

ORIGINAL RESEARCH PAPER

Management

ANGER CONTROL PROGRAMME ON EMOTIONAL AND BEHAVIOURAL PROBLEMS IN CHILDREN

KEY WORDS: Emotional and behavioral problems anger, dimensions of anger reaction.

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Aim: The aim of the study is to assess the effectiveness of anger control programme on emotional and behavioral problems in school children.

Methods: This study was conducted in a school. An evaluative research approach using pre intervention test and post intervention test was adopted in this study

Results: The findings of the study revealed that there was statistically significant difference between the post test scores of the level of anger in experimental and control group sine calculated t value (t=5.12)is greater than the table value (t58=2.002) at 0.05 level of significance.

Conclusion: The benefits of undergoing anger management sessions results in successful reduction in anger and violent outbursts amongst children.

INTRODUCTION

ABSTRACT

Providing children with an enhancement that demonstrate love, compassion trust, understanding will greatly impact a child So that they can build on these stepping stones to have productive lifestyles. Anger is an emotion varies in its intensity that is from mild irritation to fury and rage. A large group of young people suffer from various emotional and behavioral problems. Studies indicate that 17% to 22% of youth under the age of 18 suffer from emotional and behavioural problems. Between 11 million to 14 million children are at risk for emotional impairment. A majority of these children have difficulty in handling anger and act out in violence and intolerance. Some suppress the anger while the other expresses it violently. The suppression of anger causes mental disorder like depression, anxiety disorder and violent expression leading to crime and anti-social behavior. Effects of uncontrolled anger can cause many of the same problems linked to uncontrolled stress, including a depressed immune system, high blood pressure, chronic fatigue and irritable bowel syndrome and lead to asthma related issues. The benefits of undergoing anger management training helps in the successful reduction in anger.

AIM

The aim of our study is to find out the effectiveness of anger control in children in changing their emotional and behavioral problems.

MATERIALS AND METHODS

This study was conducted in a school. An evaluative research approach using pre intervention test and post intervention test was adopted in this study. In this study Quasi experimental pre test post test control group design was adopted to assess the effectiveness of ACP on emotional and behavioral problems in children from different divisions from two different floors were selected for experimental and control group. They were similar in all aspects including their settings and functioning. In this study target population were the children between 8-12 years old school going children. Sample size (n) was 60 (30= experimental, 30=control group)

In this study data collection instrument used are

- Baseline perform of the children
- Modified pediatric symptoms checklist
- Anger assessment

RESULTS:

30 children in the group most of them (40%) were within 8-10, 6 (20%) were between 10-11yrs.8-10 of them 11-12 years. In control group 13 (43%) were between 10-11years 11 (37%) of them were between 8-10 years and 6 (20%) were within the age group of 11-12 years. In the experimental group there was equal Number of male and female. 15 (50%) each in the control group

20 (67%) female and 10 (33%) male. The experimental group had 17 (57%) nuclear and 13 (43%) children from joint families.

Table: (1) Comparison of pre test and post test of emotional/ behavioral problems scores of children in experiments and control groups

Level of Behavioral/ emotional problems												
Pre test						Post test						
	Mean	Mea	t-	Df	(p-	Mean	Mea	t-	df	(p-		
	&	n %	Valu		valu	&	n %	Valu		valu		
	SD		е		e)	SD		е		e)		
Exp.	37.7	53.9	0.19	58	0.84	28.5	40.8	8.05	58	0.00		
Group	±5		8		4	± 4.2		2		01*		
Control	37.5	53.6				37.9	54.1					
group	±4					±4.8						

Tables reveals that the mean percentage of post test level emotional and behavioral problems in children in experimental group was found to be 40.8%. which is significantly lower than the pre test score 53.9%. It is very clear from the results that the mean level of emotional and behavioral score has decreased from pre test 37.7+5 SD to post test 28.5+4SD. The mean percentage post test level of emotional/ behavioral problems of children in the experimental group (28.5+42SD) was lower than that of mean post test level of emotional and behavioral problems of children in the control group (37.9+4.8SD)

Table2. Comparison of pre test and post test level of anger in experimental and control group.

	Level of Anger										
		Post test									
	Mean	Mean	t-	Df	(p-	Mean	Mea	t-	df	(p-	
	&	%	Valu		val	&	n %	Val		valu	
	SD		е		ue)	SD		ue		e)	
Exp. Group $n^1 = 30$	30.7 ± 9.5	54.9	2.08	58	0.0 52	23.9 ±7.2	42.7	5.9 12	58	0.00 02*	
Control group $n^2 = 30$	35.7 ±9.6	63.8				36.5 ±9.2	65.2				

CONCLUSION

There is significant differences between the mean post test level of anger in experimental and control group. ACP is effective on emotional and behavioural problems of children in experimental group. There is no significant association of any of the baseline variables with mean post test level of emotional and behavioural problems in children in experimental groups at P<0.05. There is association between baseline variables such as birth in order in

the experimental group and type of residents in the control group with mean post test level of anger in children at p<0.05 rest of the variables such as age , gender, education, type of family, parents occupation, family income are not significant.

REFERENCES

- Kids' mental health. Children's mental health is without a doubt the most important aspect of any child's social and cognitive development, available
- fromhtt://www.kidsmentalhealth.org. Accessed on 2-07-2017. Townsend M.C. Psychiatric Mental Health Nursing, 7th edition. Jaypee brother's 2. medical publishers (P) Ltd. 2012.
- Boyed AM. Psychiatric Nursing-contemporary practice. 4th edition: New york, Lippincot Williams and Wilkins publication. 2008. 3.
- Armbuster MA, Sukholdosky DG, Michalsen RN. Impact of managed care and treatment process and outcome in the child and outpatient clinic. Honolulu. Paper presented at the 48th annual meeting of the American Academy of Child and Adolescent Psychiatry, 2001
- Sailaxmi Gandhi Reddemma k. Concentration enhancement for hyperactive children. Nightingale Nursing Times 2005. 5.
- Femiano AC. Developing and evaluating and anger management intervention for boys: What does gender have to do with it? Boston College, Dissertations and Theses. Jan 2008.
- 7. Emotional and behavioural disorders. Available on en.m.wikipedia.org. Accessed on 12/07/2017.
- Stiffler K L. Adolescent and anger. An investigation of anger. Pennsylvania.2008; 5(2): 12-13. Available on https://dspace.iup.edu/bitstream. Accessed on 3/7/2017. 8.
- Anger management, Wikipedia, the free encyclopedia, main page content. Found on http://en.wikipedia.org/wiki/Anger_management. Accessed on 3/7/2017.

 10. Help your child understand and master anger. Scolastic.com. Accessed on 9.
- 3/07/2017.

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