**Effectiveness of Self-Instructional Module on Knowledge Regarding Selected Habit Disorders in Children among Mothers of Preschooler**

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**Authors’ contributions**

This work was carried out in collaboration between both authors. Both authors read and approved the final manuscript.

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**Study Protocol**

**ABSTRACT**

**Background:** A child is unique individual. The childhood era is critical for the socialization process, which involves the transmission of attitudes, customs, and behaviour through the influence of family and community. The promotion and maintenance of a child's health is influenced by the family's cultural and religious beliefs, educational level, and lifestyle. Improved child health requires better education, nutrition, family planning, improved health behaviour, and increased use of health services. The form of the caregiver interaction has a significant impact on a child's behavioural development. Parents, especially women, who are emotionally present, sensitive, perceptive, and effective in satisfying their child's needs are more likely to have securely connected children who are more likely to meet crucial behavioral milestones as they grow up.

**Objectives:**

- To assess the existing knowledge regarding selected habit disorders in children among mothers of preschooler.
- To assess the effectiveness of self-instructional module on knowledge regarding selected habit disorders in children among mothers of preschooler.
- To determine the posttest knowledge score regarding selected habit disorder in children.

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1. INTRODUCTION

Childhood is crucial in developing and shaping the future conduct and character of a child. Development Monitoring will begin in the child’s life, right from birth, at an early age [1]. Childhood is a time when people are completely reliant on others. Children gradually acclimate to their surroundings [2].

Learning is a key process in one’s behaviour. Our behaviour and actions are influenced by what we learn and how we learn it. We learn when we come in contact with the environment. We learn with our day to day direct or indirect experiences [3].

Research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children’s personality (5). Behavioral disorder is a mental ailment diagnosed in childhood age that presents a repetitive and persistent pattern that violates the basic rights or Research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children’s personality (5). Behavioral disorder is a mental ailment diagnosed in childhood age that presents a repetitive and persistent pattern that violates the basic rights or Research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children’s personality (5). Behavioral disorder is a mental ailment diagnosed in childhood age that presents a repetitive and persistent pattern that violates the basic rights or Research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children’s personality (5). Behavioral disorder is a mental ailment diagnosed in childhood age that presents a repetitive and persistent pattern that violates the basic rights or Research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children’s personality (5). Behavioral disorder is a mental ailment diagnosed in childhood age that presents a repetitive and persistent pattern that violates the basic rights or Research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children’s personality (5). Behavioral disorder is a mental ailment diagnosed in childhood age that presents a repetitive and persistent pattern that violates the basic rights or Research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children’s personality (5). Behavioral disorder is a mental ailment diagnosed in childhood age that presents a repetitive and persistent pattern that violates the basic rights or Research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children’s personality (5). Behavioral disorder is a mental ailment diagnosed in childhood age that presents a repetitive and persistent pattern that violates the basic rights or Research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children’s personality (5). Behavioral disorder is a mental ailment diagnosed in childhood age that presents a repetitive and persistent pattern that violates the basic rights or Research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children’s personality (5).

Keywords: Effectiveness; self instructional module; knowledge; mothers of preschooler.
Prevention and Management of Behavioural Problems in Children of Ayurvedic Principles in Prevention and Management of Behavioural Problems in Children Research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children's personality (5). Behavioral disorder is a mental ailment diagnosed in childhood age that presents a repetitive and persistent pattern that violates the basic rights research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children’s personality (5). Behavioral disorder is a mental ailment diagnosed in childhood age that presents a repetitive and persistent pattern that violates the basic rights or norms [4].

Habit Disorders are characterized as recurring actions that have no obvious social role but can have a harmful impact on the individual. The prevalence of thumb sucking is 18%. These behaviors are typically related to self-soothing in young children.

Nail biting is a common oral habit among children. The prevalence is as high as 45-60%. Nail biting is unpleasant, unsightly, and socially unacceptable, and it can lead to paronychia. Involuntary urination during sleeping, also known as nighttime incontinence or nocturnal enuresis, occurs after the age at which being dry at night can be fairly expected [5].

Encopresis is described as chronic fecal incontinence with no anatomic abnormalities It's a prevalent handicap issue in children, commonly linked to functional defecation disorders and potentially without surgery.

The study is essential to carried out regarding selected habit disorders in children among mothers of preschooler regarding habit disorders. The previous researches has been carried out on specific habit disorder. As aim of the current study is to improve the knowledge of mothers of preschooler regarding multiple habit disorders. As by reviewing the literature this type of study has not being carried out previously. So, there is a need to carry the study on assess the effectiveness of self-instructional module on knowledge regarding selected habit disorders in children among mothers of preschooler.

1.1 Aim of the Study

The aim of the study to assess the effectiveness of self-instructional module on knowledge regarding selected habit disorders in children among mothers of preschooler

1.2 Objectives

- To assess the existing knowledge regarding selected habit disorders in children among mothers of preschooler.
- To assess the effectiveness of self-instructional module on knowledge regarding selected habit disorders in children among mothers of preschooler.
- To determine the posttest knowledge score regarding selected habit disorders in children among mothers of preschooler with demographic variables.

2. METHODOLOGY

Schematic representation of methodology is depicted in Fig. 1.

A study will be based on Evaluatory research approach with one group pretest and posttest research design. The impact of self instructional module on knowledge regarding selected habit disorders in children among mothers of preschooler will be assessed using non probability convenient sampling technique. 60 mothers of preschooler selected as a sample. A structured questionnaire is prepared and data will be collected. A self structured questionnaire consisting of 27 items including demographic data and knowledge regarding selected habit disorders in children will be used to collect the data. Data collection instruments consist of the following sections.

Section A: This section consists of 7 questions of demographic variable of the mothers of
preschooler to be participated in the study: child’s age, child’s gender, number of children in family, educational status of mother, occupation of mother, previous knowledge, Source of information.

Section B: This section consists of 20 of structured questionnaires about selected habit disorders in children. In order to obtain content validity, the tool will be given to 12 experts who included one from Department of statistics, one each for Department of English and one from Marathi, and nine from Department of Child Health Nursing. After receiving opinions from the experts and consultation from the guide some modifications will be done in framing the item and same were incorporated in to the tool. Assess the knowledge of mother of preschooler about selected habit disorders in children by pre-test on first day, then implement self-instructional module on selected habit disorder in children as intervention and after seven days posttest will be conducted to assess the knowledge regarding selected habit disorders in children. Data collection will be carried out within the stipulated period. After the cycle of data collection, the investigator thank all the samples of the analysis as well as the authorities for their cooperation.

Statistical methods: By using descriptive and inferential statistics.

Sample size will be calculated by Cochran Formula

\[ n = \frac{2 \alpha^2 \cdot P \cdot (1-P)}{E^2} \]

Where,

2\( \alpha \) is the level of significance at 5% i.e., 95% Confidence interval = 1.96
P = 80% = 0.80
E = Error of Margin = 10% = 0.10
n = 1.96^2 \times 0.80 \times (1-0.80)
= 61.46

2.1 Setting of the Study
Samples will be taken from ‘selected areas of community, Wardha.

2.2 Period of Data Collection
The data will be gather within a week

2.3 Sample
In this study, samples were the mother of preschooler who were fulfilling the inclusive and exclusive criteria.

2.4 Sample Size
In this study, sample size will be 60 Mothers of preschooler.

2.5 Sampling Technique
The sampling technique used in this study Non - Probability Convenient sampling technique.

2.6 Criteria for Sample Selection

2.6.1 Inclusive criteria
1. Mothers of 3-6 years children
2. Mothers of the preschooler who were willing tp participate
3. Mothers of preschooler who can read /write English and Marathi

2.6.2 Exclusion criteria
1. Mothers of preschooler who are prior attend same teaching program
2. Mothers of preschooler who are having mental illness
2.7 Statistical Analysis

Statistical analysis done by descriptive and inferential statistics with the help of SPSS 17.0 software.

3. EXPECTED OUTCOME/RESULTS

This study is planned to assess the effectiveness of self-instructional module on knowledge regarding selected habit disorders in children among mothers of preschooler. Self-instructional module will be effective for improving knowledge of respondents.

4. DISCUSSION

A observational study conducted on to determine the current state of knowledge on of prevalence and characteristics habit disorders in kids. Th researcher has taken 277 children aged 3-12 years. The tool used in this study was direct interviewing of children’s parents or relatives. The result revels that 127 children (55.9%) were found to have one or more habit disorder, 51.2% females and 48.8% males. One hundred children (44.1%) were normal. The commonest habit was chewing on the end of the pencil (35.4%) and the least common was head banging (10.2%). The study shows that thumb sucking, breath- holding and pica developed at earlier age (1-2 year) while nail biting, hair pulling, skin- picking and head banging originate later (3-5) years, and chewing on the end of the pencil dominates habit disorders in school aged children [6].

A study was done to determine the prevalence of habit and its consequences emotional difficulties in preschool children, as well as the range of symptoms. The researcher has taken 1887 preschooler children as a sample. A standardized parent questionnaire was employed in this study as a tool. The results show that behavioural and emotional symptoms were present in 12.4% of people after six months. Internalizing symptoms (INT) had a higher overall score than externalising symptoms (EXT). On the “Anxious or Depressed” syndrome scale, the disturbed children got the highest mean score [7].

The Study conducted on Mothers' Knowledge of Behavioral issues in children under the age of five. The researcher taken 100 participants from selected urban community as a sample. The result reveals that Total knowledge score of 100 mothers is 45.1%, i.e., the mothers had average knowledge regarding behavioural problems. Common Behavioural Problems the mothers scored 54.50%. Regarding Thumb sucking they scored only 27%. Nail biting (47.33%) and Tics (48.33%) they scored almost equally. Pica (49%) and Temper Tantrum (48.33%) are also almost same [8].

5. CONCLUSION

Final conclusion will be drawn from the final result of the statistical review.

CONSENT

As per international standard or university standard, respondents’ written consent will be collected and preserved by the author(s).

ETHICAL APPROVAL

Study was approved by the Institutional Ethics Committee (letter no –DMIMS (DU)/IEC/2021/295) and the study will be conducted in accordance with the ethical guidelines prescribed by institutional Ethics Committee on Human Research.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

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