

PREVALENCE OF ASSOCIATED FACTORS OF DEPRESSIVE SYMPTOMS AMONG SCHOOL GOING CHILDREN'S.

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Abstract:

Background - Depression is the most common mental health problems in worldwide. In adulthood, this mental problem does not recognize because of people don't want to share their mental problem to health care professionals, they afraid to get a psychiatric help. In the last century, the medical community did not accept the presence of mental illness to the children. It was believed that children are lacking the mature psychological and cognitive structure.

Objective - 1. To find the incidence of related factors of depressive symptoms among school going children's.
 2. To associate the prevalence score with selected demographic variables.

Methodology –A cross sectional study was conducted among 45 randomly selected school going children's (6 to 13 year) those fulfil the inclusive and exclusive criteria, the approach use in the study that is quantitative approach. Setting of the study done by selected school Wardha district, the sample size calculated by using formula and school going children's is sample, and sample collecting method is non probability convenience sampling. Depression and associated factors is check by (PHQ-9) scale by semi structured interview schedule. The primary outcome is to fine out the prevalence of depressive symptoms among school going children's. And secondary outcome is associate the prevalence score with selected demographic variables. Ethics approval was obtained from IEC, DMIMS (DMIMS (DU)/IEC/Aug-2019/8685). The conclusion will be drawn from the results and will be published in peer reviewed journal.

Expected Results: In this study the researcher evaluate the prevalence and the associated factors of the depressive symptoms among school going children, this study will show the depression score according to minimal, moderate, mild, moderately severe and severe depression.

Keywords – assess, prevalence, associated factors, depressive symptoms, school going children's.

Introduction:

In world wide the mental disorder, depression is the mostly found. In adulthood, this mental problem does not recognize because of people don't want to share their mental problem to health care professionals, they afraid to get a physician consent. In the last century, the community people not accepting the presence of the mental illness to the children. Now a days because of some research can provide the evidence about mental illness and treatment and also the medical field are in progress so people believe disease condition and death rate. Earlier studies shown the prevalence of depression in adolescents that is (10%–60%).¹

The mood disorder (depressive mood) can detailing the all-around emotional lows, in this condition people may go on the sadness, in a severe case person can do end of the life.² the person can suffering in prolong period of time in some situation in that he feeling sad and not participate in social, personal, occupational life. The person feel low in all life situations and not feel pleasure in daily life's so if the individual can feel this things in their life so he/she consider as depression.³ Effect of depressed mood in the particular age that is remarkable. This can provide negative action on the friend, social and family relationship.⁴

The developmental time between the children to adolescent, this duration can be crucial for the children's because those period are the mental development of child and the mood is instable this responsible for young children to get depression. Behavioural changes is related to the hormonal changes can occur so because of that the diagnose of depression is difficult. Some report reveals that there is 70% of youngster not get proper treatment for depression.⁵ some depressive symptoms include inadequate sleep, weakness, reducing strength of concentration, reduce daily living activity, less joy and happiness in life, there is loss of appetite which result reducing weight, try to suicidal attempts.⁶

Rationale of study –

Depression can be found as important diseases condition that can be estimated the worldwide and disease provide burden over the countries Murray 2006 as we see the incidence rate of the depression is mostly seen in the young age peoples in 12%. In our children groups' age of 6-13 years in our nation is suffering from the depressive disorder and most common in south Asia region with 86 million peoples. Depression in children's is related with less school academic performance, unusual social activity, start drinking, try to end up life, and death. The preventive programs and early treatment that aimed to reduce the incidence of mental disorder. This provide the idea of the effectiveness and assessing the preventive programmes'.⁷

According to the disease ratein studies, 15% to 20% of the children and young person can have a mood disorder to their whole life and highly incidence and less treatment can responsible for life threatening condition such as suicide attempts and in daily life the children's can experience academic failure, inter personal relationship consequences, not get job, they are going to start alcohol and other abuses and delinquency in adulthood. The consequence of early present of mood disorder can find one year after young age. Depressive mood disorder symptoms can increases by the age and it going to mild to major mental disorder. Major depression causes because people not getting proper treatment for mental disorder. In such condition very necessary to develop preventive programmes of this crucial condition.⁸

The most suicide and suicidal behavior can mostly causing by the major depressive disorder. Younger depression can causing a chronic waxing courses and increasing risk major depression in adulthood.⁹ some research can showing the depression can cause early in adulthood as compare to past life of people.¹⁰ the rapid urbanization and family life style may the cause of depressive symptoms in children for longer period of time.¹¹ In adolescent the prevalence of depression that is 10%-60% according to some studies.¹² there is no specific tool available for the assessment of the depressive symptoms so the screening and treatment in the only option for depression.¹³

Objective - 1. To assess the prevalence of associated factors of depressive symptoms among school going children's. 2. To associate the prevalence score with selected demographic variables.

Methodology: A cross sectional study. It will be conducted in selected school in Wardha district.

Inclusion Criteria: Study participants those will be between 6-13years in age group.

- School children's those who are 6-13 years and only.
- Those are present at the time of data collection.

- Who are given their consent for participating in the study?
- They are known about English or Marathi language.

Exclusion Criteria: Study participants those having below ailments that can excluded in this study.

- Those who are attend the similar type of study.
- Those are taking treatment of any mental illness.

Withdrawal Criteria – Study participants those fulfil the below criteria will be withdrawn in the study:

- Want to withdraw from the study
- Incidence of a serious illness
- Not fulfilling study schedule

Sample size:

Sample size was the total number of subjects actually participating in the study.

In this study sample size was 457/M??MM school going children's.

Sample size formula with desired error of margin

$$n = \frac{2\alpha^2/2 \cdot P \cdot (1-P)}{d^2}$$

where,

$2\alpha/2$ is the level of significance at 5% i.e. =1.96

P = prevalence of depressive disorder = 5.6% = 0.056

$$n = \frac{1.96^2 \times 0.056 \times (1-0.056)}{0.07^2}$$

= 41.44 student needed
 = 45 samples needed in the study.

Outcome measures –

The primary outcome is to fine out the prevalence of depressive symptoms among school going children's.

Secondary outcome is providing the awareness among the community people.

Data management and prevalence assessed - The demographic data (age, sex, education, types of family, monthly income, religion) before conducting the data collection the consent taken from participant, school management and introduce our self to school teachers and students so good interpersonal relation can develop and after that structured questionnaire scale will use as a tool with the interview structure method so children able to understand the question and give proper answer , the scale consist 9 question so I will give 2 minute to each question to children.

Statistical analysis- By using SPSS software version 22 the statistical analysis can be done. For analyzing the data unpaired t- test (Wilcoxon Rank-sum) and Paired t-test (Wilcoxon sign rank) can be apply.

Ethics and dissemination- The Ethic Committee of DMIMS (DMIMS (DU/IEC/Aug-2019/8309) can kindly approved the research study, consent can be sign by all the researcher participant. The study result can be published in peer-reviewed publication and disseminated the study result.

Expected Outcomes/Results:In this study the researcher evaluate the prevalence and the associated factors of the depressive symptoms among school going children, this study will show the depression score according to minimal, moderate, mild, moderately severe and severe depression.

Discussion: A study will be conducted to find the prevalence of associated factors of depressive symptoms of school going children's. This study is based on school based survey and the cross sectional design would be used in this study, quantitative approach can be used in the study. The sample size can be calculated in statistically by using prevalence of previous studies and sample size is 45 school going children's selected in particular school of Wardha district, the sample collection done by using non probability purposive sampling. According to the study result the some school going children's may suffering with the associated factors of depressive symptoms so the researcher want to evaluate those kind of students who can need to attention so the researcher can assess the associated factors of depressive symptoms by using patient health questionnaire scale to categorise the student in mild, moderate and severe condition. This study can promote awareness to the children's, teacher as well as parents to give attention on the mental health of the child.

A similar study done by Man Mohan Singh, et al. This study shown the two fifty 40 % of adolescent had depressive disorder, 7.6 % major depressive disorder and 32.5 % other depressive disorder. In terms of severity, 29.7 % had mild depression, 15.5 % had moderate depression, 3.7 % had severe moderately severe depression and 1.1 % had severe depression respectively.¹⁴

Another similar study was conducted by Mr. Mukesh Shukla *et al.* this study shows about one-third of school-going adolescent girls were having depressive symptoms. The prevalence of depression was found to be 39.7%.¹⁵ Studies related to psychosis and depression from this region by Pal et al¹⁶, Ransingh et al¹⁷ and Behere et al¹⁸ were reviewed. Khatib et al conducted systematic review on effect of electronic media among children and adolescents on substance abuse¹⁹. John et al studied about the influence of parenting style on behavioural patterns in children²⁰. Mishra et al reflected on autoimmune neuropsychiatric disorders of childhood in their study²¹. Articles related to infant and young child feeding^{22,23} and Dengue prevalence²⁴ among children are reported.

Conclusion: The statistical analysis can show the conclusion.

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