

Knowledge and Attitude Regarding Management of Toddler's Temper Tantrum among Mothers of Kamrup (M), Assam with a View to Develop an Information Booklet: A Descriptive Study

Nargish Begum¹, Dr. Bibi Bordoloi², Rikupar Iawim³

¹M.Sc. Nursing (Child Health Nursing), CPMS College of Nursing, Guwahati-26, Assam, India

²Principal, CPMS College of Nursing, Guwahati-26, Assam, India

³Associate Professor, CPMS College of Nursing Guwahati-26, Assam, India

Abstract: ***Background of the study:** According to UNICEF, "A temper tantrum is an unpleasant and disruptive emotional outburst." It is a brief episode of extreme, unpleasant, and sometimes aggressive behaviors in response to frustration or anger mostly seen in toddlers. It occurs when children are not able to regulate the anger that arises when they are prevented from doing something they desire. These behaviors typically include crying, hitting, throwing items, breath-holding etc. If these challenging behaviors are not managed in early stage, it may lead to more serious problems including anxiety, depression, anti-social behavior, substance abuse etc. as kids grow older. **Aim:** The aim of the study was to assess the knowledge and attitude regarding management of toddler's temper tantrum among mothers of Kamrup (M), Assam." **Methodology:** A descriptive co-relational research design was used to assess the knowledge and attitude regarding management of toddler's temper tantrum among mothers. A probability sampling technique, under which multistage simple random sampling technique was used to select 123 subjects in total. Structured interview schedule and 5-point likert scale was developed to gather data and analysis was done by using descriptive and inferential statistics. **Results:** The result reveals that out of 123 subjects, majority of the subjects i.e. 86 (70%) had inadequate knowledge, 22 (17.8%) had moderate and 15 (12.2%) had adequate knowledge regarding management of toddlers Temper Tantrum. Findings showed that majority of the subjects i.e 74 (60%) had negative attitude, 37 (30%) had positive and only 12 (10%) had neutral attitude regarding management of toddlers Temper Tantrum. **Conclusion:** From the study, it is concluded that the majority of mothers had inadequate knowledge as well as had negative attitude regarding management of toddler's temper tantrum.*

Keywords: Knowledge, attitude, temper tantrum, management, mothers, information booklet

1. Introduction

Temper tantrums are brief episodes of extreme, unpleasant, and sometimes aggressive behaviors in response to frustration or anger. In toddlers, behaviors typically include crying, screaming, going limp, flailing, hitting, throwing items, breathe holding, pushing, or biting." "It is mostly associated with emotional distress due to lack of parent's attention, inappropriate parenting pattern etc and some common physiological triggers such as fatigue, hunger, or illness.

These challenging behaviours are one of the strongest predictors of more serious problems as kids grow older, including delinquency, aggression, anti-social behaviour, substance abuse etc. As their mental health is crucial for their overall development and the well-being of society so the role of mothers, or primary caregivers, in shaping a child's emotional and behavioral patterns is significant.

2. Objectives of the study

- 1) To assess the knowledge regarding management of toddler's temper tantrum among mothers of Kamrup (M), Assam.
- 2) To assess the attitude regarding management of toddler's temper tantrum among mothers of Kamrup (M), Assam.

- 3) To determine the correlation between knowledge and attitude regarding management of toddler's temper tantrum among mothers of Kamrup (M), Assam.
- 4) To find out the association between knowledge of mothers regarding management of toddler's temper tantrum with selected demographic variables.
- 5) To find out the association between attitudes of mothers regarding management of toddler's temper tantrum with selected demographic variables.

3. Review of Literature

Section I: Knowledge regarding management of toddler's temper tantrum among mothers.

Bala R, Kapoor AC, Verma S, Devi AK, Devi R, Kumari S et al (2022), conducted a descriptive study to assess the knowledge on management of behavioural problems of children among mothers in Dera, Haryana with a view to develop information booklet. A non-probability convenience sampling technique was used to select 100 mothers and data were collected with self-administered knowledge questionnaire. The result showed that maximum mother (95%) had average knowledge regarding behavioural disorders of children, (5%) had good knowledge and no one had poor knowledge of 13 behavioural problems of children. The mean and standard deviation for level of knowledge were 11.5 ± 2.02 . The findings also revealed that there is no

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significant relationship between level of knowledge and socio demographic variables. Thus, the study concluded that behavioural problems can be reduced by developing a healthy relationship with children, spending quality time together and by improving the knowledge of mothers.

Section II: Knowledge and attitude regarding management of toddler's temper tantrum among mothers.

Melita SG, Prasad L, Kumar S (2022), conducted a cross-sectional descriptive study to assess the knowledge and attitude on toddler's behavioural problems and its management among mothers at Christian Medical College, Vellore. Stratified sampling technique was utilized using 200 samples by giving self-administered questionnaire. The study showed that among the mother's majority 58.5% of mothers have moderately adequate knowledge and 18.5% of mothers have adequate knowledge regarding temper tantrum and majority of subjects i.e. 98 (49%) had negative attitude, 39 (20%) had positive attitude and only 63(31%) had neutral attitude on toddlers behavioural problems and its management. The obtained $r = 0.162$; $P = 0.001$ and the correlation is significant at the 0.05 level (2-tailed). This implies that there is a relationship between the knowledge and attitude of mothers on toddler's behavioural problems and its management. Thus, the study can be concluded that 17 continuous training on the management of behavioural problems through media, pamphlets, videos and health education will improve mother's knowledge and attitude towards their children's behavioural problems.

4. Research Methodology

Research approach: Quantitative research approach

Research design: Descriptive co-relational research design

Research variables: Knowledge and Attitude

Demographic variable: Age, educational qualification, number of children in the family, type of family, income per month, occupation of mother and previous experience of taking care of child with temper tantrum.

Setting of the study: Randomly selected 2 urban health centres under Kamrup Metro, Assam.

Population: All mothers who have toddler child.

Target Population: Mothers of toddlers of Kamrup (M), Assam.

Accessible population: Mothers of toddlers in urban community of randomly selected 2 Urban Primary Health Centers under East Zone of Kamrup (M), Assam and who fulfills the inclusion and exclusion criteria.

Sample and sample size: 123 mothers of toddlers in urban community of randomly selected 2 urban health centres under East zone of kamrup (M), Assam.

Sampling Technique: Multistage simple random sampling technique

Criteria for selection of sample:

Inclusion criteria: Mothers of toddlers attending in OPD/ immunization clinics of selected Urban Health Centers of East zone, Kamrup (M), Assam.

Exclusion criteria: Mother of toddlers not willing to participate in the study.

Tools and technique

The tool consists of 3 sections: A, B and C

Section A: Socio-demographic proforma

This section consists of 7 demographic variables such as age, educational qualification, and number of children in the family, types of family, income per month, occupational status of mother and previous experience of taking care of child with temper tantrum.

Section B: Structured interview schedule, to assess the knowledge regarding management of toddler's temper tantrum among mothers, which comprised of 20 multiple choice structured questions with four options having only one correct answer. Each correct answer carry (1) mark.

Section C: 5-point Likert scale, to assess the attitude regarding management of toddlers temper tantrum among mothers, which comprised of 20 statements with 10 positive and 10 negative statements. The total score of attitude section was 100.

Validity of the tool

The validity of the tool and information booklet in terms of relevancy, adequacy and appropriateness were determined by 7 different experts.

Reliability of the tool

The reliability of the tool has been done by using the formula of Split Half method. The reliability of knowledge questionnaire is 0.79 and the Likert scale is 0.73

Ethical Consideration

- Ethical approval was obtained from the Institutional Ethics committee of PEWS group of Institutions, Guwahati-26 for conducting the study.
- Formal permission obtained from office of the Joint Director of Health Services, Kamrup (M), Assam for conducting the study.
- Informed written consent obtained from all the participants before collecting the data.
- Participants were given liberty to leave the study at any point of time they desired.
- The participants were assured of confidentiality of the data obtained.

Pilot study

The pilot study was conducted from 18/01/24 & 20/01/24 in a similar setting among 20 mothers of toddlers. A probability sampling technique, under which multistage stratified random sampling technique were used for selection of the samples. The structured interview schedule and 5 point Likert Scale was administered to collect the data and informational booklet distributed thereafter.

Main study

The main study was conducted from 29th April to 25th May, 2024 among 123 mothers of toddlers.

5. Study Findings

Table I: Frequency and percentage distribution of socio demographic variable mothers, n= 123

| Age in years | Frequency (f) | Percentage (%) |
|----------------------------------|---------------|----------------|
| 21-25 | 38 | 31 |
| 26-30 | 57 | 46.3 |
| 31-35 | 19 | 15.4 |
| 36 and above | 9 | 7 |
| Educational qualification | | |
| Professional degree | 5 | 4 |
| Graduate | 9 | 7.4 |
| Higher secondary | 58 | 47.1 |
| High school / Primary school | 31 | 25.2 |
| No formal education | 20 | 16 |
| Number of children | | |
| One | 57 | 46 |
| Two | 27 | 30 |
| Three | 24 | 21 |
| More than three | 5 | 3 |
| Types of family | | |
| Nuclear | 63 | 51 |
| Joint | 60 | 49 |
| Extended | 0 | 0 |
| Family income per month | | |
| > 184,376 | 0 | 0 |
| 92,191-184,370 | 0 | 0 |
| 68,967-92,185 | 0 | 0 |
| 46,095- 68,961 | 0 | 0 |
| 27,654-46,089 | 10 | 8 |
| 9,232-27,648 | 91 | 74 |
| ≤ 9226 | 22 | 18 |
| Occupational status | | |
| Working | 51 | 41.4 |
| Non-working | 72 | 58.6 |
| Previous experience | | |
| Yes | 60 | 51 |
| No | 63 | 49 |

Table II: Assessment level of knowledge regarding management of toddler’s temper tantrum among mothers, n=123

| Level of knowledge | Frequency (f) | Percentage (%) | Mean | SD |
|--------------------------------------|---------------|----------------|------|------|
| Inadequate knowledge (0-7) | 86 | 70 | 9.22 | 2.65 |
| Moderately adequate knowledge (8-12) | 22 | 17.8 | | |
| Adequate knowledge (≥13) | 15 | 12.2 | | |

Table V: Association between knowledge of mothers regarding management of toddler’s temper tantrum with demographic variables, n=123

| Demographic variables | χ ² Value | df | P value | tabulated value | Inference |
|---|----------------------|----|---------|-----------------|-----------|
| Age in years | 26.2 | 6 | 0.02 | 12.59 | S* |
| Educational qualification | 24.5 | 6 | 0.04 | 12.59 | S* |
| Number of children | 11.2 | 6 | 0.82 | 12.59 | NS |
| Types of family | 25.6 | 4 | 0.01 | 9.49 | S* |
| Monthly family income | 18.4 | 12 | 0.11 | 21.03 | NS |
| Mothers occupational status | 4.2 | 2 | 0.12 | 5.99 | NS |
| Previous experience of taking care of child with temper | 2.5 | 2 | 0.28 | 5.99 | NS |

P<0.05 level of significance S= Significant NS= Not Significant

The data presented in Table II shows that majority of the subjects i.e. 86 (70%) had inadequate knowledge followed by 22 (17.8%) had moderately adequate knowledge and only 15 (12.2%) had adequate level of knowledge regarding management of toddler’s temper tantrum. The overall mean and standard deviation was 9.22 and 2.65 respectively.

Table III: Assessment of level of attitude regarding management of toddler’s temper tantrum among mothers, n=123

| Level of attitude | Frequency (f) | Percentage (%) | Mean | SD |
|---------------------------|---------------|----------------|------|------|
| Low attitude (0-54) | 74 | 60.2 | 61.8 | 8.16 |
| Moderate attitude (55-70) | 12 | 9.8 | | |
| High attitude (≥71) | 37 | 130 | | |

The data presented in table III shows that majority of the subjects i.e 74 (60%) had Low attitude, 37 (30%) had High attitude and only 12 (10%) had Moderate attitude regarding management of Toddler’s Temper Tantrum. The Mean and Standard deviation was 61.8 and 8.16 respectively.

Table IV: Correlation between knowledge and attitude regarding management of toddler’s temper tantrum among mothers, n =123

| Variables | Mean | SD | 'r'-value | 'P'-value | Inference |
|-----------|------|------|-----------|-----------|-------------|
| Knowledge | 9.22 | 2.65 | 0.42 | <0.001** | Significant |
| Attitude | 61.8 | 8.16 | | | |

*p <0.05 level of significance

The data presented in table IV shows that the obtained r=0.42, where p= 0.001, which indicates moderately positive correlation between knowledge and attitude regarding management of toddler’s temper tantrum among mothers and found to be highly significant at 0.05 level of significance.

Thus, null hypothesis H₀₁ is rejected and the research hypothesis H₁ i.e. there is significant correlation between the knowledge and attitude of the mothers regarding management of toddler’s temper tantrum is accepted.

The data presented in table V shows that the overall statistical significant association were found in regards to age of mothers ($\chi^2=26.2$, $p= 0.04$), mothers educational status ($\chi^2=24.7$, $p= 0.04$), and types of family ($\chi^2= 25.6$, $p =0.01$) with knowledge of mothers regarding management of toddler's temper tantrum. The rest of the demographic variable i.e. number of children, monthly family income, mother's occupational status, previous experience of taking care of child with temper tantrum with knowledge of

mothers regarding management of toddler's temper tantrum are found not significant.

Hence, the null hypothesis H_{02} is rejected and research hypothesis H_2 is accepted in terms of age of mothers, mother's educational status and types of family. Thus, the null hypothesis, H_{02} is retained in terms of number of children, monthly family income, occupational status, previous experience of taking care of child with temper tantrum.

Table VI: Association between attitudes of mothers regarding management of toddler's temper tantrum with demographic variables, $n=123$

| Demographic variables | χ^2 value | df | P Value | tabulated value | Inference |
|---|----------------|----|---------|-----------------|-----------|
| Age in years | 19.07 | 6 | 0.004 | 12.59 | S* |
| Educational qualification | 11.1 | 6 | 0.64 | 12.59 | NS |
| Number of children | 16.1 | 6 | 0.013 | 12.59 | S* |
| Types of family | 8.1 | 4 | 0.16 | 9.49 | NS |
| Monthly family income | 15.2 | 12 | 0.23 | 21.03 | NS |
| Mothers occupational status | 3.26 | 6 | 0.19 | 5.99 | NS |
| previous experience of taking care of child with temper | 3.8 | 2 | 0.14 | 5.99 | NS |

$p>0.05$ level of significance NS= Not Significant S= Significant

The data presented in table VI shows that the overall statistical Significant association were found in regards to age of mothers ($\chi^2=19.07$, $p= 0.004$) and number of children ($\chi^2= 16.1$, $p =0.013$) with attitudes of mothers regarding management of toddler's temper tantrum. The rest of the demographic variable i.e. mothers educational status, type of family, monthly family income, mother's occupational status, experience of taking care of child with temper tantrum with attitudes of mothers regarding management of toddler's temper tantrum are found not significant.

Hence, the null hypothesis H_{03} is rejected and research hypothesis H_3 is accepted only in terms of age of mothers and number of children. Thus, the null hypothesis, H_{03} is retained in terms of educational status, type of family, monthly family income, mother's occupational status, experience of taking care of child with temper tantrum.

6. Major Findings

- The findings of the study reveals that out of 123 respondents, majority of the subjects i.e. 86 (70%) had inadequate knowledge followed by 22 (17.8%) had moderately adequate knowledge and only 15 (12.2%) had adequate level of knowledge regarding management of Toddler's Temper Tantrum.
- The findings of the study also reveals that out of 123 respondents, majority of the subjects i.e 74 (60%) had negative attitude, 37 (30%) had positive attitude and only 12 (10%) had neutral attitude regarding management of Toddler's Temper Tantrum.
- It had been observed from the study that the obtained ($r=0.42$, $p= 0.001$) which indicates positive correlation between knowledge and attitude regarding management of toddler's temper tantrum among mothers and found to be highly significant at 0.05 level of significance.
- The results of the study also reveals that there was a significant association in regards to age of mothers ($\chi^2=26.2$, $p= 0.04$), mothers educational status ($\chi^2=24.7$, $p= 0.04$) and types of family ($\chi^2= 25.6$, $p =0.01$) with

knowledge of mothers regarding management of toddler's temper tantrum.

- The findings of the study also reveals that there was a significant association in regards to age of mothers ($\chi^2=19.07$, $P = 0.004$) and number of children ($\chi^2= 16.1$, $p =0.013$) with attitudes of mothers regarding management of toddler's temper tantrum.

7. Conclusion

The study concluded that the majority of the subjects had inadequate knowledge on management of temper tantrum. Similarly majority of the subject's had low attitude regarding management of temper tantrum. There was moderately positive correlation between knowledge and attitude, which indicates that increase level of knowledge among mothers on temper tantrum helps in developing a positive attitude towards management of temper tantrum. The variables i.e. age of mothers, mother's educational status and types of family were significantly associated with knowledge of mothers. Similarly variables i.e. age of mothers and number of children was significantly associated with attitudes of mothers regarding management of toddler's temper tantrum. Therefore, an awareness program would have great effect to increase the knowledge and positive attitude of subjects towards management of temper tantrum.

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