Research Article

Effectiveness of Structured Teaching Programme on Knowledge of Mothers Regarding Management of Selected Behavioral Problems of Children (1-10 Years) at the Selected Wards of SKIMS, Soura, Srinagar

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I N F O

A B S T R A C T

Background: The term behaviour refers to the way a child responds to a certain situation or experience. Behavioral disorders are developed from the home, school, and by social group environment by which child passes the most time .Mothers have a vital role in moulding the behaviour of the children. Homes are one of the first places where kid's behaviour is shaped.The positive reinforcement will eliminate the behavioral problems .The present study aimed to assess the level of knowledge of mothers regarding management of selected behavioral problems of children (1-10 years) .

Objectives: To assess the Pre-test and post test knowledge scores, to evaluate the effectiveness of structured teaching programme on knowledge of mothers and to find the association of Pre-test knowledge score of mothers of children (1-10 years) regarding management of selected behavioral problems with their selected demographic variables.

Methodology: Pre-experimental one-group Pre-test post-test design was used to conduct the study at SKIMS Soura Srinagar. 50 mothers were selected by convenience sampling technique. Self-structured interview schedule was used to collect the data.

Results: On Pre-test, out of 50 study subjects,majority (92%) had inadequate knowledge, (8%) had moderate knowledge and none had adequate knowledge. On post test, majority (94%) had adequate knowledge, (6%) had moderate and none had inadequate knowledge. there was significant association of pre-test knowledge score of study subject with age of mothers and non significant association with others demographic variables i.e.,type of family, place of residence, Educational status of the mother, educational status of father, occupation of mother, occupation of father, total family monthly income, number of children at $p < 0.05$ significance.

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Conclusion: Majority of the study subjects had inadequate knowledge regarding management of selected behavioral problems.So they need to get aware by educating them.

Keywords: Knowledge; Behavioral Problems; Mother; Effectiveness; Structured Teaching Programme.

Introduction

Childhood is the period of dependency. Gradually, children learn to adjust in the environment. Sometime the children show a wide variety of behavior which creates a problem to the parents, family members and society. "Behavior problems are the significant deviation from the socially accepted normal behavior", which includes Temper tantrum , thumb sucking, bed wetting , Breath holding spell, speech disorder,tics and pica.[1]Today's society is complex and ever-changing. As children grow they must learn not only to cope with current demands, but also to prepare for the many unexpected events they will face in their tomorrows. Normal behavior of children depends on various natural and environmental circumstances, in which a child grows. The ways for his best possible conduct with in his reaches and interact among those who respond his gestures and body talks. Parents are the first to whom a child makes and develops his concerns regarding his needs and wants. Normal behavior developments required normal circumstances and equal participation of parents.[2]

Behaviour is affected by temperament, which is made up of an individual's innate and unique expectations, emotions and beliefs. Behaviour can also be influenced by a range of social and environmental factors including parenting practices, gender, and exposure to new situations, general life events and relationships with friends and siblings. If the child receives appropriate responses then an emotional connection is established this will ensure that the child will learn and development will be enriched. This connection requires the parents or caregivers to help the child balance emotions, feel valued and gain sense of belonging. Parents or caregivers need to be able to read the emotional responses that the child are expressing and to model coping skills for the child.[3]

Behavioral development in children is strongly influenced by the nature of the caregiver relationship. Parents, particularly mothers, who are emotionally available, sensitive, perceptive and effective at meeting the needs of their child, are likely to have securely attached who are more likely to meet important behavioral milestones as they get older,the common behavioral problems are temper tantrum, pica, bed wetting, thumb sucking, school phobia, etc Thumb sucking and nail biting is another pleasurable sensation that diverts the child from his or her environment. These behaviors are generally a manifestation of deep insecurity. To some children, thumb sucking is a kind of security blanket. They feel secure and happy while sucking their thumb.[4]

Children deserve to learn important lessons from mothers and to acquire important habits with the help. They need help in learning what matters to us. We want our children to grow up to be responsible adults. We want them to learn to feel, think, and act with respect for themselves and for other people. We want them to pursue their own well- being, while also being considerate of the needs and feelings of others. Today, there is wide recognition that many of our children are not learning to act responsibly.[5]

Manivanna, Srinivasa (2017):A cross sectional descriptive study was conducted at Petteswaram rural community in Thanjavur district (Karnataka , India) , to assess the knowledge regarding behavioral problems of school children among 100 mothers were selected by using purposive sampling technique. All participants were given a questionnaire on behavioral problems administered 10 minutes to complete. The findings of the study revealed that knowledge of mother showed that 61% of the mothers had inadequate knowledge 37% had moderately, 2% of mother had adequate knowledge regarding behavioral problems. In conclusion of the study ,that mothers had inadequate knowledge regarding behavioral problems and there was need of education regarding behavioral problems among mothers of children .[6]

Based on the above findings, the investigator found it is desirable to assess the knowledge of mothers of children (1-10 years) regarding management of selected behavioral problems. Educating the mothers regarding behavioral problems helps to prevent the incidence of behavioral disorders among their children.

Methodology

Research methodology indicates the general pattern of organizing the procedure for gathering valid and reliable data for investigation. In this study, a quantitative research approach was adopted. Knowledge assessed by self-structured interview schedule regarding management of selected behavioral problems.

Research Design

In this study, a pre-experimental one group pretest post-test design was used to assess the effectiveness of structured teaching programme on knowledge of mothers regarding management of selected behavioral problems of children (1-10 years). This study was conducted at SKIMS Soura Srinagar Kashmir. The study subjects were 50 mothers, selected through convenience sampling technique.

Development of the Tool

Developed structured teaching Programme (intervention and health talk) containing literature related to

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definition,causes,clinical manifestation,types ,diagnosis, and management of selected behavioral problems. After content validity and modification of the tool, a self -structured interview schedule about the management of selected behavioral problems was developed. Test- retest, Karl Pearson's coefficient correlation used to calculate reliability. Reliability was found r = 0.92, which revealed that the tool was reliable for the study. A self structured interview schedule consisted of 63 items in dichotomous format with Yes or No options. Scoring criteria, 1 (one) mark for correct answer and 0 (zero) for the wrong answer. Categorization of score done, rating (0-32) inadequate, (33-43) moderate, and (44 -63) considered adequate.

Results

Findings Related to Demographic Variables of Study Subjects

The tabulated data presented in Table 1, revealed that maximum of study subjects (50%) belonged to age group of 30 -35 years, (30%) belonged to the age group of 25- 30 years,(14%) belongs to the age group of 30 - 35 years and (6%) belonged to the age group of >35 years. majority of study subjects (64 %) had nuclear family , and (36%) had joint family .showed that majority of study subjects (72%) were belonged to rural area , and(28 %) were belonged to urban area. majority of study subjects(80%) had educational status as Illiterate ,(14%) primary /middle, (4%) were higher secondary,(2%) were graduate and above .majority of study subjects (42%) had educational status as Illiterate ,(44%) primary /middle, (8%) were higher secondary,(6%) were graduate and above . majority of study subjects (96 %) were not-working, whereas(8%) were working. majority of study subjects (88 %) were labour, (10%) were doing private job and (2%) were doing government job . majority of study subjects (62%) had family income Rs 20,000,(28%) had Rs 20,000-30,000, (8%) had Rs.30,000 - 40,000 and (2 %) above Rs 40,000 family income. that majority of study subjects (52%) had one children,(42%) had two children, (6%) had three children, regarding management of selected behavioral problems respectively.A similar study conducted by Gupta 2017.who assessed the Knowledge of Mother Regarding Behavioral Problem among Under 5 Year Children in Selected Areas of Bharuch (Gujarat).Finding revealed that 4(13.33%) of mothers where in the age group of 20 − 24 years, 8(26.66%) in the age group of 25 − 29 years, 15(50%) in the age group of 30 − 34 years, and 3(10%) in the age group of 35 − 39 years. With respect to educational status0(0%) respondents were illiterate, 6(20%) in the primary & secondary school, 10(33.33%) in higher secondary school and 14(46.66%) were graduates. Regarding occupational status of mother 29(96.66%) were housewife mothers and 1(3.33%) was working mother.

Regarding family type there is 13(43.33%) in nuclear families, and 17(56.66%) in the joint families.A mother having one child frequency was 12(40%), that of mother with two child frequency was 17(56.66%) and mother with three child frequency was 1(3.33%), while 0(0%) mothers were more than three children.[7]

Findings Related to the Assessment of Knowledge Scores of Study Subjects Regarding Management of Behavioural Disorders

The data presented in table 2, revealed that on the pretest knowledge score, majority of subjects (92 %) had inadequate knowledge, (8 %) had moderate knowledge , none had adequate knowledge.A similar study was conducted by Manivanna (2017), who assessed the Knowledge of mother regarding behavior problem revealed that 25(83.33%) mother's had moderate knowledge , 5(16.66%) of mother had inadequate knowledge and no one had adequate knowledge.

The data presented in the Table 3, unveiled that maximum (94%) had adequate knowledge,(6%) had moderate knowledge and none of the study subjects had inadequate knowledge regarding management of selected behavioral problems.A similar study was conducted by Humaira (2017) at Anganwadi center Behama Ganderbal, who assessed the knowledge regarding behavioral problems among mothers of pre-schooler, maximum number of the study subjects i.e:,28(56%) had moderate knowledge ,22(44%) had adequate knowledge and none of the subjects had inadequate knowledge in the post-test regarding behavioral problems.

The data presented in the Table 4 and figure 1, depicted that the mean post test knowledge score of study subjects (48.68±3.407) was significantly higher than that of the mean pre-test knowledge score (17.58±4.19) at p (<0.05) level of significance.This indicated that the educational programme was significantly effective in improving the knowledge of study subjects regarding management of selected behavioural problems.A similar study conducted by jaya at arogya hospital Madhya Pradesh (India) 2019 to assess the effectiveness of structural teaching programme on knowledge of mothers of children (1-10 years) regarding management of selected behavioral problems. The mean post test knowledge scores (58.25 ± 1.548) of the study subjects was significantly higher than that of the mean pre-test knowledge scores (40.5 ± 1.685)at 0.05 level of significance.This indicated that structured teaching programme was effective in enhancing the knowledge regarding management of selected behavioral problems of mothers of children (1-10 years).

Association of Pre-test knowledge score of study subjects with their selected demographic variables.

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The finding presented in the table 5 revealed that that there was significant association of pre-test knowledge score of study subject with age of mothers (p=0.002). But there was non significant association between pre-test knowledge score with others demographic variables like, type of family (0.543), place of residence(0.193), Educational status of the mother (0.189),educational status of father (0.871), occupation of mother (0.539), occupation of father (0.563),total family monthly income(0.904),number of children (0.368) at p<0.05 significance.A similar study conducted by Humaira (2017) at Anganwadi center Fathepora Ganderbal (kashmir), who assessed the knowledge regarding behavioral problems among mothers of pre-schooler, maximum number of the study subjects study revealed there was statistically significant association of pre-test knowledge scores with the occupational status (p =0.008) of the study subjects while as non significant association was found between the pre-test knowledge scores of the study subjects with their demographic variables like age (p=0.704),educational status (p=0.583),monthly income (p=0.220),type of family (p=530), and number of children (p=0.156), at 0.05 level of significance.

Table 1.Frequency and percentage distribution of study subjects according to demographic variables.

[N=50]

Demographic Variables	Frequency (f)	Percentage (%)
Age		
20-25 years	7	14%
25-30 years	15	30%
30-35 years	25	50%
Above 35 years	3	6%
Type of family		
Nuclear family	32	64%
Joint family	18	36%
Place of residence		
Rural area	36	72%
Urban area	14	28%
Educational status of mother		
illiterate	40	80%
Primary/middle	7	14%
Higher secondary	2	4%
Graduate and above	1	2%
Educational status of father		
illiterate	21	42%
Primary /middle	22	44%
Higher secondary	4	8%
Graduate and above	3	6%
Occupation of mother		
Working	4	8%
Non - working	46	92%
Occupation of father		
Government	1	2%
Private	5	10%
Labour	44	88%
Total monthly income		
Less than Rs.20,000	31	62%
Rs.20,000-30,000	14	2%

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Rs.30,000 - 40,000	4	10%
Above 40,000	1	8%
Numbers of children		
One	26	52%
Two	21	42%
Three	3	6%
Four	0	0%

Table 2.Frequency and Percentage Distribution of Study Subjects According to their Pre-test Knowledge Score

[N=50]

Knowledge level	Knowledge score	Pre-test Knowledge scores obtained	
		Frequency(f)	Percentage (%)
Inadequate	0-32	46	92%
Moderate	33 – 47	4	8%
Adequate	48– 63	0	0%

Table 3.Frequency and Percentage Distribution of Study Subjects According to their Post-test Knowledge Score

[N=50]

Knowledge level	Knowledge score	Post -test Knowledge scores obtained	
		Frequency(f)	Percentage (%)
Inadequate knowledge	0-32	0	0%
Moderate Knowledge	33– 47	3	6%
Adequate Knowledge	48– 63	47	94%

Table 4.Comparison between Pre-test and Post-test Knowledge Score and Significance of Difference between the Mean Pre-test and Post test Knowledge Score.

[N=50]

Knowledge score	Mean / SD	Mean %	Mean Difference	Paired 't' Test	P value	Result
PRE TEST	17.58+4.19	27.90	31.100	61.112 *Sig	<0.001**	Significant
POST TEST	48.68+3.407	77.30				

* Significant at 0.05 level

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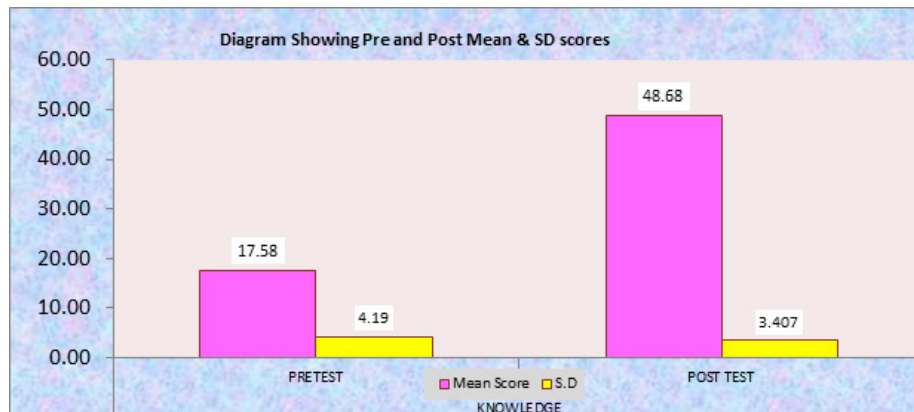*Ind. J. Holist. Nurs. 2023; 14(3)*

Figure 1.Bar diagram showed mean Pre-test and Post test Scores

Table 5.Association of Pre-test Knowledge Score of Study Subjects regarding management of selected behavioural problems with their Selected Demographic Variables.

[N= 50]

Variables	Categories	ADEQUATE KNOWLEDGE	MODERATE KNOWLEDGE	INADEQUATE KNOWLEDGE	Chi Test	df	p Value	Result
Age of Mothers	20 -25 Years	0	0	7	15.217	3	0.002	Significant *
	25 - 30 Years	0	1	14				
	30 - 35 Years	0	1	24				
	Above 35 Years	0	2	1				
Type of Family	Nuclear Family	0	2	30	0.370	1	0.543	Non Significant
	Joint Family	0	2	16				
Place of Residence	Rural area	0	4	32	1.691	1	0.193	Non Significant
	Urban area	0	0	14				
Educational Status of Mother	Illiterate	0	2	38	4.775	3	0.189	Non Significant
	Primary \ Middle	0	2	5				
	Higher secondary	0	0	2				
	Graduate and Above	0	0	1				
Educational Status of Father	Illiterate	0	2	19	0.711	3	0.871	Non Significant
	Primary \Middle	0	2	20				
	Higher secondary	0	0	4				
	Graduate and Above	0	0	3				
Occupational Status of Mother	Working	0	0	4	0.378	1	0.539	Non Significant
	Non- working	0	4	42				

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Occupational Status of Father	Government	0	0	1	1.149	2	20.563	Non Significant
	Private	0	1	4				
	labour	0	3	41				
Total Family Monthly Income	Less than Rs.20,000	0	3	28	0.567	3	0.904	Non Significant
	Rs.20,000 - Rs 30,000	0	1	13				
	Rs.30,000 - 40,000	0	0	4				
	Above Rs. 40,000	0	0	1				
Number of Children	One	0	1	25	1.998	2	0.368	Non Significant
	Two	0	3	18				
	Three	0	0	3				
	Four	0	0	0				

Conclusion

The following conclusions were drawn on the basis of findings of the study.

➤ Pre-test findings showed that the study subjects had inadequate knowledge regarding management of selected behavioral problems. So, there is need to make them aware about the management of selected behavioral problems by educating them.

➤ There was an improvement in the knowledge of study subjects after implementation of structured teaching programme regarding management of behavioral problems which was evident from post test, thus structured teaching programme was effective imparting education.

➤ There was significant association of knowledge level of study subjects with age, (p =0.002) which indicates that probably age of mothers have profound effect on the knowledge regarding management of selected behavioral problems.

➤ There was non-significant association of the knowledge level with the demographic variables i.e,type of family (0.543), place of residence(0.193),Educational status of the mother (0.189), educational status of father (0.871), occupation of mother (0.539), occupation of father (0.563),total family monthly income(0.904),number of children (0.368), which indicated that the variables probably had no effect on their knowledge.

Recommendations

On the basis of the findings of the study , the following recommendations were made:

➤ lThe study can be replicated on large samples to validate the findings and for generalization.

➤ lA similar study can be conducted to identification and management of behavioral problems in school children.

➤ Different ways of teaching modalities can be used.

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