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To assess the practices regarding management of selected behavioral problems in school going children among the mothers in selected urban areas of Pune city

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Abstrac

A study titled "A study to assess the practices regarding management of selected behavioural problems in school going children among the mothers in selected urban areas of Pune city." Was Conducted for The Partial Fulfillment of The Bachelor Degree of Nursing Bharati Vidhyapeeth Deemend To Be University, Pune During Year 2018-2019.

The objective of the study was:

- To assess the practices regarding management of selected behavioral problems in children among the mothers.
- 2. To find association of practice with selected demographic variables.

In this study the research design adopted is exploratory design. The study will include 150 mothers for the present study. In this study, sample will be selected by using non – probability snow ball sampling technique.

Section A: Deal with the demographic data that consists of seven items that is age of mother, religion, educational status, occupation, type of family.

Section B: Consist of 23 self structured questionnaires.

The finding of the study shows that mothers having good practices 85.3 % regarding of management of behavioral problems in school going children, 14.7% of mothers have poor practices.

The present study in short gave the researchers a new experience, a chance to widen their knowledge and a venue to interact with the mother.

Keywords: Practice, management, behavior problem, school going children

Introduction

Children are the most important aspects of our country. Therefore, it is important to provide attention to children for optimum growth and development for their well being. Children's show wide variety of behavior problems. Maximum behavior disorder is insignificant and it is not because long lasting disturbance. Behavior problems are viewed as discrepancy between the child's behavior and demands placed on him by his parents, teachers and colleagues. Habit disorder speech disorder, Eating Disorder, sleep Disorder, personality disorder are the types of behavior problems.

Behavior problem are because of failure in adaptation to intensely circumstances and existence of competitions.

Need of the Study

Childs health is The pillar of national development. School plays a vital and Influential r According to present study of INC of medical research 2009, the frequency was 12.5 of mental and behavioral disorder in Indian children. The study was done by the teachers in Ludhiana, the samples were 957 school children and they used Rutter B Scale.

Childs first mentor is parents. Children behave same as their parents. ole in the cognitive, language, emotional, social and moral development of children's.

Mothers are the first care taker of child who concern regarding breast feeding and mental well being of children. Therefore it is necessary to educate mothers about taking care of children.

The trained mothers can prevent behavioral problems by practicing good management for behavioral problems of school going children's, if they get adequate knowledge regarding management of behavioral problems.

Research statement

"A study to Assess the Practices Regarding Management of Selected Behavioural Problems in School Going Children Among the Mothers in Selected Urban Areas of Pune City."

Objective of the study

- 1. To assess the practices regarding management of selected behavioral problems in children among the mothers.
- To find association of practice with selected demographic variables.

Methodology

Descriptive research was used A study to Assess The Practices Regarding Management Of Selected Behavioural Problems In School Going Children Among The Mothers In Selected Urban Areas Of Pune City. The target population who fulfills the inclusion criteria are selected for this study, a non-probability snow ball Sampling Technique was used to select 150 samples. A 23 Self-Structured Questionnaires were formulated to assess the practices regarding management of selected behavioral problems. Each corrected answer was given a score of one and wrong answer zero score. The score between 0-11 = bad practices

12-23= good practice and 23 The tool was validated by 5 experts in department of pediatric nursing faculty. Valuable suggestions were incorporated and tool was finalized. Permission was obtained from undergraduate research monitoring committee and institute ethical committee.

The reliability of tool was established by conducting a pilot study. The data collection was conducted for one month in selected areas of Pune city. The investigator first introduced themselves to the mothers and developed a good rapport with them. The investigators explained the purpose of the study and then gained their confidence by obtaining a written consent from samples. The data collection was done by

questionnaire method a separate questionnaire was used for each mothers. Approximately 20 minutes were spent for each sample. Similarly the same data procedure was followed for the entire 150 samples.

Major study findings

Table 1: Practices score of mothers regarding management of behavioural problem, n = 150

| Practices Score | | | | | | |
|-----------------|------------|--------------|-------|--|--|--|
| | Bad (0-11) | Good (12-23) | Total | | | |
| Frequency | 22 | 128 | 150 | | | |
| Percentage | 14.7 | 85.3 | 100% | | | |

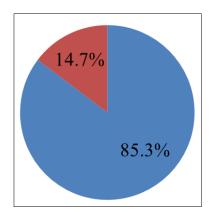


Fig 1: Percentage distribution of practices score regarding the behavioral problems in children among mothers

Table 1 shows that practices scores of mothers regarding the behavioral problems that majority (85.3%) mothers have the good practices and (14.7%) mothers have bad practices of management of behavioral problem.

Table 2: Association of demographic variables with practice score of mothers for self reported practices regarding the management of behavioral problem in children's. n = 150

| Demographic Variable | | Practice Score | | Chi a a san a sala sala sala sala sala sa | D 37-1 | TC |
|----------------------|------------------|--------------------|------|---|---------|-----------|
| | | Bad | Good | Chi square calculated value | P-Value | Inference |
| Age | 20-25 | 06 | 41 | 7.821 | 0.166 | NS |
| | 26-30 | 10 | 45 | | | |
| | 31-35 | 03 | 25 | | | |
| | 36-40 | 0 | 13 | | | |
| | 41-45 | 02 | 03 | | | |
| | 46-50 | 01 | 01 | | | |
| Religion | Hindu | 14 | 77 | 0.005 | 0.798 | NS |
| | Muslim | Muslim 08 51 0.095 | | 0.798 | 149 | |
| Education | Primary | 02 | 13 | | 0.873 | NS |
| | Secondary | 12 | 62 | 1.231 | | |
| | Higher secondary | 05 | 31 | | | |
| | Graduation | 03 | 16 | | | |
| | Post Graduation | | 6 | | | |
| Type of family | Joint | 06 | 27 | 0.418 | 0.518 | NS |
| | Nuclear | 16 | 101 | | | |
| Occupation | House Wife | 08 | 51 | 0.095 | 0.518 | NS |
| | Worker | 14 | 77 | | | |
| Noof child | One | 04 | 38 | | 0.138 | NS |
| | Two | 10 | 70 | 5 512 | | |
| | Three | 06 | 15 | 5.513 | | |
| | More than three | 02 | 05 | | | |

Note: If determine chi square-value is lesser than chi square table value then we reject the null hypothesis and can assume

the result is statistically significant i.e. there is a no association.

Implication

The finding of the study have implication for nursing practices, nursing education, school education, administration and research study. By this study the mothers will become aware of behavioral problem in in children. Results of this study will also provide additional knowledge in research area.

Conclusion

As per the analysis it can be concluded that, the data is collected by 150 sample. Analysis is done by using descriptive statistics-frequencies and percentage for analysis of practices and inferential stastics-chi square is used for association between demograhic variables and practices score. The findings also revels that there is no association between demographic variables regarding practices of management of behavioral problem among the mothers.

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Ethical clearance

Administrative approval from college ethical committee. The whole process is described to the participants.

Informed written consents were taken from the participants. Demographic data was collected.

Structured questionnaire was given to the participants and they were given 20 minutes to solve the questionnaire.

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