A Descriptive Study to Assess the Measures Adopted by Mothers to Reduce Behavioral Problems in Children Aged 6–12 Years in Selected Urban Areas of District Shimla, Himachal Pradesh

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ABSTRACT

Aim: This study aims to assess the measures adopted by mothers to reduce behavioral problems among children in selected urban areas. Methodology: Quantitative research approach and descriptive research design were applied. The research was conducted in the urban areas of Sanjauli, Shimla District, Himachal Pradesh. Sample size was 200 mothers and purposive sampling technique was used. Results: The results of the present study reveal that majority of mothers adopted the measures to reduce behavioral problems in children for temper tantrum was 11.5% avoided situation likely to stimulate the child, for nail biting 11.5% kept hands busy and cut the nails of child, for thumb-sucking 10.5% those praised for behavior change and kept hands busy, for enuresis (bed wetting) 12.0% made the child void before bedtime and reward for dry nights, for stammering 3.0% avoided stress and practiced speech training, for school phobia 8.5% of mothers adopted measures like praise for regular attendance at school, for anorexia nervosa 2.0% of mothers supervised meals and snacks and monitored the weight, for bulimia nervosa 1.5% avoided over feeding the child and monitor the weight, for breath-holding spells 1.0% used distractive methods, stay calm, provide safe environment, and provide proper ventilation, for aggressiveness 27.0% tried anger management, for pica 13.0% gave positive reinforcement and kept the child away from mud, clay, chalks, etc., for somnambulism (waking in sleep) 6.5% kept close supervision, avoided bunk bed, and stayed most of the time with the child, for somniloquy (talking in sleep) 9.5% made sleep schedule and avoided emotional stress, for bedtime fears and nightmares 9.0% avoided scary television shows, and for lying 26.5% of mothers shared their values, whereas for shyness 19.0% of mothers stay with child in social situations. Conclusions: The study results show that measures adopted followed by mothers to deal with behavioral problems of their children that 197 (98.5%) mothers, the measures adopted level followed by mothers were “poor” and 3 (1.5%) mothers were followed average measures.

Keywords: Behavioral problems, Children, Measures adopted, Mothers

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Introduction

Infancy and childhood are of paramount importance in determining and patterning the future behavior and character of the children. Childhood is the period of dependency. Gradually, the children learn to adjust in the environment. However, when there is any complexity around them, they cannot adjust with those circumstances. Then, they become unable to behave in the socially acceptable way and behavioral problems develop with them. Common behavioral problems of childhood are temper tantrum, breath-holding spell, thumb-sucking, nail
boring, enuresis, pica, speech problems, sleep disorders, school phobia, shyness, etc.[1]

As per the WHO report (2000), the prevalence of mental disorders among children has been reported to be 14–20% in various studies.[2] Mental and behavioral disorders account for about 12% of the global burden of diseases. In India, the burden of mental and behavioral disorders ranged from 9.5 to 10.2/1000 population.[3] A comparative study was conducted by Kumari et al. to assess the knowledge regarding behavioral problems under-five children among employed and unemployed mothers in Nellore, Andhra Pradesh. The sample size consisted of 60 mothers in among 60, 30 are employed mothers and 30 are unemployed mothers. In India, the past 15 years, the prevalence rate of behavior problems among children varied from 5 to 51%.[4]

As an investigator during my clinical experience, I have observed and given care to many children with some behavioral problems and I found that there is lack of parent-child relationship. Hence, I felt a need for study to be conducted from a group of mothers to find out their parent-child relationship and measures adopted by them to reduce behavioral problems for their children.

**Statement of the problem**

A descriptive study to assess the measures adopted by mothers to reduce behavioral problems among children aged 6–12 years in selected urban areas of district Shimla, Himachal Pradesh.

**Objectives**

The objectives of this study were as follows:

1. To assess the measures adopted by mothers to reduce behavioral problems among children in selected urban areas.
2. To associate measures adopted by mothers with selected demographic variables.

**Methodology**

- Research approach: In this study, quantitative research approach has been applied.
- Research design: In this study, descriptive research design has been applied.
- Variables: Study variables are measures adopted by mothers.
- Research setting: The research was conducted in the selected urban areas of Sanjauli (Chalonthi) for pilot study and main study area was the upper cemetery and lower cemetery of Shimla District, Himachal Pradesh.
- Population: Mothers residing in selected urban areas of Shimla District.
- Sample: Mothers having children between 6 and 12 years residing in selected urban areas of Shimla District.
- Sampling technique: Purposive sampling technique was used to select the sample for the study.
- having children between 6 and 12 years residing in selected urban areas of Shimla District who fulfill the inclusion criteria.
- Development and description of tool: The tool was constructed after extensive review of literature and discussion with the experts and with the investigator’s personal and professional experience. The tool consists of two sections: Age of mother, type of family, family income per month, single parent, education of mother, education of father, working status of mother, working status of father, religion, number of children, age of the child, gender of the child, and education of the child.

1. Section A: It consists of demographic variables which include
2. Section B: It consists of checklist regarding behavioral problems.

**Scoring key**

One score was given for yes response and 0 score for no response.

- Reliability: Reliability of tool was checked by split-half method and formula used to calculate was Karl Pearson’s correlation coefficient. The tool was reliable as the score was $r = 0.70$ which indicates an acceptable level of reliability of a tool.
- Procedure of the data collection: A formal permission was obtained from the Principal – Akal College of Nursing, Councilor of selected urban areas of Chalonthi and Sanjauli District, Shimla, Himachal Pradesh and a written consent was also obtained from the study participant. Then, the investigator explained the purpose of the study to the study participants. It took 20–30 min for each mother. The period of data collection for main research study was the month of November 1–November 30, 2015.

**Data analysis and interpretation**

The data have been analyzed using both the descriptive and inferential statistics. In descriptive statistics, (1) frequency and percentage distribution were used to analyze the demographic profile subject and (2) frequency and percentage distribution of measures adopted by the mothers to reduce behavioral problems among children. In inferential statistics, (1) ANOVA test was used for association between measures adopted by mothers with selected social variables.

**Section A: Frequency and percentage distribution of demographic variable**

Table 1 depicts that the mothers came from a family, diverse age distribution, i.e., 25.5% with <30 years, 26.0% with ages between 31 and 35 years, 26.5% with ages ranging
between 36 and 40 years, and 22.0% with age more than 41 years. The type of the family was also in the range that 51.5%. Mothers came from nuclear families, whereas 48.5% came from joint families. An overwhelming majority of respondents belonged to monthly income group in excess of Rs.15,000. As to education, 51% of the mothers and 55.5% of the fathers were graduate – postgraduates. The working status of mothers was in the category of unemployed for 51.0% and the remaining 49.0% were employed. 66.0% of the fathers were employed. Of all the respondents, 89.5% preferred Hindu religion and 84.5% of the families were “one child” families. The sample had a total of 200 children, of which 43.5% were 6–8 years of age, 27.0% were of 8–10 years of age, and 29.5% were of 10–12 years of age. For gender, 45.5% were male, whereas 54.5% were female. For education of the child, 58.5% came under 1–3 and 41.5% came under 4–6 standards.

Section B: Assessment of measures adopted by mothers to reduce behavioral problems among children

Table 2 depicts that majority of mothers adopted measures to reduce behavioral problems for their children for temper tantrum, for 23 mothers (11.5%) avoided situation likely to stimulate the child, for nail biting 23 (11.5%) kept hands busy and cut the nails of child, for thumb-sucking 21 (10.5%) those praised for behavior change and kept hands busy, for enuresis (bed wetting) 24 (12.0%) made the child void before bedtime and reward for dry nights, for stammering 6 (3.0%) avoided stress and practiced speech training, for school phobia 17 (8.5%) mothers adopted measures like praise for regular attendance at school, for anorexia nervosa 4 (2.0%) mothers supervised meals and snacks and monitored the weight, for bulimia nervosa 3 (1.5%) avoided over feeding the child and monitor the weight, for breath-holding spells 2 (1.0%) used distractive methods, stay calm, provide safe environment, and provide proper ventilation, for aggressiveness 54 (27.0%) tried anger management, for pica 26 (13.0%) gave positive reinforcement and kept the child away from mud, clay, chalks, etc., for somnambulism (waking in sleep) 13 (6.5%) kept close supervision, avoided bunk bed, and stayed most of the time with the child, for somniloquy (talking in sleep) 19 (9.5%) made sleep schedule and avoided emotional stress, for bedtime fears and nightmares 18 (9.0%) avoided scary television shows, and for lying 53 (26.5%) mothers shared their values, whereas for shyness 38 (19.0%) mothers stay with child in social situations.

The level of measures adopted followed by mothers to deal with behavioral problems of their children. It shows that in 98.5% of the sample subjects, the measures adopted level followed by mothers were “poor.”

Table 3 depicts the level of measures adopted followed by mothers to deal with behavioral problems of their children. It shows that in 98.5% of the sample subjects, the measures adopted level followed by mothers were “poor.”

Section C: Association between measures adopted by mothers with selected demographic variables

Table 4 indicates significant association between measures adopted by mothers for temper tantrum and selected demographic variables.

Table 1: Frequency and percentage distribution of demographic variable n=200

| Variables                          | Category                      | F (%) |
|-----------------------------------|-------------------------------|-------|
| Age of mother (years)             | <30                           | 51 (25.5) |
|                                   | 31–35                         | 52 (26.0) |
|                                   | 36–40                         | 53 (26.5) |
|                                   | >41                           | 44 (22.0) |
| Mean±SD                           | 34.8650±4.9618               |       |
| Type of family                    | Nuclear family                | 103 (51.5) |
|                                   | Joint family                  | 97 (48.5) |
| Family income per month           | <Rs. 5000                     | 34 (17.0) |
|                                   | Rs. 5001–10,000               | 13 (6.5) |
|                                   | Rs. 10,001–15,000             | 24 (12.0) |
|                                   | >Rs. 15,000                   | 129 (64.5) |
| Family history of behavioral problems | No                            | 200 (100.0) |
|                                   | Yes                           | 0 (0)   |
| Single parent                     | No                            | 200 (100.0) |
|                                   | Yes                           | 0 (0)   |
| Education of mother               | Illiterate                    | 12 (6.0) |
|                                   | Primary–middle                | 23 (11.5) |
|                                   | Secondary–higher secondary    | 63 (31.5) |
|                                   | Graduate–postgraduate         | 102 (51.0) |
| Education of father               | Illiterate                    | 5 (2.5)  |
|                                   | Primary – middle              | 21 (10.5) |
|                                   | Secondary–higher secondary    | 63 (31.5) |
|                                   | Graduate–postgraduate         | 111 (55.5) |
| Working status of mother          | Employed                      | 98 (49.0) |
|                                   | Unemployed                    | 102 (51.0) |
| Working status of father          | Employed                      | 132 (66.0) |
|                                   | Unemployed                    | 68 (34.0) |
| Religion                          | Hindu                         | 179 (89.5) |
|                                   | Sikh                          | 12 (6.0)  |
|                                   | Buddhist                      | 9 (4.5)   |
|                                   | Muslim                        | 0 (0)     |
|                                   | Others                        | 0 (0)     |
| Number of children                | One                           | 169 (84.5) |
|                                   | Two                           | 31 (15.5)  |
|                                   | > Two                         | 0 (0)     |
| Age of the child in years         | 6–8                           | 87 (43.5)  |
|                                   | 8–10                          | 54 (27.0)  |
|                                   | 10–12                         | 59 (29.5)  |
| Mean±SD                           | 8.6650±1.95239               |       |
| Gender of the child               | Male                          | 91 (45.5)  |
|                                   | Female                        | 109 (54.5) |
|                                   | Others                        | 0 (0)     |
| Education of the child            | 1–3                           | 117 (58.5) |
|                                   | 4–6                           | 83 (41.5)  |

SD: Standard deviation
Table 2: Frequency and percentage distribution of measures adopted by mothers to reduce behavioral problems among children $n=200$

| Behavioral problems                  | Measures adopted by mothers                                                                 | F (%) | f (%) |
|--------------------------------------|---------------------------------------------------------------------------------------------|-------|-------|
| Temper tantrum                       | Encourage your child to speak out                                                          | 22 (11.0) | 178 (89.0) |
|                                      | Praise for good behavior                                                                  | 21 (10.5) | 179 (89.5) |
|                                      | Avoid situation likely to stimulate the child                                              | 23 (11.5) | 177 (88.5) |
|                                      | Distract the child when demanding                                                          | 22 (11.0) | 178 (89.0) |
| Nail biting                          | Keep hands busy                                                                          | 23 (11.5) | 177 (88.5) |
|                                      | Avoid punishment                                                                          | 22 (11.0) | 178 (89.0) |
|                                      | Cut the nails                                                                             | 23 (11.5) | 177 (88.5) |
|                                      | Praise for change the habit                                                                | 20 (10.0) | 180 (90.0) |
| Thumb-sucking                        | Praise for behavior change                                                                 | 21 (10.5) | 179 (89.5) |
|                                      | Avoid scolding                                                                            | 20 (10.0) | 180 (90.0) |
|                                      | Keep hands busy                                                                          | 21 (10.5) | 179 (89.5) |
|                                      | Use of any appliances during sleep                                                        | 11 (5.5)  | 189 (94.5) |
| Enuresis/bed wetting                 | Restrict the fluid after dinner                                                           | 23 (11.5) | 177 (88.5) |
|                                      | Void before bedtime                                                                      | 24 (12.0) | 176 (88.0) |
|                                      | Reward for dry nights                                                                     | 24 (12.0) | 176 (88.0) |
|                                      | Toilet practice                                                                           | 22 (11.0) | 178 (89.0) |
| Stammering                           | Avoid stress                                                                             | 6 (3.0)   | 194 (97.0) |
|                                      | Avoid trigger                                                                            | 5 (2.5)   | 195 (97.5) |
|                                      | Practice speech                                                                          | 6 (3.0)   | 194 (97.0) |
|                                      | Use tongue twisters                                                                       | 3 (1.5)   | 197 (98.5) |
| School phobia                        | Praise for regular attendance                                                             | 17 (8.5)  | 183 (91.5) |
|                                      | Talk to the teacher                                                                       | 15 (7.5)  | 185 (92.5) |
|                                      | Talk to friends/classmates                                                                | 11 (5.5)  | 189 (94.5) |
|                                      | Guide the child                                                                          | 16 (8.0)  | 184 (92.0) |
| Anorexia nervosa                     | Supervise meals and snacks                                                                | 4 (2.0)   | 196 (98.0) |
|                                      | Monitor the weight                                                                       | 4 (2.0)   | 196 (98.0) |
|                                      | Use of natural instructions                                                               | 3 (1.5)   | 197 (98.5) |
|                                      | Provide emotional support                                                                 | 3 (1.5)   | 197 (98.5) |
| Bulimia Nervosa                      | Avoid overfeeding                                                                        | 3 (1.5)   | 197 (98.5) |
|                                      | Encourage for exercises                                                                   | 2 (1.0)   | 198 (99.0) |
|                                      | Monitor the weight                                                                       | 3 (1.5)   | 197 (98.5) |
|                                      | Avoid emotional stress                                                                    | 2 (1.0)   | 198 (99.0) |
| Breath-holding spells                | Use distinctive methods                                                                   | 2 (1.0)   | 198 (99.0) |
|                                      | Stay calm                                                                                | 2 (1.0)   | 198 (99.0) |
|                                      | Provide safe environment                                                                  | 2 (1.0)   | 198 (99.0) |
|                                      | Provide proper ventilation                                                                | 2 (1.0)   | 198 (99.0) |
| Aggressiveness                       | Anger management                                                                         | 54 (27.0) | 146 (73.0) |
|                                      | Eliminate underlying stress and anxieties                                                 | 52 (26.0) | 148 (74.0) |
|                                      | Avoid punishment                                                                         | 46 (23.0) | 154 (77.0) |
|                                      | Reward appropriate, non-aggressive behavior                                              | 52 (26.0) | 148 (74.0) |
| Pica                                 | Provide balance diet                                                                     | 2 (1.0)   | 172 (86.0) |
|                                      | Plan the diet                                                                            | 21 (10.5) | 179 (89.5) |
|                                      | Positive reinforcement                                                                    | 26 (13.0) | 174 (87.0) |
|                                      | Keep away from mud, clay, chalks, etc.                                                   | 26 (13.0) | 174 (87.0) |
| Somnambulism/walking in sleep        | Make close supervision                                                                    | 13 (6.5)  | 187 (93.5) |
|                                      | Avoid bunk bed                                                                           | 13 (6.5)  | 187 (93.5) |
|                                      | Use night light                                                                          | 5 (2.5)   | 195 (97.5) |
|                                      | Stay always with the child                                                                | 13 (6.5)  | 187 (93.5) |
| Somniloquy/talking in sleep          | Encourage for exercises                                                                   | 6 (3.0)   | 194 (97.0) |
|                                      | Make sleep schedule                                                                      | 19 (9.5)  | 181 (90.5) |
|                                      | Maintain a sleep diary                                                                    | 5 (2.5)   | 195 (97.5) |
|                                      | Avoid emotional stress                                                                    | 19 (9.5)  | 181 (90.5) |
| Bedtime fears and nightmares         | Listen and understand the child                                                          | 17 (8.5)  | 183 (91.5) |
|                                      | Avoid scary television shows                                                              | 18 (9.0)  | 182 (91.0) |
|                                      | Use fairy tales                                                                          | 16 (8.0)  | 184 (92.0) |

(contd...)
Table 2: (Continued)

| Behavioral problems | Measures adopted by mothers | F (%) | f (%) |
|---------------------|-----------------------------|-------|-------|
| Lying               | Share your values           | 53 (26.5) | 147 (73.5) |
|                     | Help to find the problem    | 52 (26.0) | 148 (74.0) |
|                     | Punish the child            | 44 (22.0) | 156 (78.0) |
|                     | Praise for change           | 50 (25.0) | 150 (75.0) |
| Shyness             | Encourage to do some extracurricular activities | 37 (18.5) | 163 (81.5) |
|                     | Stay with child in social situations | 38 (19.0) | 162 (81.0) |
|                     | Praise brave behavior like responding to others | 37 (18.5) | 163 (81.5) |
|                     | Avoid negative comparisons with more confident siblings and friends | 32 (16.0) | 168 (84.0) |

Table 3: Distribution of measures adopted level followed by mothers to reduce behavioral problems among children n=200

| Measures adopted by mothers | F (%) |
|-----------------------------|-------|
| Excellent measures          | 0 (0) |
| Good measures               | 0 (0) |
| Average measures            | 3 (1.5) |
| Poor measures               | 197 (98.5) |

Results

Frequency and percentage distribution of demographic variables, it was observed that age distribution, i.e., 25.5% mothers were <30 years, 26.0% mothers were age between 31 and 35 years, 26.5% mothers were age ranging between 36 and 40 years and 22.0% mothers were age >41 years. The type of the nuclear family was in the range of 51.5% and significant association with “age of the child,” for nail biting with “education of the child” is significantly associated, for enuresis (bed wetting) with “religion” and with “education of the child” is significantly associated, for aggressiveness with “type of family” is significant, for pica the significant association was with “religion,” “age of the child in years,” and with “gender of the child,” for somnambulism (walking in sleep) the association was highly significant with “family income per month” and significant association with “education of the mother,” “education of the father,” and with “working status of the father,” for lying significant association with “religion” and with “gender of the child,” and for shyness the significant association with “education of the child.”

The study results show that measures adopted followed by mothers to deal with behavioral problems of their children
Table 4: Association between measures adopted by mothers with selected demographic variables *n=200*

| Association between measures adopted by mothers for | Demographic variables | \(F\) ratio | Table value | \(P\) level |
|-----------------------------------------------------|----------------------|-------------|-------------|-------------|
| Temper tantrum                                      | Type of family       | 3.823       | 2.99        | 0.024       |
|                                                     | Age of the child in years | 8.070       | 2.99        | 0.000***    |
|                                                     | Education of the child | 3.739       | 2.99        | 0.025       |
| Nail biting                                         | Education of the child | 3.158       | 2.99        | 0.045       |
| Thumb-sucking                                       | Age of mother in years | 4.743       | 2.99        | 0.010       |
|                                                     | Religion             | 5.811       | 2.99        | 0.004       |
|                                                     | Age of the child in years | 4.287       | 2.99        | 0.015       |
|                                                     | Education of the child | 4.690       | 2.99        | 0.010       |
| Enuresis (bed wetting)                              | Religion             | 6.665       | 2.99        | 0.002       |
|                                                     | Education of the child | 3.742       | 2.99        | 0.025       |
| Aggressiveness                                      | Type of family       | 4.790       | 2.99        | 0.009       |
|                                                     | Religion             | 5.261       | 2.60        | 0.002       |
|                                                     | Age of the child in years | 2.690       | 2.60        | 0.048       |
|                                                     | Gender of the child  | 3.595       | 2.60        | 0.015       |
| Somnambulism (walking in sleep)                     | Family income per month | 8.767       | 2.99        | 0.000***    |
|                                                     | Education of the mother | 5.808       | 2.99        | 0.004       |
|                                                     | Education of the father | 6.496       | 2.99        | 0.002       |
|                                                     | Working status of the father | 4.441       | 2.99        | 0.013       |
| Lying                                               | Religion             | 3.023       | 2.99        | 0.051       |
|                                                     | Gender of the child  | 5.345       | 2.99        | 0.005       |
| Shyness                                             | Education of the child | 3.788       | 2.60        | 0.011       |

\(P < 0.05\) Significant and \(***P < 0.001\) highly significant

that is 197 (98.5%) mothers were followed “poor measures” and 3 (1.5%) mothers were followed average measures.

In the present study, ANOVA test was used to calculate the association between measures adopted by mothers with selected demographic variables. Results of the present study reveal that there was a significant association between measures adopted by mothers for temper tantrum and selected demographic variable with “type of family” where the calculated \(F\) value was 3.823 as against the table value of 2.99 at 2 and 197 df and \(P < 0.05\) level of significance, there was a highly significant association with “age of the child” where the calculated \(F\) value was 8.070 and significance association with “education of the child” where the calculated \(F\) value was 3.739 as against the table value of 2.99 at 2 and 197 df and \(P < 0.05\) level of significance, for nail biting with “education of the child” where the calculated \(F\) value was 3.158 as against the table value of 2.99 at 2 and 197 df and \(P < 0.05\) level of significance, for thumb-sucking with “age of the mother in years” where the calculated \(F\) value was 5.345 as against the “education of the child” where the calculated \(F\) value was 4.743 as against the table value of 2.99 at 2 and 197 df and \(P < 0.05\) level of significance, for enuresis (bed wetting) with “religion” where the calculated \(F\) value was 6.665 and with “education of the child” where the calculated \(F\) value was 3.742 as against the table value of 2.99 at 2 and 197 df and \(P < 0.05\) level of significance, for aggressiveness with “type of family” where the calculated \(F\) value was 4.790 as against the table value of 2.99 at 2 and 197 df and \(P < 0.05\) level of significance, for pica the significant association was with “religion” where the calculated \(F\) value was 5.261, with “age of the child in years” where the calculated \(F\) value was 2.690, and with “gender of the child” where the calculated \(F\) value was 3.595 as against the table value of 2.60 at 3 and 196 df and \(P < 0.05\) level of significance, for somnambulism (walking in sleep) the association was highly significant with “family income per month” where the calculated \(F\) value was 3.767, association was significant with “education of the mother” where the calculated \(F\) value was 5.808, with “education of the father” where the calculated \(F\) value was 6.496, and with “working status of the father” where the calculated \(F\) value was 4.441 as against the table value of 2.99 at 2 and 197 df and \(P < 0.05\) level of significance, for lying significant association with “religion” where the calculated \(F\) value was 5.345 as against the table value of 2.99 at 2 and 197 df and \(P < 0.05\) level of significance, and for shyness the significant association with “education of the child” where the calculated \(F\) value was 3.788 as against the table value of 2.60 at 3 and 196 df and \(P < 0.05\) level of significance.

**Discussion**

The discussion deals with the findings of the study. The findings of each objective are as follows:

- To assess the measures adopted by mothers to reduce behavioral problems among children using a checklist
- The present study shows that only 3 (1.5%) mothers followed average measures and remaining mothers that are 197 (98.5%) not adopted measures to reduce behavioral problems for their children.

A similar study was conducted by Pushpalatha and Sudharshana (2015) on behavioral problems of identified school children in Shimoga District, overall 75 children between the age range of 8 and 12 considered problematic
were identified by the different school teachers. Findings of the study show that children, in general, the intensity of the problem was low in 68 children, average in 5 children and was high in two children. Considering the problem behavior in the checklist individually, it is seen that 39 children of 75, constituting around 52% had exhibited problem behaviors. In that, aggressive (24%), temper tantrums (18%), excessive level of fighting (17%), and fear of animals (16%) are with the behavior deliberate attempts to harm, others (16%) are with highest frequency. Accordingly, problems such as anxiety (14%), involuntary wetting of the bed, examination phobia, poor memory, lack of attention, and concentration are seen frequently in around 8% of the sample.\[5\]

To associate measures adopted by mothers with selected demographic variables. Results of the present study show that there was a significant association between measures adopted by mothers for “temper tantrum” with selected demographic variables with type of family, age of the child in years, and education of the child, for “nail biting” with education of the child, for “thumb-sucking” with age of mother in years, religion, age of the child in years, and education of the child, for “enuresis” (bed wetting) with religion and education of the child, for “aggressiveness” with type of family, for “pica” with religion, age of the child in years, and gender of the child, for “somnambulism” (walking in sleep) with family income per month, education of the mother, education of the father, and working status of the father, for “lying” with religion and with gender of the child, and for “shyness” with education of the child which was significantly associated. Hence, the $H_0$ was rejected and $H_1$ was accepted.

The study was conducted by Ganesha and Venkatesan on “Comparative Profiles of Problem Behaviors in Children from Single Versus Dual Parent Families.” That study used a cross-comparative two group random survey design on a sample of 300 children in the age group of 6–18 years. The results reveal a trend toward higher extensity and intensity of problem behaviors in children from single-parent households, especially those headed by single fathers (N: 61; Mean: 119.0; Standard deviation [SD]: 9.1) followed by those led by single mothers (N: 89; Mean: 117.0; SD: 8.3) and least in children from dual-parent homes (N: 150; Mean: 77.3; SD: 13.3). These differences are statistically significant (F: 489.617; $P$: 0.001). This trend is replicated for single- and dual-parent families from both rural (F: 280.004; $P$: 0.001) and urban (F: 234.721; $P$: 0.001) family background. In addition, in relation to gender, girls from single-parent families headed by fathers (N: 32; Mean: 120.0; SD: 7.8) appear to have the greatest incidence of problem behaviors followed by boys from single-parent families headed by fathers (N: 29; Mean: 118.0; SD: 10.3), boys from single-parent families headed by mothers (N: 38; Mean: 117.0; SD: 8.4) and lowest in girls.\[6\]

Conclusion

A result of the present study indicates that mothers must adopt good measures and to have good parent-child relationship to prevent and to reduce the behavioral problems among children because the present study findings show that among 200 samples of mothers, only 3 (1.5%) mothers followed average measures and remaining mothers that are 197 (98.5%) not adopted measures to reduce behavioral problems for their children.

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