

Child And Adolescent Psychiatric Epidemiology In India

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Mental health is an integral and initial component of health. The world Health organization (WHO) constitution states. "Health is a state of complete physical, mental and social Well-being and not merely the absence of disease or infirmity." More than 450 million people suffer from mental disorders worldwide. In India, Mental health services, especially for children and adolescents, are limited both in terms of number of facilities as well as trained professionals. The majority of mental Health services are restricted to urban areas that are medical college or regional mental health institutes. Mere presence of a treatment facility does not guarantee that all children/adolescents suffering from mental illness will utilize such services. In fact most of the time there is significant delays from the patient side in accenting mental Health services either because of lack of awareness or associated stigma. It is high time to promote positive mental health in children, adolescents and their parents through health education. Parental counseling is of almost importunes in order to avoid the delay in treatment seeking mental Health is an integral and in entail component of Health.

The importance of psychological well-being in children and adolescents, for healthy emotional social, Physical, cognitive and educational development, is well recognized. However a large gap exists, in the area of prevention and mental health promotion that mainly health into pediatric primary care and strength ending of the existing human resources and infrastructure. The Indian Association for child and Adolescent mental Health (IACAM) conceived of long cherished dream of those mental health profesional who have shown greater commitment to the mental Health problems of children and adolescents over long years. The idea of floating an association of child mental health profesional originated in 1988 on the occasion of " National workshop on child Mental Health". Needs and priorities" organized by Dr. Sarita

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Malhotra, Department of Psychiatry at post graduate Institute of Medical education and Research, Chandigarh on Nov 25-26 1988. The idea was mooted among the prominent psychiatrists which received an overwhelming positive response. Considerable amount of support was mobilized and it was finally possible to prepare a memorandum introduced formally at first National Conference of child and Adolescent Mental Health in Pune on Nov. 3-4-1990.

The importance of epidemiological studies lies in recognition of cases that do not come to treatment settings. The increasing focus on child adolescent mental health in India points to the necessity of epidemiological studies on children. Although these are a fuel such studies done in different parts of India in different socio-editorial settings, data from those can't be generalized to the entire country. This need can be served by meta-analysis. There has been no meta-analysis reported from India for the child and adolescent psychiatric epidemiology.

Introduction:-

What is Psychology-Psychology is the science of the mind and behavior. The word " Psychology" comes from the Greek word psyche meaning " breath, spirit, soul". And the Greek word logia meaning the study of something. According to Medilexieon's Medical dictionary, psychology is " The profusion (clinical psychology), scholarly discipline (academic psychology), and science (research psychology) concerned with the behavior of human and animals, and related mental and physiologic proneness." Although psychology may also include the study of the mind and behavior of animals, in this psychology refers to humans.

Psychology- Studying the mind.

The mind is highly complex and enigmatic. Many wonder how psychologists can study such an intricate, seemingly abstract and extremely sophisticated thing. Even if scientists look inside the brain, as in an autopsy or dewing a surgical operation, all they see is gray matter (the brain). Thoughts, cognition, emotions, memories, dreams perception, etc, can't be seen physically, like a skin rash or heat defect.

Experts say that the approach to psychology is not that different to other sciences. As in other sciences, experiments are devised to confirm or disprove theories or expectation. For a physicist, the roué date during the experiments may be atoms, electron, the psychologist human behavior is the raw data.

Where does psychology lie compared to other sciences-Many say that psychology lies at the crossroads of other disciplines, such as medicine, linguistics, sociology, biology, artificial intelligence, anthropology, sociology and even history. For example- neuropsychology- which looks at how different brain areas are involved in memory, Language, emotion, etc- over laps with biology and medicine.

There are many branches of Psychology. The following are seen as the main branches of psychology.

- (i) **Clinical psychology:** clinical psychology integrates science, theory and practice in order to understand, predict and relieve Maladjustment, disability, and discomfort. Clinical psychology also promotes adaption, adjustment and personal development. A clinical psychologist concentrates on the in tell.
- (ii) **Cognitive psychology:** Investigates internal mental processes, such as problem solving, memory, bearing and language.
- (iii) **Evolutionary psychology:** looks at how human behavior has been affected by psychological adjustments during evolution.
- (iv) **Forensic Psychology:** involves applying Psychology to criminal investigation and the law.
- (v) **Neuropsychology:** studies the structure and function of the brain in relation to clear behaviors and psychological processes.

Methods and Material:-

Methods:- Sixteen community based studies on 14594 children and adolescents; and seven school based studies on 5687 children and adolescents, reporting prevalence of child and adolescent psychiatric disorder were calculated psychology Impact on Children:

India has one of the highest suicide rates among teenagers and young adults between the age of 1s to 29. Failure in examination is among the top 10 reasons for suicide in the country while family problems among the top three while initially, farmers from religion with poor monsoons were considered the most vulnerable group, recent studies between 2014-2017 revel that young adults of weathered and eructated families in the urban built are more prone to ending their lives. According to a 2016 report about 3, 31 students in the country took their lives in 2015 after having failed in examinations. Most of these suicides are a result of parental pressure and high expectation, not consummate with the students skills or interests, say experts. Maharastra, Tamilnadu, Andhrapradesh, West Bengal and MadhaPradesh seem to have set the

worst precedents in thaws field. Even in cases where suicide is not on the child's mind, such undue pressure coming groom parents-people who are changed with nurturing and caring for the child-leads to a number of psychological issues, manifesting in different stages of youth and adulthood.

Signs that a child may be stranded:

- (i) **Disinterest** is one of the greatest signs of a strained child. Lack of interest of studies, playtime, television and entertainment or outdoor activities are tell tale signs that something is not quite right. While have to investigate the cause do also look out for extraordinary fatigue, lack of hunger, disturbed sleep patterns etc.
- (ii) **Watch out for frequent fortes of 'sicknesses.** This is a common sign among younger children: Frequent headaches, stomach aches, and induced nausea are some ways a young child may deal with fear or anxiety general or with regard to one particular activity.
- (iii) **Negativity and negative behavior** I almost revealing when it comes to a child's state of mind. Negative behavior could include mood swings, agrarian , social isolation or refusal to interest with peers and anxiety
- (iv) **When it comes to teenagers,** parental pressure and resultant stress may translate into rebellion. Undesirable activities such as smoking drug addiction, playing truant from school etc. May be Manifestations of an inability to deal with parental pressure.
- (v) **Underachievement** in activities that your child generally likes participating in may be a cry for help. Excessive pressure may lead a child to perform poorly in Academies in activities that he/she naturally good at.

Positive Parenting:-Introspect- Introspection is a key element of parenting .After a long day review your interactions with your child. Have these interactions been one-sided or does our child have the right to disagree? Has our own behavior been compelling rather than understanding and inspiring?

Encourage- Encouragement, Coming from parents, can be child's stepping stone to success. A parent is a key player in his/her child's life and shall be the one our child will depend on to teach him/her confidence, hand work and excellence. It is also the responsibility of the parents to teach their child to accept failure without losing heart. Failure is a cue to seek hewer opportunities and not an occasion for mourning.

Interact-Some of the best times your are likely to spend with your child are those when you are playing, laughing and participating in fun or leisure activities, Make these times an opportunity to build friendship . Any word of advice that you shall then have will not sound like a commandment and will not sound like a commandment and will help strengthen the child personality.

Seek help-seeking help (personal) for the parents and the child is no longer taboo. In fact family counseling is a n e nary part of life given the fast paced lives. We lead Psychologists and counselors are trained to identify negative behavioral patterns and help the parents break them.

About Children in Manusmriti-

The Sanskars-Manusmriti says that 16 " Sanskars" that is proper rituals, should be done for and since the time of conception, during pregnancy at birth, during childhood, adulthood, old age and at death because these are beneficial for this and future lives.

The " Sankars " not only instill good qualities in a child but also remove lead habits. There are described briefly as follows:

- (i) Garbhadhan Sanskar: Even before a child is conceived, Manurmriti says- adults desirous of having a child should conduct themselves in the prescribed manner to conceive a healthy child. Veerya (Sperm) should be given properly for fertilization.
- (ii) Punsavan: This is done for birth of child when the signs of pregnancy appear or in 2nd or 3rd antenatal month.
- (iii) Seemantonayan: This is done in the 4th Month of antenatal period and is for the stability of the fetus.
- (iv) Jaatkarm: This is done at birth severing the cord in which the new born is made to lick small amounts ghee (Clarified butter) and honey.
- (v) Naamkaran: Here the child is named on 10th -12th postnatal or any other good day.
- (vi) Nishkraman: The child is taken out of the house for a stroll in fresh air in 4th month or three after.
- (vii) Annprashan: The Child is fed easily digestible tasty food consisting of pulses and cereals.
- (viii) Mundan or Chudakarm: Here head of shaven at 1st or 3rd year of birth.

Discussion:-The above account of ancient Hindu IMCC shows that children were considered precocious in India since ancient times. There-

fore their being healthy, intelligent, well-mannered, pro-social, well educated and shelled was considered very important. Girls were also educated as were boys but in a separate school and by female teachers. There was therefore, no bias against the girl's education and ancient Indians were progressive in this regard. The students were taught how to behave and use proper manners. They were advised to acquire positive qualities like truthfulness, cleanliness and give up bad habits like being aggressive, Jealous, Vindictive, greedy or lazy. There remind one of the modern psychiatric interventions of teaching life skills to school children to empower them and exchange their abilities, and prevent emotional behavioral and conduct disorders.

Ancient Indian health related and Medical concepts about children:- Very few psychiatric disorders have been identified in children. It is possible that epilepsy in ancient Indian texts may also have included dissociative disorder.

Compared to contemporary modern pediatrics and child and adolescents psychiatry the above may seem very simplistic or primitive. However, it must be noted that this was so in keeping with the scientific and technological developments of the ancient times, Ayurved, still survives and so does religious treatment and faith healing. The latter may have very adverse, even fatal consequences sometimes.

Conclusion:- One thing is certain, single window operation for child mental health, education and welfare will surely go a long way in successful implementation of various child legislations providing right control, quick result and ensuring Justice for successful mental health programs.

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