

Journal Homepage: - www.journalijar.com

INTERNATIONAL JOURNAL OF ADVANCED RESEARCH (IJAR)

INTERNATIONAL ACCENAL OF APPLAYCED RESEARCH STATE OF THE APPLA

Article DOI: 10.21474/IJAR01/17662 **DOI URL:** http://dx.doi.org/10.21474/IJAR01/17662

RESEARCH ARTICLE

PREVALENCE OF BEHAVIORAL PROBLEMS AMONG SCHOOL GOING CHILDREN IN SOUTH INDIA

Ganesan R.1, Hemavathy J.2, Komalavalli T.3 and Jayanthi P.4

- Ph.D Scholar, OmayalAchi College of Nursing, affiliated to The Tamil Nadu Dr. MGR Medical University, Puzhal, Chennai-600066.
- 2. Ph.D Research Guide & HOD, OmayalAchi College of Nursing, affiliated to The Tamil Nadu Dr. MGR Medical University, Puzhal, Chennai-600066.
- 3. Ph.D Co-Guide & Principal, KarpagaVinayaga College of Nursingaffiliated to The Tamil Nadu Dr. MGR Medical University.
- 4. Vice-Principal, Venkateswara Nursing College affiliated to The Tamil Nadu Dr. MGR Medical University, Chennai.

Manuscript Info

Manuscript History

Received: 30 July 2023 Final Accepted: 31 August 2023 Published: September 2023

Kev words:-

Behavioral Problems, School Going Children

Abstract

Background: Children can have mental, emotional and behavioural problems that are real, painful and costly. These problems often can lead to development of disorders if neglected which are the sources of stress for children and their families, schools and communities.

Aims & Objectives: To assess the prevalence of behavioral problems among school going children.

Methodology: Researcher adopted quantitative approach and cross-sectional descriptive study. 1600 school going children screened by child behavior checklist and who fulfilled inclusion and exclusion criteria, were selected as samples by using a non-probability purposive sampling technique. Written informed consent was obtained from the parent and assent obtained from school going children.

Results:210(13.13%) school going children had behavioral problems. In experimental group the mean behavioral problem score was 51.83 with SD of 9.75 and in control group the mean behavioral problem score was 53.26 with SD of 11.32. There is a significant difference between experimental and control group behaviour score.

Conclusion: The study concluded that majority of the school going children had moderate level of behavioral problems. Regular screening of behavioral problems and early intervention help the school going children to cope and grow in a better way.

Copy Right, IJAR, 2023,. All rights reserved.

Introduction:-

Young people can have mental, emotional and behavioural problems that are real, painful and costly. These problems often can lead to development of disorders if neglected which are the sources of stress for children and their families, schools and communities. Although it is difficult toget accurate estimates of child mental disorders, the few available epidemiological data indicate that 12-51%; with the average around 29% of the world's children

Corresponding Author:- Ganesan R.

Address:- Ph.D Scholar, OmayalAchi College of Nursing, affiliated to The Tamil Nadu Dr. MGR Medical University, Puzhal, Chennai-600066.

suffer from emotional and other mental problems that warrant mental health treatment. Out of this group, 6-9% is seriously emotionally disturbed children who need intensive psychiatric care.¹

In India, Children below 16 years of age constitute over 40% of its population. Community studies on emotional/behavioural disorders in children and adolescents conducted in India have yielded disparate point prevalence estimates (2.6% to 35.6%). Methodologically robust studies on community samples have reported overall point prevalence rates of 9.4% in children aged 8-12 years14, 12.5% in children aged 0-16 years. In Assam, a cross sectional study on school students shows prevalence rate of various behavioural problems ranged from 7.90 to 16.78%. Anxiety problem was highest among school students.²

The prevalence rates of behavioral problems across various studies conducted in different states in India vary, thus making it difficult to get a collective understanding of the extent of the problem. A study by Srinath **et al.**, in 2005, conducted on a community-based sample in Bengaluru, revealed the prevalence rates of behavioral problems to be around 12.5% in children up to 16 years of age. Another study done on school children in Chandigarh found the rate of behavioral problems among 4–11 years' old to be 6.3%. As evident from the available literature, the overall rates of psychiatric illnesses among children and adolescent population across the various states in India and other middle- and low-income countries vary between 5% and 6%.

Recent evidence indicates that emotional and behavioural disorders frequently lead to poor school performance and to dropping out of school. The behavioural problems such as quarrelling, using abusive language, delinquent behaviour are visible in school children in general. A child may have more than one disorder ranging from mild to severe. 4

Behaviour problems arise from external influences whose effects are not often noticed or understood by others. Teachers and parents are faced with the difficulty of dealing with the behaviour problems of their children. Behaviour problems of children often interfere with the learning process and are incompatible with their educational program.⁵

Behaviour problems may range from extreme withdrawal to intense hostile aggression. These students, if not identified and helped during their school days would continue to have difficulties dealing with society and their problems may become progressively more serious later in life.⁶

It is important for teachers to understand the factors which could be responsible for the observable behavior problems of their students. Lack of understanding of the reasons behind the behaviour of the students may make the teacher react in a way which might aggravate the situation. Students with problem behavior in the classroom pose challenges for teachers. ⁷

Materials And Methods:-

A quantitative research approach was adopted. The researcher adopted a cross-sectional descriptive design for the study. School going children between 8-12 years of age who were fulfilling the inclusion criteria were the sample for the quantitative study. 210 school going children (105 each in experimental and control group) who were fulfilling the inclusion criteria were included for the study. Non-probability purposive sampling technique was adopted.

The inclusion criteria's were school going children who were studying third standard to sixth standard, both boys and girls with all levels of behavioral problem and available at the time of data collection for both qualitative and quantitative studyeither one of the parent to be alive. The exclusion criteria was school going children with attention deficit hyperactivity disorder (ADHD) and aggressive behavior.

Researcher screened behavioral problems among 1600school going children from 20 schools by using modified child behavior checklist. The tool consisted of 40 items in the domains of physical, intellectual, social, emotional and self-development. Researcher collected socio-demographic data and behavioral problems among school going children.

Ethical Consideration

Ethical permission was obtained from The Institutional Ethics Review Board from OmayalAchi College of Nursing. Permission was obtained from the Chief Education Officer and Principals of Schools to conduct the study in the selected areas. Informed consent was obtained and detailed explanation about the study was given to parents and assent obtained from school going children. Confidentiality and privacy was maintained throughout the study. The participants were given a full freedom of continuing (or) withdraw from the study at any time. School going children convenient timing and day was chosen to conduct the study.

Statistical Analysis

Statistical analysis was performed using the Statistical package for Social Sciences Programme (SPSS) version 17.0. Descriptive statistics was used to describe the demographic variables. Student independent 't' test was used to compare the level of behavioral problem score among school going children between experimental and control group.

Results And Discussion:-

210(13.13%) school going children had behavioral problems.41(39.05%) in experimental group and 36(34.29%) in control group school going children aged 12 years. 62(59.05%) and 66(62.86%) were belonged to female gender in experimental and control group. Assessment of behavioral problems among school going children depicted in **Table 1** and the domainwise behavioral problems depicted in **Table 2**. Comparison of behavioral problems among school going children between experimental and control group depicted in **Table 3**.

Table 1:- Assessment of behavioral problems among school going children N=210.

Level of	Experimental group(n=105)		Control group(n=105)		Chi square test
behavioral	n	%	n	%	
problems					
Normal	0	0.00	0	0.00	χ2=2.76
Mild	21	20.00	27	25.71	p=0.25(NS)
Moderate	62	59.05	50	47.62	
Severe	22	20.95	28	26.67	
Total	105	100	105	100	

p>0.05 not significant NS=not significant

Table 2:- Domainwisebehavioral problems among school going children N=210.

Domains	Group						
	Experimenta	al group	Control group				
	Mean	% of mean	Mean	% of mean			
		score		score			
Physical	10.38	64.88	10.72	67.00			
Intellectual	10.72	67.00	11.09	69.31			
Social	9.79	61.19	9.93	62.06			
Emotional	10.89	68.06	11.17	69.81			
Self-development	10.05	62.81	10.34	64.63			
Total	51.83	64.79	53.26	66.58			

p>0.05 not significant NS=not significant

Table 3:- Comparison of behavioral problems among school going children N=210.

Domains	Group	Group			Mean	Independent t-test
	Experimen	Experimental group		group	difference	
	Mean	SD	Mean	SD		
Physical	10.38	2.21	10.72	2.28	0.34	t=1.11 p=0.27(NS)
Intellectual	10.72	3.44	11.09	3.65	0.37	t=0.74 p=0.46(NS)
Social	9.79	2.72	9.93	2.73	0.14	t=0.38 p=0.71(NS)
Emotional	10.89	3.75	11.17	3.88	0.28	t=0.54 p=0.59(NS)
Self-development	10.05	3.89	10.34	4.34	0.29	t=0.52 p=0.60(NS)

1	7D 4 1	F1 00	~	F2 26			
	Total	51.83	9.75	53.26	11.32	1.43	t=0.98 p=0.33(NS)

P≤0.05 significant, P≤0.001 very high significant

The study findings were consistent with the study conducted by Gupta AK, Mongia M, Garg AK (2017) on behavioral problems in school going children. Five hundred children aged 6–18 years were randomly selected from a government school in Kanpur, Uttar Pradesh, and assessed for cognitive, emotional, or behavioral problems using standardized tools. Results revealed that about 22.7% of children showed behavioral, cognitive, or emotional problems. The study concluded that the importance of regular screening of school children for preventive as well as timely remedial measures.⁸

Another study conducted by Barman N, Khanikor MS(2018) reported that 18% of the students have abnormal behavioural while 12% have borderline behavioural problems. Highest number of students (26%) has conduct problems. Mean score of externalizing problem is more than that of internalizing problem. There is significant association between emotional problem and age, conduct problem and gender, conduct problem and no of siblings, hyperactivity and religion, prosocial problem and age.⁴

Srilatha A, Doshi D, Reddy MP, Kulkarni S (2016) study results revealed that girls reported more emotional problems and good prosocial behavior and males had more conduct problems, hyperactivity, peer problems, and total difficulty problems. MamtaBisht (2021) study results revealed that 60% of working mothers reported Borderline Behaviour in their children. Abnormal behaviour consisting of hyperactivity, bad habits and social problems etc. were reported by 15% of working mothers. Children among non-working mothers reported higher levels of anxiety, and conduct problems. Significant association was found between Behavioural problems of children among working mothers and type of family, number of children, age of the child, and gender of the child.

Conclusion:-

The study concluded that 13.13% of school going children had behavioral problems and majority of them had moderate level of behavioral problems. Parents and teachers coordinated effort is needed to rule out the behavioral problems among school going children. Regular screening of behavioral problems and early intervention help the school going children to cope and grow in a better way.

References:-

- 1. Ogundele MO. Behavioural and emotional disorders in childhood: A brief overview for paediatricians. World J ClinPediatr. 2018 Feb 8;7(1):9-26. doi: 10.5409/wjcp.v7.i1.9. PMID: 29456928; PMCID: PMC5803568.
- 2.PratapSharan.The Need for National Data on Epidemiology of Child and Adolescent Mental Disorders, J. Indian Assoc. Child Adolesc.Ment. Health 2008; 4(2):22-27
- 3.Rajanidevi S,Hiremath, Bimlarani.Behavioural Problems among School Going Children.Behavioural Problems among School Going Children, 2019;4(2):799-803.
- 4.Barman N, Khanikor MS. Prevalence of behavioural problems among school children: a pilot study. Int J Health Sci Res. 2018; 8(12):95-101.
- 5.Jogdand SS, Naik J. Study of family factors in association with behavior problems amongst children of 6-18 years age group. Int J Appl Basic Med Res. 2014 Jul;4(2):86-9. doi: 10.4103/2229-516X.136783. PMID: 25143882; PMCID: PMC4137648.
- 6.Rubin KH, Coplan RJ, Bowker JC. Social withdrawal in childhood.Annu Rev Psychol. 2009;60:141-71. doi: 10.1146/annurev.psych.60.110707.163642. PMID: 18851686; PMCID: PMC3800115.
- 7. Alakashee B, Al Gharaibeh F, El-Mneizel A, Aderibigbe S. Teachers' views about school students' behavioral problems in the Emirate of Sharjah: An exploratory study. Heliyon. 2022 Jun 18;8(6):e09756. doi: 10.1016/i.heliyon.2022.e09756. PMID: 35770146; PMCID: PMC9234592.
- 8.Gupta AK, Mongia M, Garg AK. A descriptive study of behavioral problems in schoolgoing children.Ind Psychiatry J. 2017 Jan-Jun;26(1):91-94. doi: 10.4103/ipj.ipj_39_17. PMID: 29456329; PMCID: PMC5810175.
- 9.MamtaBisht. Behavioural problems of children among working and non-working Mothers.International Journal of Advances in Nursing Management. 2021; 9(4):395-9. doi: 10.52711/2454-2652.2021.00091.