

Pediatric Review - International Journal of Pediatric Research

2025 Volume 12 Number 1 Jan-Mar

Research Article

Behavioral Pattern

Behavioral Pattern of Single Child and Child with Siblings: A Comparative Study

Roychan A^{1*}, Verma M², Podder L³

DOI:https://doi.org/10.17511/ijpr.2025.i01.03

^{1*} Anoshka Roychan, M.Sc Nursing Student, Pediatric Nursing, Nursing College, All India Institute of Medical Sciences, Bhopal, India.

² Mamta Verma, Ph.D, Faculty of Pediatric Nursing, Nursing College, All India Institute of Medical Sciences, Bhopal, India.

³ Lily Podder, Ph.D, Faculty of Obstetrics and Gynaecological Nursing, Nursing College, All India Institute of Medical Sciences, Bhopal, India.

Introduction: In this era of globalization, behavioral disturbances in young children are among the notable child health problems, the importance of which is increasingly recognized in most societies. About 8.9% of children suffer from behavioral disorders worldwide and the most common age group for behavioral disorders is 6-11 years. This study intends to identify the domains most affected in a child brought up with siblings as compared to an only child.

Methods: To assess the behavioral differences among single children and children with siblings, a comparative study was conducted in Bhopal, India with parents of 80 children in each group of 6-12 years of age group (recruited by convenient sampling technique). The data was collected using Selfa structured Child Behavioral Checklist containing eight domains, whose reliability was found to be r = 0.833.

Result: There was a significant association in behavioral pattern of a single child with sociodemographic variables like employment of parents and class in which the child studies whereas, variables such as parent's age and birth order had a significant association with behavioral pattern of a child with sibling (p<0.05).

Conclusion: The study findings revealed that children without siblings were most affected with anxiousness during various situations of their life however, while considering children who were brought up with siblings had physiological problems as well as were more aggressive. The current study provided the base for identifying the reasons for the domains being affected in both groups.

Keywords: Behavioral Pattern; Single child; only child; child with siblings; multiple children family; only child family

Corresponding Author	How to Cite this Article	To Browse
Anoshka Roychan, M.Sc Nursing Student, Pediatric Nursing, Nursing College, All India Institute of Medical Sciences, Bhopal, , India. Email: anoshkaroychan1998@gmail.com	Roychan A, Verma M, Podder L, Behavioral Patter Single Child and Child with Siblings: A Compar Study. Pediatric Rev Int J Pediatr 2025;12(1):13-22. Available From https://pediatrics.medresearch.in/index.php/ijpr cle/view/789	ative Res.
2025-02-17 2025-02-25	Review Round 2 Review Round 2025-03-05 2025-03-13	

 Conflict of Interest None
 Funding Nil
 Ethical Approval Yes
 Plagiarism X-checker 13.14
 Note

 OPEN OACCESS
 © 2025by Roychan A, Verma M, Podder Land Published by Siddharth Health Research and Social Welfare Society. This is an Open Access article licensed under a Creative Commons Attribution 4.0 International License https://creativecommons.org/licenses/by/4.0/ unported [CC BY 4.0].
 Note

Pediatric Rev Int J Pediatr Res 2025;12(1)

Introduction

A human starts his living from family and the base of his personality and intellectual values are established in childhood. Behavior, also incorporates not only the conscious behavior and activities of the human mind but also the subconscious and unconscious.[1]

As a consequence, it covers not only the overt behavior but also the covert behavior involving the inner experiences and mental processes. [2]

Globally, one in seven 10-19-year-olds encounters a mental disorder, accounting for 13% of the global burden of disease in this age group. Furthermore, depression, anxiety and behavioral disorders are among the leading causes of illness and disability among adolescents. About 8.9% of children aged between 7 and 11 years were diagnosed with a diagnosis of behavioral disorders among other psychological disorders. [3]

Behavioral disturbances are notable child health problems, the importance of which is increasingly recognized in most countries. A behavioral problem is a deviation from the accepted pattern of behavior on the part of the child when he is exhibited to an inconsistent social and cultural environment. [4]

According to the Centers for Disease Control and Prevention, a large proportion (5.5 million) of children suffer from behavioral disorders during their developmental stage. Many of these problems are transient and probably don't get noticed. [5]

At times, however, the extent of these problems and their overall effects on a child's development can be serious. Moreover, experimental studies have demonstrated that children who exhibit symptoms of behavioral disorders experience more peer rejection, thereby leading to their engagement in antisocial behaviors in early adolescence and also to the development of externalizing behavioral problems. [6]

Families with only one child have been growing since about late 60s. This may be because of increased living costs, personal choice and women conceiving at an older age. There happens to be a stigma with only children and people tend to give a negative response to describe only children. The popular thought is that only children are "spoiled."[7] The environment in which a child is raised plays a big part in their personal development. Consequently, many children will exhibit different character traits and characteristics depending on their birth order or if they are the only child. In the last decade, there has been a steady decline in the average household size in contrast to single-child families being on the rise.

It has been pointed out that not having siblings and being more intimate with adults can hurt adjustment and social life. In the past, it was reported that single children received too much attention due to a lack of siblings, had premature puberty, and became selfish, dependent, and capricious, compared to children nurtured with siblings. But there has been a lack of evidence to support this cliché about single children.

They concluded that single children have social skills as children with siblings have and it seems that only children have more friends than multiple children. Only children are very similar to the first born child and have more self-confidence than multiple children. [8]

Families may have an only child for an arena of reasons that include personal choice, family planning, financial problems, emotional issues or physical health issues, longing to travel, stress in the family, educational advantages, late marriage, stability, focus on work, time constraint, advanced age, infertility, divorce, and death of a sibling or parent. [9]

In most societies throughout the world, siblings who often grow up together help in facilitating the development of strong emotional bonds between the children. The emotional bond between siblings is often complicated and is influenced by factors such as parental treatment, birth order, personality, and personal experiences outside the family. There are cases where siblings grow up in separate homes, in different environments. Therefore, both nature and nurture affect development. [10]

The sibling relationship is likely to last longer than any other relationship in one's lifetime and plays an integral part in the lives of families. Yet, in comparison to the wealth of studies on parent-child relationships, relatively little attention has been devoted to the role of siblings and their impact on one another's development. [11] There is a dire need for further research in the Indian context. To understand effect of being raised with a sibling and without a sibling on an individual's personality, present study was conducted. [12] There is literature suggesting significant differences in behavioral pattern of a single child and a child brought up with a sibling. But some in contrast show no significant difference between both.

Aim of the study

To assess behavioral differences exhibited by single child and child with siblings and having said that also to study comparison between both groups.

Materials and Methods

Ouantitative research with a comparative research design was adopted to assess and compare behavioral patterns exhibited by a single child and a child with siblings. The study was conducted in community areas of Bharkheda Pathani and Sai Baba Nagar of Bhopal district Madhya Pradesh, India, with 160 parents of single children and children with siblings in age group between 6-12 years who met following criteria: parents of single child and child with siblings (living with one or more siblings) between 6- 12 years those who are, available and are willing to participate during data collection of study, able to understand Hindi or English and divorced/ widowed or are single parent. The study excluded children: with long-term disease or under treatment of any chronic disease, children who lost their siblings in recent period of 6 months,

Children with any psychological issues and single children residing in joint/extended families. Ethical clearance was taken from the Institutional Human Ethics Committee IHEC-PGR of AIIMS Bhopal (LOP no: IHEC-PGR/2021/M.ScNursing/July 07). The pilot study was initiated after receiving LOP. Permission was taken from concerned authorities before data collection. Anonymity of participant was maintained by assigning code numbers for identification. Nonmaleficence was maintained by taking Informed consent from parents of children among age group 6-12 years. No potential harm was caused to participant. Confidentiality of data was maintained. There is no financial benefit involved in study but parent can start identifying any abnormal behavior at a very early stage.

The data analysis was performed which included both descriptive and inferential statistics. A master data sheet was prepared after editing, coding, and tabulation for data analysis. Data analysis was done using Statistical Package for Social Sciences (IBM SPSS 25). Mean, median, frequency, percentage distribution and range were analyzed to assess the sociodemographic variables of parents' performance and child's performance. Mann Whitney U test was used to find out comparison between behavioral patterns of a single child and a child with a sibling. An Independent t-test and ANOVA were performed to find out association between behavioral pattern of a single child and sociodemographic variables and between the behavioral pattern of a child with a sibling and sociodemographic variables.

Results

Table 1. a: Distribution of parents of single child and child with sibling according to sociodemographic characteristics

S. No	Sociodemographic Variables			Single Child(n1= 80)			Child with Sibling(n2= 80)			
			f	f		f				
1.	Relationship with the child	Father	30		37.5	32		40		
		Mother	50	50		48		60		
2.	Age		Father	Mother		Father	Mother			
		20- 25 years	10	3	16.25	5	10	18.8		
		26-30 years	14	30	55	10	30	50		
		31-35 years	5	16	26.25	15	7	27.5		
		>35 years	1	1	2.5	2	1	3.75		
3.	Religion	Hindu	61	61		49		61.3		
		Muslim	18	18		21	21			
		Christian	1		1.3	10		12.4		
		Others	0	0		0	0			

N= 160

4.	Educational Status		Father	Mother		Father	Mother	
		No formal education	8	9	21.3	4	8	15
		Primary education	20	15	43.8	23	4	33.7
		Higher Education	16	7	28.6	8	18	32.5
		Graduate or above	3	2	6.3	10	5	18.8
5.	Type of employment	Government	4	3	8.8	2	3	6.3
		Private	7	13	25	15	4	23.7
		Self-employed	23	2	31.2	22	6	35
		Unemployed	5	23	35	10	18	35
5.	No. of children up to 18 years of age	One child	ild 0		0	0		0
		Two children	0	0		35	35	
		Three children	0	0		35		43.8
		Four children & above	0	0		10		12.5

Roychan A et al. Behavioral Pattern of Single Child and Child with Siblings

Participant's characteristics: Table 1. a and 1.b provides a summary of participant's characteristics. Among parents of a single child, majority 44(55%) and 40(50%) of parents of children with siblings were between age group 26-30 years. The majority of 28(35%) parents in both groups were unemployed. Furthermore, mostly 42(52.5%) female children who had siblings faced behavioral problems and additionally, majorly 43(53.7%) second-born children with siblings showed deviation in behavioral patterns.

Table 1. b: Distribution of single child and childwith siblings between the age group 6-12years with their sociodemographic variables

N= 160

s.	Sociode	emographic	Single C	hild(n1=	Child with			
No	Va	riables	8	0)	Sibling(n2= 80)			
			Frequency	Percentage	Frequenc	Percentage		
			(f)	(%)	y (f)	(%)		
1.	Age	6- 7 years and	15	18.8	27	33.8		
		11 months						
		8- 09 years	38	47.5	34	42.5		
		and 11 months						
		10- 11 years	27	33.7	19	23.7		
		and 11 months						
2.	Gender	Male	40	50	38	47.5		
		Female	40	50	42	52.5		
3.	Birth Order	First child	80	100	4	5		
		Second child	0	0	43	53.7		
		Third child	0	0	33	41.3		
4.	Class in	1st standard	16	20.0	15	18.8		
	which	2nd standard	47	58.8	29	36.3		
	studies	3rd standard	12	15.0	16	20.0		
		4th standard	3	3.8	11	13.8		
		5th standard	2	2.5	9	11.3		
		or above						

Table 2. a: Domain-wise distribution ofbehavioural patterns of single childrenbetween the age group 6- 12 years of age

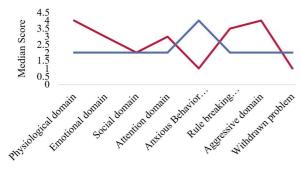
S. No	Domain	Maximum Score	Range	Median
1	Physiological domain	8	6 (0-8)	2.00
2	Emotional problems	8	4 (0-8)	2.00
3	Social Domain	8	6 (0-8)	2.00
4	Attention domain	8	6 (0-8)	2.00
5	Anxious Behavior domain	10	9 (0-10)	4.00
6	Rule-breaking behavior domain	8	7 (0-8)	2.00
7	Aggressive Behavior domain	6	5 (0-6)	2.00
8	Withdrawn domain	4	3 (0-4)	2.00

Table2.b:Domain-wisedistributionofbehavioralpatternsofachildwithsiblingbetween the age group6-12 years of age

N2= 80

S. No	Domain	Maximum Score	Range	Median
1	Physiological domain	8	7 (0-8)	4.00
2	Emotional domain	8	8 (0-8)	3.00
3	Social Domain	8	7 (0-8)	2.00
4	Attention domain	8	7 (0-8)	3.00
5	Anxious behavior domain	10	3 (0-10)	1.00
6	Rule-breaking behavior domain	8	8 (0-8)	3.50
7	Aggressive domain	6	6 (0-6)	4.00
8	Withdrawn domain	4	4 (0-4)	1.00

Comparison of Behavioral Characteristics: Tables 2. a and 2. b illustrate information comparing behavioral pattern of single child & child with sibling domain wise as analysed using Mann Whitney U test. It was evident that most parents of single children advocated that their child faced Anxious Behavior (Median score 4) in many day-to-day life situations. Whereas, children with siblings had Phys. as well as Aggressive Behavior problems (Median score =4) most as per their parents. Graphical representation can be seen in Fig 1. While comparing domains between both group significant diff. was seen in all domains except Social Problem domain (u value 3258 & p value =<0.001).



Domains of Behavioral Pattern ——CHILD WITH SIBLING ——SINGLE CHILD

Figure 1: Depicts the graphical representation of the domain-wise comparison of behavioral patterns between a single child and a child with a sibling.

Association of Behavioral Patterns with Sociodemographic Variables: Tables 3. a and 3.b presents association between behavioral pattern and sociodemographic variables.

Independent t-tests and ANOVA were carried out to identify factors associated with behavioral pattern of a child.

It was apparent that there was a significant association between type of employment of parents (F value= 2.530, p=0.043), class in which child studies (F value= 1.774, p=0.014) and behavioral pattern of a single child.

Moreover, a significant association was found between behavioral pattern of a child with a sibling and parent's age (F value = 5.544, p = 0.002), type of parent's employment (F value = 0.590, p = 0.03) and birth order of child (F value = 0.102, p = 0.04).

Table 3. a	: Distribution	of	sociodemographic	variables	and	their	association	with	behavioral
patterns of	single child								

S. N	o Sociode	emographic variables	N	Independent t-test/One-way ANOVA	df	p-value	Resul
ι.	Relationship with child	Father	30	1.94	78	0.047*	s
		Mother	50				1
2.	Age	20- 25 years	13	0.752	3, 76	0.525	NS
		26-30 years	46				1
		31-35 years	19				1
		>35 years	2				1
3.	Religion	Hindu	61	0.570	2, 77	0.568	NS
		Muslim	18				
		Christian	1				1
		Others					
۱.	Educational status	No formal education	17	0.549	3, 76	0.650	NS
		Primary education	35				
		Higher education	23				1
		Graduate or above	5				1
5.	Employment type	Government	7	2.530	3, 76	0.043**	S
		Private	20				
		Self-employed	25				
		Unemployed	28				
.	Age of child	6-7 years and 11 months	15	0.788	3, 76	0.504	NS
		8- 9 years and 11 months	38				
		10- 11 years and 11 months	27]
' .	Gender	Male	40	0.215	78	0.830	NS
		Female	40				
	Class of study	1st standard	16	1.774	4, 75	0.014**	s
		2nd standard	47				
		3rd standard	12				
		4th standard	3				1
		5th standard or above	2				1

Table 3.b: Distribution of sociodemographic variables and their association with behavioral patternsof a child with a sibling

S. No	Sociodemographic	variables	Ν	Independent t-test/One-way ANOVA	df	p-value	Result
1.	Relationship with child	Father	32	0.228	2, 77	0.797	NS
		Mother	48				
2.	Age	20- 25 years	15	5.544	3,76	0.002**	S
		26-30 years	39				
		31-35 years	23				
		>35 years	3				-
3.	Religion	Hindu	49	0.941	2, 77	0.395	NS
		Muslim	21				1
		Christian	10				1
		Others	49				
4.	Educational status	No formal education	12	0.176	3, 76	0.912	NS
		Primary education	27				
		Higher education	26				
		Graduate or above	15				
5.	Employment type	Government	5	0.590	3, 76	0.03**	S
		Private	19				
		Self-employed	28				
		Unemployed	28				
6.	Number of children under 18 years of age	One child	0	0.543	2, 77	0.583	NS
		Two children	35				
		Three children	35				
		Four children and above	10				
7.	Child's Age	6-7 years and 11 months	27	0.235	2, 77	0.791	NS
		8- 9 years and 11 months	34				
		10- 11 years and 11 months	19				
8.	Gender	Male	38	0.282	8	0.779	NS
		Female	42				
9.	Birth Order	First child	4	0.102	2, 77	0.04**	s
		Second child	43				
		Third child	33				
10.	Class of study	1st standard	15	0.758	4, 75	0.556	NS
		2nd standard	29				1
		3rd standard	16				1
		4th standard	11				1
		5th standard or above	9				

Discussion

 $N_2 = 80$

The present study aimed to assess and compare the behavioral patterns of single child and child with siblings. Additionally, the study also explored the association between the selected sociodemographic variables with the behavioral pattern. In the comparison of single-child behavior and children with siblings, it's important to remember that individual differences play a significant role. While family structure can influence behaviour and development, other factors like parenting style, Environment, and personality also contribute. The following section discusses the present study findings in the context of existing literature.

Participant's characteristics: Study from Lucknow, India found that majority of participants were from age group of 9- 12 years in contrast with present study where maximum subjects were in age group of 8- 9 years and 11 months13. In present study, 35% of parents reported working for themselves, compared to 80% of parents who had children with behavioural issues and were unemployed in Nagpur, India14. The current study indicated an equal gender distribution, but an Iranian descriptive survey found that 71% of preschool children with behavioral difficulties were girls. [16]

Behavioral Pattern of Single Child: In the present study, a single child performed poorly in the anxious behavior domain as compared to other domains, which was at variance with a qualitative study from Nepal where students of the same age group were having antisocial behavior as the most problematic domain of behavioral assessment. [15] Detailed data can be collected from parents of single children regarding the reasons for anxious behavior meanwhile from children with siblings' reasons regarding aggressive behavior problems and physiological behavior problems.

Behavioral Pattern of the Child with Siblings: Children with siblings scored highest in the physiological and aggressive behavior areas, whereas the emotional and attention domains scored comparatively low. A Brazilian study discovered that 22.7% of 500 school pupils showed behavioral issues such as anxiety, hyperactivity, argumentativeness, and perfectionist beliefs that required treatment and a mean aggressive behavior score of 4. [17] As the tools and methodologies used in these studies across India are dissimilar, and hence the findings are not comparable, nurse administrators can create awareness programs for school children regarding behavioral problems. At the community level, awareness programs on the impact of behavioral problems on children, families and communities can be run with the help of community radio, televisions and mobile phones.

Comparison of Behavioral Characteristics: When comparing the behavioral patterns of a single child and a child with a sibling, the current study found that the single child had a maximum score for the items in the anxious behavior domain, while the child with a sibling had a maximum score for the items in the physiological and aggressive behavior domain respectively. According to a study done among school-aged children aged 6 to 12 in Kanpur, India, 35 (40%) of the population of single children were found to have more psychosomatic issues, such as abdominal pain, urinary infections, and anxious behavior, than children with siblings, who displayed more aggression. [18] A study conducted in Boston and Delhi (India) with 251 and 80 participants, respectively,

Revealed conflicting results indicating the majority of solitary children (78%) exhibited more antisocial behavior than children with siblings (29%) did. The findings of the present study can be attributed to the fact that behavioral psychology can be studied in detail as there are two different arenas of behavioral patterns in a single child as compared to children brought up with siblings. The findings collectively incorporate the fact that anticipatory support shall be given by parents and school administration along with teachers to children with behavioral problems. A developmental study can be done to assess the achievement of developmental milestones in children with behavioral problems. [19], [20]

Association of behavioral patterns with sociodemographic variables: Sociodemographic factors including work status and the class the child is enrolled in school had a strong association with behavioral patterns of single children among the 80 parents who participated in the study. Similar results were found in a Brazilian study of 152 mothers of single children, where it was discovered that there was a correlation between the behavioral pattern of the single child and sociodemographic factors like the parent's employment status and who was the child's primary caregiver. [21]

An Iranian descriptive study that claimed there was a link between a single child's behavior pattern and the parent's parenting style and level of education came to a conflicting conclusion. [22] The behavioral pattern of a child who has a sibling and a few sociodemographic factors, such as the parent's age, work status, and the child's birth order, were significantly associated in the current study. Similar results were reported in a descriptive study conducted in Mangalore, India among parents of children with siblings, which showed a significant relationship between the behavior of these children and sociodemographic factors like the child's birth order, the parent's employment, and maternal illnesses. [23]

Similar results were obtained in a study conducted in Brazil including 152 moms of children who had siblings, where a substantial correlation between children's behavior and the parents' ages and parenting styles was discovered. [24] There was a substantial correlation between the behavioral pattern of children with siblings, the kind of family, and the degree of parental attachment, According to a study done among schoolchildren in Mumbai, India, which produced results that were contrary to those of the current study. [25]

One limitation of this study was the time taken to collect data, as time constraints and the researcher's unwillingness to spend extra time while interacting with the participants hindered the study. In addition to that, the tool used for interviewing was not a standardized tool due to ethical and social concerns. Future research could address these limitations by using a standardized tool and allocating more time for the data collection period.

Conclusion

In conclusion, the findings of the present study revealed that the child with a sibling was most affected by physiological issues, whereas the domain that was most impacted in the case of a child nurtured without a sibling was the area of anxious behaviour. According to the existing literature family, school, and community issues with children's conduct need to be addressed. A multilevel intervention is required for this. The current study served as the foundation for determining the causes of the affected domains in both groups. To determine potential causes of behavioral issues in siblingand single-parented both children, exploratory studies could be conducted. It also vehemently refutes popular beliefs about the behavioral patterns displayed by both single children and children with siblings.

Financial support & sponsorship

Self-funded and no external funding was received.

Conflict of interest

No conflict of interest was identified

Acknowledgement

Ms. Anoshka gathered the data, performed data analysis, interpretation, and table and figure creation. When it came to developing and composing the results and conclusion, Dr. Mamta offered her insightful perspective. Dr. Lily helped with the presentation of the manuscript, the editing of the manuscript, and a factual evaluation. Special thanks to everyone who helped write this work, whether directly or indirectly, for their knowledge and support in all areas and to all the participants and faculty of AIIMS Bhopal.

References

1. United Nations International Children's Emergency Fund. The State of the World's Children 2021 On My Mind: Promoting, protecting and caring for children's mental health. https://www. unicef. org/reports/state-worlds-children2021 [Accessed on October 2021] [Crossref][PubMed][Google Scholar]

2. Kalaivani C. Comparative Study to Assess the Behavioral Pattern of Single Child and Child with Sibling between the Age Group of 6-12 Yrs in Selected Areas at Manamadurai. " Repository-Tnmgrmu. ac. *in*, *1 Apr. 2012, repositorytnmgrmu.ac.in*/5721/. Accessed 26 Jan. 2023 [Crossref][PubMed][Google Scholar]

3. CDC. National Center on Birth Defects and Developmental Disabilities Home [Internet]. Centers for Disease Control and Prevention. 2019. *Available from: [Article][Crossref][PubMed][Google Scholar]*

4. Laird RD, Jordan KY, Dodge KA, Pettit GS, Bates JE. Peer rejection in childhood, involvement with antisocialpeers in early adolescence, and the development of externalizing behavior problems. Dev Psychopathol 2021; 13(2):337-54. [Crossref] [PubMed][Google Scholar]

5. Personality Traits of the Only Child - New Kids Center [Internet]. www. newkidscenter. org. [cited 2023 Jan 26]. Available from: [Article][Crossref] [PubMed][Google Scholar]

6. Rasote KC, Gore AD, Ranganathan U. A Cross Sectional Study of Behavior Disorders In 6-15 Years Age Group in Rural Area. Ntl J of Com-munity Med 2015; 6(3):364-369. . [Crossref][PubMed][Google Scholar]

7. Gupta I, Verma M, Singh T, Gupta V. Prevalence of Behavioral Problems in school going children. Indian J. of Paediatrics 2020; 68 (4):323-6. [Crossref][PubMed][Google Scholar]

8. Arora S. & Teotia A. (2021). Comparison Between Only Child and Child with Siblings on Adjustment and Personality. *International Journal of Indian Psychology*, 9(2), 1326-1335. *DIP:18.01.138.20210902*, DOI:10.25215/0902.138 [Crossref][PubMed][Google Scholar] 9. Derakhshanpour F, Khosravi A, Khajavi A, Shahini N, Kashani L, Salimi Z. Comparing social skills between children of single-child and multiple-children families. Journal of Fundamentals of Mental Health 2020 Jul-Aug; 21(4): 276-81. . [Crossref] [PubMed][Google Scholar]

10. Howe N, Recchia H. Peer relations Sibling Relations and Their Impact on Children's Development [Internet]. Encyclopedia on Early Childhood Development. 2014. Available from: [Article][Crossref][PubMed][Google Scholar]

11. Pourhossein R, Pourhossein R, Habibi M. Prevalence of behavioral disorders among preschool children. Journal of Fundamentals of Mental Health 2015 Sep-Oct; 17(5): 234-39. . Prevalence of behavioral disorders among preschool children. Journal of Fundamentals of Mental Health 2015 Sep-Oct; 17(5): 234-39 [Crossref][PubMed][Google Scholar]

12. Badi JE. Personality of Only Children and Children with a Sibling. The International Journal of Indian Psychology. Volume 4, Issue 2, No. 87. 2017 January-March [Crossref][PubMed][Google Scholar]

13. Prakash J, Sudarsanan S, Pardal PK, Chaudhury S Retd. Study of Behaviour Problems in a Paediatric Outpatient Department. Med J Armed Forces India. 2006 Oct;62(4):339-41. *doi:* 10.1016/S0377-1237(06)80102-4. *Epub* 2011 Jul 21. PMID: 27688536; PMCID: PMC5034185 [Crossref] [PubMed][Google Scholar]

14. Nair G. A Comparative Study to Assess the Level of Behavioural Problems among Children between the Age Group of 2½ Years to 5 Years of Employed and Unemployed Mothers in Selected Areas of Nagpur. RFP Indian Journal of Medical Psychiatry [Internet]. 2018. [Crossref][PubMed][Google Scholar]

15. Adhikari, R. P., Upadhaya, N., Gurung, D. *et al. Perceived behavioral problems of school aged children in rural Nepal: a qualitative study. Child Adolesc Psychiatry Ment Health 9, 25 (2015). [Article][Crossref][PubMed][Google Scholar]*

16. Wissink IB, Dekovic M, Yagmur S, Stams GJ, de Haan M. Ethnic identity, externalizing problem behavior and the mediating role of self-esteem among Dutch, Turkish-Dutch and Moroccan-Dutch adolescents. J Adolesc. 2008; 31(2): 223-40. [Crossref][PubMed][Google Scholar] 17. Gupta AK, Mongia M, Garg AK. A descriptive study of behavioral problems in school going children. Ind Psychiatry J. 2017 Jan-Jun;26(1):91-94. *doi:* 10.4103/ipj.ipj_39_17. PMID: 29456329; PMCID: PMC5810175 [Crossref][PubMed][Google Scholar]

18. Ojha SP, Chapagain M, Tulachan P, Ma J. Emotional and behavioural problems among sheltered homeless children. Journal of Nepal Medical Association. 2013 Jul 1;52(191). [Crossref] [PubMed][Google Scholar]

19. Cosimini J. Comparative Study of Behavioral Perceptions of Only and Sibling Children. FSU Journal of Behavioral Sciences, Vol. 2 [1999], Iss. 1, *Art. 2 [Crossref][PubMed][Google Scholar]*

20. Goel M, Aggarwal P. A comparative study of self confidence of single child and child with sibling. undefined [Internet]. 2012 [cited 2022 Jun 1]; Available from: https://www. semanticscholar.org/paper/A-comparative-study-of-self-confidence-of-single-Goel-

Aggarwal/bf7a048d74333526891637c8da511d797f5 f0f55 [Crossref][PubMed][Google Scholar]

21. Goel M, Aggarwal P. A comparative study of self confidence of single child and child with sibling. undefined [Internet]. 2012 [cited 2022 Jun 1]; Available from: https://www. semanticscholar.org/paper/A-comparative-study-of-self-confidence-of-single-Goel-

Aggarwal/bf7a048d74333526891637c8da511d797f5 f0f55 [Crossref][PubMed][Google Scholar]

22. Azad M, Jalali MR. Intergenerational transmission of family factors: Parenting styles, attachment styles and family climate. Journal of Family Research 2014; 10(1): 79-97. [In Persian]. [Crossref][PubMed][Google Scholar]

23. Joseph N, D' Souza M, Sinha U. Assessment of determinants of behavioral problems among primary school children in Mangalore city of South India. Current Psychology. 2021 Dec 1;40(12):6187–98. *Available from: [Article][Crossref][PubMed][Google Scholar]*

24. Mirzabeigi H. The Effectiveness of training how to bringing up children based on Iranian culture on parents' growing methods and children's achievements. Educational Developement of Jundishapur 2013; 4(1): 74-82. [In Persian]. [Crossref][PubMed][Google Scholar] 25. Chesnay MD. Nursing Research Using Data Analysis: Qualitative Designs and Methods in Nursing [Internet]. Google Books. Springer Publishing Company; 2014 [cited 2023 Jan 27]. [Crossref][PubMed][Google Scholar]

Disclaimer / Publisher's NoteThe statements, opinions and data contained in all publications are solely those of the individual author(s) and contributor(s) and not of Journals and/or the editor(s). Journals and/or the editor(s) disclaim responsibility for any injury to people or property resulting from any ideas, methods, instructions or products referred to in the content.