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RESEARCH ARTICLE

A STUDY TO ASSESS THE KNOWLEDGE AND ATTITUDE OF THE FAMILY MEMBERS REGARDING THE IMPACT OF ALTERED PARENTING AND HEREDITY ON PSYCHIATRIC PROBLEMS IN SELECTED PSYCHIATRIC HOSPITAL ,NELLORE, A.P

G. Deepika^{*1}, Rajeswari.H² and Anjani Devi .Nelavala³

^{1,2,3}Mental Health Nursing, Narayana College of Nursing, Chinthareddypalem, Nellore, Andhra Pradesh, India

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ABSTRACT

Introduction: Mental health can be defined as the successful performance of mental function ;resulting in the productive activities ;fulfilling relationship with other people and the ability to adapt to change and cope with adversity from early childhood until late life

Objectives: To assess the level of knowledge of the family members regarding altered parenting and psychiatric problems

To assess the level of knowledge of the family members regarding heredity and psychiatric problems .

To assess the attitude of the family members regarding altered parenting and psychiatric problems .

To assess the attitude of the family members regarding heredity and psychiatric problems.

Material and methods: The present community based cross- sectional study was conducted in NMCH,at Nellore, Andhra Pradesh state(India). The study sample included 60 family members of psychiatric patients selected by convenience sampling technique.

Results and Discussion:- the result shows that 56% of family members are having below average knowledge,43%are having average knowledge and 1% is having above average knowledge regarding the impact of altered parenting and heredity on psychiatric problems.55% of family members were having below average attitude level,41% have average attitude level and 4% were having above average attitude regarding the impact of altered parenting and heredity on psychiatric problems. The Co-relation coefficient of attitude and knowledge(r) is 0.3942.

Conclusion: The findings of study revealed that there is a significant relationship between the knowledge and attitude of the family members on impact of altered parenting and heredity and psychiatric problems

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INTRODUCTION

“There is a tide in the affairs of men, which, when taken at the flood, leads on to fortune. Omitted, all the voyages of the life is bound and in miseries. On a full sea are we how afloat, And we must take the current when it serves, or lose our ventures”.

Mental health can be defined as the successful performance of mental function; resulting in the productive activities; fulfilling relationship with other people and the ability to adapt to change and cope with adversity from early childhood until late life ,mental health is the spring board of thinking and communication skills, learning, emotional growth resilience and self esteem.

Our health and our environmental health are our most valuable asset. It is often taken granted when it is lost. Health and disease are concepts that are only relevant to biological system. Organisms requires a balanced ratio of resources for survival.

A failure to achieve a resource causes a deficiency while a surplus of any resources results in toxicity.

In more complex mobile organisms the nervous system co-ordinates the function of maintaining balance ,even when the internal and external environment are constantly changing .In a state of health ,there is pursuit of beneficial defences against harmful aspects of the environment. Evert process, including mental process co-relates with environmental circumstances and simultaneous physiological, biological and biochemical events within the body and brain.

Behaviour, cognitions, emotions, vegetative functions, parenting, neuronal architecture, neural chemistry and gene expression reflect the life situation and maintain balance ,by precipitating an adaptive allocation of resources, resulting in the capacity to experience to experience pleasure, well being, fulfilling relationship and productive activities.

*Corresponding author: G. Deepika

Mental Health Nursing, Narayana College of Nursing, Chinthareddypalem, Nellore, Andhra Pradesh, India

Need Of The Study

According to WHO , mental and behavioural disorders are estimated to amount for 12% of the global burden of diseases ,yet the mental health budgets of the majority of countries constitute less than 1% of their total expenditure of the health.

About 2-5% of India's population suffers from some form of mental or behavioural disorders. Around 1% has serious form of mental disorder requiring urgent care at any one point of time .Not less than 10-15% of those attending general health facilities have a common mental disorder- Health Dialogue

There are more than 54 kinds of mental disorders and it can include anything from anxiety disorder, eating disorder, childhood disorder, mood disorder, cognitive disorder, personality disorder to more serious condition like schizophrenia and other psychiatric disorders or substance related disorders. Mental disorders rank second in term of causing disability-Health Dialogue 2012.

Schizophrenia affects between 1-2% of people .The illness occurs all over the world and the incidence is similar in different cultures .Health Dialogue 2012.Psychosomatic illness among Indian patients has been found to be high .Owing to the stigma attached to psychiatric illness, most patients remain reluctant to visit a psychiatrist. There is a an overcrowding in the medicine other specialist department .A psychiatry department with consultations liaison psychiatric service in each government hospital is the need of the day.-JIMA, Nandini Chakrabarathi.

Many movies have depicted a child who was troubled, or one who was troubled or one who was set in problems turning out to be criminal when he or she grew up into an adult. 450 million people worldwide are affected by mental, neurological or behavioural problems at any given time .These problems are expected to increase considerably in the years to come.

Mental problems are common to all countries cause immense human suffering social exclusion, disability and poor quality of life.

Once in every 4 person going to health services has at least one mental, neurological or behavioural disorder. Most often these are neither diagnosed nor treated.

As per the WHO theme 2010," Urbanization of Health", researcher felt that urbanization is having an amazing effect on parenting which in turn will lead to psychiatric problems. Hence there arises a great necessity to have an assessment study on the selected topic.

Objectives Of The Study

1. To assess the level of knowledge of the family members regarding altered parenting and psychiatric problems

2. To assess the level of knowledge of the family members regarding heredity and psychiatric problems.
3. To assess the attitude of the family members regarding altered parenting and psychiatric problems.
4. To assess the attitude of the family members regarding heredity and psychiatric problems.

Hypothesis

H1: There will be a significant relationship between the knowledge of the family members on impact of altered parenting and heredity and psychiatric problems.

H2: There will be a significant relationship between the attitude of the family members on impact of altered parenting and heredity and psychiatric problems.

H3: There will be a significant relationship between the knowledge and attitude of the family members on impact of altered parenting and heredity and psychiatric problems.

H4: There will be significant relationship between knowledge and attitude and selected demographic variables: age, education, economic status, family type, geographical background of residence on impact of altered parenting and heredity on psychiatric problems.

METHODOLOGY

Research approach: A quantitative research approach was utilized.

Research design: A descriptive research design was adapted.
Setting

A study was carried out in NMCH, Nellore, A.P

Population

The present study population comprises of family members of psychiatric patients in NMCH, Nellore, A.P.

Sample

The sample for the present study consists of family members of psychiatric patients in NMCH, Nellore, A.P..

Sampling

Non probability convenience sampling was employed to select a sample.

Sample size The sample size consists of 60 family members of psychiatric patients in NMCH Nellore

Description of the Tool

Structured knowledge questionnaire consists of two parts.

Part-I: It consists of demographic data such as age, type of family, economic status, education, geographical background of residence.

Part-II: it consists of 30 multiple choice questions based on impact of altered parenting and heredity on psychiatric problems

Data Analysis

Table No 1 plan for data analysis

S.NO	Data analysis	Method	Remarks
1.	Descriptive	Frequency and percentage Mean, median and standard deviation	To describe the distribution of demographic variables To determine the knowledge of family members on impact of altered parenting and heredity and psychiatric problems . To find out the association between family members on impact of altered parenting and heredity and psychiatric problems.
2.	Inferential	Chi-Square	

RESULTS AND DISCUSSION

The data was organized, tabulated, analyzed and interpreted by using descriptive and inferential statistics based on the objectives of the study. The findings were presented in the following sections.

The analysis of the data was mainly classified as:-

Section-I

Frequency and percentage distribution of demographic variables of knowledge of the family members regarding altered parenting and psychiatric problems.

Section-II

1. Frequency and percentage distribution of knowledge of the family members regarding altered parenting and psychiatric problems.
2. Frequency and percentage distribution of attitude of family members

SECTION -III

Findings related to relationship between knowledge and attitude of family members.

Section-IV

Association between the knowledge and attitude and selected demographic variables.

RESULTS AND DISCUSSION

Section-I

Frequency and percentage distribution of demographic variables

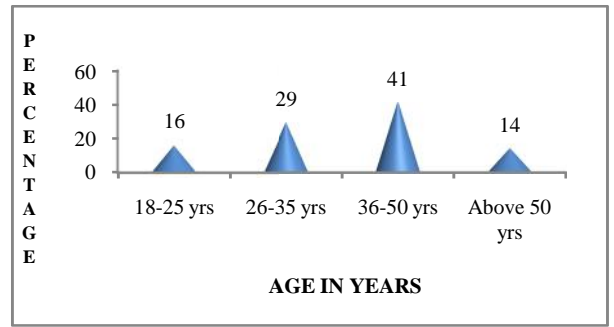


Fig 1 percentage distribution of family members based on age

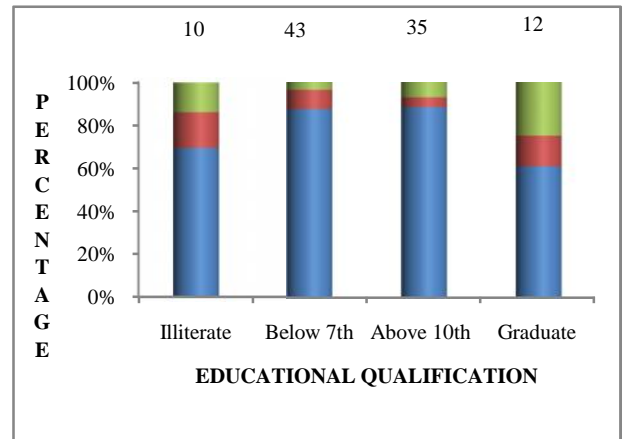


Fig 2 percentage distribution of family members based on educational qualification

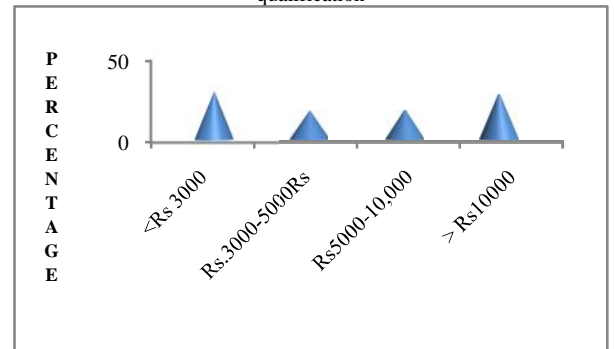


Fig 3 percentage distribution of family members based on income per month

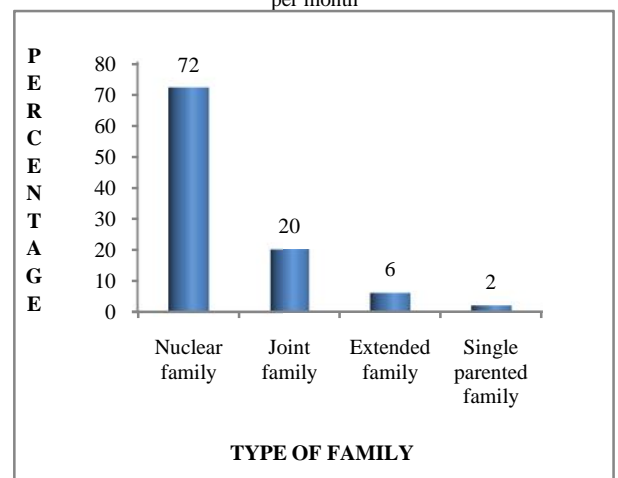


Fig 4 percentage distribution of family members based on Type of family

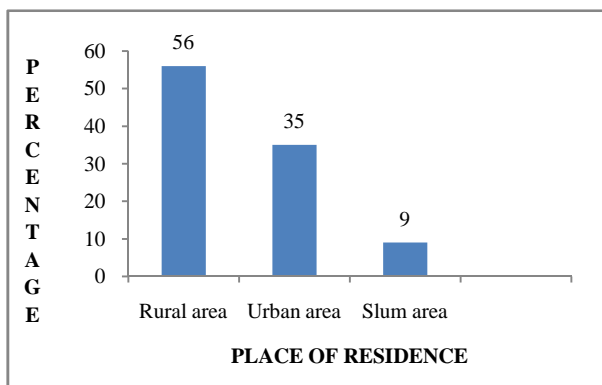


Fig 5 percentage distribution of family members based on Place of residence

Section-II

Findings related to knowledge of family members

- Knowledge score ranged between 2 and 24 and the maximum possible scores was 30.
- The mean percentage of knowledge of family members were 42.5% which is below average.
- The standard deviation was 14.898 for knowledge questionnaire.
- Above findings proves that the knowledge of family members is less i.e. below expected average line. Hence H1 is accepted.

Findings related to attitude of family members

- Attitude scale ranged between 43 and 117 and the maximum score possible was 150.
- The mean percentage of attitude of family members was 48.7% which is below average.
- The standard deviation was 12.422 for attitude scale.
- Above findings proves that the attitude of family members is less i. e, below average .Hence H2 is accepted.

Latha (1975) conducted a study to explore the attitude of relatives towards mental illness and mental hospital which affected further stay of patients in the hospital. The findings of the study revealed the stigma attached the mental hospital by the relatives acted as a hindrance for the discharge of the patient. Higher expectation of relatives reduced the chances of the patients leaving the hospital. The relatives previous experience of management of problems and their anticipation of future problems after the discharge of the patients decided whether the patient would be discharge or not.

Section-III

Findings related to relationship between knowledge and attitude of family members.

- 56% of family members are having below average knowledge,43%are having average knowledge and 1%

is having above average knowledge regarding the impact of altered parenting and heredity on psychiatric problems.

- 55% of family members were having below average attitude level, 41% have average attitude level and 4% were having above average attitude regarding the impact of altered parenting and heredity on psychiatric problems.
- Co-relation co-efficient of attitude and knowledge(r) is 0.3942,which lies between 0&1.Hence it is significant and our H3 is accepted.

Section-Iv

Findings related to relationship between knowledge and attitude and selected demographic variables.

- There is a significant relationship between knowledge and attitude and selected demographic variables: age, education, economic status, family type and geographical back ground of residence on impact of altered parenting and heredity on psychiatric problems. Hence H4 is accepted

CONCLUSION

The findings of study revealed that there is a significant relationship between the knowledge and attitude of the family members on impact of altered parenting and heredity and psychiatric problems.

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