

Review Article

Mental health in children: a view on social attribute

Ramkumar Sundaram*, Shagirunisha Rizvana A. M., Aishwarya T.,
Anbarasan V., Ganesh Babu S. M.

Department of Community Medicine, Dhanalakshmi Srinivasan Medical College, Perambalur, Tamil Nadu, India

Received: 26 April 2021

Accepted: 26 May 2021

*Correspondence:

Dr. Ramkumar Sundaram,

E-mail: mailtodrramkumar@gmail.com

Copyright: © the author(s), publisher and licensee Medip Academy. This is an open-access article distributed under the terms of the Creative Commons Attribution Non-Commercial License, which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

ABSTRACT

Child and adolescence are crucial periods to promote emotional well-being as the greater part of psychological issues start at these stages, and a large number of these continue for the rest of the life. Right now, this has become a need as overall information shows an increase in the pervasiveness of emotional well-being issues in childhood and adolescence and the level of those coming to almost 20%. Factors affecting mental health are familial factors, social and environment, media, physical activity, chronic illness in child, abuse, and bereavement. These factors affect the child's mental health from their early stages of life. Thus remembering the effect from these factors the child's mental health to be improved. Large numbers of the psychological wellness programs carried out in schools advance the improvement of social abilities, socio-enthusiastic capabilities, and learning results while simultaneously diminishing problematic behaviour.

Keywords: Mental health, Children, Family

INTRODUCTION

Child and adolescence are crucial periods to promote emotional well-being as the greater part of psychological issues start at these stages, and a large number of these continue for the rest of the life.¹ Right now, this has become a need as overall information shows an increase in the pervasiveness of emotional well-being issues in childhood and adolescence and the level of those coming to almost 20%. The circumstance is additionally exacerbated by the way that a large number of these youngsters and teenagers are not getting the specific consideration they require.² Thusly, significant efforts to unite the best proof about psychological wellness have been done and raised the test of concurring about crucial issues in the field such as the definition of mental well-being and other related ideas. According to WHO, mental health is understood not as a mere absence of illness, but in a broader sense, as a state of well-being in which

individuals develop their abilities, face the stress of their daily life, perform productive work, and contribute to the betterment of their community. This definition filled in as the reason for the WHO mental health action plan, 2013-2020, which fuses the ideas of mental wellness advancement, psychological sickness counteraction and therapy, and restoration. Especially, formative parts of children and youngsters, including, for example, the capacity to oversee contemplations, feelings, just as to construct social connections, and the fitness to learn, are accentuated in the arrangement as basic aspects to be handled in psychological wellness intercessions.

Mental well-being intercessions directed in schools and the networks start from the reason that the issues experienced by young people are dictated by the connection of individual, natural and family factors. Appropriately, schools and networks offer an ideal setting to intercede as kids and youths develop a lot through friendly connection. Schools and networks can take

advantage of its current circumstance to cultivate kid and youth advancement and to advance great emotional wellness. Large numbers of the psychological wellness programs carried out in schools advance the improvement of social abilities, socio-enthusiastic capabilities, and learning results while simultaneously diminishing problematic behaviour.³

The school climate and environment can thus assume a basic part in empowering the advancement of defensive elements for psychological well-being, like social-passionate capabilities and abilities. Consequently, social and psychological advancement is established through friendly communications in a specific social and social setting. Drawing on the commitments of Vygotsky's hypothesis of intellectual turn of events, human communication that happens in the social and social setting upgrades learning and is crucial for mental capacity. These social cycles where individuals learn and created happen through connections with others, including even (peer) just as master fledgling (e.g., instructor understudy) relations. Critically, explicit instruments have been delivered to catch gainful types of discourse across instructive settings.⁴ The majority of the examination has been given to understanding the focal pretended by the nature of discourse and association between understudies, in little gathering homerooms, or entire class setting educator understudy communication. Besides, research directed in local area based schools have likewise revealed the advantage of including families and local area individuals in learning collaborations with rudimentary understudies, particularly for those having a place with weak populaces.

DISCUSSION

Factors affecting mental health

Factors that primarily affect the mental health of children are; familial factors like parenting, parents with mental illness, family structure and trauma; social and environment factors, media, physical activity, chronic illness in Child, abuse and bereavement.

Familial factors

Single parenting; inspecting the writing, it likewise turns out to be certain that solitary parenthood turns into a reasonable danger factor for emotional wellness issues for the two kids and grown-ups, prompting more noteworthy mental trouble and sorrow, and puts ladies in a difficult situation further expanding the degree of stress.⁵ Throughout the long term, there has been an overall agreement that single-parent families are in a difficult spot contrasted with more customary homes. The components related with more regrettable result in single-parent families perhaps more muddled than first clear. Single-parent families are likewise proposed to have less versatility when standing up to push. Single parenthood raises further monetary difficulties intensifying the degree

of stress, perhaps causing more troubles in parent-kid connections. The pervasiveness of destitution in the single-parent family has been assessed to be just about as high as half contrasted with around 5% in two-parent flawless families. This financial drawback can additionally prompt higher paces of passionate and social issues in youngsters.⁶

Parents with mental illness; history of parental psychopathology inclines youngsters to expanded paces of sadness and other psychopathology when contrasted with offspring of guardians who don't have any full of feeling ailment. Further, contemplates have additionally shown that the course of misery in these youngsters might be more constant with expanded paces of backslide. It additionally gives the idea that the mother's full of feeling state has a more significant impact on the kid than the father's disease and the distinction being genuinely huge. As referenced beforehand, parental conjugal hindrances additionally influence kid's danger for psychopathology and likely interweave with parental psychopathology further prompting conjugal disunity.⁶

Parental divorce; There is evidence divorce is associated with a negative consequence for children. Psychological and behavioural distresses are common. Boys in particular are at increased risk for conduct problem. Educational attainment and motivations are often compromised. Children in the divorcing family often show behavioural changes before their parents separate.

Social and environment

Poverty; poverty and social disadvantage mostly associated with a deficit in children cognitive skills and achievements. Disruptive behaviour associated with family poverty. Boys were affected more than girls. Increased risk for conduct problems for children in a family facing persistent economic stress. Evidence suggests effects were indirect. Poverty imposed stress on parents and reduces supports available to them. This in turn increases the harsh parenting and reduces parents emotional availability to their children need.⁷

Neighbourhood; the rate of childhood disorder varies in different neighbourhood and communities. Urbanization is frequently associated with an increased risk of disorder.

Media

An assortment of overviews going back to the extent that the 1930s have shown that a generous extent of kids experiences intense unfortunate responses to different parts of the substance of media, particularly films, TV dramatizations, and the news. Co-relational investigations uncover a relationship between the measure of TV survey and rest issues, and review reports uncover that extraordinary, an injury like indications from media openness are basic in youngsters and teenagers.⁸ Formative contrasts are significant impacts on the thing

are terrifying and on which systems for mitigating media-instigated fears are compelling. The outcomes of openness to material that is terrifying to an offspring of a particular formative stage can be emotional. It is regularly hard to quiet a kid who has been seriously terrified by a program or film, and the subsequent loss of rest and uplifted degrees of pointless uneasiness can cause physical, psychological, and enthusiastic issues. Accordingly, endeavours to protect kids from the improperly upsetting substance are warranted. Little exploration has been led on intense dread responses conveyed by more up to date advancements, like the Internet, online media, and convenient gadgets.⁹

Physical activity

Leisure-time physical activity was measured by just asking three questions. Mostly physically inactive people are endangered to severe risk of anxiety and depression. Other non-communicable diseases such as hyperlipidaemia, cardiovascular diseases, diabetes mellitus are also associated with physically inactive children than physically active children in later ages of life.⁸

Chronic physical illness in children

The prevalence of chronic physical sicknesses and their relationship with mental problems was surveyed utilizing information gathered by essential primary care paediatricians. A chronic sickness was analysed in 1573 (15.6%) of 10,058 youngsters of age 4 to 16 years, 945 (9.4%) of whom had a "serious" disorder, 535 (5.3%) had a minor issue (hay fever or dermatitis), and 121 (1.2%) had a speech or language issue. Social issues were distinguished all the more frequently among patients with "serious" disorder than among those without chronic sickness (2.4% versus 1.7%), as were passionate issues (5.0% versus 3.1%). Among those with "serious" conditions including the CNS, the commonness of behavioural (5.2%) and emotional (10.4%) messes was as yet higher. Even though youngsters with "serious" messes not including the CNS likewise showed raised predominance paces of behavioural (2.1%) and emotional (4.5%) aggravations, this increment didn't arrive at factual importance. No relationship with "minor" chronic illness was found. The adverse consequence of these emotional well-being issues on the youngster was more serious when a chronic disease was likewise present, however, references for psychological well-being administrations didn't mirror his affiliation.¹⁰

Child abuse

Domestic violence is associated with childhood mental disorders. According to parents reports, 4% of children had witnessed severe domestic violence. Increased number of children in the family, older age children, ethnicity, physical inability, separated parents using a divorce, rented livelihood, disastrous neighbourhood, the emotional and mental health of the

mother are all the factors that greatly played a role in the mental health of children. Severe domestic violence increased the occurrence of conduct disorder by 3 folds. It is high time to create awareness regarding this to the society to bring light to the lives of growing children. Living with a stepparent increased the risk of being abused by 30 to 40 times versus 14 times the risk when living with a single parent. Parents who were abused in their childhood were shown to act more aggressively toward their children.⁶

Bereavement

Family structure plays an important role in the mental health of both parents and children. Family disruptions have varying defects, behavioural and emotional problems are more in cases of divorce than the loss of one parent (bereavement). Substance abuse, lack of money and proper attention from parents are certain risk factors. About 30% children are found to living with surrogated father. Statically difference was noted that mother's affective state influence the child more than that of father's. It is also found that the psychopathology of parents influences the rate of depression in their children. Economic disadvantage of a single parent after the loss of one parent causes increased risk of behavioural and psychological problems in the children.

Exclusion from school

Children with a disorder were more likely to play truant (8.5%) than children without a disorder 0.8% rates were higher in emotional disorder than a behavioural disorder. Boys were affected more than girls. In about 3 or more occasions, approximately one child in twenty with the hyperactive or behavioural disorder had been excluded from school.

CONCLUSION

High incidence of mental health illness, especially mood disorders in the parents and siblings of depressed children are more prone to childhood depression. It was suggested that vulnerability to develop depression is inherited and exposure to environmental stress leads to mental illness. Staying away from parents was found to be an important risk factor for depression in children. Self-care support is essential for the prevention of mental health issues. Education regarding mental health must be provided from the schools to make them stronger. Mental health awareness programme to be implemented for the well being of the children in their later ages of life.

Recommendations

Since mental health care at an early age has a positive impact on the mental health of adults, schools are important. Schools are the ideal location for mental health literacy and should be the site of health services that integrate mental health with all health care, either through

school-based health centres' or smaller online-based activities with a combination of health and mental health providers. READY is a family-based intervention programme to prevent mental health problems. Good interaction between teachers and students which include interviews, interactive games, cooperative and non cooperative games may have a positive impact on children.

Funding: No funding sources

Conflict of interest: None declared

Ethical approval: Not required

REFERENCES

1. Kessler RC, Berglund P, Demler O, Jin R, Merikangas KR, Walters EE. Lifetime prevalence and age-of-onset distributions of. *Arch Gen Psychiatry*. 2005;62: 593-602.
2. Mills C, Stephan SH, Moore E, Weist MD, Daly BP, Edwards M. The president's new freedom commission: Capitalizing on opportunities to advance school-based mental health services. *Clin Child Fam Psychol Rev*. 2006;9(3-4):149-61.
3. Dowdy E, Ritchey K, Kamphaus RW. School-Based Screening: A population-based approach to inform and monitor children's mental health needs. *School Ment Health*. 2010;2(4):166-76.
4. Hennessy S, Rojas-Drummond S, Higham R, Márquez AM, Maine F, Ríos RM, et al. Developing a coding scheme for analysing classroom dialogue across educational contexts. *Learn Cult Soc Interact*. 2016;9:16-44.
5. Cherlin AJ, Furstenberg FF, Chase-Lansdale PL, Kiernan KE, Robins PK, Morrison DR, et al. Longitudinal studies of effects of divorce on children in Great Britain and the United States. *Science*. 1991; 252(5011):1386-9.
6. Behere AP, Basnet P, Campbell P. Effects of family structure on the mental health of children: A preliminary study. *Indian J Psychol Med*. 2017;39(4): 457-63.
7. Garcia-Carrion R, Villarejo BC, Villardón-Gallego L. Children and adolescents mental health: A systematic review of interaction-based interventions in schools and communities. *Front Psychol*. 2019;10(APR):1-10.
8. Cantor J, Wilson BJ, Wilson BJ. Media and violence : intervention strategies for reducing aggression media and violence: intervention strategies for reducing aggression. *Front Psychol*. 2015;3269:37-41.
9. Thakur K, Kumar N, Sharma NR. Effect of the pandemic and lockdown on mental health of children. *Indian J Pediatr*. 2020;87(7):552.
10. Sadler K, Vizard T, Ford T, Goodman A, Goodman R, McManus S. Mental health of children and young people in England. *Community*. 2018;11:233-44.

Cite this article as: Sundaram R, Rizvana SAM, Aishwarya T, Anbarasan V, Ganesh BSM. Mental health in children: a view on social attribute. *Int J Community Med Public Health* 2021;8:3694-7.