

What do Parents Know About the Mental Health Needs and Problems of Children?

–Jilly John*

ABSTRACT

Mental health is how people think, feel and act as they encounter life's ups and downs. Parents and child care providers need to be aware of the role of mental health in the overall healthy development of young children. It is the task of caregivers to observe young children to be sure that they are maintaining mental health by mastering age-appropriate social and personal skills, such as understanding and managing their feelings, interacting with others and learning to assert themselves in the world.

The present study was conducted to examine and compare the knowledge level of parents on mental health problems of children in Gulbarga district, Karnataka and Wayanadu district in Kerala. The data was collected from 250 respondents who are members of different neighbourhood groups in Gulbarga district and Wayanadu district. Stratified random sampling method used for collecting the data. The findings revealed that there is a poor knowledge regarding the mental health problems of children among the parents. This indicates the need for creating knowledge among the parents with the help of specific intervention programme. This study is an initiative to evolve appropriate suggestions for better strategies to promote mental health awareness among mothers.

Keywords: *Child Mental Health, Knowledge, Parents and Neighbourhood Group*

INTRODUCTION

Mental wellbeing is an essential component as well as an integral part in attaining good health. Good mental health enables people to realize their

* Assistant Professor, Department of Social Work, Central University of Karnataka, Gulbarga, Karnataka, India. Email: Jillymanoj1@yahoo.co.in, jillyjohn@cuk.ac.in

own potentials, cope with the normal stressors of life, work productively, and contribute to the society. Certain individuals and groups in the society are having a greater risk of experiencing mental health problems. People living at poverty, people with chronic health conditions, children exposed to maltreatment and neglect, women experiencing poor socioeconomic conditions and exposed to violence, people experiencing discrimination, violence and abuse and older persons have more possibility of experiencing mental health problems. Among these groups women and children are having high risk of negative implications in future.

PREVALENCE AND SIGNIFICANCE

Prevalence of mental health problems among children has been studied by many investigators and there is a variation in prevalence rate from 0.48% to 29.4%. (Malhotra and Nanda Patra 2014). Majority of these problems begin in childhood. If left untreated, these conditions severely influence the development of children, their academics and their potential to live fulfilling and productive lives. Children with mental health problems face major challenges with stigma isolation and discrimination, as well as lack of access to health care and education facilities and violation of their fundamental rights. Four out of five children in low and middle income countries do not receive any treatments for mental health problems.(Funk M., Drew N., and Knapp M., 2012). The inability of the caregivers or parents to recognize the mental health problems in children and insufficient specialists and health care providers in mental health field is a major area of concern when thinking about the prevention of mental health problems in children and the promotion of good mental health. Children living in difficult circumstances are also in the threat of developing mental health problems (Stagman S., & Cooper J.L., 2010). Parent's knowledge regarding normal child development will be helpful to avoid many of the child mental health problems. (WHO, 1978). Child's mental health is improved by better mental health services but the parent's use of these services provided by the country depend upon different factors. One of the barrier for access to mental health services according to WHO (2003) is lack of community information regarding mental health problems and the report suggest that improved awareness of psycho social development will make changes in the situation. (WHO report, 2003)

RELEVANCE OF EARLY IDENTIFICATION

Prevention of mental health problems in children will be more effective if those efforts are focused on parental awareness about the problems of children. Through early identification of the problems, the chances of better treatment results increase which in turn contribute to the appropriate development of children. Problems of children are better identified by parents than anyone. For early identification to be possible, parents need to know about the symptoms of mental health problems in children. If parents should be more responsive to the needs of children, they must be aware about it. Early intervention through identification, prevention and treatment of mental health problems should therefore be started within the family itself.

METHODS

The aim of the study was to assess the awareness of mothers about mental health problems of children, who are having children belonging to the age group of 6 to 12.

OBJECTIVES OF THE STUDY

1. To assess the knowledge of parents in developmental needs of children.
2. To assess the knowledge of parents about mental health problems of children.

As per the study design researcher has collected data from 250 mothers which included 125 from Kerala and 125 from Karnataka.

RESEARCH DESIGN

The study describes the knowledge of parents in the areas of developmental needs and mental health problems of children. The study describes the needs of mothers who are having children belonging to the age group of 6-12 and hence descriptive research design is used in the study.

UNIVERSE AND SAMPLE

The universe of the study included all the parents in the three taluks of Gulbarga district in Karnataka and Wayanadu district in Kerala. Multi-

Stage Random Sampling procedure was adopted as the selection of sample in this study for the quantitative analysis.

The list of neighbourhood groups in the selected district were collected from the agency in Kerala and Karnataka. The three taluks were selected randomly and from the selected three taluks list of neighbourhood groups were collected. From those who fulfill the inclusion criteria the list of members were prepared and from the list 125 respondents from each state were selected randomly for the quantitative data analysis of the need assessment.

Inclusion criteria: Parents aged between 25-55 years, staying with children (at least one child within the age group of 6-12 years) and regular member of a neighborhood group had selected for the study.

Exclusion criteria: Parents who attended any classes on mental health related topic.

TOOLS OF DATA COLLECTION

A Structured Questionnaire on the socio-demographic profile and a Knowledge Inventory on developmental needs and mental health problems of children were used to collect the data. A 39 item inventory was used to assess the knowledge of the respondent regarding developmental needs and mental health problems of children. A knowledge inventory was constructed for this purpose, validated and was used for the study. The knowledge inventory consisted of 39 items related to developmental needs such as physical, psychological and social needs and Concept of mental illness & mental health problems, causes, symptoms and treatment of mental health problems. Malayalam and Kannada version of the knowledge inventory was used for the study. Informed consent was taken from the respondents and confidentiality was assured before administering the tools. The data sheets were coded for computer analysis. Data obtained was analysed for using descriptive statistics, parametric statistics such as t-test used to find the significance of the study.

RESULTS

Analysis of the socio demographic details of the mothers reveals that most of the respondents 55.6% belong to the age group of 30-39. Majority of the respondents who were participated in the study (54%) were educated up to 10th standard, there were 14.4% of the respondents who are graduates.

80% of the respondents are house wives. and 8.8 percentage of the total respondents are daily wage labourers. 4.8 percentage of the total population are working in some private firm, 1.6 percentage of the total respondents are self-employed and .8 percentage of the total population are employed in government sector. Among the total respondents 18 percentage of the sample population from Karnataka belongs to Aland thaluk, whereas 16 percentage of the sample belongs to Gulbarga thaluk and Chittapoor thaluk respectively. In Kerala 18 percentage of the sample population belongs to Mananthawadi thaluk whereas 16 percentage each of the sample population belongs to Bathery thaluk as well as Vythiri thaluk.

Table 1. The Pattern of Distribution of Scores in the Different Dimensions for Assessment of Knowledge of the Respondents.

<i>Dimension</i>	<i>Mean score</i>	<i>t-value</i>
Developmental milestones	2.31	14.864**
Developmental needs	1.78	51.650**
Concept of mental illness & mental health problems	3.01	.216 ^{ns}
Causes of mental health problems	3.07	1.530 ^{ns}
Symptoms of mental health problems	2.63	10.824**
Treatment of mental health problems	1.81	28.514**
Overall knowledge	2.47	25.464**

** Significant at 0.01 level; ns non-significant at 0.05 level

For this, one sample t-test was carried out for comparing whether the mean score is equal to 3 (average knowledge score). T-value calculated was found to be non-significant in the case of knowledge regarding developmental milestones, developmental needs, Symptoms of mental health problems, Treatment of mental health problems and overall knowledge. In all these cases means score was significantly less than the average score of three which indicates that there is a poor knowledge among the parents. This indicates the need for creating knowledge among the parents with the help of some intervention programme. However in the case of knowledge regarding Concept of mental illness & mental health problems and causes of mental health problems, no significant difference was observed for the present sample with average knowledge score which shows that in these two dimension parents have an average level of knowledge.

Table 2. Comparison of Knowledge in Kerala and Karnataka

<i>State</i>	<i>Kerala</i>	<i>Karnataka</i>	<i>t-value</i>
Developmental milestones	2.85	1.78	17.341**
Developmental needs	1.79	1.77	0.506 ^{ns}
Concept of mental illness & mental health problems	3.08	2.94	1.885 ^{ns}
Causes of mental health problems	3.22	2.92	3.392**
Symptoms of mental health problems	2.81	2.45	5.569**
Treatment of mental health problems	1.85	1.77	0.957 ^{ns}
Overall knowledge	2.56	2.37	4.136**

** significant at 0.01 level; ns non significant at 0.05 level

The results of table 2 shows that there is no significant difference was noted in the dimensions of Knowledge level in Developmental needs of children, Concept of mental illness and mental health problems and in the Treatment of mental health problems among the parents from the state of Kerala and Karnataka. The t-value corresponding to these dimensions are found to be non-significant at 0.05 levels.

However, there exists significant difference in the dimensions of Knowledge level in Developmental milestones, Causes of mental health problems, Symptoms of mental health problems and Overall knowledge about all these dimensions between the parents of Kerala and Karnataka. The t-value for comparing the Knowledge level in Developmental milestones, Causes of mental health problems, Symptoms of mental health problems and Overall knowledge was found to be significant at 0.01 levels. It indicates that, there exists significant difference in the knowledge level in Developmental milestones, Causes of mental health problems, Symptoms of mental health problems and Overall knowledge of parents from Kerala and Karnataka. The mean value of knowledge level in Developmental milestones is higher among the parents in Kerala than in Karnataka. This indicates that the parents from Kerala have more knowledge about the developmental milestones of children than the parents from Karnataka. The mean value of knowledge about causes of mental health problems is higher among the parents in Kerala than in Karnataka. This indicates that the parents from Kerala have more knowledge about the Causes of mental health problems than the parents from Karnataka. The mean value of knowledge about Symptoms of mental health problems is higher among the parents in Kerala than in Karnataka. This indicates that the parents from Kerala have more knowledge about the Symptoms of

mental health problems than the parents from Karnataka. The mean value of overall knowledge level is higher among the parents in Kerala than in Karnataka which indicates that the parents from Kerala have higher overall knowledge level than the parents from Karnataka.

IMPLICATIONS OF THE STUDY

The study has an important implication for public mental health, and the knowledge gap existing among the parents, other primary care givers and general public. This study gives us an outlook on the level of knowledge of parents regarding the mental health problems of children in Kerala and Karnataka. Parents need to be aware about the developmental milestones, symptoms and causes of mental health problems which will help them to avoid the occurring of mental health problems of children in future. As there is significant difference in the level of knowledge among parents in two states, different measures has to be taken while framing the intervention programmes. The knowledge regarding the problems will also help the parents to identify the problems early and to keep away the stigma which will be a barrier for proper treatment or prevention. Overall this study paves way for better interventions to make changes in the society through tackling the mental health problems of children. As parents are the primary care givers of majority of children, the knowledge of mental health problems will function as a promotive, preventive, curative and developmental component of mental health issues at the community.

SUGGESTIONS

Appropriate interventions are necessary to handle the gap in knowledge level of parents with respect to mental health problems of children. Neighbourhood groups can be a better platform for the dissemination of knowledge among parents. As majority of the rural population is part of the neighbourhood groups this source for intervention can be utilized. As anganwadi teachers and ICDS personals have more communication with the smallest unit of society, their training programmes can include information about mental health problems of children which in turn will reach to the community. Opportunity among parents to share the difficulties they experienced while bringing up children will give opportunity for peer learning and catharsis. A collaborative attitude and functioning among all mental health professionals will serve the purpose of awareness creation and attitude changes in the society.

LIMITATIONS

A semi structured questionnaire was used for the assessment of knowledge of parents due to non availability of structured scale. Higher statistical methods could not be adopted due to the nature of data.

CONCLUSION

This study assessed the knowledge of mothers regarding the mental health problems of children at Gulbarga district in Karnataka and Wayanadu district in Kerala. Studies proved that knowledge will make changes in the attitude, practice and behaviour of an individual. It will help parents to adopt better child rearing practices and prevention of mental health problems among children. If parents can identify the problems early, they can approach mental health professionals and can participate in the secondary and tertiary prevention. The area of public mental health need more explorations and interventions in the present century.

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