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"A Study to Assess the Risk Factors of Body Focused Repetitive Behavior Disorder Among School Going Children At Selected Area, Puducherry

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I. INTRODUCTION

"Children are not focus. They have problems .Focus on helping the child, not fixing your" - L. R. K. nost

Body-focused repetitive behavior disorders are a group of disorders characterized by repetitive actions that include skin picking, hair pulling, nail biting, and other compulsions. These disorders can range from a common habit to a pathological disorder, that negatively impacts the psychiatric health and social well-being of an individual. Diagnosis can be made clinically, and monitored using different scales and assessments. Various treatments have been tried with differing successes. There are currently no first line curative medications for these disorders, but cognitivebehavioral therapy has seen the most success in treatment. Specifically habit reversal therapy has shown the most promise in reducing the repetitive behaviors and symptoms seen in these disorders. Habit reversal therapy has also seen success through augmentation with additional therapies such as mindfulness, or treatment with a selective serotonin reuptake inhibitor in a patient with comorbid obsessive compulsive disorder. This paper aims to explore the efficacy of different treatment modalities specifically the effectiveness and approach of habit reversal therapy.

II.REVIEW OF LITERATURE

Smitha Bhandari(2017) Was conducted a study on Body focused repetitive behaviors are intense urges like biting, picking, and pulling that can cause damage. Asmanyas1 in 20 people have a BFRB, but they can be dismissed as "bad habits."While BFRBs share some symptoms with obsessive-compulsive disorder(OCD),they're not the same. They real so different from self-harming rituals, like cutting yourself. Experts are still trying to figure this out, but they know your genes are involved. If someone in your family has a BFRB, you're more likely to have one, too. Other things that might play a role include your personality, the amount of stress in your life, your childhood, and even the age you first started showing signs of a BFRB.

STATEMENT OF PROBLEM

A study to assess the risk factors of body focused repetitive behavior disorder among school going children at selected area ,Puducherry**.**

OBJECTIVES OF STUDY

- 1) To assessthe risk factors of body focused repetitive behavior disorder among school going children.
- 2) To associate the risk factors of body focused repetitive behavior disorder among school going children with their selected demographic variables.

ASSUMPTION

It refers two school going children may have some risk for developing body focused repetitive disorder due to academic performance.

III. MATERIALS AND METHODS

The research approach used for this study was quantitative research approach. A descriptive research design was used to assess the risk factors of body focused repetitive behavior disorder among school going children atbharathadevienglish high school at madagadipet at Puducherry. By using convenience sampling technique 30 sample was selected for the present study. The period of data collection was two week. The tool consists of demographic data,standard risk factors of body focused repetitive behavior disorder index. The

outcome of the study was evaluated by using descriptive and inferential statistics.

DESCRIPTIONOFTOOL:

- **Section A:**Description of the demographic variables amongschool going children.
- **Section B:** Assessment of the level of risk factors of Body focused repetitive behavior disorder among school going children at selected area Puducherry.

- **SCORING INTERPRETATION**:

SCORING	INTERPRETATION
1-5	Very low level of risk factors
6-10	Low level of risk factors
11-15	High level of risk factors
16-20	Very high level of risk factors

RESEARCH APPROACH:
A quantitative research approach was adapted for this present study.
RESEARCH DESIGN:
A descriptive research design was adapted for this study.

SETTING OF THE STUDY:
The study was conducted in Bharatha Devi English High School madagadipet , Puducherry.
SAMPLE:
children with risk factors of body focused repetitive behavior disorder in Bharatha Devi English High school madagadipet, at puducherry.
SAMPLING TECHNIQUE:
A convenient sampling technique was used for the study.
SAMPLE SIZE:
The sample size was 30 School going children.
SAMPLE SELECTION CRITERIA:
Inclusion criteria:
Both Male and female children.
Children with the age group (12-13) years.
Exclusion criteria:
Children's who have been sick during the study period.
Children's who are not available during the data collection.

IV. RESULTS:

Table1:-Frequency and percentage wise distribution of demographic variables amongschool going children.

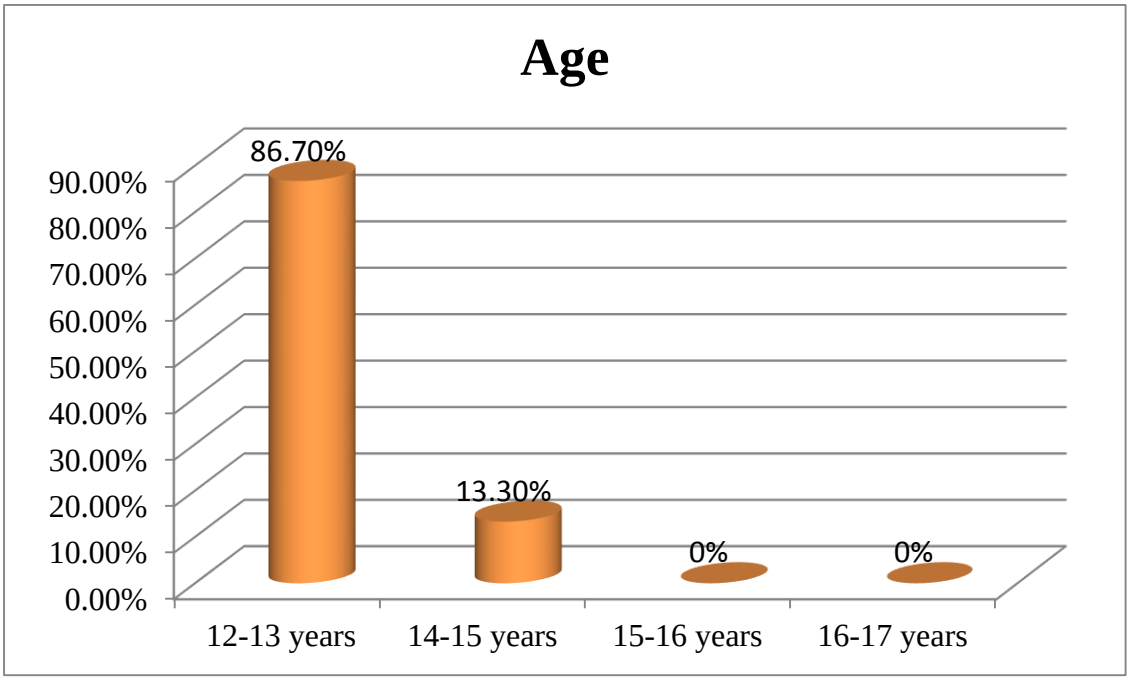
SL. NO	DEMOGRAPHIC VARIABLES	FREQUENCY (N)	PERCENTAGE (%)
1	**Age**		
	a) 12-13 years	26	86.7
	b) 14-15 years	4	13.3
	c) 15-16 years	0	0
	d) 16-17 years	0	0
2	**Gender**		
	a) Male	11	36.7
	b) Female	19	63.3
3	**Religion**		
	a) Hindu	29	96.7
	b) Muslim	1	3.3

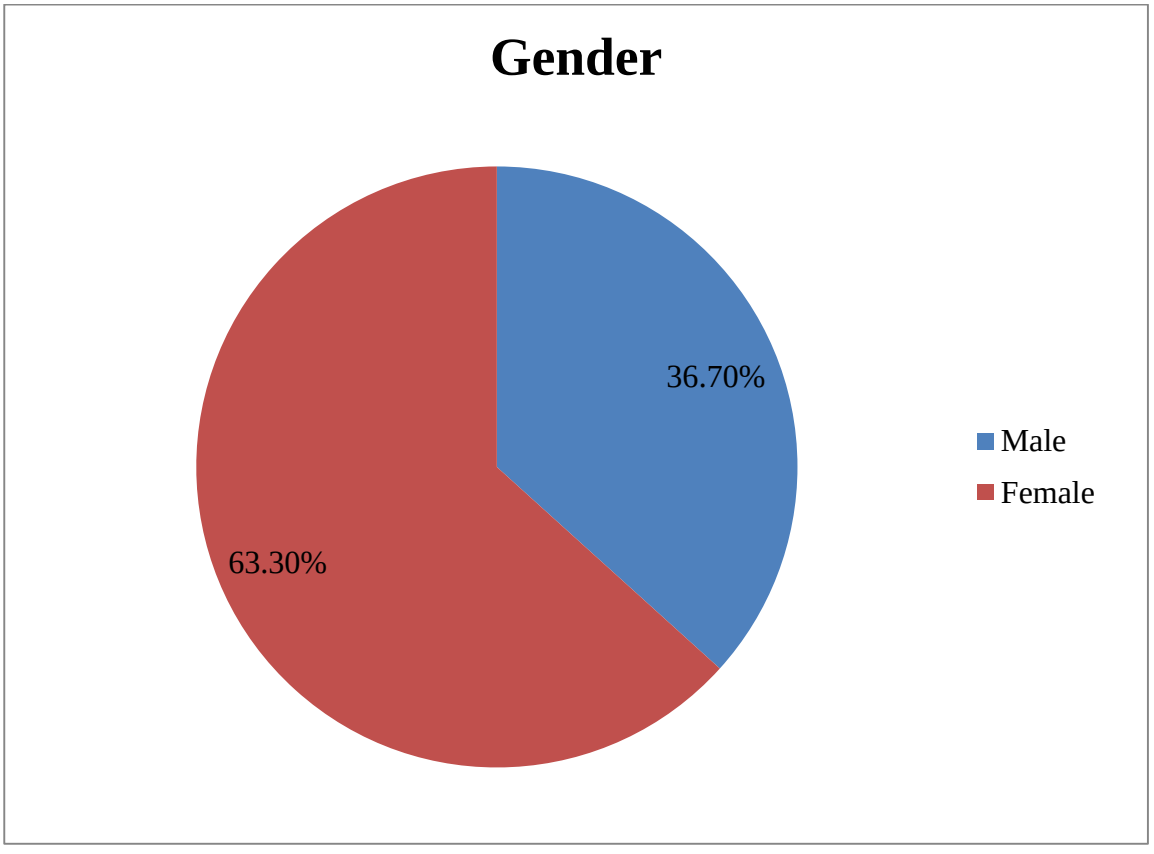
	c) Christian	0	0
	d) Others	0	0
4	**Residency**		
	a)Urban	15	50
	b)Rural	15	50
5	**Type of family**		
	a) Nuclear Family	14	46.7
	b) Joint family	16	53.3
6	**No. of Family Members**		
	a) 3 members	1	3.3
	b) 4 members	16	53.3
	c) 5 members	5	16.7
	d) above 5 member	8	26.7
7	**Income of the family**		
	a) Below Rs. 8,000 month	8	26.7
	b) Rs.5000, -10,000 month	8	26.7
	c) Above 10,000 month	14	46.6
8	**Dietary pattern**		
	a) vegetarian	0	0
	b) Non-vegetarian	2	6.7
	c) Both veg and non-veg	28	93.3
9	**Occupation of Father**		
	a) Government	5	16.7
	b) Private	17	56.6
	c) cooli	3	10
	d) Others (specify)	5	16.7
10	**Birth order**		
	a) 1	8	26.7
	b) 2	14	46.7
	c) 3	0	0
	d) Above the above	8	26.7
11	**Source of information**		
	a) Radio	1	3.3
	b) TV	15	50
	c) Newspaper	0	0
	d) All the above	14	46.7

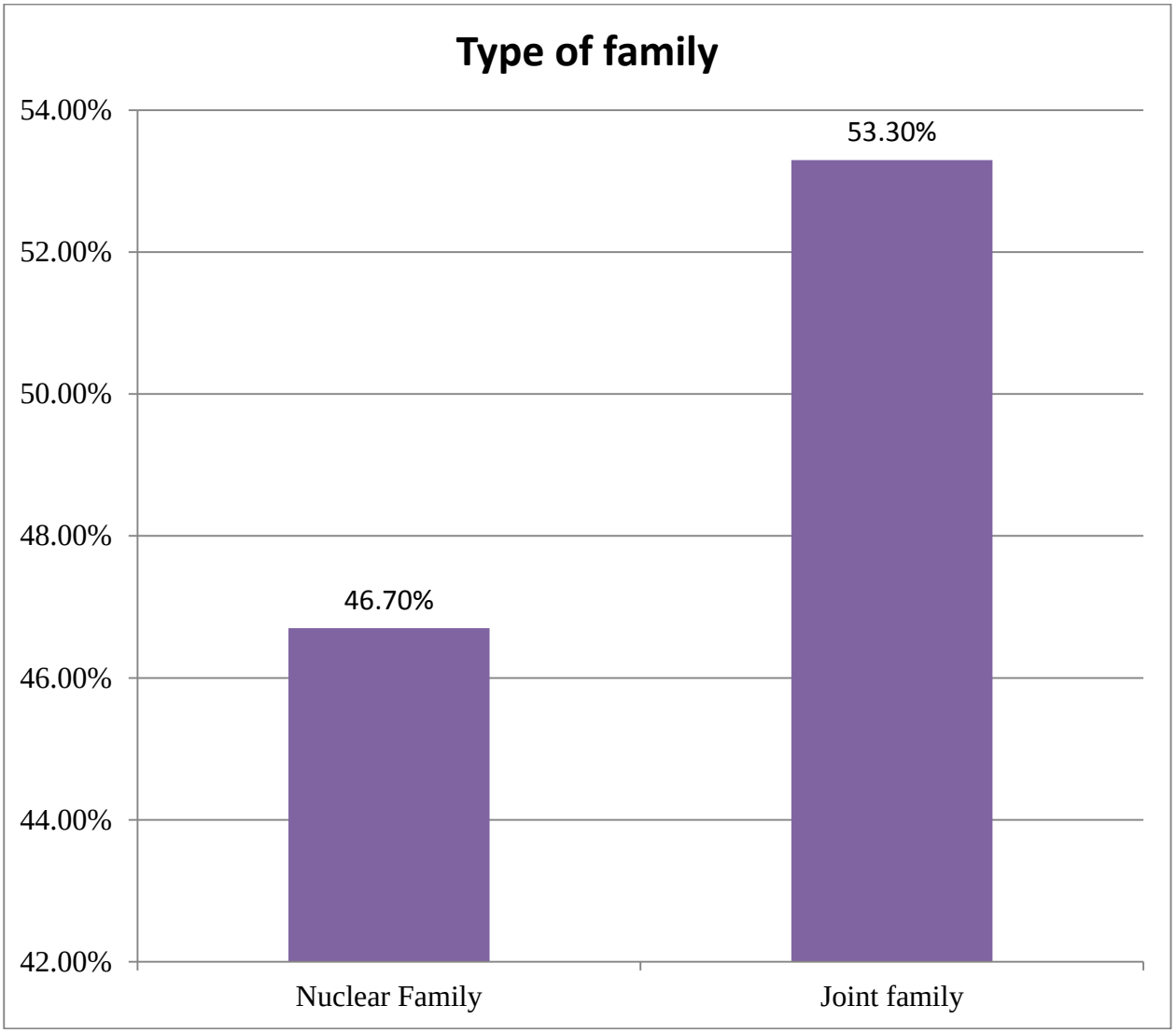
Table 1 shows frequency and Percentage wise distribution of demographic variables among children.
Out of the 30 children who were interviewed, Majority of the children26(86.7%) of study population were in the age group are 12-13 years. Majority of thechildren were female 19(63.3%). Majority of the children were Hindu 29(96.7%). Majority of the children were urban and Rural 15(50%). Majority of the childrenwere Joint family16(53.3%). Number of Family Members was 4 members 16(53.3%).

Majority of the children,family income were Above 10,000 month 14(46.6%). Majority of the children were both veg and non-veg 28(93.3%). Majority of the children, Occupation of Father were Private17(56.6%). Majority of the children, 14(46.7%) Birth orders were 2. Majority of the children, of information were TV

15(50%).


Age
86.70%
13.30%
0%
0%
90.00%
80.00%
70.00%
60.00%
50.00%
40.00%
30.00%
20.00%
10.00%
0.00%
12-13 years
14-15 years
15-16 years
16-17 years


Gender
36.70%
63.30%
Male
Female


Type of family
54.00%
52.00%
50.00%
48.00%
46.00%
44.00%
42.00%
46.70%
53.30%
Nuclear Family
Joint family

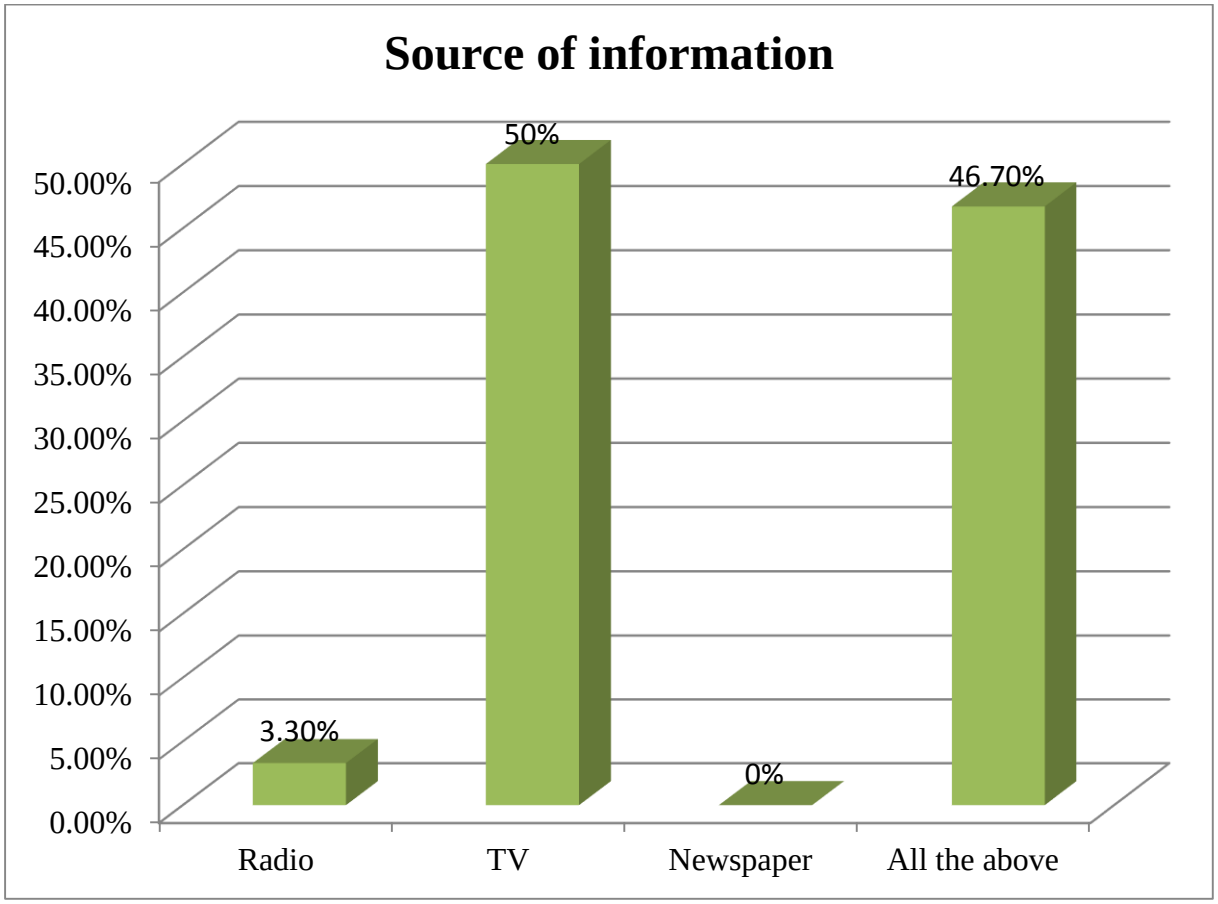


Table 2:-Frequency and percentage wise distribution oflevel of risk factors of Body focused repetitive behavior disorder among school going children at selected area Puducherry.

(N = 30)

LEVEL OF RISK FACTORS	FREQUENCY (n)	PERCENTAGE (%)
VERY LOW	13	43.3
LOW	10	33.3
HIGH	4	13.4
VERY HIGH	3	10
Total	30	100
Mean±Standard deviation	7.17±4.42	

Table –2 shows frequency and percentage wise distribution oflevel of risk factors of Body focused repetitive behavior disorder among school going children at selected area Puducherry. Majority of the children 13(43.3%) had very lowlevel of risk factors, 10(33.3%) had low,4(13.4%) had high and 3(10%) had very highlevel of risk factors. The mean and standard deviation of level of risk factors of Body focused repetitive behavior disorder among school going children at selected area Puducherry is (7.17±4.42)respectively.

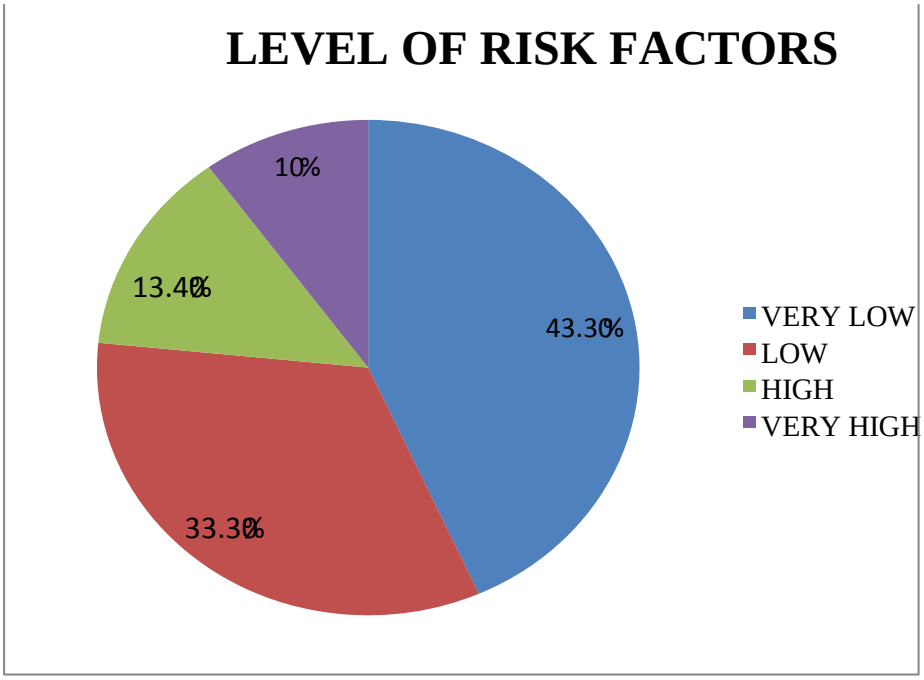


Table –3: Association betweenthe level of risk factors of Body focused repetitive behavior disorder among school going children at selected areawith their selected demographic variables.

				LEVEL OF RISK FACTORS						Chi-square
SL.	**DEMOGRAPHIC**	**VERY LOW**		**LOW**		**HIGH**		**VERY HIGH**		**X^2 and P-**
NO	**VARIABLES**	**N**	**%**	**N**	**%**	**N**	**%**	**N**	**%**	**Value**
1	**Age**									
	a) 12-13 years	12	92.3	8	80	4	100	2	66.7	X^2=2.39
	b) 14-15 years	1	7.7	2	20	0	0	1	33.3	Df=3 p =0.494
	c) 15-16 years	0	0	0	0	0	0	0	0	NS
	d) 16-17 years	0	0	0	0	0	0	0	0	
2	**Gender**									**X^2=8.89**
	a) Male	7	53.8	2	20	2	50	0	0	**Df=3 p =0.012**
	b) Female	6	46.2	8	80	2	50	3	100	***S**
3	**Religion**									
	a) Hindu	12	92.3	10	100	4	100	3	100	X^2=1.35
	b) Muslim	1	7.7	0	0	0	0	0	0	Df=3 p =0.717
	c) Christian	0	0	0	0	0	0	0	0	NS
	d) Others	0	0	0	0	0	0	0	0	
4	**Residency**									X^2=0.801
	a)Urban	6	46.2	6	60	2	50	1	33.3	Df=3 p =0.847
	b)Rural	7	53.8	4	40	2	50	2	66.7	NS
5	**Type of family**									**X^2=7.41**
	a) Nuclear Family	9	69.2	3	30	2	50	0	0	**Df=3 p =0.043**
	b) Joint family	4	30.8	7	70	2	50	3	100	***S**

6	**No. of Family Members**									
	a) 3 members	0	0	1	10	0	0	0	0	X^2=9.13
	b) 4 members	9	69.2	5	50	1	25	1	33.3	Df=9 p =0.425
	c) 5 members	3	23.1	1	10	1	25	0	0	NS
	d) above 5 member	1	7.7	3	30	2	50	2	66.7	
7	**Income of the family**									
	a) Below Rs. 8,000 month	2	15.4	3	30	3	75	0	0	X^2=9.73
	b) Rs.5000, -10,000 month	4	30.8	2	20	1	25	1	33.3	Df=9 p =0.372
	c) After 10,000 month	7	53.8	5	50	0	0	2	66.7	NS
8	**Dietary pattern**									
	a) vegetarian	0	0	0	0	0	0	0	0	X^2=0.701
	b) Non-vegetarian	1	7.7	1	10	0	0	0	0	Df=3 p =0.873
	c) Both veg and non-veg	12	92.3	9	90	4	100	3	100	NS
9	**Occupation of Father**									
	a) Government	1	7.7	3	30	0	0	1	33.3	X^2=6.755
	b) Private	9	69.2	4	40	3	75	1	33.3	Df=9 p =0.663
	c) cooli	1	7.7	1	10	1	25	0	0	NS
	d) Others (specify)	2	15.4	2	20	0	0	1	33.3	
10	**Birth order**									
	a) 1	4	30.8	3	30	0	0	1	33.3	X^2=3.58
	b) 2	5	38.5	5	50	2	50	2	66.7	Df=6 p =0.733
	c) 3	0	0	0	0	0	0	0	0	NS
	d) Above the above	4	30.8	2	20	2	50	0	0	

-p < 0.05 significant,*-p < 0.001highly significant,NS-Non significant

table 3 depicts that the demographic variable, **Gender, Type of family and Sourceof Information** had shown statistically significant association between the level of riskfactors of Body focused repetitive behavior disorder among school going children at selected area with their selected demographic variables.

The other demographic variable had not shown statistically significant association Between the level of risk factors of Body focused repetitive behavior disorder among school going children at selected area with their selected demographic variables respectively.

V. CONCLUSION AND RECOMMENDATIONS:

A descriptive study to assess the risk factors of body focused repetitive behavior disorder among school going children at bharathadevi english high school at madagadipet at Puducherry. The findings of the study revealed that Out of 30 samples, Majority of the children 13(43.3%) had very low level of risk factors, 10(33.3%) had low, 4(13.4%) had high and 3(10%) had very high level of risk factors. The mean and standard deviation of level of risk factors of Body focused repetitive behavior disorder among school going children at selected area Puducherry is (7.17$\pm$4.42) respectively.

NURSING IMPLICATIONS:

The study has implicated for nursing practice, nursing education, nursing administration and nursing research.

NURSING PRACTICE:

This study emphasis in improving the knowledge regarding risk factors of body focused repetitive behavior disorder through educative measures. More knowledge regarding risk factors of body focused repetitive behavior disorder will help for early identification of the children with risk factors of body focused repetitive behavior disorder. Visual information can also provide with slide show which will help the client to increase the knowledge regarding risk factors of body focused repetitive behavior disorder among school going children. Nurses' active participation in school health programmes by providing direct and indirect care helps to achieve the goals of health services. School going children deficit in knowledge regarding risk factors of body focused repetitive behavior disorder indicate the needs for arranging health education session in related topics.

NURSING EDUCATION:

Nurse educator should emphasize more on preparing students to impact health information to the public regarding risk factors of body focused repetitive behavior disorder. The study has clearly proved that video teaching programme was effective in improving the knowledge regarding risk factors of body focused repetitive behavior disorder.To practice this, nursing personal needs to be equipped with adequate knowledge and practice regarding video teaching programme. The curriculum of nursing education should enable student nurse to equip themselves within the knowledge of risk factors of body focused repetitive behavior disorder.

NURSING ADMINISTRATION:

Nurse as an administrator should take limitation in formulating policies and protocols for health teaching. The nursing administration should motivate the subordinate for participating in various educational programmes and improve their knowledge and skills. The administrator serves as a reserve's person for young nursing students, parents and school teachers for proving guidance and counselling for school going children with risk factors of body focused repetitive behavior disorder. The nurse administrator has given through slides show for the awareness of Risk factors of body focused repetitive behavior disorder among school going children.

NURSING RESEARCH:

There is a good scope for nurse to conduct research in this area, to find out the effectiveness of various teaching strategy to educate the teachers and the parents The research study can be made by further implication of the study. Can be used for evidence based nursing practice as a rising trend.

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