A Study to Assess the Knowledge and Attitude Regarding Temper Tantrum in Children among Mother of Toddlers in Selected Village, at Kanpur, Uttar Pradesh

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ABSTRACT

Temper tantrums are a way a young child lets out strong emotions before he or she is able to express them in socially acceptable ways. The objectives of the study these studies are to assess the knowledge and attitude. To associate knowledge and attitude level with selected demographic variables and to find out correlation between knowledge and attitude among mother of toddlers. The research approach used was survey approach and research design was simple descriptive co relative research design. The population was mother of toddlers selected by convenient sampling technique. The sample size was 60 mothers. The study setting was Kurkuradev village at Kanpur. A structured knowledge questionnaire and a Likert scale was used to collect data regarding temper tantrum. The result of the study was moderate knowledge 40(66.67%) and 7(11.67%) adequate knowledge and inadequate knowledge 13(21.66%) regarding mother of toddlers. And the overall mean score and standard deviation of knowledge score regarding temper tantrum in children among mother of toddlers were mean 9.18 and standard deviation 3.27 respectively. Attitude scores regarding temper tantrum in children of mother of toddlers had positive attitude 35(58.34%) while only 25(41.64%) students had negative attitude level of mother of toddlers among temper tantrum in children. And the overall mean score and standard deviation of attitude regarding temper tantrum in children among mother of toddlers were mean 26.51 and standard deviation 6.30 respectively. The results concluded that there is a positive co relation between knowledge and attitude of mothers of toddlers regarding temper tantrums

Key words: Temper tantrum, toddlers.

Introduction

A temper tantrum is when a child has an unplanned outburst of anger and frustration. Tantrum can be physical, verbal or both. Usually, they are acting like this because they want or need something they cannot express with words [1]. Tantrums are often disproportionate to the circumstances. In other words, children react very strongly. For example, you might tell you child to put away a toy or turn down their treat request. They may lead to thrashing, yelling and hitting. A tantrum is a natural response, when someone or something blocks a child from learning particular independent or learning skill. At this time, the child may not possess the required skills or knowledge to express his or her disappointment, anger and frustration in any other manner.[2]

A temper tantrum is an explosion. It is a burst of adrenaline manifesting in red faces, clenched fists, loud ranting and sometimes physical aggression.[3]Temper tantrum may range from simple crying (for a long time) to screaming,

Kicking, beating, holding breath and rolling on the floor. Temper tantrum is very common among 1 year old to 3 years old. [4]Temper tantrums in children are very common especially when they are 2 years old. As children pick up important life skills, tantrums tend to decrease. The best way to deal with temper tantrum is to avoid it to happen in the first place. [5]

Children are more prone to show anger and temper from time to time. A temper tantrum is a sudden, on-the-spot and unplanned show of anger. It may be an act to get parent's attention. Alternatively, it could also be spontaneous and self-generated as a response to some internal or external stimuli. When the child displays an incidence of temper tantrum, he rosemary cry, yell, or swing their legs and hands wildly [6]. Temper tantrum could last anywhere from a few seconds to more than 5 minutes. It could be very wild or it could be serious. Temper tantrum is always more intense at the start and it may dissipate very slowly with the passage of time [7]

As the children grow older, they will learn practical ways to handle and manage very strong emotions that eventually lead to temper tantrums. If temper tantrums recur continuously over a period, then parents may need to consult a qualified

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physician to find out the reasons for temper tantrum. [8]

Research Problem

A study to assess the knowledge and attitude regarding temper tantrums in children among mothers of toddlers in selected village, at Kanpur, Uttar Pradesh.

Objectives of the study

- 1. To assess the knowledge regarding temper tantrum of toddler child's mother in selected village at Kanpur.
- 2. To assess the attitude regarding temper tantrum of toddler child's mother at selected villages in Kanpur.
- To find out the association of the knowledge and attitude with their selected demographic variable.

Hypothesis

H1: There is a significant association between level of knowledge and attitude of mother of toddler with their selected demographic variables.

H2: There is a positive correlation between the level of knowledge and attitude score regarding temper tantrum among mother of toddlers.

Methodology

Research approach: A quantitative, approach was used by the investigators to assess the knowledge and attitude regarding temper tantrum among mothers of toddlers.

Research design: In this Simple descriptive correlative research design was adopted for the study.

Setting of the study: In this research study the setting was conducted in kukuradev village at Kanpur.

Variables

Research variables: Knowledge and attitude regarding temper tantrum in children among mothers of toddlers

Demographic variables: In this study the Demographic variables are Age, Type of family, Educational Qualification of mothers of toddler, Source of health information, Monthly family income.

Population: The population for the present study was mothers of toddlers.

Target population: Target population comprised of Mothers of toddlers who are living in village at Kanpur.

Accessible population: Accessible population comprised of mothers of toddlers who are available

at the time of data collection in selected village at Kanpur.

Sample: In this study, the sample was mothers of toddlers in selected village that fulfilled the sampling criteria.

Sample size: The sample size of present study comprises of 60 Mothers of toddlers who fulfilled inclusion criteria.

Sampling techniques: In this research study, the samples were selected through convenient sampling technique

Sampling criteria

Inclusion criteria

Mothers of toddlers who-

- 1. Are available at the time of data collection.
- 2. Are willing to participate.

Exclusion criteria

Mothers of toddlers who-

- 1. Are not able to read and write.
- 2. Had attended the health talk on Prevention and management of temper tantrum.

Methods of data collection

The tool used for the study was self-structure knowledge questionnaire to assess the knowledge regarding temper tantrum in children's and Attitude levels regarding temper tantrum were assessed by Likert Scale were selected village at Kanpur.

Development and description of tool

Section A: It consists of Demographic variables such as Age, Type of family, Educational Qualification of mothers of toddler, source of health information, Monthly family income.

Section B: self structured knowledge questionnaire items pertaining regarding temper tantrum in children.

Section-C: Likert scale to assess the attitude about temper tantrum in children.

Results findings

Section-A

The major findings of present study were

- 1. Majority of the mothers of toddlers 35% were age group of 26-30 years.
- 2. Majority of the mothers of toddlers 56.64% belong to nuclear family.
- 3. The educational status of the mothers of toddlers 58.34% had intermediate education.
- 4. The family monthly incomes mothers of toddlers 41.66% had 5001-10,000 Rs/.
- 5. The majority of mother of toddlers based on their source of health information was and all of the above 88.33%.

Section-B

Table No.1: Frequency and percentage wise distribution of level of knowledge on Temper tantrum in children. N=60

Serial No.	Level of knowledge	Freque ncy	Percentag e (%)
1	Inadequate knowledge	13	21.66
2	Moderate Knowledge	40	66.67
3	Adequate Knowledge	0	11.67

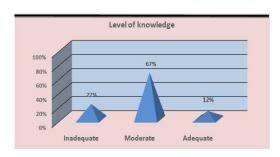


Figure No 1: Pyramid Graph showing percentage wise distribution of level of knowledge among mother of toddlers.

Table no.2: Frequency and percentage wise distribution of level of attitude on temper tantrum in children among mother of toddlers. N=60

Serial No.	Level of Attitude	Frequen cy	Percenta ge (%)
1.	Positive attitude	35	58.34
2.	Negative attitude	25	41.64

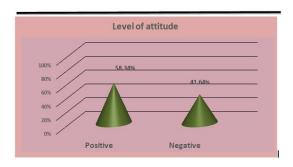


Figure no.2: cone graph showing percentage wise distribution of level of attitude among mother of toddler.

Section-C

Table no 3: Association between the demographic variables and knowledge score of mother of toddlers regarding temper tantrum in children. N=60

S. No.	Demographic variable	k	Knowled	ge	Calculated value	DF	Tab Value	Inference
		IA	MA	Ad				
1)	Age							
A)	21-25 Years	4	9	2	$X^2=5.236$	6	12.592	NS
B)	26-30 Years	6	14	1				
C)	31-35 Years	3	13	4				
D)	36 and above	0	4	0				
2)		Type of family						
A)	Joint family	6	16	4	$X^2=0.767$	3	7.815	NS
B)	Nuclear family	7	24	3				
3)			Ed	ucation	nal status	'	,	
A)	High school	3	5	1	X ² =4.512	6	12.592	NS
B)	Intermediate	5	27	3				
C)	Graduate	5	8	3				
D)	Post graduate	0	0	0				
4)	Monthly family income							
A)	<5000 Rs/-	2	5	1	X ² =6.657	6	12.592	NS
B)	5000-10000 Rs/-	9	14	2				
C)	10001-15,000 Rs/-	1	7	1				

D)	>15001 Rs/-	1	14	3				
5)	Source of health information							
A)	Mass media	0	2	0	$X^2=2.765$	6	12.592	NS
B)	Family/friends	0	0	0				
C)	Health workers	0	4	1				
D)	All of the above	13	34	6				

NS= Non significant, S= Significant, d.f- Degree of freedom.

Table no. 3The above table shows that there is no significant association between knowledge score and selected demographic variables like age, type of family, educational status, and monthly family income source of health information.

Table no.4: Association between the demographic variables and Attitude score of mothers of toddlers regarding temper tantrum in children. N=60

S. No.	Demographic variable	Positive	Negative	Cal. Value	DF	Tab Value	Inference
1	Age						
A)	21-25 years	10	5	$X^2=0.868$	3	7.815	NS
B)	26-30 years	11	10				
C)	31-35 years	12	8				
D)	36 and above	2	2				
2	Type of family						
A)	Joint family	16	10	$X^2 = 0.624$	1	3.841	NS
B)	Nuclear family	19	15				
3	Educational status						
A)	High school	5	4	$X^2 = 0.781$	3	7.815	NS
B)	Intermediate	22	13				
C)	Graduate	8	8				
D)	Post graduate	0	0				
4			Monthly fam	ily income			
A)	<5000 Rs/-	4	4	$X^2 = 9.683$	3	7.815	S
B)	5000-10000 Rs/-	15	10				
C)	10001-15000 Rs/-	7	2				
D)	15001 Rs/-	9	9				
5	Source of health information						
A)	Mass media	0	2	$X^2=2.893$	3	3.815	NS
B)	Family/ Friends	0	0			-	
C)	Health workers	3	2				
D)	All of the above	32	21				

NS = NOT SIGNIFICANT, S = SIGNIFICANT (level of significant p =0.05)

The above shows that there is significant association between attitude score and selected demographic variable monthly family income and H1 was accepted

Section-D

Correlation between the knowledge and attitude score

Table no 5: Correlate the level of knowledge and attitude regarding temper tantrum among mother of toddlers.

	'r' value	Correction
Correlation between levels of Knowledge	1	Positive
and attitude		

r = Karl Pearson correlation coefficient.

Coefficient of correlation analysis between knowledge and attitude show Positive Correlation among knowledge and attitude scores. It seems that then when knowledge increase the attitude also improves. So H2 was accepted.

Recommendation

On the basis of finding, it is recommended that-

- The similar study may be replicated on large sample.
- An Experimental study can be conducted to improve knowledge and attitude mothers.
- A similar study can be repeated in other hospital and colleges and community areas.

Conclusion

The present study concluded that there is a positive correlation between knowledge score and attitude score of the mothers of toddlers .This points out that when knowledge level increases attitude will also become positive regarding temper tantrums.

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