



A STUDY TO EVALUATE THE EFFECTIVENESS OF THE STRUCTURED TEACHING PROGRAMME ON SPEECH THERAPY AMONG PARENTS OF AUTISTIC CHILDREN IN SELECTED SPEECH THERAPY CENTERS, BANGALORE.

Keziya Susan Babu

Research Scholar, Srinivas College Of Nursing Sciences, Srinivas University Mangalore

ABSTRACT

Background: Autism is the fastest growing serious developmental disability in the world. Centers for Disease Control and Prevention reports shows that Autism affects as many as one out of every 80 children. Studies say that there would be nearly 4 million Autistic children and adults in India by 2020. It can well cross 8-10 percent of Indian population who will be falling under such category. As the medical community unable to find any suitable cause for its root, the only way available is; early detection and intervention by which the symptoms of unacceptable language and behavior can be minimized. Autism and speech delay are often interrelated. Speech therapy can improve overall communication among autistic children. 10-20 percent of autistic children need to attend a special school or training centre where the speech therapy is conducted and parental support and effort is the most crucial factor in the success of speech therapy.

Objectives:

- To assess the pre test and post test knowledge of parents of autistic children regarding speech therapy.
- To evaluate the effectiveness of structured teaching programme on knowledge regarding speech therapy of autistic children among parents.
- To assess the association between post test knowledge level among parents of autistic children regarding speech therapy and selected demographic variables.

Method: An evaluative approach with one group pre test post test pre experimental design was adopted for this study. Purposive sampling technique was used to select the sample. 60 parents of autistic children who met the inclusion criteria were selected through purposive sampling technique for the study. The conceptual framework for the study was based on systems theory. On the first day a structured knowledge questionnaire was administered to the parents of autistic children to find out the pre test knowledge level on speech therapy. A demographic profoma was also administered along with the questionnaire. The structured teaching programme was given on the same day in three divided areas for a period of one hour. The post test was conducted on the seventh day of teaching programme by administering the same knowledge questionnaire. **Results:** Data were analyzed by using descriptive and inferential statistics on the basis of objectives and hypothesis of the study. Descriptive statistics used were frequency and percentage, mean, standard deviation and tabular representation of the data. Paired 't' test was computed to test the significance of difference in the mean pre test and post test knowledge scores. Among the parents of autistic children 86.67% had inadequate knowledge, 13.33% of them had moderately adequate knowledge and non of them had adequate knowledge regarding speech therapy among autistic children. In the pre tests mean knowledge scores and mean percentage scores the parents of autistic children have scored more in the area of Autism and its symptoms (49.37%) and in the area of techniques of speech therapy (49.37%). The least mean percentage scores of parents of autistic children were observed in the area of speech therapy and its importance (41.8%). The mean percentage post test knowledge scores of parents of autistic children in all areas of speech therapy were higher than the mean percentage pre test knowledge scores. The maximum mean percentage score in the post test was in the area of Autism and its symptoms (90.63%). In the area of speech therapy and its importance the score was 84.8% and in the area of techniques of speech therapy the score was 77.92%. The data also reveals that the maximum gain in score was in the area of Autism and its symptoms (0.8149). The minimum gain in score was in the area of techniques of speech therapy (0.5638). The 't' test value showed that there was significance gain in knowledge on speech therapy among parents of autistic children through the structured teaching programme. The calculated value 't' = 54.06 is greater than the table value t (59) = 2.00, and p < 0.05. Among parents of autistic children there was significant association found between knowledge scores with demographic variables like age, educational status, employment status and previous knowledge regarding autism and speech therapy. **Interpretation and Conclusion:** A very high significant difference was found between the pre test and post test knowledge scores in all area of Speech therapy, it was concluded that the structured teaching programme was highly effective in increasing knowledge among parents of autistic children regarding Speech therapy.

KEYWORDS : Autism, Autistic Children, Speech therapy.

INTRODUCTION

Autistic disorder is a perplexing condition. Children with autism may present a variety of problems with speech and communication. Children might be completely non verbal, have limited speech, or use echolalia as children mature, they develop greater awareness and attachment to parents and other familiar adults. But the autistic child exhibits lack of responsiveness to other people, gross impairment in communication skills and bizarre responses to various aspects to the environment. All these are developing within the first 30 month of age. Autism and speech delay are often interrelated. Problems with verbal language are among the most common sign of autism generally experiences considerable speech problems. Speech therapy can improve overall communication among autistic children. This makes it possible for children with autism to improve their ability to form relationships and function in day-to-day life. The main goal of speech therapy for autism is to improve useful communication. For some children, verbal communication is a realistic goal. For others, the goal may be gestured communication. Still other children may have the goal of communication by means of a symbol such as picture boards.

Specific goals of speech therapy include helping the individual with autism to articulate word well, communicate both verbally and non verbally, comprehend verbal and non verbal communication, understanding others intentions in arrange of settings, initiate communication without prompting from others, know the appropriate time and place to communicate something, develop conversational skills, exchange ideas, communicate in ways to develop relationships, enjoy communicating, playing and interacting with others and learn self-regulations. Speech-language therapy activities can also include ways to improve social skills and social behaviors. For example, a child might learn how to make eye contact or to stand at a comfortable distance from another person. These skills make it a little easier to interact with others.

Most children have average intelligence and function in mainstream society but need individualized educational and health services. Parents should accept the child's problem as is; and make plans to care at home. The involvement of both the parent is essential for successful child rearing. Parents of these children can provide quality

interventions and advocate against barriers of care.

MATERIALS AND METHODS

Research approach: An evaluative approach was adopted for the study to determine the effectiveness of planned teaching programme on the knowledge of speech therapy among parents of autistic children.

Research design: One group pre test post test design, which is a pre experimental design, was adopted in this study.

Research question: Effectiveness of the structured teaching programme on speech therapy among parents of autistic children

Research variables

Independent variable: Structured Teaching Programme (STP) on Speech Therapy.

Dependent variable: Knowledge regarding Speech Therapy.

Extraneous variables: the extraneous variables identified by researcher are age, education, occupation, monthly, income, religion, type of family, locality, number of children, previous knowledge and source of information.

Setting of the study: Speech Therapy Centers at Bangalore, Karnataka

Sample: 60 parents of Autistic Children who met the inclusion criteria formed the sample for the study.

Sampling technique: Purposive sampling technique. Criteria for sampling selection

Inclusion criteria

- Parents of newly diagnosed autistic children.
- Parents of autistic children those who are willing to participate in the study.
- Parents of autistic children those who are available during the period of data collection.

Exclusion criteria

- Parents of autistic children those who are health professionals.
- Parents of long term autistic children.
- Parents of children with other linguistic disorders.

Description of the tool

Tool 1: Demographic Profoma

Demographic profoma comprised of 10 items and the characteristics included were age, education, occupation, monthly income, religion, type of family, locality, number of children, previous knowledge and source of information.

Tool 2: Structured knowledge questionnaire

This consists of closed-ended questions which were formed to assess the knowledge among parents of autistic children on speech therapy. It consisted of 30 items which were divided into three areas.

Area 1: Autism and its symptoms.

Area 2: Speech Therapy and its importance.

Area 3: Techniques of Speech Therapy.

RESULTS

Organization of findings

Section 1: Description of the sample characteristics

Among the parents of autistic children (58.33%) were in the age group of 26-35 years, (58.33%) were graduates, (53.3%) were government employees, (36.67%) were having monthly income above 15001 rupees, (50%) was Hindu's, (60%) were from nuclear family, (61.67%) were from urban areas, (65%) had one child, (56.67%) were having less previous knowledge, (61.67%) source of information were from Health care professionals.

Section 2: Knowledge among parents of autistic children regarding speech therapy.

- Distribution of pre test knowledge scores of the subjects
Among the parents of autistic children (86.67%) had inadequate knowledge, 13.33% of them had moderately adequate knowledge and none of them had adequate knowledge regarding speech therapy.
- Area wise distribution of post test knowledge scores of the subjects.
Among the parents of autistic children 10% of them had moderately adequate knowledge and most of them (90%) had adequate knowledge regarding speech therapy.
- Area wise distribution of pre test mean knowledge scores and mean percentage scores of parents of autistic children.

It was found that the parents of autistic children have scored more in the area of Autism and its symptoms (49.37%) and in the area techniques of speech therapy (49.37%). The least mean percentage scores were observed in the area of techniques of speech therapy (41.8%).

- Area wise distribution of post test mean knowledge scores and mean percentage scores of parents of autistic children.
It was found that the parents of autistic children have scored more in the area of Autism and its symptoms (90.63%). In the area of Speech therapy and its importance the score was 84.8% and in the area of Techniques of speech therapy the score was 77.92%.
- Area wise Mean and Standard deviation of pre test and post test knowledge score of parents of autistic children
In the area of Autism and its symptoms, mean post test knowledge obtained, in the area of Speech therapy and its importance 8.48 and in the area of Techniques of speech therapy the mean post test knowledge obtained 9.35 are higher than their pre test knowledge scores which are 3.95, 4.18 and 3.95.
- Area wise mean percentage of pre test and post test knowledge scores and gain scores of Parents of autistic children in different areas of Speech therapy.

Table 1 depicts that the mean percentage post test knowledge scores of parents of autistic children in all areas of speech therapy were higher than the mean percentage pre test knowledge scores. The maximum gain in score was in the area of autism and its importance (0.8149) and speech therapy and its importance (0.7388). The minimum gain in score was in the area of Techniques of speech therapy (0.5638).

Section 3: Effectiveness of structured teaching programme on Speech therapy among parents of autistic children.

Area wise mean, standard deviation and't' value of pre test and post test knowledge scores of parents of autistic children.

Table 2 shows that the computed't' values in all areas were higher than the table value, being highest in the area Speech therapy and its importance (t 59=2.00, P < 0.05). The overall't' value was 54.06 at P < 0.05.

Section 4: Association between post test knowledge levels on speech therapy among parents of autistic children with their selected demographic variables.

Table 1: Area wise mean percentage of pre test and post test knowledge scores and gain scores of Parents of autistic children in different areas of Speech therapy.

Sl. No	Areas	Mean Percentage Score		Gain Scores		
		Pre test	Post test	Actual gain	Possible gain	Modified gain
1	Autism and its symptoms	49.37%	90.63%	41.26 %	50.63%	0.8149
2	Speech therapy and its importance	41.8%	84.8%	43%	58.2%	0.7388
3	Techniques of speech therapy	49.37%	77.92%	28.55 %	50.63%	0.5638

Table 2: Area wise mean, standard deviation and't' value of pre test and post test knowledge scores of parents of autistic children

Sl. No	Knowledge Aspects	Max Score	Pre Test		Post Test		Paired T Test
			Mean	SD	Mean	SD	
1	Autism and its symptoms	8	3.95	1.70	7.25	0.772	11.32*
2	Speech therapy and its importance	10	4.18	1.54	8.48	1.28	22.05*
3	Techniques of speech therapy	12	3.95	1.89	9.35	1.94	20.69*
	Combined	30	12.08	5.13	25.08	3.992	54.06*

t59=2.00, P < 0.05 *Significance

CONCLUSION

The study findings shows that, there was a very high significant difference between the pre test and post test knowledge scores in all areas of speech therapy. Among the parents of autistic children there

was significant association found between knowledge scores and demographic variables like age, educational status, employment status and previous knowledge regarding autism and speech therapy. Hence, it was concluded that structured teaching programme on speech therapy among autistic children was highly effective.

REFERENCES

1. Pillitteri A. Maternal and Child Health Nursing. 4th Edition. New York: Lippincott Williams and Wilkins; P.1678-79.
2. Bhatia MS. Essentials of Psychiatry. 4th Edition. New Delhi: CBS Publishers; .23.20-23.21.
3. Stuart GW. Principles and Practice of Psychiatric Nursing. 9th Edition. New Delhi: Elsevier Publications; P.88-89
4. Chamalah E, Arsanti M. Alquran Speech Therapy for Children with Autism. Journal Pendidikan Humaniora. 2017;5(2):58-63.
5. Speech-Language Therapy for Autism [Internet]. <https://www.nichd.nih.gov/>. 2022 [cited 20 June 2022]. Available from: <https://www.nichd.nih.gov/health/topics/autism/conditioninfo/treatments/speech-language>