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Research Article

A DESCRIPTIVE STUDY TO ASSESS THE KNOWLEDGE REGARDING AGGRESSION AND COPING STRATEGIES AMONG ADOLESCENTS AT SELECTED AREA DEHRADUN

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Abstract: The aim of study was to assess the knowledge regarding aggression and its coping strategies among adolescents at selected school Dehradun. **Objective of the study:** to assess the knowledge regarding aggression and its coping strategies among adolescent To fine out the association between the knowledge and coping strategy regarding aggression with selected demographic variables among adolescent To find out the correlation between knowledge and coping strategy regarding aggression among adolescent. **Methodology:** the design used is non experimental descriptive, sampling technique used non probability convenient sampling sample size is 56 it was conducted at SGRR public school Bombay bagh Dehradun, reliability is 0.6 data collection done by selfadministrative method through online surveys, **Result:** the results show there are a total 56 participants out of which 50 % are females and 50% are male according to age 58.9% students in the age group of 14 years 15 years are about 19.6%, the 34% of the subject have poor aggression knowledge and 61% have average and 5% have good the 10.7% have poor aggression coping strategies and 51.7% have average at last 37.6% have good coping strategies. There is only significant association with religion $\chi^2 4=10.87$ and no association between level of knowledge on aggression and coping strategies other demographic variables. Correlation between aggression score and coping strategies score is 0.505 is positive correlation, **Conclusion:** the study revealed that maximum sample have average knowledge about aggression and coping strategies there is significant association between aggression knowledge with demographic variables i.e., Religion.

Key words: aggression, coping strategies, knowledge, adolescent.

1. INTRODUCTION:

Aggression is a behavior intended to threaten or injure the victim's security or self-esteem. it means to go against, to assault or to attack. it is a response that aims at inflicting pain or injury on objects or persons. weather the damage is caused by words, fists or weapons, the behavior is virtually always designed to punish. it is frequently accomplished by bitterness, meanness and ridicule. an aggressive person is always vengeful. expression of anger may take many forms also present differently according to the developmental age of the child. in early childhood, aggressive behavior in mild to moderate forms is fairly common. as children develop, however they learn skill to control their aggression before it becomes problematic aggression as a behavior whose primary or sole purpose or function is to injure another person or organism, whether physically or psychologically. biological causes are related the internal functioning of the body, first it is estimated the poor brain functioning is the real cause of aggression differ with respect to the underlying motivation of the action, people carry out acts of instrumental aggression behavior motivated by the desire to express anger and hostige in order to secure a ransom. goal, hostile aggression behavior motivated by the desire to express anger and hostile feelings.

2. REVIEW OF LITERATURE:

Kuldeep & Thakur sona (2021) a descriptive study was conducted to explore the relationship between aggression and family environment among adolescents, a sample consisting of 200 adolescents was taken from the three districts of



Punjab state namely Ludhiana, Sangrur and Hoshiarpur, data was collected with the help of aggression scale by Dr GP Mathur results clearly indicated a significant relationship between overall aggression and family environment of adolescent students. Pearson's product moment correlation methodology was used, correlation between aggression and cohesion dimension of family environment of adolescent, the correlation between aggression & conflict dimension of family environment among adolescent is 0.31 that is positive & significant at 0.1 level of confidence that shows that there exists a significant positive relationship between aggression and conflict dimension of family environment of adolescents.

Ibrahim haidar & Darwiesh breik wisam (2019) a cross sectional study was conducted in gifted education international school Jordan on coping strategies adopted by adolescents 1000 adolescents were selected from ordinary school divided into 485 or 48.5% males and 515 or 51.5% females to determine the relationship between the independent variables and dependent variables all the independent variables were found to be significant predictors of the adopted the values were 0.761 the first discriminant function is significant (0.212,x2(12)=231.949 in this analysis the low correlation the results suggest that the style of coping may be affected by social and demographic variables as for gender differences it was found that females resort to invest in close friend in accordance with the stereotypes concerning both genders.

2. MATERIALS AND METHODOLOGY :

Research approach and design: quantitative non experimental

settings-the study was conducted at SGRR public school Bombay bagh at Dehradun Uttarakhand. there are total 600 students in this school out of which 67 students studying in 9th class and 90 students are 11th class, this setting was selected because of availability of sample and they may true representative of study population

Population The population selected for the present study were adolescents from the selected SGRR

Public school Bombay Bagh in Dehradun Uttarakhand. Approximate 300 students are falls into adolescents age group

sample: sample is used adolescent students of SGRR public school Bombay bagh who were fulfilling the selection criteria.

sampling technique and sample size: samples were chosen by using non probability convenient sampling technique and sample size is 56.

Research variables: Knowledge regarding aggression and coping strategies are research variables assessed by rating scales.

Demographic variables: Age, Gender, Education, Religion, Type of family, Father's Education, Father's occupation, Mother's education and occupation, family income, number of siblings.

DATA COLLECTION PROCEDURE: The sample was collected by non-probability convenient sampling technique. The method of data collection technique was self-administrative online survey three-point rating scale on aggression and its coping strategies, the data was collected through google form application.

DATA ANALYSIS: The Organization and presentation of data.

Section 1: Description of the socio demographic variables of the subjects.

Section 2: Description of level of knowledge on aggression and coping strategies among adolescent.

Section 3: Correlation between the aggression and coping strategies among adolescent.

Section 4: Association between level of knowledge on aggression and its coping strategies with selected demographic variables.

3. DISCUSSION: Based on the objectives of the study three-point rating scale was used to assess knowledge on coping strategies during aggression.

Table 1: Level of knowledge on aggression and mean score.

n=56

Aggression level	Frequency	Percentage %	Mean	Sd
Poor	19	34		
Average	34	61		
Good	3	5		
			13.8	6.35



Table 2: Level of knowledge on coping strategies among adolescent.

n=56

Coping behavior	Frequency	Percentage	Mean	Sd
Poor	6	10.7%		
Average	29	51.7%	12.0	3.47
Good	21	37.6%		

Table 3 Correlation between aggression score and coping strategies score.

n=56

Variables	R
Correlation between aggression and coping strategies	0.505

4. RECOMMENDATION:

- Similar study cab be conducted for a large sample to generalize the finding.
- A similar study can be done among health care workers to assess knowledge regarding aggression and its coping strategy.
- Training programmer may be conducted in all sector to control aggression.

5. CONCLUSION: The result of the study proved there is no significance association between level of coping strategies with all demographic variables, Correlation between aggression score and coping strategies score is 0.505 there is positive correlation so therefore null hypothesis failed to accept.

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