



Teachers' knowledge about epilepsy in Greece: Information sources and attitudes towards children with epilepsy during school time



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ARTICLE INFO

Article history:

Received 27 January 2016

Revised 18 March 2016

Accepted 3 April 2016

Available online 28 May 2016

Keywords:

Epilepsy
Education
Teachers
Stigma
Children
Information

ABSTRACT

Aim: The aim of this study was to explore the sources of information for the educators in Greek primary and secondary schools with regard to epilepsy, first aid to seizures, and pupils' health conditions.

Method: A semistructured anonymous 52-item questionnaire was sent to 100 public primary and secondary Greek schools from all districts. Two thousand thirty-seven teachers were approached; 446 questionnaires returned. The data were analyzed with SPSS20. Also, 70 head teachers were phone-interviewed with an open-ended unstructured questionnaire. The derived data were analyzed using mixed methodology.

Results: Twenty-two percent of the addressed educational community responded to the questionnaire, mostly women (66.6%). More responses came from urban areas (71.5%). The main source for the teachers to obtain information about epilepsy was found to be personal experience (37.75%) and internet (34.93%). Only a small percentage was referred to courses (6.2%). Eighty point three percent of the educators knew what epilepsy is, and 88.1% had the right view about the nature of the illness. However, 92% of the educators replied that they have not had adequate first aid training. Although 80.3% of the teachers believed that the school personnel are aware of the pupils' medical history, 85.48% of the teachers considered that they are informed about the pupils' condition from the parents/carers, and only 5.53% believed that the information came from the family doctor. Ninety-five point seventy percent of the educators declared a wish for further information and training about epilepsy.

Conclusion: Knowledge and attitudes of the educators towards epilepsy are improved compared with those reported in previous studies conducted in Greece. However, there are still areas of uncertainty which need improvement. The necessity for more information about epilepsy and pupils' medical history along with appropriate training about seizure incidents seems crucial for the Greek educational community. Educational campaigns about epilepsy could improve teachers' knowledge of epilepsy to develop a well-informed and tolerant community. Further research in the field is necessary to provide teachers with accurate information about the illness and the ways to cope with it.

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1. Introduction

Epilepsy is a chronic neurological disorder that can impact school-aged children and that is thus studied by many scientists in the field

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of education worldwide [1–43]. Children with epilepsy must learn to deal with this disorder while spending long hours in the school environment for almost 12 years. Prior studies have examined the quality of life among children with epilepsy, stigma associated with epilepsy, teachers' knowledge and attitudes regarding epilepsy and patients with epilepsy, school achievements of children with epilepsy, school absences, seizure management in the school setting, school staff training related to epilepsy, comparison between epilepsy and asthma perception, pediatrician's role, school involvement in seizure disorder treatment, and preferred sources of information about epilepsy among elementary school teachers [1–40]. In Greece, three studies in this field have explored the risk of accidents in special education schools

[2], epilepsy-related issues arising from differences among cultural populations [7], and educators' knowledge and attitudes towards epilepsy and students with epilepsy [14]. Few studies worldwide have examined teachers' sources of information regarding epilepsy [1,6,9,14,17,25,30,31,33,40].

Our present study aimed to explore the sources of knowledge provided to educators in Greek primary and secondary schools relating to epilepsy, first aid in the event of seizures, and pupils' health conditions.

2. Methods

From October 17th to December 15th in 2011, a semistructured questionnaire (Appendix) was distributed to 100 public primary and secondary schools in all regions of Greece. The questionnaire was developed by the authors specifically for this study, based on similar studies in the field with appropriate additions where necessary. There was no pilot study to examine its validity, but it was tested for readability and comprehensibility and consistency among a sample of five educators prior to its distribution. The questionnaire was administered only to school personnel directly involved in pupils' education [14,44,45].

The questionnaire comprised 52 items and was divided into four sections.

The first section asked about the teachers' background, including sex, year of birth, years of work, and educational level.

The second section included questions about the school, including the region, county, number of pupils, and available school services.

The third section included questions about the teachers' knowledge about epilepsy and the relevant legislation in the educational field, sources of knowledge about epilepsy, first aid training, and attitude towards pupils with epilepsy.

The fourth section investigated teachers' personal experiences with pupils with epilepsy and included some questions about the attitudes of other children's parents towards pupils with epilepsy.

The questionnaire included both qualitative and quantitative questions, and we used both open-ended and closed questions, as well as questions answered on a Likert scale, depending on the required data.

To ensure selection of schools from all Greek counties, we listed all of the schools in the online national school database according to their region. After receiving consent from the Ministry of Education, we selected a number of schools from each county, in proportion to the region's population. School selection was performed randomly but not in a systematic probabilistic manner.

In accordance with the regulations of the Ministry of Education, we personally communicated with the head teacher of each school prior to the release of the questionnaire. We sent a number of questionnaires based on the number of staff mentioned by the head teacher.

Some of the head teachers asked us to mail the questionnaire, others asked to receive it via e-mail, and a few requested that we personally give it to the staff after presenting a short introduction to the study and its purpose. In the latter case, the teachers asked the researchers for a ten-day period during which to complete and return the questionnaire, either personally or by mail. When the questionnaire was sent by e-mail, an initial e-mail was sent to confirm that the researchers had the right address for the school. After receiving confirmation from the school and with the authority's permission, a second e-mail was sent with the questionnaire. The educators returned the completed questionnaire through the school e-mail. When the teachers opted to return the questionnaires by mail, we provided the schools with a pre-paid envelope that was returned to the researchers using a confidential private courier account created only for this study.

2.1. Data analysis

The questionnaire responses were analyzed using mixed methods research analysis [45–48]. The qualitative data were grouped and

analyzed in depth. The quantitative data were analyzed using statistical methods.

Nominal variables are presented with absolute and relative frequencies (%). We used the chi-square test of independence to test the association between two variables. The assumption of the test was that the expected frequencies of the cells would be at least equal to five. When this assumption was violated, we used Fisher's exact test. Statistical significance was evaluated at the 5% significance level. All statistical analyses were performed using SPSS version 20 (SPSS, Inc., Chicago, IL, USA).

In addition to the questionnaire, 70 head teachers agreed to participate in a short open-ended phone interview. We analyzed the interviews using qualitative methods to enrich and triangulate the findings. The data were grouped according to three sections of the questionnaire (sections two to four) and analyzed in depth.

The teachers' level of knowledge about epilepsy was determined based on their responses to questions in the third section of the questionnaire. Missing data were taken into consideration. Thus, we only drew conclusions when it was allowed based on the amount of data available. The most important data came from the answers to questions 11, 14, and 15, for which we were not missing substantial data. We triangulated these findings with the data obtained from interviews with the head teachers.

3. Results

During our first telephone contact with 70 head teachers, 65 expressed their doubts about their staff's cooperation in completing the questionnaire. Overall, 96 schools agreed to participate in this study, returning a total of 446 questionnaires (21.89%). Among the 68 schools that preferred to answer the questionnaire by e-mail, 25 responded. We received responses from six of the nine schools that preferred to answer by mail. We made personal visits to 19 schools, where we gave the school staff a short lecture about the research. The staff of these 19 schools responded and asked the researcher to pay a second visit to collect the answered questionnaires.

3.1. Demographics

Table 1 presents the participants' demographic characteristics. Among those who responded to the questionnaire, 67% were female, and 80% were between 40 and 60 years of age. Male educators were generally slightly older than the female educators—with 45% of male participants being 51 to 60 years old and 42% of female participants being 41 to 50 years old. Among our participants, 43% had over 20 years of teaching experience, demonstrating that our study population had substantial experience with children. Almost all participants had a university education (94%), with 18% having a master's or a PhD degree. Of the participating schools, 33% were located in big towns, and almost 27% were located in small towns or villages. The educators' answers indicated that 38% believed that their school can support children with special educational needs, while almost 56% did not. The vast majority of the sample (81%) possessed some knowledge about epilepsy.

Table 2 presents our results regarding factors associated with epilepsy knowledge. Knowledge of epilepsy was significantly more associated with school location in the capital or in towns than with school location in villages ($p = 0.008$). The chi-square test of independence revealed that epilepsy knowledge was not associated with participant age ($p = 0.641$) or years of experience ($p = 0.831$).

We also tested for associations between seizure incident management and participant characteristics, such as age, years of experience, and location (Table 2). We found that seizure incident management was significantly associated with participant age ($p = 0.003$) and years of experience ($p = 0.004$). Specifically, the percentage of participants who had managed a seizure incident was higher among

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