Sanskrit**

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Foreword



I am very happy to bring out this study report titled Psychosocial Problems and Management in Public Funded Schools in Kerala. This study has been a joint venture of the State Council of Educational Research and Training and Sree Sankaracharya University of Sanskrit, Kalady. The study assessed the significant psychosocial and emotional troubles among the students in our schools and mapped the existing services and the management strategies. I hope the discussions of the findings from the study will help trigger actions to empower the public funded schools in Kerala to undertake appropriate interventions.

The National Curriculum Framework views guidance and counselling as part of school curriculum and counselling functions can be carried out through the curriculum by integrating guidance philosophy and practices through curricular offerings, thereby adopting a proactive and preventive approach. However, the status of Guidance and Counselling in schools had to be studied with a view to improving its status and positions to be suited to the present needs and challenges.

It is a heartening fact that the study brought forward a few crucial findings and suggestions which would be of great use to strengthen the guidance and counselling activities to be envisaged in the state with the revision of school curriculum. The study assumes significant importance in the context of the Government of Kerala's initiative to transform the public funded schools in Kerala through comprehensive educational reforms.

I wish and hope that the department will take urgent steps to strengthen the areas of Guidance and Counselling in schools based on the recommendations of the study. We welcome constructive criticism and creative suggestions from all concerned.

Dr. J. Prasad

Director
SCERT



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Preface



School is an abode of making the future generations enthusiastic and responsibly creative. It is supposed to cater to the needs of the 'new gen in making' for taking up with the challenging errands of the impending competitive world. The teaching and learning exercises in the primary to higher secondary educational institutions are therefore; need to be inspiring and experiential. The schools are paving the foundations and also shaping the pace of the imminent developments and empowerment. The ultimate aim therefore of the schools is the enablement of the students to take up the life situations and to equip the teachers and parents in facilitating the learners in the growth process. If this reverie is to be true, the perspective and approach to the students and the school education system should be comprehensive and multi-dimensional.

The students are to be treated as complete human being in making with the cognitive, psychomotor and affective domains mutually inclusive. If any of these dominates the others or becomes weak than the others, then the development of the student to a dignified and competitive citizen will be problematic. More than that, the student will become a badly-behaved student to the teaching learning process in the contemporary world and also for the future social existence. The present school educational system is highly dependent on the cognitive domain and so the affective domain along with the psychomotor domain are remarkably undermined. As a result, there are enormous circumstances reported through the informal sharing and the media reports regarding the psychosocial problems among the school students, including suicides.

All concerned with the school education in Kerala are aware about the gravity of the psychosocial issues among the student community. Hence, this research is a remarkable and historic event in the efforts of making a quality education experience to the students, teachers, parents and the general community. The research process also gives strength to the empowerment of the public funded school education process in Kerala to go ahead with the creative and right based quality education to the next generation. It is also my pleasure to ink the preface of this report and I would like to thank the Director and administrative team of SCERT for giving this responsibility to the Social Work Department of my university. I also congratulate Dr. Jose Antony and the team of the social work department, SSUS for making this research and report a significant contribution to the social world and academic community with its scientific vigour and methodical precisions.

Dr. Dharmarajan P.K.
Vice Chancellor
Sree Sankaracharya University of Sanskrit



Acknowledgement

The report of the research process initiated by the SCERT and conducted by the Department of Social Work, SSUS Kalady titled as *"Psychosocial problems and management in public funded schools in Kerala"* is presented with real happiness and gratitude. The research is an enthusiastic effort of collective work by a team of researchers and supported by the experts and office systems in SSUS and SCERT. Hence it is really nostalgic to thank each and every one who has contributed their thinking, willingness, time, energy, expertise, and effort to make the endeavour a reality.

In the very outset we would like to acknowledge the visionary backing and proactive encouragement of Dr. J. Prasad, the Director of State Council for Education Research and Training. The entire research process is meaningfully completed because of the relentless support and reinforcement he has rendered. It is also very nostalgic to recognize the inspiration and strength we have received from Dr. Dharmarajan P.K., the honourable Vice Chancellor of Sree Sankaracharya University of Sanskrit, Kalady. He has really given the permission and motivation to establish this meaningful collaboration and partnership for the research purpose. Along with this, we also acknowledge the great support and encouragement given by the syndicate, Pro Vice chancellor, Registrar, Finance Officer, and the entire administrative staff of the university in making this research a successful one.

The thoughtful suggestions and timely modifications proposed by the members of research ethics committee, academic leadership, research officers and the administrative system of SCERT are also accredited with gratitude. We also thank the technical and academic support given by Dr. Reshma Bharadwaj, (Head of department of Social Work, SSUS, Kalady) along with other teachers, and staff of the department throughout the research process.

We own up the critical reflections, possible and meaningful alterations and suggestions from the experts who have taken the throbbing to come and attend the consultative workshops on the proposal development, tool finalization, data validation and draft report scrutiny. We express our indebtedness to the teachers and experts who have gone through the final draft report and made necessary modifications. It's our obligation to acknowledge Dr. Benoy Peter, Director, Centre for Migration and Inclusive Development, for his valuable suggestions and the great technical help in the sampling process.

We are deeply indebted to the students, their parents and teachers of all the participating schools in the research for their involvement and commitment. Without their support and participation this research would not have been carried out. They are the real owners of this research process and the final product. The findings represented in the research are their experiences and expressions.

This research would not have done without the passionate and meticulous work of Mrs. Jesly Jacob and Mr. Kiran Chandran, Ph.D. Research scholars of the Department of Social Work, SSUS, Kalady. They have owned up the research and have taken all the pain to carry out the entire process including the proposal development, tool making, pre-testing, data collection, analysis, report making and the administrative responsibilities, without bothering about the monetary benefits. The support of other research scholars in the department is also well acknowledged. The work of the 22 field investigators who have really travelled through the schools, collected the data from the students, teachers and parents have made the quality of the research really high. Their support in data analysis process is also well appreciated. The technical support of various institutions, including the team, who have made the online data collection and analysis possible, is also recognized.

Dr. Jose Antony
SSUS

Vineesh T. V.
SCERT



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Executive summary

An individual's childhood revolves around and evolves in the milieu of school. About 13 to 14 years of the lifetime, especially the foundational years of a child, is spent in school. These years are very crucial in their physical, intellectual and psychosocial development and so the school education fixes the base and sets the pace of the future success or failure of the life of an individual. It is the age when the child learns to express and manage their Psycho social behaviour along with the academic and other functional aspects. It is also the critical period in which the child starts to develop maladjustments or psychosocial difficulties and problems. With the advanced human development in the state and nuclearisation of families, Kerala state has been grappling with high levels of mental health challenges. The better mental health of children will result in the improved achievement. There is no state-wide data available in Kerala on the various services available in schools to manage the psycho-social problems among school children. In this context, SCERT in collaboration with Sree Sankaracharya University of Sanskrit conducted a study to understand the psychosocial problems and management in public funded schools in Kerala.

The general objective of the study is to analyse the status of the psychosocial and emotional problems among the students, to map the existing management strategies in the public funded schools in Kerala. The specific objectives are, to study the prevalence of diverse types of psychosocial problems; the existing management interventions and major players in schools to deal with psychosocial problems. The study also explores the existing systems of services and the gap between the need and services in the schools in the psychosocial empowerment processes.

A descriptive design is adopted for the study by gathering and analysing both qualitative and quantitative data. The quantitative data provide information about the status of the estimates of psychosocial problems and management systems in schools. The qualitative data provide in-depth information about significant issues in schools, innovative models of management and cases of individual students. The study covers the students enrolled in the public funded (government and aided) Lower Primary (LP), Upper Primary (UP), and High School (HS). Six districts and 66 schools were selected from 14 districts through probability proportionate to size (PPS) sampling method at the first stage and 20 students were selected without replacement through systematic random sampling from each selected school in the second stage. Class teachers of all the selected students constituted the teacher sample and the parents of these students constituted the parent sample. Wayanad, Kannur, Kozhikode, Malappuram, Alappuzha and Thiruvananthapuram are the districts selected. The proportion of government and aided school selected is aligned to the state level distribution of students in such schools. Quantitative data was collected from 1236 students, 1214 teachers and 1011 parents.

The strength and difficulty questionnaire (SDQ), which is a standard, internationally approved brief behavioural screening questionnaire was used for data collection. The Malayalam versions of SDQ for the students, teachers and parents were used in the study. A supplementary, semi-structured interview schedule was also used to collect the background information about the respondents. District wise data collection was carried out by 22 qualified field investigators. Quantitative data collection took place from 04-01-2019 to 25-01-2019. A gender balanced team of two Research Associates (ROs) monitored the data collection process. The findings of the study need to be interpreted in the context of the floods and landslides that occurred in Kerala during 2018 after which the fieldwork of this study was undertaken. It is likely that the impact of the disasters on the mental health of the students may have influenced the estimates.



Major findings of the study are listed below as points:

- ◆ The number of students in the abnormal category and boarder line category, in respect to the psychosocial and emotional behaviour is significantly high and needs special care and protection.
- ◆ The students, teachers and parents are of the opinion that these problems are making substantial impact on the school and personal life of the children.
- ◆ The trends about the prevalence of problems are consistent with the student, teacher and parent perspectives. At the same time the parents have reported more psychosocial issues with the students followed by teachers than the students.
- ◆ Apart from the slight differences in the trends there is no significant variation in the levels of problems and management between, government, aided systems of schools genders and levels of learning as LP, UP and HS.
- ◆ The contemporary intervention systems available in the schools are not sufficient in terms of the needs and effectiveness.
- ◆ The presence of systemic intervention practices and the availability of trained professional practitioners is very limited in the public funded schools in Kerala.
- ◆ The data on the present management system gives the impression that the parents and teachers are the major rescue points for or the students but they are not trained and equipped for the task.
- ◆ It is also evident that there is no proper coordination system in the schools for the management of these psychosocial issues of the students.
- ◆ No policy protocol or procedures are in place to monitor or regulate the interventions in the schools.
- ◆ There are some schools in hand pick number and teachers who have taken up some interventions to make the students manage their psycho emotional issues, but they are not available to the vast majority of the students and also are not a systematic intervention practice.
- ◆ These interventions are usually undertaken with the interests of the managements or the PTA but not as a result of the educational policy and philosophy followed at present.
- ◆ Professional service and scientific guidance and counselling to solve the psychosocial problems of students are not adequate and appropriate in the school contexts.

In the light of the findings, the study suggests some measures to improve the affable ambience of the schools as well as the interventions for the emotional problems faced by the students. They are:

- ◆ The students in the abnormal category need to be addressed to solve their problems and relevant authorities may initiate provisions for necessary clinical interventions.
- ◆ The students in the borderline category need to be provided special care and supportive assistance so that they can be protected from a breakdown and provisions should be made to ensure supportive professional psychosocial service available in the schools and maintain a proper management mechanism for them.
- ◆ The psychosocial management should be made a major priority of the educational process and the affective domain has to get an equal treatment with the cognitive and psychomotor domains and so the curriculum should be designed accordingly.
- ◆ Appropriate policy and procedural regulations are to be made for the monitoring and effective management of psychosocial interventions in the schools
- ◆ Proper systemic guidelines are to be made for the support and partnership from the community expertise like the professionals, organisations and higher education institutions in the process
- ◆ Relevant institutions in Kerala may initiate and conduct regular in-depth research on psycho-social problems, to understand their causative factors, management mechanisms, and correlation with other issues of children.

In short, the study on psychosocial problems and management of students in the public funded schools in Kerala jointly carried out by the SCERT and Social Work Department of SSUS, Kalady, has brought out a baseline regarding the psychosocial conditions of students in contemporary schools in Kerala. This effort has meaningfully solved the paucity of data regarding the prevalence of psychosocial issues among school students in the aided and government schools spread through the lower primary, upper primary and high school divisions. The findings and conclusions derived from this study could be the base for effective policy framing, procedure development and intervention programme designing efforts to save the children in need of special care and support in our schools. The study also has brought out the possibility and need for further in-depth analysis of various issues prevalent among the students with their causal and social correlates. The process of the research also has given the warnings about the insufficiency of the existing research tools and techniques.





Chapter I

Introduction



Children and Mental Health

An individual's childhood by and large evolves and revolves around in the milieu of a school. As usual practice, a child enters school education at the age of 4 to 6 years and completes his/her school education by the age of 17 to 19 years. About 13 to 14 years of the lifetime especially the foundational years of a child is spent in school. Moreover, these 13 to 14 years are very crucial in their physical, intellectual and psychosocial development and so the school education fixes the base and sets the pace of the future success or failure of the life. It is the age when the child learns to express and manage their psycho emotional and social behaviours along with the academic and other functional aspects. It is also the critical period in which the child starts to develop maladjustments or psychosocial difficulties.

The children in schools face a wide variety of problems. The problems faced by school going children are beyond the academic problems like learning difficulty, poor attention, poor academic achievement, etc. The cognitive, psychomotor and affective adjustments are essential for the development and empowerment of children to successful human beings. The students face serious issues in the psychomotor and affective domains and usually the curricula and pedagogy along with the school administration system and policy makers give little attention to them. Hence, it is a mandate that the school education should give a compatible and integral development effort with all these dimensions of school children. But unfortunately the present school education scenario does not cater to this important need.

The psychosocial factors play a huge role in developing and maintaining academic learning and the school-based mental health programmes can bring about positive changes in children's behavioural and emotional well-being (Susan S. Han, Bahr Weiss, 2005). Schools are well-thought-out as places where providing mental health to children (Michelle Rones and Kimberly Hoagwood 2000). According to Daniel Romer and Mary McIntosh (2012), the failure to treat adolescents with mental disorders results in high risk of poor academic achievements as well as prolonged mental disability. Further the analysis on these and similar studies also have revealed the paucity of sufficient empirical base on these issues in Kerala context. Apart from some stray reports and academic research, the government authorities and other significant agencies in the sector have no empirical evidence to make any policy, procedure or programmes in this sector.

Indian Scenario

A detailed review of literature reveals that the psychosocial condition of school students has been a serious concern in India. According to the World Health Organisation, 15% of children in India go through serious emotional disturbances (WHO, 2001). The overall prevalence of the mental and behavioural disorder in Indian children is 12.5% (ICMR, 2001).

Studies conducted in of different parts of rural and urban India suggest that the prevalence of behaviour disorders among children in India range from 1.6 per cent to 41.3 per cent. Pathak et.al, (2011) found that a sizable population of the adolescents in Chandigarh needed support in coping with an emotional and behavioural problem. One of the major suggestions of this study is to have effective mental health services in school. Sujith Serkhel et.al (2006) opined that, conduct disorders are the most frequently diagnosed psychiatric condition among children and the occurrence is more among boys compared to girls. The onset of conduct disorders is high in the childhood period than in the adolescent period. According to Deepthy Gupta and Geeta Thapliyal (2015), the pro-social behaviour of the adolescent was average and favourable. There is a good difference between the pro-social behaviour of girls and boys. A study conducted by Nair and others (2017) in Gujarat found that 15 per cent of the students have high scores in SDQ, and the prevalence of emotional problems were more among girls than in boys. The physical challenges like vision problems, difficulty to study at home, failure in a school exam, inability to communicate with parents and punishment at school negatively affect the mental well-being of the school going children. Enjoyment with peer and engagement in extracurricular activities were the protective behaviours found among the adolescent school children.

Jyotsna Akam Venkata and Anuja S Panicker (2013) found that one in every ten children suffer from attention deficit hyperactive disorder (ADHD) and it is three times more prevalent among boys than girls. There is a significant difference in the prevalence of ADHD by the socio-economic backgrounds, with higher prevalence among those from lower socio-economic status. Poor social behaviour was found to be a co-morbid condition with ADHD among children at 9-10 year age group. National Mental Health Survey shows that nearly 9.8 million young Indian in the age group of 13-17 were in need for active intervention. Economic times (22 march 2018) brought an alarming report regarding the mental health of students in India that on student commits suicide in every hour. Among the students in the age group 4-6 years, the prevalence of mental health issues is 12%.

The depression of adolescents between the age of 13 and 19 was studied in Kerala on beck's depression inventory by K. C Nair, M and K Paul, Mini & John, Ramany (2004). The results from the study show that 9.5% children had severe depression and 1.7% were under extreme depression. Among school dropout girls, 2.6% had severe depression and 0.2% cases had extreme depression. Among school dropout girls 1.4% was having severe depression and 0.2% cases were having extreme depression on Beck's depression inventory. Depression among school children makes them less productive and less receptive in the education process.

Mental Health of Children in Kerala

Micro studies available provide insights into several mental health issues of children in Kerala. A research report submitted to university grants commission in on the topic "Identification of guidance needs among higher secondary school students of Kerala" indicated that the higher secondary school students of Kerala are facing several psychosocial issues and have considerable guidance requirements especially in educational, intra and interpersonal relationships, psychosocial management systems and vocational needs. A study on school drop-outs among tribal students with special reference to Paniya tribe in

Wayanad district (2014) suggests that dropping out of school is not simply the outcome of academic failure, but it is a result of the social and psychological problems experienced in school. The school dropouts are predisposed by a lack of support and resources in families, schools and communities in coping up with the demands and challenges in psychological and social existences. Reduction of dropout rate and improvement of educational quality require comprehensive approaches to help the 'at-risk students' and to engage the social and academic problems they face in their lives so they can improve the 'at-risk settings' that contribute to these problems.

A total of 45,29,662 students pursued education during the academic year 2018-19 under 1,72,188 teachers across 14,593 schools under the Department of Education. The prevalence of mental health issues among the children in Kerala schools is not known. Evidence on comprehensive intervention programmes and management processes on these issues are also conspicuous by their absence. Early diagnosis and interventions can considerably reduce the mental health problems and other vulnerabilities of children in schools. Such interventions have lifelong positive impact on the vulnerable children. In this context, this study empirically examines the psychosocial problems of children in public funded schools in Kerala.







Chapter II

Methodology



Statement of the problem

The Jayaraj commission estimates that at least nine lakh of children from the state of Kerala suffer from mild to severe intellectual disabilities (Deccan chronicle on July 18, 2016). One out of every five students in Kerala in the age group 9 years to 12 years suffered by some kind of psychological distress (Study by Amrita Institute of Medical Science, reported by Times of India daily on 10 October 2018). Various non-academic problems including child abuse are reported by the children in Kerala in their communication with classmates, teachers and counsellors. The suicides of school students in Kerala in spite of all the prevention efforts, is a strong indication of the need for psycho-social support in schools. Education is the best progression of all-round development of a human beings and the schools should facilitate this. While the cognitive and psychomotor domains receive comparatively good attention from the schools, the affective domain is poorly addressed. The focus on affective domain of the students is very much essential for improving inclusion of a vulnerable student. Effective management of psychosocial problems in schools can contribute to the improved quality of life of school children. The better mental health of children will result in the improved success of school education. There is no state-wide data available in Kerala on the various services available in school to manage the psycho-social problems of school children. By providing state level estimates on psychosocial problems of students and examining the current management strategies adopted by public schools in Kerala by interacting with key stakeholders, this study aims to provide strategic policy inputs on addressing the mental health issues among children. By identifying the gap between the needs of school children and available services in schools, this study also provides pointers to bridge such a gap.

Objectives

The general objective of the study is to estimate and analyse the prevalence of psychosocial problems among the students and to map the existing management strategies so as to prepare the bench mark data base to develop appropriate scientific intervention strategies in the public funded schools in Kerala.

Specific objectives of the study are enlisted below:

1. To study the prevalence of diverse types of psychosocial problems experienced by the students in public funded schools in Kerala.
2. To find out the existing interventions and major players in schools to deal with psychosocial problems experienced by the school children in Kerala
3. To analyse the existing coordination systems of the services including the infrastructure, personnel, training, policies and procedures in managing the socio-emotional and psychological concerns of the children.
4. To identify the gap between the need and services of school children in Kerala in the psychosocial empowerment processes.

Research design

A descriptive design is adopted for the study by gathering and both qualitative and quantitative data were gathered and analysed. The quantitative data provided information about the status of the estimates of psychosocial problems and management systems in schools. The qualitative data provided in-depth information about significant issues in schools, innovative models of management and cases of individual students. The study covered the students enrolled in the public funded (government and aided) lower primary, upper primary, and high schools. In order to provide a one-time good state-level estimate with adequate representation of students from Lower Primary, Upper Primary and High School segments in the Kerala a sampling size of 1200 was decided. Assuming a 10 per cent non-response, a sample of 1320 was targeted. Adopting a self-weighting design six districts and 66 schools were selected from 14 districts and 12,008 schools through Probability Proportionate to Size (PPS) sampling method at the first stage and 20 students were selected without replacement through systematic random sampling and at each selected school in the second stage. Class teachers of all selected students constituted the teacher sample and the parents of the selected students constituted the parent sample. The student sample ensures rural-urban, high-land, mid-land, low land, north-central-south Kerala, government-aided, boy-girl representations. Wayanad, Kannur, Kozhikode, Malappuram, Alappuzha and Thiruvananthapuram are the districts selected. The proportion of government and aided school selected is aligned to the state level distribution of students in such schools. The response rates in the study are given in table 2.1.

The qualitative data was gathered through purposive sampling of insightful cases and interventions which the research team came across in the sample schools. The research team relied on the school teachers in shortlisting the cases and interventions.

Tool for data collection

The preliminary data regarding psychosocial issues and their management was collected from government and aided schools in Kerala with the help of an online questionnaire prepared by SSUS and circulated by SCERT to all the government and aided schools in Kerala. The online questionnaire was intended to obtain insights regarding different psychosocial problems in schools and their management. The online questionnaire was filled by the head teacher of the school or the senior most teacher. However, only a small proportion of the schools provided this data.

The quantitative data regarding the prevalence of the psychosocial problems in the schools were collected from the random sample of students, teachers and parents using the strength and difficulty questionnaire (SDQ), which is a standard, internationally approved brief behavioural screening questionnaire about 3-16 year old children, which was recommended by the panel of experts consulted by SCERT-SSUS team. The scale is developed and tested to use

Table 2.1: Response rates in the survey by category

Variable	Respondent category		
	Student	Teacher	Parent
Target sample	1320	1320	1320
Achieved sample	1236	1214	1011
Response rate	93.6%	91.9%	76.5%

in different cultural and geographical backgrounds including India. SDQ examines five attributes, which include emotional problems, conduct problems, hyperactivity and inattention, peer relationship problems and pro-social behaviour. There are 25 items in SDQ and score of each five items describes the above mentioned five attributes. The Malayalam version of the student, teacher and parent SDQ questionnaires were used in the study. A supplementary semi-structured interview schedule also was used to collect the background information about the respondents. The tool was pretested and adapted without affecting the reliability and validity aspects. The study also has gathered the qualitative information using the qualitative data provided in-depth information about innovative models of management and cases of individual students managed in schools in Kerala.

Ethical considerations

Maintaining ethics in research is an integral part of any research that deals with the human being. To avoid ethical violations in the study, the research team consulted with the research ethics committee of SCERT. The research proposal, as well as the research tools, were scrutinised by the research ethics committee. The overall research process has taken care not to harm any beliefs, emotions, social relationship, privacy, and dignity of all engaged in the research. The research ethics committee

recommended the researchers not to approach any student, parent and teacher with any prejudice. This research has not violated any child right or human right at any stages of the study. The confidentiality of the data is also ensured. All the data collected in this research have been used exclusively for the research purpose, which will contribute to the welfare of humankind especially the students, parents, teachers and the education process.

Data collection and analysis

For data collection, post graduates in of Social Work (MSW) were recruited through a rigorous recruitment process. All 22 Field Investigators (FIs) were provided a two-day training at SSUS during December 4-5, 2018. A field test was conducted in three schools in Ernakulum district to examine the operational constraints of the data collection. A team of two investigators collected data from each school. Quantitative data collection took place from 04-01-2019 to 25-01-2019. A gender balanced team of two Research Associates (ROs) monitored the data collection process. After the analysis of quantitative data, collection of qualitative data was carried out. The collected data were cleaned and analysed using Statistical Package for Social Sciences (SPSS) following the SDQ scoring instructions.

Limitations of the study

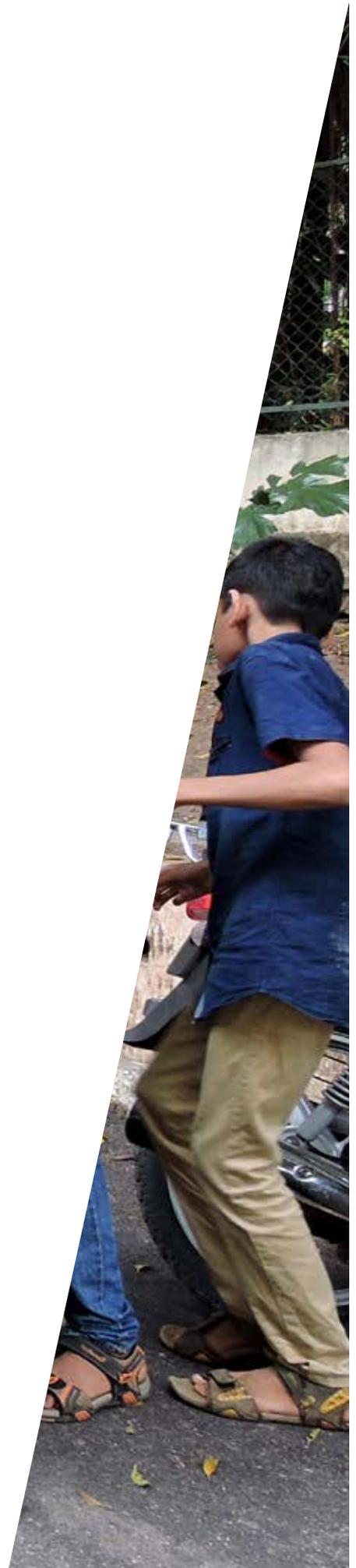
The study focused on five psychosocial issues such as emotional problem, hyperactivity, conduct disorder, peer relationship problem and level of pro-social behaviour. Problems like learning disorders, substance abuse and other mental health issues are not studied. The impact of floods and landslides might have influenced the SDQ score of the affected respondents which may cause a slight increase in the prevalence of psychosocial problems. The data collection of the parent version of SDQ was difficult because of the unwillingness of parents to provided data given the limited time frame. While the online questionnaire was circulated to all schools, only 976 schools responded (8.1%) and hence may not provide a reasonable picture of the management strategies adopted by the schools in Kerala. The responses on SDQ may be influenced by social desirability bias. This research has not covered students in public funded higher secondary schools. The study also has not covered the students from unaided sector or following other schemes of education such as CBSE, ICSE, etc. This study has not attempted to investigate the problems of children with disabilities and children of migrant labourers.





Chapter III

Findings and Discussion



Introduction

Findings from the data analysis and a brief discussion on the same is presented in this chapter. In the first section data received from the schools through the online questionnaire is summarised. From subsequent section onwards, quantitative data gathered through SDQ is analysed. Qualitative information gathered also is blended into the analysis in the form of case studies. Conduct, emotions, activity and attention level, peer relationships and social behaviour are the major components discussed here. The overall constraints of the student are explored as the total difficulty of the student in relation to the psychosocial experiences in each domain. The analysis is provided by gender classifications, levels of learning and type of school. Also, in the case of abnormal levels of the issue, perspectives of the teachers and parents of the children are also provided. In addition to these, the chapter also discusses the current management strategies of the issues in these domains and estimates the proportion of children who require psychosocial interventions.

Psycho-social Interventions reported by the schools in the academic year 2018-19

In this section the data collected from the schools using the online questionnaire on the psycho-social problems and interventions in public funded schools in Kerala in the academic year 2018-19 is presented with the highlights on the major trends and key findings. The data give a general understanding on the major psycho-social issues among the students and also explains the current practice of managing them. Altogether only 976 schools have responded to the online data gathering process. The data is gathered on the basis of the experiences in the academic year 2018-19. This number is abysmally small in comparison with the total number of public funded schools in Kerala and represent only crude insights. The observations elicited from the data cannot be generalized or taken as a final impression. The non-response of the schools can also be read as a practice of negligence with the psychosocial problems of the students and the management in general. Even then the data gives indicative trends about the presence of different psychosocial problems, their management interventions and the difficulties in the process.

Majority of schools reported that these problems are widely prevalent among the students. The reported problems are different emotional issues, dependency on modern social media and electronic devices, lack of interest in studies and relationship issues along with poor attention, lack of parental attention and inappropriate care. Regarding the strategies

adopted by the schools in managing the issues, they have reported that most of the schools have conducted classes for parents regarding the growth and development of children and challenges children face at each stage of development. Some schools have the strategy of home visits to deal with psycho-social issues of children. Several schools also conduct motivation classes for school children. There are also schools with counselling facility which provide personality development sessions to their students.

It is also observed that most of the schools are just arranging orientation, or awareness classes. Another fact is that in most of the schools, the teachers are the significant people in providing counselling and guidance to students with problems. This effort usually does not work because the students continue to maintain the student-teacher relationship understanding instead of a client-worker relationship. Another problem in this approach is that, many of the problems are related to the teachers, teaching-learning practices and the management concerns and the same people may not be competent to handle the issues. Some schools have utilized the services of the primary health centres to address the issues. Only a few schools have the facility of school counsellor to provide counselling and guidance to children. Very few schools depend on psychologists to provide counselling service to children for serious issues.

Usually the schools follow generalized problem solving process and tries to equip the students to manage their problems by themselves. In majority of the schools the teachers are the resource personnel for the orientation, awareness or motivation classes. Some schools leverage the expertise of the block resource centre (BRC) trainers. At times, they use the experts from outside such as trainers, training institutes, and teachers from other schools, colleges or universities. In response to the query on the criteria for selecting the experts, it was observed that most of the schools consider expertise of resource person and institutional affiliation while selecting resource personnel. The familiarity and affiliation to the school is also considered a major criterion. Only very few schools consider the cost factor in the selection criteria. Among the responded schools almost all schools agreed that the psycho-social interventions could help the students in solving their problems. They use the generally observed changes among the parents and students as the criteria to evaluate the interventions and do not follow any scientific measure for monitoring or evaluation. Majority of the schools also reported that they have spent an amount of ₹1000 to ₹50,000 in the process of providing the psychosocial support to the students.

Problems in conduct

Conduct disorder is a childhood psychological condition characterised by persistent aggressive behaviour and inability to behave in a co-operative manner according to the socially accepted norms of his or her community. Early detection of conduct disorder and its management is very much essential to avoid future psychiatric and behavioural problems of an individual. Based on the scores of these five items on conduct disorders in the SDQ, students were classified into normal, borderline and abnormal categories as per standard scoring procedures. Normal score means the students conduct is in the normal way, abnormal and borderline scores indicate the need for further clinical investigation, diagnosis and intervention.

While four-fifths of the students were normal, 9.5% of students in public funded schools were found to have abnormal conduct and another 9.5% had conduct problems at borderline level, indicating that almost 20% of students have problems related to conduct. Slightly above four-fifth of the boys and girls have normal conduct while almost one in every ten boys and above nine per cent of girls have abnormal conduct. Among both boys and girls, nearly 9.5% have borderline conduct disorder. Prevalence of abnormal and borderline conduct was higher among the students in government schools compared to aided schools. The prevalence of abnormal conduct was more among the high school students and lowest among the students in the upper primary section.

Table 3.1: Percentage distribution of conduct of students by select background characteristics

Variable/category	Normal	Borderline	Abnormal	Total	Number
Gender					
Boys	81.0	9.4	9.7	100	609
Girls	81.2	9.6	9.3	100	627
Type of school					
Government	76.4	11.3	12.3	100	470
Aided	83.9	8.4	7.7	100	766
Grade					
Lower primary	80.6	9.8	9.6	100	418
Upper primary	83.1	8.7	8.2	100	450
High school	79.1	10.1	10.9	100	368
All	81.1	9.5	9.5	100	1236



Table 3.2: Percentage of abnormal level of conduct among students by types of respondents

Variable/category	Respondent category		
	Student	Teacher	Parent
Gender			
Boys	9.7	7.7	15.0
Girls	9.3	5.7	11.3
Type of school			
Government	12.3	6.3	12.7
Aided	7.7	6.9	13.3
Grade			
Lower primary	9.6	6.0	14.6
Upper primary	8.2	5.7	13.6
High school	10.9	8.7	10.7
All	9.5	6.7	13.1
Number	1236	1214	1011

While parents reported higher levels of abnormal conduct among the students, the levels reported by the teachers were lower than that reported by the students. According to both the parents and teachers, the abnormal level of conduct was higher among boys than girls. Also parents of children of aided schools reported higher prevalence of abnormal conduct of children which was in consonance with the teacher versions. In parental perspective, the abnormal level of conduct disorder is highest in lower primary and lowest in high school.

The analysis on the prevalence of conduct disorder among the school students in Kerala it is clear that an alarming percentage of students are in the group of borderline or abnormal and the inference is rather consistent with the parental, teachers' and students' perspectives. It is also identified that the levels of conduct disorder are not much varying between the levels of learning as LP, UP and high school. It is also an inference that the levels of conduct disorder are not much different in the case of government run and aided schools in Kerala. The students in the border line and abnormal category need urgent attention in terms of clinical supports and psychosocial interventions to solve their problems by the professionally trained service providers.



Emotional problems

The emotion of an individual is their own subjective feeling of a state of mind. Happiness, anger, love and hate are different types of emotions an individual experience. When a person persistently shows an emotional reaction to a situation which is inappropriate as per his community norms or if a person shows hypo or hyper-emotional response to a situation is said to have emotional problems. The persons with emotional problems are highly susceptible to future mental health issues and a person's productivity is also impaired when the emotions are disturbed. The SDQ scale has five items to study the emotional status of the child. The scores obtained from these five items differentiate the responses into abnormal, borderline

and normal categories. Normal score means the student's emotion is in a normal way, abnormal and borderline scores indicate the need for further clinical investigation, diagnosis and intervention.

About nine out of every 10 children are in the normal category in the emotional status according to the SDQ scores. However, 11.4% children experienced emotional status at a borderline or abnormal level. Slightly over five percent have emotional problems at an abnormal level. The prevalence of emotional problems is slightly more among girls than boys. Emotional problems were higher in children studying in government schools compared to those in aided schools.

Table 3.3: Percentage distribution of students in public funded schools, Kerala, 2018-19 by emotional status (Student version)

Variable/category	Normal	Borderline	Abnormal	Total	Number
Gender					
Boys	90.1	5.5	4.2	100	609
Girls	86.9	6.5	6.5	100	627
Type of schools					
Government	86.5	6.5	6.8	100	470
Aided	89.6	5.7	4.5	100	766
Grade					
Lower primary	88.9	5.0	5.9	100	418
Upper primary	86.8	7.3	5.7	100	450
High school	89.9	5.7	4.3	100	368
All	88.5	6.0	5.4	100	1236



Table 3.4: Percentage of students in public funded schools, Kerala, 2018-19 with abnormal emotional status, by category of respondents and select background characteristics

Variable/category	Respondent category		
	Student	Teacher	Parent
Gender			
Boys	4.2	4.0	15.6
Girls	6.5	6.7	18.4
Type of school			
Government	6.8	9.6	18.6
Aided	4.5	7.7	16.2
Grade			
Lower primary	5.9	10.7	19.7
Upper primary	5.7	7.3	16.5
High school	4.3	7.0	14.7
All	5.4	8.4	17.0
Number	1236	1214	1011

Parents reported highest levels of emotional problems among the students across background characteristics of children. All groups consistently report emotional problems prevalent more among girls compared to boys and among government schools compared to aided schools although the levels differ significantly. Also the prevalence tends to reduce from lower primary to high school students across respondent categories.

In the analysis of the trends in relation to the emotional problems it is identified that the students have serious emotional problems and the representation in the abnormal and borderline categories are alarming. The trends are consistent with the perspectives of parents, teachers and students and there is no significant variation between the levels in respect to the gender, nature of schools and the levels of learning. The school days are also days of rapid growth and emotional maturation and the trend need to be taken seriously and necessary actions are to be initiated.



Case study:

Extreme experience of psychosocial struggles ends in a suicide

During the field investigation for quantitative data collection the FIs learned that a student committed suicide in the school a few days ago. The boy who committed suicide was 14 years old and was studying in grade ninth. He belonged to a Paniya tribal community. His father was an alcoholic and he used to quarrel with his mother and had committed suicide two months ago. The child was very much friendly with his father and father's death made him severely depressed. He has three brothers but he did not much relate with them. He had dropped-out from school in 2017 and re-joined in 2018. When he re-joined in school he was not interacting with students and teachers and later he started to interact with teachers and classmates. According to his friends and teachers he had no goals in his life and he was aware of his day to day life only.

Before his suicide, he was hospitalised for fever, stomach pain and tiredness and it was suspected as sickle cell anaemia, however it was not but due to poor food intake. The teachers used to compel him to take food he refused to eat food properly. For improving his health, his family was depending on religious healing methods than modern medicine. After the suicide of the father, he was found very depressed in class and when his teachers and friends asked about it, he did not give any reason. Further he used to tell his friends that he will also commit suicide but they didn't report that to anybody and didn't take the sayings seriously.

Service of the counsellor was available in the school. Only some special classes like value education and health education conducted in schools for the welfare of students. The school didn't have any specific practice of addressing the psychosocial problems of the students. Even after the suicide of the student, it is observed that no further step is taken. The younger brother of the child studies in the same school and he has not received any psycho-social intervention as he is passing through a grief situation.

Implications

The family environment and then socio cultural aspects of the child were very tough and there was no significant support or care for him. The relation with the father was very solid and may have influenced him to take the extreme step to end his life. It seems that there was good relation with the teachers and the students after few months of his re-entry to school. Even then, he could not find any meaningful platform to share the personal issues and feelings and the required support. No one could understand that the child was depressed. The lack of early diagnosis of psycho-social issues of the boy by the school has also contributed a lot to the death of the child. If the problem was identified and a proper psychosocial problem management intervention was done, this suicide could have been avoided. The teachers, peers as well as parents, were not able to understand the conditions through which their child passes through because they were not professionally trained in the psychosocial management process. It is more a concern that the student's younger brother is in the same school and is passing through a tough situation.



Hyperactivity and inattention

Hyperactivity and inattention are key features of attention deficit hyperactive disorder. Hyperactivity means the activity is higher than expected and the child has got high energy. Hyperactivity has a physiological and psychological reason. Inattention means difficulty to concentrate on a particular task. Individuals with hyperactivity and inattention shift from one task to another without completing any task. The children with hyperactivity and inattention may find difficulty in all domains and spheres of life. So its diagnosis and management are very essential to develop a child into a functioning and contributing individual. The SDQ scale has five items that give information on hyperactivity and inattention. Based on the score received from these five items, students were categorised into normal, borderline and abnormal. The normal children's activity level

and attention level are within the expected limit of their age. The borderline and abnormal groups need psychosocial intervention to ensure their effective participation in schooling and to make them an integral part of society.

Overall, nearly five percent school students had hyperactivity and inattention at abnormal levels and about 12% students had either borderline or abnormal level of hyperactivity and inattention. This was more prevalent among boys compared to girls. Hyperactivity is high in aided school than in government schools. Abnormal levels of hyperactivity and inattention were more or less similar among lower primary and high school students where prevalence was slightly lesser among upper primary students.

Table 3.5: Percentage distribution of students in public funded schools, Kerala, 2018-19 by hyperactivity and inattention (Students' version)

Variable/category	Normal	Borderline	Abnormal	Total	Number
Gender					
Boys	86.2	8.2	5.6	100	609
Girls	88.8	7.6	3.5	100	627
Type of school					
Government	87.0	9.1	3.8	100	470
Aided	87.8	7.1	4.9	100	766
Grade					
Lower primary	86.3	8.4	5.2	100	418
Upper primary	88.2	8.4	3.3	100	450
High school	88.0	6.7	5.1	100	368
All	87.5	7.9	4.5	100	1236



Table 3.6: Percentage of students in public funded schools with abnormal level of hyperactivity and inattention, Kerala, 2018-19, by category of respondent and select background characteristics

Variable/category	Respondent Category		
	Student	Teacher	Parent
Gender			
Boys	5.6	13.6	18.4
Girls	3.5	3.6	11.2
Type of school			
Government	3.8	9.6	14.9
Aided	4.9	7.7	14.6
Grade			
Lower primary	5.2	10.7	19.7
Upper primary	3.3	7.3	13.6
High school	5.1	7.0	10.7
All	4.5	8.4	14.7
Number	1236	1214	1011

The abnormal level of hyperactivity and inattention ranged from 4.5% from student scores to 14.7% from parent scores. The data available indicate that the number of students with hyper activity and inattentiveness is very high among the students in the public funded schools in Kerala. Parents consistently reported much higher levels of hyperactivity and inattention among students, across background characteristics. According to all categories, boys had higher levels of hyperactivity and inattention compared to girls. While

parents and teachers scored higher prevalence of hyperactivity and inattention among government school students, the students scored otherwise. While the parents and teachers scored a gradual reduction in prevalence of hyperactivity and inattention from lower primary to high school, this was inconsistent in the case of students whose scores were more or less similar for UP and LP with a lower prevalence in the UP section.



Case study on hyperactivity:

A live unaddressed concern for attention

While doing the data collection and also analysing the quantitative information from the school, a nine-year-old boy was identified falling in the abnormal category in total difficulty and hyperactivity of SDQ. The child hails from a low income family from a deprived community. He is the only child of his parents. The child lives with his mother and the father is in prison in connection with a murder case. The child used to be a witness of the fight between parents. Mother usually does not allow him to play with children from the neighbourhood as he ends up with quarrels fights with the peers. The school system including the peers, teachers and authorities always identified him as a problem child.

The child is aware of his behavioural problem, but he is ambitious, and an average in academic performance. He is good at drawing and singing but he does not get enough opportunity to use his talents. He has the good quality of obeying elders, but has always been restless, attention seeking, poorly attentive, and used to abruptly shift from one activity to another. Even though he has difficulty in learning some spelling and symbols he has not been screened for a learning disorder. The child does not receive any psychosocial intervention from the school. He is ashamed of his father's imprisonment and the fight between parents and he tries to hide these from others. He complains that nobody loves him and wants the company

of somebody who really is concerned about him and understands him.

Implications

The child has hyperactivity and behavioural issues. There are several factors affecting his behaviour. These include the poor socio-economic status, broken family and imprisonment of the child's father. Being a single child with a single parent makes the life of the child constrained. Restricting the child from playing and mingling with friends aggravate the mental agony of the child. The child has not been screened for learning disorder even if he had symptoms of learning disorder. The teachers, parents and friends have branded him as a quarrelsome boy and at the same time no scientific efforts are made to help him. There is no strategy in school to understand and manage the problem of the child. The school system has no policy or procedure to manage similar psychosocial problems of the children. Usually the system blames the students for their problems and also demands the parents to manage the problems. Here, the family is also in trouble in managing the child. Mother is the key person in solving the issue of child and many things she does fire backs, like restricting child worsening his situation. Child's mother is aware of his problems and she takes him to an Ayurveda hospital for treatment and counselling although it was not affordable. The case demands a systemic intervention in the school context with coordinated efforts from a trained team.



Peer relationship problems

Peer relationship is considered as an important component of the development of a child. The child learns interpersonal relationships, social norms and new skills through peer relationships. In SDQ, five items measure the level of the peer relationship of the student. Based on the score of these five items students were classified into normal, borderline and abnormal.

Almost four-fifths of the students in the public funded schools were found normal regarding their peer relationships. However, about 22 per cent of the students were either on borderline or at abnormal level in terms of peer relationships indicating

the need of attention. About 17 per cent of the boys are on borderline position that means if they get attention, the problem can be resolved. Around four per cent of the boys are seen abnormal in terms of peer relationship problems, and that indicates they need clinical attention. The prevalence of borderline and abnormal levels of peer relationships were found similar among boys and girls. However, the prevalence borderline peer relationships were much higher among the students in the government schools compared to those in the aided schools. The prevalence of peer relationship problems (borderline and abnormal) ranged between 20 to 25 among the students by grades.

Table 3.7: Percentage distribution of students in public funded schools, Kerala, 2018-19 by peer relationship (Student version)

Variable/category	Normal	Borderline	Abnormal	Total	Number
Gender					
Boys	79.3	16.6	4.1	100	609
Girls	77.4	17.2	5.4	100	627
Type of school					
Government	72.3	22.1	5.5	100	470
Aided	82.0	13.7	4.1	100	766
Grade					
Lower primary	75.4	17.7	6.9	100	418
Upper primary	79.6	16.0	4.4	100	450
High school	80.2	17.1	2.7	100	368
All	78.3	16.9	4.8	100	1236



Table 3.8: Percentage of students with abnormal peer relationships by respondent category and select background characteristics

Variable/category	Respondent Category		
	Student	Teacher	Parent
Gender			
Boys	4.1	8.9	17.8
Girls	5.4	6.0	16.9
Type of school			
Government	5.5	9.1	21.4
Aided	4.3	6.4	15.1
Grade			
Lower primary	6.9	7.9	21.8
Upper primary	4.4	7.7	16.2
High school	2.7	6.5	13.7
All	4.8	7.4	17.3
Number	1236	1214	1011

According to the student version on the abnormality regarding to the peer relation problems, it is found that the prevalence among boys was slightly lesser. When it is compared to teacher version and significantly lesser compared to the parent versions. In the case of girls, parents reported high peer relationship problems whereas the girls reported much less. In government schools, students reported less peer relationship problem comparing to parents and teachers. In government schools, problems in peer relationships are more prevalent is compared to aided schools. The data show the prevalence of peer relationship problems show a declining trend from lower primary to high school in all respondent versions.

According to the data available on peer relation it is found that there are a significant percentage of students experiencing serious peer relationship problems. The percentage of peer relationship problem abnormal and borderline were somewhat

similar in student and teacher versions and it is slightly higher from the parent scores. Peer relation problems show similar trends among boys and girls across respondent categories. There is no significant difference in peer relation problem among L.P, U.P, and H.S students.

The students need special care and protection in the contemporary world of virtual realities and virtual relations to make their relations realistic and meaningful to them. This area is a real concern for the parents, teachers and students. Many of the other serious issues are getting aggravated and misfired due to the absence of good relationships or the misunderstandings of the existing relationships. Hence the peer relations are to be addressed by a team of professional service providers and the teachers and parents also need to be trained in this domain.

Pro-social behaviour

Pro-social behaviour is a set of behaviour which includes socially accepted behaviour of sharing, co-operating, helping etc. Pro-social behaviour is valued and accepted behaviour which considers the others in the social system in a community including the environment. A school is a socialisation place of the child and pro-social behaviour is an important aspect of the socialisation of the child. SDQ has five items to study pro-social behaviour. Based on the scoring of these five items students were divided into normal, borderline and abnormal categories. Normal pro-social behaviour means the students have good pro-social behaviour and abnormal

pro-social behaviour means the child has very poor pro-social behaviour.

Almost nine in 10 students found normal in pro-social behaviour. However, 12 per cent students had either abnormal or borderline pro-social behaviour. Abnormal pro-social behaviour was more prevalent among boys compared to girls. The prevalence abnormal pro-social behaviour was higher among students of government schools compared to aided schools. Also, the abnormal level of pro-social behaviour was highest among the high school students compared to lower primary and upper primary section.

Table 3.9: Percentage distribution of students in public funded schools, Kerala, 2018-19 by pro-social behaviour (Student version)

Variable/category	Normal	Borderline	Abnormal	Total	Number
Gender					
Boys	87.0	6.4	6.5	100	609
Girls	89.1	5.4	5.4	100	627
Type of school					
Government	88.1	5.1	6.8	100	470
Aided	88.1	6.3	5.4	100	766
Grade					
Lower primary	90.4	3.8	5.7	100	418
Upper primary	89.3	5.5	5.1	100	450
High school	83.9	8.6	7.3	100	368
All	88.1	5.9	5.9	100	1236



Table 3.10: Percentage of students in public funded schools, Kerala, 2018-19 with abnormal level of pro-social behaviour problem by respondent category and select background characteristics

Variable/category	Respondent		
	Student	Teacher	Parent
Gender			
Boys	6.5	15.9	7.3
Girls	5.4	8.1	4.5
Type of school			
Government	6.8	14.6	4.2
Aided	5.4	10.3	6.7
Grade			
Lower primary	5.7	9.8	6.3
Upper primary	5.1	11.4	5.1
High school	7.3	15.2	6.3
All	5.9	11.9	5.8
Number	1236	1214	1011

Table 3.10 gives the comparison of the abnormal level of pro-social behaviour in students’ perspective, teachers’ perspective and parental perspective. The highest level of abnormal social behaviour is reported in teachers’ observations. In student data, teacher data and parent data boys have more abnormal pro-social behaviour compared to girls. In student data and parent data, government schools have a higher abnormal pro-social behaviour compared to aided schools. But in parental perspective percentage of abnormal pro-social behaviour is high in aided school than in government school. According to the perspectives of parent, teacher and student highest

level of abnormal pro-social behaviour is in high school than lower primary and upper primary. The trends on the pro-social behaviour clearly give an impression that abnormal and borderline percentage of pro-social behaviour is high in all the three sets of data. There is no significant difference between parent and student versions with regard to the abnormal and borderline pro-social behaviour. It is very important that the new generation student community needs more creative inputs in the direction of the pro social behaviours especially when they are getting more and more individualistic.



Case study:

Poor pro-social behaviour combined with emotional and relationship struggles

During the field investigation for quantitative data collection, the FIs noticed a 15 year old boy as he was not co-operative in the process, and also while analysing his score through SDQ the child's scores in the area of emotional status, peer relationship and pro-social behaviour were alarming. Exploring his case revealed that the child is a victim of parental divorce. His parents got separated because of dowry issue and alcoholism of his father when he was three years old and now he stays with his father and visits his mother on holidays. His father is addicted to alcohol and he beats the child often. The child has a quarrelsome relationship with father and the elder brother and he is interested to stay with mother. The child is in grade ix and he is afraid of studying and attending examinations. He is good at drawing but fears to participate in the competition. He has no friends and he interacts very less in the class with teachers as well as with his friends. He is introvert in nature and he is shy to communicate with others. He has persistent complaints of headache at during class hours.

Child's school conducts some classes for the promotion of psycho-social wellbeing but it does not provide any counselling or attempt to address problems of the individual children. The issues of this child have not

received any attention from parents or teachers. The school does not take serious efforts to manage these issues in the school. They have an opinion that these types of problems are normal among the students and usually do not take any special effort.

Implications

This case is a clear indication of neglect experienced by children from the family environment. The issues between parents and alcoholism of parent have a direct impact on the child's mental health. His childhood was full of suffering because of family issues. Traditionally dowry issue is brought as a threat to the dignity and safety of a woman but this social issue had a direct impact on the development of the child. The fear to face competition is from lack of confidence and no one is putting any effort to bring the child to the mainstream. Even if the child's teachers know that he is good at drawing, there is no encouragement. Classes are conducted in schools to improve mental health once in a year or a month. However, such an intervention for the name sake does not do any justice to the children who are in need of help. The schools without counsellors should have at least a referral system for the children with psycho-social issues. For this, the parent and teacher should understand the child. Otherwise, the children with the psycho-social problem will go unattended and their poor mental health will lead to further dangers and exclusion.



Total Difficulty

Total difficulty of the student in relation to the psychosocial problems is assessed using 20 out of the 25 items in the SDQ scale. It is the sum of items under conduct, emotions, hyperactivity and inattention and peer relationship. The score of total difficulty is also divided into normal, borderline and abnormal.

Among the students, 84.3 per cent were found to be normal and 15.6% had experienced total difficulty to a borderline or abnormal level. The percentage of students who experienced total difficulty at abnormal level was four per cent. In the case of the percentage of abnormal psychosocial problems, boys have a slightly lower prevalence compared to girls. The prevalence of borderline/abnormal level psychosocial problems is more among students in government schools compared to aided schools. There was not much difference among the school grades in terms of the abnormal level of total difficulty scores.

Table 3.11: Percentage distribution of students in public funded schools, Kerala, 2018-19 by total difficulty (Student version)

Variable/category	Normal	Borderline	Abnormal	Total	Number
Gender					
Boys	84.5	11.4	3.9	100	609
Girls	84.1	11.3	4.6	100	627
Type of school					
Government	81.3	13.4	5.3	100	470
Aided	86.2	10.2	3.7	100	766
Grade					
Lower primary	81.3	14.8	3.8	100	418
Upper primary	84.8	10.2	4.8	100	450
High school	86.9	8.9	4.1	100	368
All	84.3	11.4	4.2	100	1236



Table 3.12: Percentage of students in public funded schools, Kerala, 2018-19 by abnormal level of total difficulty by respondent category and select background characteristics

Variable/category	Respondent		
	Student	Teacher	Parent
Gender			
Boys	3.9	9.9	14.1
Girls	4.6	6.5	12.6
Type of school			
Government	5.3	10.2	15.5
Aided	3.7	6.9	12.2
Grade			
Lower primary	3.8	8.3	19.7
Upper primary	4.8	6.8	12.5
High school	4.1	9.6	7.3
All	4.2	8.2	13.4
Number	1236	1214	1011

The percentage of abnormal behaviours in the total difficulty scores of boys is slightly less than girls in data from students; whereas the data from parents and teachers show that abnormal percentage is much higher for boys than girls. Data from student, teacher and parent reveals that the percentage of abnormal level of total difficulty is higher among students in government schools than in aided schools. The variations

by grade is not much different in the case of student and parent versions whereas it reduces from lower primary to high school in the case of parents. The data on the total psychosocial problem index very clearly say that there is a significant number of students in the public funded schools in the borderline and abnormal category who needs very significant professional psychosocial interventions.



Case study:

Cumulative experiences of psychosocial problems by an eighth standard boy

During the time of the analysis of the quantitative data, one student was found abnormal in different domains. He is an eighth standard student who always looks like an introvert in nature. The primary observations found that the boy is very poor in academic achievement and also restrict himself from interacting and making friends with other children. His family members are highly religious and his father works in abroad, and very rarely visits home. Educated up to secondary, the mother is very orthodox and withdrawn from the general social life. She is not very attentive in the child's needs and interests. At the same time, she seems to be overprotective and does not allow the child even to go neighbourhood to play with other children. He has limited opportunities to peer group interaction due to the strict parenting. His parents do not allow him to attend summer camps and other activities in the school. He is interested to play with the neighbourhood kids but not with the school mates. The student seems very shy in nature but obedient to the teachers and elders. He is facing issues in learning and using language (poor academic performance), talks very less and provides the responses to the questions are in only few words. At the same time his skills in mathematics are fairly good, and he completed the tasks given by the fi quickly.

The aided school where he studies has about over three thousand students and so individual attention is difficult. The school has no system to identify and support such

students and also is not concerned in providing individual attention. They consider these issues of the child as ordinary or even normal and do not give any special significance. They manage the child and other children with different psychosocial issues by the traditional methods like, punishing, isolating or informing the parents. The school also follows high religious values and cultural practices according to the religion of the management. The school does not follow any scientific practice to address psychosocial problems of the students.

Implications

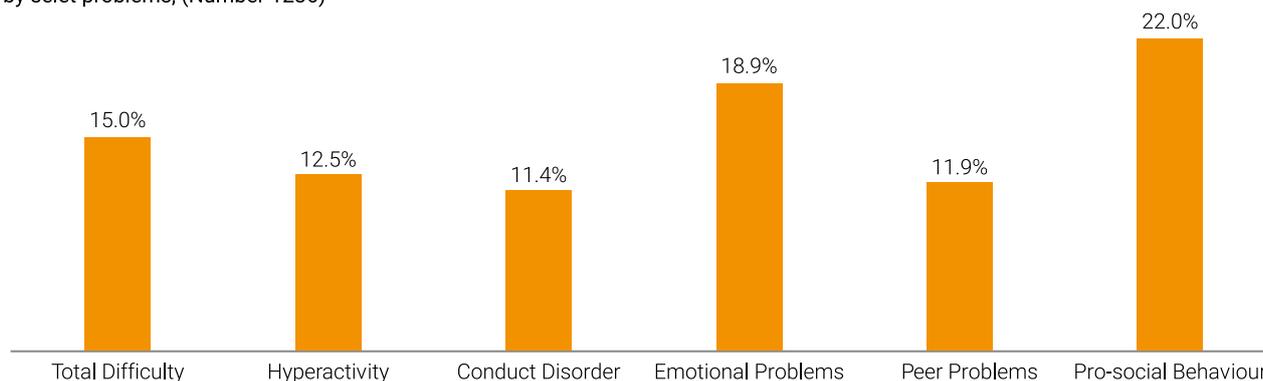
The family atmosphere of the child is very restrictive and the child has developed different psycho-social conditions like, emotional disturbances, poor social behaviours, and poor learning skills. The student has developed a feel that he is good for nothing. The atmosphere in the school also is not supportive and the student cannot find a way to overcome these issues. Due to the orthodox religious sentiments and practices, student is compelled to stand inside a circle, which regulates the potential of the students and further spoils their psychosocial domains. The school has a large students' strength and so individual attention from teachers is difficult. The student said he likes mathematics most, but his mathematics teacher does not even know his name because the class is overcrowded with sixty students. High religiosity, the inability of the parents to care of the children, limited infrastructure and facilities in schools associated with the absence of scientific and professional psychosocial interventions spoil the potential of the students and further lead to the poor learning and character formation.



Figure 3.1 provides the percentage of children in need of psychosocial intervention by domain. This figure gives a comprehensive impression on the issue of the psychosocial problems among the LP, UP, and HS students in the public

funded schools in Kerala. This indicates that almost one in every five students in public funded school has a problem related to pro-social behaviour which needs to be addressed.

Figure.3.1: Percentage of students in public funded schools in Kerala, 2018-19 in need of psychosocial intervention, by selet problems, (Number 1236)

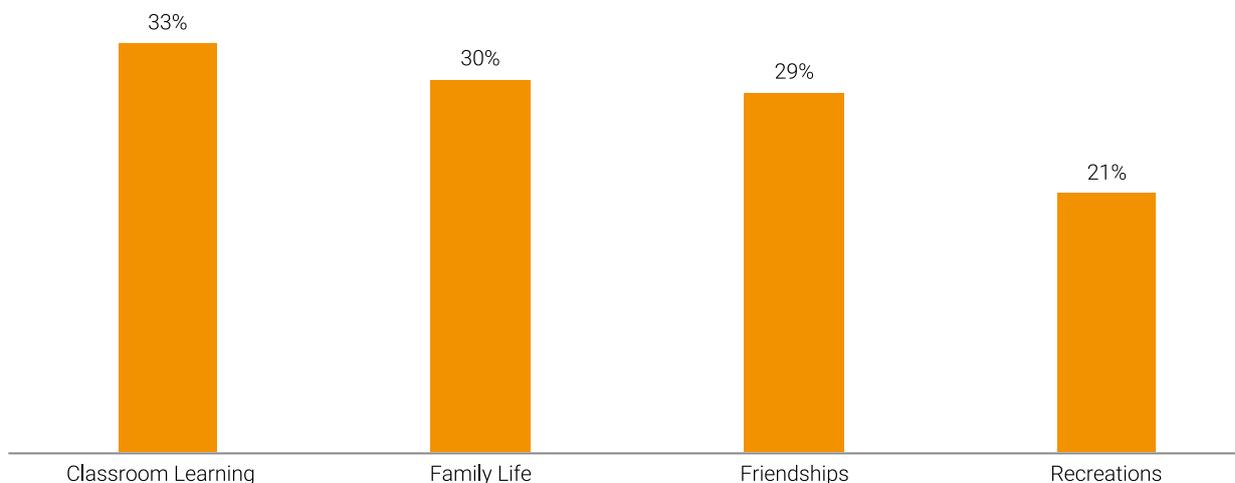


A similar proportion of students in public funded schools had emotional issues that need to be intervened. Roughly 12 per cent each had hyper activity, conduct problems and peer relationship constraints. The percentage of students in public funded schools with significant constraints in attention, conduct, emotions and peer problems is 15 per cent. The children who fall in

the abnormal and borderline category really need the psychosocial intervention to promote their well-being as a student and as an individual of a society. The extent of problems among the students in public funded schools tells us the alarming situation and need for a systemic and comprehensive response to effectively address the issues.

The students who reported psychosocial problems were asked to report how these problems affected their daily life in four domains. Table 3.2 provides the impact of psychosocial problems on the affected student's family life, friendships, classroom learning and recreations.

Figure.3.2: Percentage of students experiencing psychosocial problems by reported areas impacted (Multiple Response), Number: 277

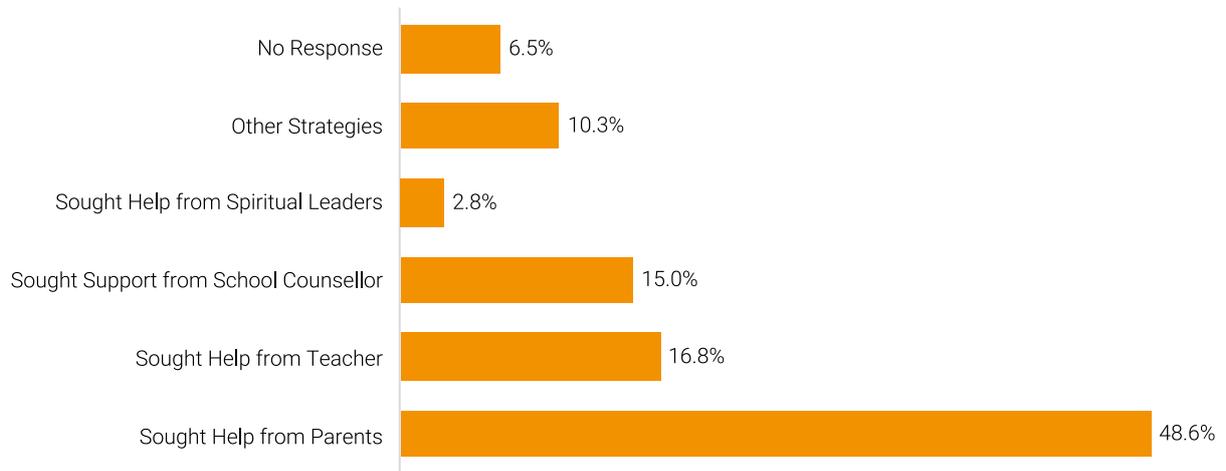


One in every three students with psychosocial problems reported that it severely impacted their classroom learning. About thirty per cent each reported that the problems substantially affected their family life and friendships. About one-fifth of the students who experienced psychosocial problems reported that it significantly impacted their recreational activities.

Students in the sample who reported having experienced a psychosocial problem were asked how they managed it last time. Only 107 out of the 277 people responded to this. The

findings are presented in Figure.3.3. One in every two students told that they sought the support of the parents. Nearly about 17 percent approached teachers. Among the students who experienced problems, 15 per cent approached the school counsellors and nearly about three per cent reported having sought help from spiritual leaders. A few students also reported having sought the services of a psychiatrist. These findings endorse the insights from the analysis of the responses from the schools and also triangulates the qualitative data from the case studies indicating the overall poor of the psychosocial problems.

Figure 3.3: Management strategies of students in public funded schools, kerala, 2018-19 when faced with a problem, Number 107



Management Strategies: Case Studies

1. “Kaleidoscope” an inspirational initiative

During the fieldwork, the team identified that the L.P school from a northern district of Kerala has an indigenous programme named ‘kaleidoscope’. The school has developed a system to evaluate the student’s affective, cognitive, and psychomotor domains continuously by integrating parents, teacher and students in the process. As indicated by the name, it is a triangular viewpoint from parents, teachers and students to evaluate and enhance the academic performance, behaviour and extra-curricular talents of students. This programme was started in the school four years back and the philosophy behind the ‘kaleidoscope’ is that the role of a teacher is not limited to just teaching them the academic lessons but also is to develop him/her as a person who is worth to this society. ‘Kaleidoscope’ is a multi-stage process which is designed for one year. Make a student’s profile record with the details on the socio-demographic profile and physical condition of the student at the time of admission to each class. The initiative was to maintain a book for each student for a year to collect the details about the students from the teacher, parents and students based on 23 dimensions and do a continuous motivation, monitoring, evaluation and provide training programmes and other psychosocial and academic supports.

Ability evaluation was a step in the process where the students’ abilities were assessed with the help of 23 indices; based on the three dimensions. The process depended on the student’s own viewpoint, experiences of the class teachers of the current and previous academic year and the opinion of the parents. They have a system of scoring the evaluation indicators in a five-point scale. They conduct class P.T.A and based on the information,

the parent, teacher, and the student together find out the specific areas where the student needs more attention and care and note it. Then the school resource group (S.R.G) discusses about each child and make them into groups to provide training and other support and make an annual plan for them. This will be evaluated by the class teacher every month and by parents and students in each term. Thus, the students who are weak in the academic aspects are provided extra class and support after usual class hours. If the student is in difficulty or having any psychosocial problem, they take help from block resource centre (BRC) team members. This programme has a good referral system to address the problems of a child that requires higher level management.

Implications

From the observations of teachers, parents and students, ‘kaleidoscope’ programme is very useful to understand the progress of the student. It understands the academic, psychosocial and extra-curricular aspects of the child. This is a good model for all schools in Kerala as the teacher; takes the primary role in this programme as a facilitator for the all-round development of individual than an ordinary teacher with a focus on the academic curriculum. At the same time, the programme is not scientifically tested for its effectiveness or even the current form of intervention is not scrutinized. This programme also needs further scientific evaluation to understand its drawback and to improve its effectiveness. It is not system based and the initiative may not be continued once the person behind it moved away from the system. However, ‘kaleidoscope’ programme indicates that if there is a serious effort to develop a comprehensive programme for the support of the students with psychosocial problems, a transformation can be made.

2. Social activity-oriented teaching and learning: A replicable model.

An inspiring initiative of a school to engage their students in the social and practical life situations through various activities was observed during the fieldwork. The school has good infrastructure including smart classrooms and the teachers and students held a healthy relationship. The school provides special classes like communicative English, computer classes and special mathematics classes for students to improve their academic skills and achievements. They also provide special classes to students who have difficulty in learning. The teachers ensured the inclusion of all students in cultural activities like debates, drama and speeches. Apart from these activities they organise continuous trainings on swimming, karate, yoga and chess. Vegetable cultivation in schools by children and involvement of children in the maintenance of the environment have been some other daily activities of the children in the school.

Implications

This is a general intervention model which depicts the picture of a government lower primary school attempting to invest in the development of students. Involvement of children in activities improves their level of confidence. Childhood is an important time that develops the personality and all the inputs at a lower primary session are very crucial. Engagement with the nature is a good way to learn values. These interventions help the students to have a concern towards the environment. These engagements also will reduce the occurrence of the psychosocial problems and will work as an effective prevention strategy against the increasing issues in the affective domain. The activity-oriented learning process is a way to manage the hyperactivity, emotional problems, and will improve the pro social behaviour of children. This experience gives an impression that the possibility of getting the students interacted and engaged with the social activities that require a coordinated effort of the cognitive, psychomotor and affective domains is very effective in managing and preventing the occurrences of psychosocial problems. The case also provides a clear indication about the possible and essential transformation that should be brought within the school education system in Kerala. The significance of the affective and psychomotor domains need more attention and structured interventions to make the individual students as mature citizens of tomorrow.









Chapter IV

Key findings and conclusions

Introduction

The cognitive domain, affective domain and psychomotor domain are the three domains of learning and development of a child. Attention to the cognitive domain is inevitable for the fruition of efforts we put in the cognitive and psychomotor domains of a child. The psychosocial problems of the child sombrey affect the affective domain of the child. The state-wide data regarding the psychosocial problems of school children and its management strategy in school is not available currently for Kerala. This study estimates the state-wide prevalence of emotional problems, conduct disorder, hyperactivity, peer relationship problems and poor pro-social behaviour of children in public funded schools in Kerala. This research also points out the present management strategy used in schools to solve these psycho-social issues. The data obtained through this research will be the base for future research and for educational policy for Kerala which encompasses the framework for the psychosocial management of school children.

Methodology

A descriptive design is adopted for the study by gathering and both qualitative and quantitative data. The quantitative data provided information about the status of the estimates of psychosocial problems and management systems in schools. The study covered the students enrolled in the public funded (government and aided) lower primary, upper primary, and high schools. In order to provide a one-time good state-level estimate with adequate representation of students from lower primary, upper primary and high school segments in the Kerala, a sampling size of 1200 was decided. Adopting a self-weighting design six districts and 66 schools were selected from 14 districts and 12,008 schools through probability proportionate to size (PPS) sampling method at the first stage and 20 students were selected without replacement through systematic random sampling and at each selected school. Class teachers of all selected students constituted the teacher sample and their parents of the sample of students constituted the parent sample. Wayanad, Kannur, Kozhikode, Malappuram, Alappuzha and Thiruvananthapuram are the districts selected. The proportion of government and aided school selected is aligned to the state level distribution of students in such schools.

Key Findings

Prevalence of psychosocial problems

- ♦ Majority of the schools are of the opinion that they all have experienced different types of psychosocial problems with the students in their schools
- ♦ **Conduct disorder:** There is significant percentage of students in the public funded schools in Kerala with conduct disorders in the borderline and abnormal

categories. It is highest in the parent version and lowest in the teacher version. In student version the prevalence of conduct disorder is higher among the students in government schools compared to aided schools, the percentage of conduct disorder in government and aided schools does not show a significant difference in parent version and teacher version

- ♦ **Emotional problem:** The study has proved that the percentage of students, with the emotional problems in the borderline and abnormal categories is alarming and warrants scientific interventions. Percentage of the abnormal and borderline emotional problem is highest in the parent version and lowest in the student version. Emotional problems are slightly higher in government schools than in aided schools. Emotional problems are slightly higher among girls than among boys.
- ♦ **Hyperactivity:** The level of hyperactivity in the school going children in the public funded schools in Kerala in the borderline and abnormal categories is significant and a serious effort has to be made to address the issue. Abnormal and borderline percentage of hyperactivity is higher in parent version than student version and also teacher version higher than parent version. Percentage of abnormal and borderline is similar in aided and government schools. Abnormal and borderline percentage of hyperactivity is slightly higher in boys than girls.
- ♦ **Peer relation:** The study reveals that the number of students with peer relationship issues is really noticeable among the LP, UP and high school students of the public funded schools in Kerala and abnormal and borderline percentage of peer relationship problems is almost similar in student and teacher version of data, and it is higher in the parent version. It is higher in government schools than in aided schools. Peer relation problem is similar among boys and girls.
- ♦ **Total difficulty:** The study reveals that the experience of total difficulty among the students in Kerala public funded school is significant and demonstrates the gravity of the issue. Abnormal and borderline percentage of total difficulty is consistent among boys and girls. The students, teachers and parents are of the opinion that these problems are making impacts on the school and personal life of the children.
- ♦ **Pro-social behaviour:** the findings on the basis of the level of pro social behaviour very clearly say that the percentage of students with abnormal and borderline pro social behaviour is high with regard to all categories and levels of students in the public funded schools in Kerala. Abnormal and borderline percentage of pro-social behaviour is high in teacher version and there is no significant difference between parent and student versions. Abnormal and borderline pro-social behaviour is almost similar in government and aided schools and also in boys and girls.

- ◆ **Impact of problem:** a significant percentage of the respondents in the study from different categories reported that the psychosocial problems have significant impact on the daily life of the students especially with their academic and other engagements. It may be an indication that parent and the teacher do not recognise the impact of the student experience from their psycho-social problem. The highest number of percentage of students responded that they share their problem with mother.
- ◆ The teachers believe that all their efforts for the development of the child will be fruitful only if there is a scientific framework to deal with the psychosocial problem of child.
- ◆ Majority of teachers, parents and school authority expressed their concern about the absence of a proper mechanism to deal with the psychosocial problems of students.

The current management mechanisms

- ◆ Some of the schools have attempted to give generic and specific interventions to the students who have manifested serious behavioural and emotional problems. The most commonly used interventions are giving counselling services and orientation classes to the students and parents.
- ◆ The schools have utilized the services of the internal and external resource persons and institutions in the management of the problems.
- ◆ The experience of the schools reveal that the interventions made with the support of the internal resources or the external experts bring good results. The schools are spending a small amount of money for the management of the psychosocial problems of students. At the same time majority of the schools have different avenues for extra-curricular engagements as clubs, day observation, community involvement activities and so on.
- ◆ Schools are of view that the current inputs on psychosocial interventions are insufficient. Further it is identified that there is no system or regular procedure in the management of psychosocial problems of students. There is no protocol to be followed. The absence of the policy on the issue by the government is also observed.
- ◆ Majority of students in the public funded system depend on their parents and teachers to solve their issues. In aided schools, their governing authority interferes in student's problem based on their religious/administrative philosophy or the influential persons or institutions even with business concerns.
- ◆ Further the qualitative and in-depth analysis of the selected cases has shown that the family background and the general socio economic conditions are very significant in the occurrence and management of the psychosocial problems.
- ◆ The individual experiments and initiatives are doing well to the students and parents but the individual initiatives alone cannot resolve the problems at scale.
- ◆ The schools are not equipped to work with the problems even after serious bad experiences with the issue.

All these findings on the basis of the data gathered through different methods, tools and sources have given a comprehensive impression and conclusion that the prevalence of the psychosocial problems among the students in the public funded schools in Kerala is very significant and alarming. The management of these problems at the student level, family level, school level and the state level are suboptimal. They are neither systemic nor scientifically established. This is because of the over emphasis on the cognitive domain and scholastic achievements. The affective domains and the psychomotor domain are not proportionately addressed and so the balanced development of the next generation is not ensured. The absence of a policy, procedure and protocol regarding the identification, management and referral of these psychosocial issues make the situation further grim and challenging. The inefficiency of the families and the attitudinal concerns among the teacher community make the treatment of the problem tough. Hence it is categorically significant that the government as the primary stake of the public funded school education in Kerala take a speedy and needy scientific initiative and leadership responsibility in managing the psychosocial problems of the students. It is essential to make the universalised school education in Kerala a quality and dignified educational experience for the students and the future generations.

The gaps identified

- ◆ In the schools, professionally qualified individuals who can make a psychosocial intervention are limited. The availability and accessibility of professional psychosocial services are very poor in schools. Currently there is no mechanism to monitor such interventions in schools.
- ◆ Usually hyper or hypo reactive pattern is adopted towards psychosocial problems of students by the school authority and parents. It is observed through interaction with school authorities, teachers and parents that significant efforts are to be made to deal with the psycho-social problem in schools.





Chapter V

Recommendations



Recommendations

In the light of the findings of the study, the researchers suggest some measures to improve the cordial atmosphere of the school as well as the interventions for the management of psychosocial problems faced by the students in public funded schools in Kerala.

The proposed course of action:

- ◆ The children in the abnormal category are in need of further clinical screening and management. Hence relevant authorities may develop appropriate and affordable professional service to such students through the schools. It is also recommended to encourage a comprehensive team (trained teachers, professional experts and parents) intervention approach to support these students.
- ◆ There are significant socio-cultural factors including family background, school environment, lifestyles and media for a student developing conduct disorder apart from biological reasons. Therefore, with the support of professional experts and parents a regular awareness creation and vigilant monitoring mechanism may be developed on these internal and external factors to prevent and reduce the development of conduct disorder.
- ◆ The prevalence of emotional problems among school students is also worrisome. The overemphasis on academic achievement and the expectations on the future may have a very significant contributory influence on these emotional problems and therefore appropriate intervention programmes by trained practitioners have to be developed and implemented in all these schools to save the students from further development of these emotional problems to major psychological problems. A state resource team may be constituted to address this issue.
- ◆ The available technical support services and personnel in service provision need to be reviewed and strengthened by the government and the schools to cater to the needs of these students. The teachers and parents may be made aware to focus on the strengths and weakness of children in moulding them than to hang on with the ambitious and unrealistic academic achievement targets.
- ◆ The prevalence of abnormal and borderline hyperactive behaviours among the students in Kerala warrants emergency attention and pro-active involvement of the concerned to manage the hyperactive students. Hence, the learning experience of the students requires the appropriate engagement of the energy of the students.
- ◆ The most alarming observation from the study is the prevalence of peer relationship problem of (about 22%) in the abnormal and borderline category. These peer relationship problem is a major concern of teachers and parents and also make critical influences on the personal, social and academic life of students. The school education system should be sensitive to the peer relationship problem of students and make open spaces for developing good relationships among the students. Open learning opportunities, dignified interaction spaces, community engagements and other social relationship development initiatives will help students in managing their peer relationship problem. The trend from the data gives the impression that the peer relationship gets more consolidated and managed as they grow older. The teachers, family need to be trained to make the peer relationship of student more accepted and dignified.
- ◆ It is a convincing observation that the pro-social behaviour of students is critically challenged. The reasons for this alarming phenomenon may be a lack of appropriate space in social engagement, weakening of social institutions, increased involvement in individualized social media and the nuclear family lifestyles and so on. Hence, the curriculum of school education and pedagogy need to be reviewed in the light of this observation and appropriate space. Efforts and steps are to be initiated in the system and functional practices to give more opportunities to all students. Further, the social involvement may be treated as a major factor in student's evaluation and so the parent and teachers along with the students are motivated to get more socially committed and engaged.
- ◆ In general, there should be an appropriate policy framework for psychosocial management of the students in the schools which envisage the scientific management of the problems. Competitive and scientific programmes may be prepared to support all the students based on a universalized problem management initiative. More awareness and skill development programmes should be made mandatory for teachers, parents and the older students in managing these psychosocial problems among the students.
- ◆ It is also essential, in the light of the study that on a regular basis services of expert professionals are to be made available in the schools to address psychosocial problems. There are several promising interventions where the school, parents and children come together to address the psychosocial problems of the students. Such initiatives may be understood better and lessons learned may be leveraged to replicate/scale up such interventions with regular monitoring.
- ◆ A major observation of the research is the absence of a coordination system in the schools or even at the state level for the management of psychosocial problems. Hence, the government may evolve such a mechanism for psycho-social management.
- ◆ Avail support and partnerships from the community expertise like the professionals, organisations and higher education institutions in the process.

Further research recommendation:

- ◆ State-wide research may be conducted on the issues of the students regarding the problems related with the educational social and psychological correlates
- ◆ The psychosocial causative factors need to be evaluated further and correlated with problems
- ◆ The curriculum and pedagogy need to be further critically analysed, reviewed and modified in the light of these findings to make a balanced curricula and pedagogy.
- ◆ The influence of psychosocial problems on the development of students needs to be studied.
- ◆ The available systems of management and the personnel involved in the process including the school counsellor and external experts are to be evaluated in terms of their roles, responsibilities, strategies, procedures and impacts on the students.
- ◆ Lessons learned from the models of psycho-social interventions adopted by Europe, Asia and other countries or even the other states in India may be studied and be incorporated into our system.

Conclusion

This research "psychosocial problems and management in the public funded schools in Kerala" undertaken by the department of social work, Sree Sankaracharya University of Sanskrit

Kalady and the SCERT Kerala to analyse the prevalence of psychosocial problems and their management practices in the schools has given a clear state-wide estimate of the problems and their management systems. The study has assessed the volume of conduct disorders, emotional problems, peer relationship issues, hyper activity and inattention along with the pro social behaviour. The findings have given an impression that the levels of these problems in the schools as reported by the parents, teachers and students through the SDQ are alarmingly high and demand an immediate action to ensure the quality teaching and learning experiences in the schools in Kerala. The inquiry on the current management practices and the players involved in the process and the philosophy of the management activities have given the idea that there are no significant scientific and systemic management practices, policies and procedures in the process of psychosocial problem solving practices in the state. It can be anybody's game and practically nobody is attending to the issue. The available interventions are highly inadequate and many a times unscientific and nonprofessional. Hence the proposal is put up to make scientific policies, programmes and procedures in place to make the psychosocial living of the students safe and proactive. The state agencies have to take the issue very seriously and make appropriate administrative and interventional initiatives so that the next generation citizens will be more authentic, contributing and successful.



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