Effect of Nursing Intervention on the Knowledge and Short-Term Utilization of Quality Time Activity by Parents of Children with Behavioral Problems

Padmavathi Nagarajan*
Assistant Professor, College of Nursing, JIPMER, India

Received: December 12, 2017; Published: December 18, 2017

*Corresponding author: Padmavathi Nagarajan, Assistant Professor, College of Nursing, JIPMER (Jawaharlal Institute of Post-graduate Medical Education and Research), Pondicherry-605 006, India; Email: padmavathi2002@gmail.com

Abstract

Background: Children are the most precious possession of mankind. They should be nurtured with the utmost care and affection. In India, children constitute about 40% of the total population. Behaviour disorders are one of the most common childhood disorders, which can hinder the normal development of children.

Objective: The study aimed to assess the knowledge on quality time activity of parents and to evaluate the effectiveness of nursing interventional programme.

Methods: ‘Quasi experimental, one group pre-test and post-test design’ was adopted. Sample consisted of 30 parents of children diagnosed with behavioural problems admitted in child psychiatry center. Purposive sampling was done to recruit the subjects based on inclusion criteria. Quality time assessment questionnaire was used to assess the knowledge on quality time. An educational module was administered and parents were encouraged to engage in various types of quality time activities.

Results: There was statistically significant increase in the knowledge (p<0.01) and in the quality time activities (p<0.01) following nursing intervention program.

Introduction

Children are the most precious possession of mankind. They should be nurtured with the utmost care and affection. The greatest gift that parents can give to their children is a sense of personal worth. The self-esteem of a child should be more valuable to a parent than achievements in studies, sports or any other field [1]. Behavioural disorders among children are universal and recent studies indicate the higher prevalence rate. The prevalence of behavioural problems in the western literature has been reported to vary between 5-10% [2]. The prevalence of behavioural problems in India has been explored by different authors -36% by Bassa, 9% by Chacko, 10.6% by Raju 4.6% by Singh and Gupta 1970 [3]. Sarita, Bhargava et al. [4] From Ajmer reported 38.1%, Bhatia et al. [5] from Delhi reported 20% and Indira Gupta et al. from Ludhiana reported 36.5%.

The home today is smaller. The housewives have entered career in order to supplement the family income. The flat system in the cities confines the child within four walls and offers little chance to have companionship and peer groups. Because children have fewer people to share their experiences, parents must work harder to make the home a place where there is a fun, activity and a variety of things to do together. In India, children constitute about 40% of the total population. Behaviour disorders are one of the most common childhood disorders, which can hinder the normal development of children. The present study aimed to find out the effectiveness of a nursing intervention on the knowledge and short-term utilization of quality time activity by parents of children with behavioural problems.

Methodology

‘Quasi experimental, one group pre-test and post-test design’ was adopted. In this design, a single test group was selected and knowledge and utilization of quality time activities were measured before the introduction of intervention. Teaching program on quality time activities was then introduced in four sessions and the effectiveness was measured. The differences due to the application of the experimental program were then determined by comparing the pre-test and post-test scores. Sample consisted of parents of children with behavioural problems between the age group of 4-15 years admitted in child psychiatry center. Either father or mother...
or both staying with children at the time of conducting study were chosen as sample. Purposive sampling was used to select subjects on the basis of inclusion criteria. Participants signed the written informed consent after being explained about the risks and benefits of the study. Privacy was provided and confidentiality was maintained throughout the study.

**Description of Research Tools**

a) Socio-demographic and clinical profile

b) Quality Time assessment questionnaire which was prepared for the study to assess the knowledge on quality time activity of parents

c) A recording sheet on Quality time activities to record the interactional activities of parents and children

**Quality-Time Assessment Questionnaire:**

This questionnaire consisted of 44 items divided into 3 sections to assess the knowledge and quality time activity by parents with their children. Section A consisted of 11 explorative questions on which information was collected from the parents regarding quality time. Section B consisted of nine statements to assess the knowledge of parents on quality time activity. Section C consisted of twenty-four statements of activities that normally parents do with their child.

**Description of Nursing Intervention**

Each parent had four sessions of educational program on alternate days and each session lasted for one hour. In addition to that, the researcher observed parent-child interaction and collected data of scores is shown in Table 1.

**Table 1: Comparison of pre and post test scores variables domain wise.**

<table>
<thead>
<tr>
<th>Serial no.</th>
<th>Domains</th>
<th>Pre-test score</th>
<th>Post-test score</th>
<th>“t” value</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Mean ± SD</td>
<td>Mean ± SD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Knowledge</td>
<td>22.3 ± 2.7</td>
<td>25.9 ± 1.3</td>
<td>-8.115</td>
<td>0.000*</td>
</tr>
<tr>
<td>2</td>
<td>Activity</td>
<td>27.5 ± 5.2</td>
<td>33.8 ± 3.8</td>
<td>-5.972</td>
<td>0.000*</td>
</tr>
<tr>
<td>3</td>
<td>Enjoyment</td>
<td>16.5 ± 5.7</td>
<td>22.1 ± 3.9</td>
<td>-5.117</td>
<td>0.000*</td>
</tr>
<tr>
<td>4</td>
<td>Difficulty</td>
<td>8.6 ± 4.5</td>
<td>5.6 ± 3.8</td>
<td>3.48</td>
<td>0.002*</td>
</tr>
<tr>
<td>Total score</td>
<td></td>
<td>75.0 ± 12</td>
<td>87.4 ± 8.1</td>
<td>-5.836</td>
<td>Total score</td>
</tr>
</tbody>
</table>

**Discussion**

The present study was an attempt to find out the effectiveness of nursing intervention on the knowledge and short term utilization of quality time activities by parents of children with behavioural problems and to develop a package on quality time activities. In India, this study is the initial study on quality time. The following is the summary of similar studies conducted in this area and the findings are given below; Bryant & Zick [6] found that dinner conversation were important for the child’s development. In their study, mothers spent 44 minutes per day sharing household work with their children and father spent about 34 minutes. Bradley and Caldwell [7] emphasized the parents’ socio-emotional investment in children. They suggested that the quality of parent’s socio-emotional investment should manifest in the amount of joy, expressions of affection toward a child, sensitivity to the child’s needs and responsiveness to those needs, and consistent choices on the parent’s part to act in the best interest of the child.

Marsiglio [8] found that paternal engagement activities, which is time spent in one-to-one interaction with a child in involving activities such as private talks, playing together influenced the quality of father child interaction. Cooksey & Fondell [9] examined the frequency with which parents spent time with their children in general. Fathers were asked, how often do you spend time with the children in the following activities

a) Leisure activities away from home

b) At home working on a project or playing together

c) Having private talks

d) Helping with reading or homework.
Results indicated that the fathers eat just over half of their breakfasts and dinners with their children, several times per month had leisure activities but fewer activities at home. The desired outcome of the study was achieved by combination of factors such as availability of parents in the ward and parents were free from their household/office work. Routine activities carried out in the in-patient unit such as recreational activities, permission for weekend outings and the picnics arranged by the multidisciplinary team also promoted the positive parent-child interaction. Physical facilities like play area and the pleasant atmosphere of the child psychiatry centre also enhanced the quality of parent-child interaction [10].

**Conclusion**

Behaviour disorders of children are one of the most common childhood disorders which affect the mental health development of children. The present study has scientifically proved that planned structured teaching with the parents of children with behavioural disorders increases their knowledge about quality time and quality time activities. Nurses have ample opportunities to extend the health teaching services to the parents to improve their knowledge on various issues related to mental health promotion.

**Acknowledgement**

I would like to thank Dr. K Lalitha and Dr. Shoba Srinath (NIMHANS) for their guidance in conducting the study.

**References**