IJNRD.ORG ISSN : 2456-4184
INTERNATIONAL JOURNAL OF NOVEL RESEARCH AND DEVELOPMENT (IJNRD) | IJNRD.ORG
An International Open Access, Peer-reviewed, Refereed Journal

A Cross-Sectional Evaluation of Behavioral Concerns Among Preschool Children in Selected Anganwadi Centers of District Firozabad

Gajendra Parashar[1*] Ramavatar Singh Tyagi[2], Dr. Shivraj Singh Tyagi[3]

[1*]Vice Principal, Department of Child Health Nursing, Institute of Nursing and Paramedical Sciences, Mangalayatan University Aligarh (U.P.)

[2]Vice Principal, Department of Medical Surgical Nursing, Institute of Nursing and Paramedical Sciences, J.S. University Shikohabad, Firozabad (U.P.)

[3]Principal, Department of Medical Surgical Nursing, Institute of Nursing and Paramedical Sciences, Mangalayatan University Aligarh (U.P.)

Abstract :

Introduction: Well-adjusted children are typically healthy, emotionally balanced, and content. Their development depends on meeting emotional, physical, and psychological needs. Common behavioral issues in preschoolers include aggression, temper tantrums, sleep disturbances, thumb-sucking, nail-biting, enuresis, disobedience, food refusal, delayed speech, and attention difficulties. These problems often stem from inadequate parental care, family conflict, or lack of supervision. Early behavioral issues can predict more serious challenges later in life, such as delinquency, academic failure, and mental health disorders. **Objectives:** 1. To assess behavioral problems among preschool children (ages 3–6) as reported by mothers using the Modified Jacqueline McGuire and Naomi Richman Preschool Behavior Checklist. 2. To examine the association between these behavioral problems and selected demographic variables. **Methods:** A descriptive, non-experimental, quantitative study was conducted using a non-probability consecutive sampling method. Tools included a socio-demographic questionnaire and the modified Preschool Behavior Checklist. **Results:** The study found that 21% of children exhibited behavioral problems, while 79% did not. A significant association was observed between behavioral issues and the number of children in the family ($p < 0.05$). No significant links were found with variables such as age, gender, family type, birth order, income, residence, or religion.

KEYWORDS: Delinquency, psychological needs, non-purposive, quantitative study.

INTRODUCTION

Children are the foundation of a nation's future, and their well-being directly impacts the progress of society. A healthy body and a sound mind in children are essential for the development of a strong and prosperous country. The preschool age, typically ranging from 3 to 6 years, is a crucial stage of growth, during which children begin to explore their environment, form social connections, and develop creativity. During this period, the family remains a central source of love, support, and guidance. While pre-schoolers may seek affection less frequently than toddlers, their emotional needs remain significant and should be acknowledged with care and respect.

As Karl Menninger stated, "What is done to children, they will do to society," emphasizing the importance of nurturing young minds. Investments made in creating a positive emotional and physical environment for children today will shape responsible and capable individuals tomorrow. Pre-schoolers are naturally curious and eager to learn, absorbing information rapidly through exploration and interaction.

Early childhood is a sensitive period for behavioural development, as children shift from limited language skills and sensory-motor interactions to more advanced communication, emotional regulation, and empathy. Their cognitive and social skills begin to take form rapidly during this stage.

While some repetitive behaviours in children are part of normal development, they may become problematic when persistent and disruptive to emotional, physical, or social well-being. Habitual actions often begin as intentional behaviour and can become ingrained if repeated regularly.

Each child is unique in temperament, development, and behaviour, making it challenging to distinguish between typical and atypical patterns. Behavioural issues are identified when children consistently exhibit actions that disrupt social norms or hinder interactions with others. These may also affect academic performance, cause emotional distress, or result in unexplained physical symptoms and irrational fears.

Difficulties at this stage can signal underlying family issues and may persist into later childhood. Early screening and assessment are essential to detect and address developmental and behavioural concerns promptly. According to the World Health Report (2001), around 15% of Indian children suffer from serious emotional disturbances. The Indian Council of Medical Research (ICMR) also reported a 12.5% prevalence of mental and behavioural disorders among Indian children. Other studies across India have found the prevalence of behavioural problems ranging between 1.6% and 41.3%.

The investigator, through personal experiences during hospital and community postings, as well as observations within her neighbourhood and family, noticed a significant number of children displaying behavioural concerns. Motivated by both practical experience and a thorough review of related literature, the investigator felt a strong need to conduct a study aimed at assessing behavioural problems among preschool-aged children.

MATERIALS AND METHODS

A descriptive, non-experimental quantitative research design was employed to examine behavioural issues among preschool-aged children attending selected Anganwadi centres in District Firozabad. Data collection was carried out using a non-probability consecutive sampling method. The study's participants comprised mothers of preschool children enrolled in these centres, with a total of 200 mothers included in the sample.

To assess behavioural problems, the study utilized the Modified Jacqueline McGuire and Naomi Richman Preschool Behaviour Checklist (PBCL). This instrument is divided into two sections:

- **Part A**: A socio-demographic data sheet that collects information on the child's age, gender, number of siblings, birth order, family structure, religion, area of residence, and household income.
- **Part B**: The PBCL itself, which consists of 22 items evaluating various behavioural aspects such as temper, fears, worries, mood, activity level, concentration, and social relations. Each item is rated on a 3-point scale:
    - **0**: Not true as far as you know
    - **1**: Somewhat or sometimes true
    - **2**: Very true or often true

The total score ranges from 0 to 44, with higher scores indicating a greater likelihood of behavioural issues.

- The items are grouped into seven behavioural categories: conduct issues, habit disorders, temper tantrums, emotional disturbances, speech-related problems, social interaction difficulties, and the ability to concentrate and engage in play.

A **cut-off score of 12** was used to identify behavioural concerns. Children scoring below 12 were considered to have no behavioural problems, while those scoring 12 or above were classified as having behavioural issues.

HYPOTHESIS

H_1: There exists a statistically significant relationship between the behavioral problems of preschool children and their selected demographic variables at a 0.05 level of significance.

ETHICAL CONSIDERATION

1. Permission to conduct the study was also secured from the respective Anganwadi workers at each selected center.

2. Informed consent was obtained from the mothers of all participating children prior to data collection.

3. The confidentiality and anonymity of all participants were strictly maintained throughout the study

RESULTS

Key Findings Related to Demographic Characteristics:

The study revealed that the majority of the children (46%) were 3 years old, followed by 33.5% who were 4 years old. About 19.5% were aged 5 years, and only a small proportion (1%) were 6 years old. In terms of gender distribution, 53.5% of the participants were male, while 46.5% were female.

Regarding religious background, the majority (60%) belonged to the Hindu community, 37.5% were Sikh, and a small minority (2.5%) identified as Muslim. When categorized by family structure, 51% of the children came from nuclear families, and 49% belonged to joint families.

Looking at the number of children in the household, 45% of participants had two children in the family. About 19% had more than three children, 18.5% had three children, and 17.5% were from single-child families.

Sibling data indicated that 40.5% of the children had one sibling, 39.5% had no siblings, 12% had two siblings, and only 8% had more than two.

In terms of residence, a significant majority (71%) of the participants lived in urban areas, while 29% resided in rural locations.

When examining family income, most parents (76%) reported earning less than ₹10,000 per month. About 16% had a monthly income between ₹10,001 and ₹20,000, 6.5% earned between ₹20,001 and ₹30,000, and only 1.5% had an income of ₹30,000 or more per month.

Area of problem	Mean	Mean%	Rank
Temper tantrums	0.64	32.00	1
Capacity to concentrate and play	1.65	27.50	2
Emotional difficulties	1.76	17.55	3
Conduct problems	1.79	14.92	4
Social relationships	0.81	13.50	5
Language	0.31	7.75	6
Habits	0.13	3.13	7

Figure: Percentage-wise Distribution of Behavioral Issues Among Preschool Children

Key Findings on the Relationship Between Behavioural Problems and Demographic Variables

S.No	Demographic variable	Behavioral problem (yes)	Behavioral problem (no)	df	Chi square	P value
1	Age of child (in years)					
	a) 3	17	75			
	b) 4	15	52	3	1.546	0.672
	c) 5	9	30			
	d) 6	1	1			
2	Gender					
	a) Male	23	84	1	0.034	0.854
	b) Female	19	74			
3	Religion					
	a) Hindu	22	98			
	b) Muslim	1	4	2	1.366	0.505
	c) Sikh	19	56			
4	Type of family					
	a) Nuclear	20	82			
	b) Joint	22	76	1	0.243	0.622
5	Number of children in family					
	a) First	2	33			
	b) Second	19	71			
	c) Third	5	32	3	16.383	0.001*
	d) Above third	16	22			
6	Sibling order					
	a) First	14	65			
	b) Second	17	64			
	c) Third	6	18	3	1.757	0.624
	d) Above third	5	11			
7	Residence					
	a) Urban	25	117			
	b) Rural	17	41	1	3.401	0.065
8	Income					
	a) <10000	30	122			
	b) 10001-20000	9	23			
	c) 20001-30000	2	11	3	1.648	0.649
	d) >30000	1	2			

The relationship between behavioral problems and various demographic factors was analyzed. The findings indicated a significant association between behavioral problems and the number of children in the family ($p = 0.001^*$, $df = 3$), with significance at the 0.05 level. However, no significant correlations were observed between behavioral problems and other variables such as age, gender, religion, family type, birth order, place of residence, or family income.

DISCUSSION:

A study by Letícia M. et al. investigated the prevalence and factors related to behavioural problems in preschool children. The study involved 349 children aged between 49 and 72 months, selected through random sampling. Behavioural issues were assessed using a Behaviour Checklist to determine the frequency of problems. The overall prevalence of behavioural problems was reported as 23.5%, with internalizing problems at 9.7% and externalizing problems at 25.2%. These findings align closely with the present study, which found that 21% of the children exhibited behavioural problems.

Another study by Ji S. Hong et al. explored disruptive behaviours in pre-schoolers aged 3.0 to 5.1 years (n = 273) through caregiver interviews using the Preschool Age Psychiatric Assessment. The research identified temper loss, mild property destruction, and low-intensity deceitfulness or stealing as early signs of conduct disorder in preschool children and as predictors of conduct disorder in school-aged children. Consistently, the present study observed the highest mean percentage of behavioural issues in the domain of temper tantrums, accounting for 32%.

Casey A. Holtz et al. conducted research on the incidence of behavioural problems among toddlers and pre-schoolers from low-income families. The study included a diverse sample of 357 children aged five years and younger from urban, economically disadvantaged areas. Behavioural problems were assessed via parent-reported questionnaires tailored for low-income populations. Results showed that boys and younger children exhibited more externalizing behaviours compared to girls and older children. Similarly, the current study found a higher prevalence of behavioural problems among children from families with a monthly income below ₹10,000, highlighting the influence of economic factors on child behaviour.

IMPLICATIONS

Nursing Education:

- The study highlights the importance of short-term, in-service training programs for nurses and community health workers focused on health education about specific behavioural issues in children.
- Nursing curricula should include more comprehensive content and practical activities aimed at enhancing nurses' skills in identifying and managing behavioural problems.
- Nurse educators have a valuable role in training Anganwadi workers and mothers of preschool children about recognizing and addressing behavioural concerns.

Nursing Practice:

- Nursing professionals must adapt to the evolving needs of society and be skilled in identifying behavioural problems during the critical developmental stages of preschool children.
- Paediatric health nurses should provide essential community-based care and organize educational sessions to improve awareness and management of behavioural issues.
- Nurse educators can guide parents on emotional and behavioural health, enabling them to foster well-being, reduce risks, and promote healthy development in children.

Nursing Administration:

- In light of rapid technological advancements and expanding knowledge, nurse administrators should proactively encourage nurses to update their skills and provide counselling services related to behavioural problems.
- Nursing staff should take an active role in raising public awareness about behavioural issues and preventive strategies.
- Nurse administrators can facilitate in-service training programs focusing on behavioural problems within clinical settings.

Nursing Research:

- Research efforts should aim to explore the various types of behavioural problems affecting preschool children.
- Nursing research should also examine the outcomes and impacts of different behavioural issues on child development.
- Nurses are encouraged to investigate unresolved topics in behavioural health, undertake relevant studies, and publish findings to benefit preschool children's care and development.

RECOMMENDATIONS

- A comparative study could be conducted to examine behavioural problems between male and female children.
- Research can also compare behavioural issues among children from rural and urban communities, as well as between rural and urban schools.

ACKNOWLEDGMENT

I extend my gratitude to all the participants who willingly took part in this study.

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