
CONFLUX

JOURNAL OF EDUCATION

VOLUME 1, ISSUE 7, DECEMBER 2013

A PEER REVIEWED INTERNATIONAL JOURNAL



A STUDY ON THE INFLUENCE OF KERALA DIETs AMONG THE TEACHER COMMUNITY FOR THE LAST TWO DECADES

Issahac, V V

INTRODUCTION

District Institutes of Education and Training (DIETs) are established in India with a specific aim to develop primary education in all sectors of the population. Many of the DIETs in India could not meet the target set to them because of various issues in implementing them. But at the same time, some of the DIETs in India delineated perfect examples of teacher professional improvement and school development. DIETs in Kerala could attain the targets fixed and the teaching community has improved substantially to provide quality education to the students. What are the favorable factors supported the DIETs in Kerala in this remarkable achievement? This is a study to find out those favorable factors due to which DIETs could influence the teacher community for their betterment.

The National Policy on Education (NPE) 1986 and Programme of Action (POA) 1986 envisaged the setting up of District Institutes of Education and Training (DIETs) to achieve Universal Elementary Education (UEE). The revised guidelines redefined the mission of DIETs as to provide academic and resource support at the grass root level for the success of various strategies and programs being undertaken in the areas of elementary (and adult) education and for improving the quality of education at the school level. The functioning of DIETs is also a move towards decentralization - as DIET becomes the nodal unit at the district level to carry out local/regional educational needs, and research based planning for elementary education. Today, DIETs have become key centres to provide quality education at the primary level by achieving targets like UEE, EGS & AIE, NPGEL, TLC Programmes of National Literacy Mission and SSA. Various measures were taken by SCERTs and Directorates of Education to strengthen the functioning of DIETs in each state.

Because of various reasons, many DIETs have fallen short in attaining the vision outlined for them in the Guidelines. Lack of infrastructural facilities, shortage of competent staff, non-cooperation of the teaching community, lack of interest of the parents for qualitative education for their children, non-awareness for active participation of the community are some of the issues standing against the performances of DIETs in many places.

DIETs in Kerala are examples for effective functioning. Many of the activities undertaken in Kerala helped the DIETs to bring fruitful results in Kerala. Some of the notable factors supporting DIETs for their effective functioning are experienced staff, active cooperation of the teaching community, parental interests for qualitative education for their children, and active community participation.

Quality Education

Along with the concept of universalization of education, Kerala started focusing its attention on quality of education. National Policy on Education (NPE) - 1986 (revised 1992) laid stress on universal enrolment and retention along with quality of education. The following initiatives of central and state governments mark their commitment to provide quality in education.

The fast changing social order made it inevitable to introduce scientific and innovative perspectives in the field of education. This created a momentum that led to the curriculum reform in 1996-97. The experiences that were gathered during the introduction of DPEP in selected districts of Kerala during 1994 -95 from classes I to IV were helpful in this reform. The evaluation process and the system of grading suggested by the new curriculum were implemented up to class X in 2004 - 05. Whenever a curriculum reform or revision is introduced it would be viewed with "vision of education as a social process". The methods proposed in the curriculum suggested on "activity-based process-oriented learning". Enquiry-based learning and liberal democratic learner-friendly approach are also considered for the overall development of the learner.



study indicate that the subjects with Medial Epicondylitis who were given Critz release technique along with conventional treatment had a statistically significant improvement in their performance.

FINDINGS OF THE STUDY

- Conventional physiotherapy decrease pain in patients with Medial Epicondylitis
- Critz Release Technique together with conventional physiotherapy is more effective in decreasing pain in patients with Medial Epicondylitis.
- The post pain scores in Critz Release Technique with conventional physiotherapy were higher than that of conventional physiotherapy only.

IMPLICATION OF THE STUDY

The treatment expenses are very high nowadays. It is necessary to find a treatment that is both cost effective and financially viable. Critz release technique of the forearm flexors may provide a solution to this dilemma. The treatment methods are relatively inexpensive and allow the patient to continue with work while on the treatment programme. It is hypothesised that by effectively treating with the Critz release technique the forearm flexors muscles tendon may be lessened and a resolution of symptoms may be seen. This study will help to determine the potential value of Critz release technique on Medial Epicondylitis and establish its level of effectiveness when used as an adjunct to conventional physical management.

REFERENCES

- Cyriax, J.H. and Cyraix, P.J. (1993). Cyriax's illustrated manual of orthopaedic medicine. 2nd edition. Pp 58-59. Oxford. England. Butterworth-Heinemann Ltd
- Delee, J.C. and Drez, D.J. (1994). Orthopaedic Sports Medicine: Principles and Practice (1st edition.)860-868. USA: W.B. Saunders Company.
- Ernst, E. (1992). Conservative therapy for Golfers Elbow. British Journal of Clinical Practice, 46(1): 55-7.
- Haker, E., Lundeberg, T. (1991). Pulsed ultrasound treatment in Medial Epicondylalgia. Scandinavian Journal of Rehabilitation Medicine. 23: 115-118.
- Haswell, G.D. (2002). The efficacy of dry needling in patients suffering from Medial Epicondylitis. Masters Degree in Technology. Chiropractic Dissertation, Technikon Natal, Durban.
- Hertling, D. and Kessler, R.M. (1996). Management of Common Musculoskeletal Disorders: Physical Therapy Principles and Methods (3rd edition). U.S.A: Lippincott-Raven Publishers.



Table 3. Comparison of Difference of Critz Release Technique together with Conventional Management Technique in the Treatment of Medial Epicondylitis

Tests	N	Median	Range	Z value	Significance
Experimental post	15	0	1	-2.970	.003
Control post	15	2	3		

Table 3 shows the median, range and Z-values of conventional management in the treatment of Medial Epicondylitis of pre-test and post test. The obtained z- value-2.970 is and it is statistically significant at 0.01 levels. From the table it can derive that, there is statistically significant difference between the mean scores of pre and post tests at 0.01 levels. Therefore it can be concluded that, conventional management was effective in the treatment of Medial Epicondylitis to relieve pain. So the null hypothesis was rejected.

RESULTS AND DISCUSSION

Critz Release Technique along with conventional therapy is significant at 5% level in reducing pain among the subjects with Medial Epicondylitis. The result showed that primarily on pain and treating the biomechanical cause of pain. Critz Release Technique produced significant reduction in pain as measured by VAS (Visual Analogue Scale). The result of present study showed that received Critz Release Technique produced significant reduction in pain as shown by experimental group, when compared with that of the control group.

The tissue healing is thought to be enhanced by use of therapeutic modalities that promote increased circulation to the injured area. The ultrasound is recommended to assist this process. It can alter the membrane permeability various iron like calcium, which have profound effect on cell activity by increasing protein synthesis and secretion of wound factors by cells involving in the healing process. There is a significant increase in tensile strength reduction in inflammation and energy absorbing capacity of tendon with therapeutic ultrasound. The mechanical effect of ultrasound helps to remove traumatic exudation and reduces the damage of adhesion formation. The protein synthesis occurs during ultrasound which stimulates the repair of damaged tissue. Thus effect of ultrasound causes the healing of the tendon which indirect by reduction in the pain.

Stress relaxation occurs if tissue is stretched to a fixed length tolerable to the subjects. The tissue will relax and less force will be necessary for the tissue to regain to remain at the same length. If force is kept constant, the tissue will elongate due to the process known as creep. When viscoelastic tissue is stretched, the above properties allow plastic or permanent deformation. The gentle, controlled stresses are important for the appropriate alignment of connective tissue as it heals. This concept is particularly important if the treatment involves the use of manipulative maneuvers such as received Critz release technique. Cyriax believed this helped to prevent random blinding of newly formed collagen fibers. Muscle conditioning improving fitness should be a key element in the rehabilitation effort. The treatment of patients with the patient's pain and inflammatory response, while initially important, does not complete therapeutic intervention. The subject's functional ability should be assessed as thoroughly as possible. The usual method of instituting strengthening exercises is by means of an intensity graded protocol according to the patient's tolerance. These exercise programs should be started as early in the treatment to assist with appropriate tissue remodeling. It is probably appropriate that early strength training should focus on low load, high repetition program to avoid symptom aggravation.

Usual mobilization and manipulation techniques are not enough in dealing with the Medial Epicondylitis. Critz release technique gives much importance to soft tissue evaluation treatment and for the smooth functioning of elbow joint. The pre test evaluation of the control and experimental group shows that there is no significant difference between the groups before the treatment. When pre test and post test analysis of pain was done within the groups, both control and experimental group shows significant decrease in pain in Medial Epicondylitis. On analysis of post test result of control and experimental group, it is evident that the experimental group had statistically significant reduction in pain in Medial Epicondylitis. The results of present



HYPOTHESES OF THE STUDY

1. There will not be any significant effect of conventional management in the treatment of Medial Epicondylitis.
2. There will not be any significant effect of Critz Release Technique together with the conventional management in the treatment of Medial Epicondylitis.
3. There will not be any significant difference between Critz Release Technique and conventional technique in the treatment of Medial Epicondylitis.

METHODOLOGY

The study was conducted to find out the efficacy of Critz Release Technique in the management of Medial Epicondylitis of the elbow joint in reducing pain. The researcher used an experimental design. The subjects included were the persons diagnosed with stage two Medial Epicondylitis. A total of 30 subjects randomly assigned in to control group and experimental group of 15 each. Pre test evaluation was done on the first day prior to the starting of treatment. The tool selected for the study was Visual Analogue Scale (VAS) for measuring pain. Control group received conventional physiotherapy including ultrasound, stretching and home exercise programme. The experimental groups were treated with Critz Release Technique in addition to conventional physiotherapy. Duration of the treatment was five days in a week for one week continuously.

The results obtained were statistically analyzed using Wilcoxon Signed -Rank test and Mann-Whitney U test. The result showed that there is significant difference of pain relief between the experimental group and Control group; where the treatment for experimental group was Critz Release Technique and conventional physiotherapy and for control group the treatment was only conventional therapy methods.

ANALYSIS AND INTERPRETATION OF THE DATA

Table 1. Effectiveness of Conventional Management in the Treatment of Medial Epicondylitis

Tests	N	Median	Range	Z value	Significance
Pre- tests	15	10	1	-3.457	.001
Post – tests	15	7	3		

Table 1 shows the median, range and Z-values of conventional management in the treatment of Medial Epicondylitis of pre-test and post test. The obtained z- value is -3.457 and it is statistically significant at 0.01 levels. From the table it can derive that, there is statistically significant difference between the mean scores of pre and post tests at 0.01 levels. Therefore it can be concluded that, conventional management was effective in the treatment of Medial Epicondylitis to relieve pain. So the null hypothesis was rejected.

Table 2. Effectiveness of Critz Release Technique together with Conventional Management Technique in the Treatment of Medial Epicondylitis

Tests	N	Median	Range	Z value	Significance
Pre- tests	15	10	1	-3.493	.000
Post – tests	15	0	1		

Table 2 shows the median, range and Z-values of conventional management in the treatment of Medial Epicondylitis of pre-test and post test. The obtained z- value-3.493 is and it is statistically significant at 0.01 levels. From the table it can derive that, there is statistically significant difference between the mean scores of pre and post tests at 0.01 levels. Therefore it can be concluded that, conventional management was effective in the treatment of Medial Epicondylitis to relieve pain. So the null hypothesis was rejected.