A Descriptive Study to Assess the Knowledge of Parents Regarding Adolescent Behavioural Problems in Selected High Schools, with a View to Develop an Information Booklet

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Abstract: Adolescence is the age between 10 to 18 years, marking major physical and mental changes in individuals personality leading to state of confusion and dilemma. Many studies show that major behavioural problems can set in the age if not adequately addressed. The study aimed to assess the knowledge of parents regarding adolescent behavioural problems, so that baseline data can be collected with will help in development of information booklet regarding the same. Findings revealed that a majority (83%) of the respondents were females. The analysis of the knowledgescores revealed that a majority of the respondents (83%) had good level ofknowledge. A significant association was found between the knowledge of the parents regarding adolescent behavioural problems and their age(p<0.05).

Keywords: Adolescent, Behavioural Problems, Parents, Knowledge, Information Booklet

1. Introduction

Adolescence is the age between 10 to 18years. The individual is lost in identifying his/her own identity. At times they are expected to behave like adults & many a times they are corrected if they behave like adults. This time of major transition in life role creates confusion, anger and so on responses. This funny situation if not tackled uniquely, may lead to regression & maladaptive coping responses. According to an epidemiological study conducted by Indian Council of Medical Research at Bangalore, the prevalence rate of adolescent behaviour problems was 12% among the 4-16 years age group, the common problems being hyperactive disorder and conduct disorders6. In India, out of the 30% of the children suffering from Mental illhealth, it is estimated that one to two percent have behavioral problems.¹

2. Literature Survey

A study by National Healthy School Standard (England) on signs of distress among children concluded that if distress is adequately addressed at the initial stage can prevent major health issues among students.²

A study on prevalence of behavioural problems in school going children at an urban area of Punjab, found that 43.5% of children had behavioural issues and concluded that this identification needs to be done in early age.³

A study on school teacher's knowledge on ADHA in England concluded that there is a need to assess level of knowledge on ADHD in society; they also suggested that⁴. teachers had adequate knowledge but level of knowledge of the parents was unknown.⁴

A study on Parental Influences on Adolescent Problem Behavior whereHigh school students (approximately 14–18 years old; N=2,568) underwent the process of survey and revealed that majority of times parents were successfully able to tackle the behavioural problems but could have done in better manner if had necessary knowledge on the topic.

A study at United States on the truancy among 8th and 10th grade students reported nearly 11% of 8th graders and over 16% of 10th graders reported recent truancy. Among the most salient predictors of recent truancy were parental education, having large amounts of unsupervised time after school, school disengagement variables (e.g.: poor grades) and drug use.⁵

A study was conducted behavioural problems in Indian adolescent boys at Nepal. 685 school going boys of 9th and 10th grades were screened revealed 5.69 per cent had behavioural disturbance. They had adjustment issues in school, tuition, playground and were less competent in the area of academics, peer popularity and application.⁶

3. Methodology/ Approach

A Descriptive survey approach was found to be appropriate to describe the knowledge of parents regarding adolescent behavioural problem.

Tool: Demographic Performa & Close-ended knowledge questionnaire on adolescent behavioural problems.

Validity: Content validity was established by 15 experts in the field of Child health and Mental Health.

Reliability: The tool was found to be reliable with a calculated value of r=0.8.

5. Result / Discussion

Part I: Percentage distribution of sample with reference to demographic variables

A majority (83%) of the respondents were females. Most of the respondents (41%) belonged to the age group of 31 -

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40 years, only 35% had some information about adolescent behavioural problems.

Part II: Knowledge of parents regarding adolescent behavioural problems.

Section A: Assessment of the knowledge of parents regarding adolescent behavioural problems.

The assessment of the knowledge of the parents regarding adolescent behavioural problems revealed that a majority (83%) had a good level of knowledge, while none showed poor level of knowledge.

Part III: Association of the knowledge with selected demographic variables

The analysis to find association of knowledge with selected demographic variables was done using chi-square (\Box 2) test and fisher's exact test. The results showed that there was a significant association of knowledge with age (p<0.05) and with Previous information on adolescent behavioural problems (p<0.05).

6. Conclusion

The data collected to assess the knowledge of parents regarding adolescent behavioural problems, revealed that majority (83%) of the respondents had good level of knowledge while none of them could be rated as having poor level of knowledge. The overall knowledge score obtained by the respondents was 26.35 ± 3.06 , with a mean percentage of 77.5%. Area wise analysis of the knowledge scores revealed that the respondents scored highest in the area of management of adolescent behavioural problems with a mean score of 12.32 ± 1.52 and a mean percentage of 88%. A significant association was found between the knowledge of the parents regarding adolescent behavioural problems and their age.

7. Limitation

- The study was limited to theparents.
- The study was limited to the selected schools at Pune city.
- The studyincluded only hyperactive behaviour, anxiety problems and conductproblems amongadolescent as behavioural problems.

8. Future Scope

Nursing Practice

- The finding will help nurses in planning for health education for parents regarding adolescent behavioural problems.
- Adolescent nurses can work in collaboration with the parents in behavioural modification of students at home.
- The school nurses couldfurtherimpartknowledge to the parentsregarding the behavioural problems.

Nursing Education

• The school nurses and mental health can be integrated in

nursing curriculum.

• Community activities, health education or awareness programme can be arranged on adolescent behavioural problems and its management.

Nursing Research

- Elaborative studies can be conducted on larger population.
- Study can also be replicated in different geographical areas.

Nursing Administration

- The nurse administrators can organize community level programmes to increase awareness on adolescent behaviouralproblems.
- The nurse administrators can collaborate with the healthcare providers to organize school mental health programmes for parents and caregivers.

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