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Research Article

**PSYCHOLOGICAL DISTRESS AMONG CHILDREN
BEING RAISED IN FAMILIES WITH EPILEPTIC MOTHERS****Kazi Humayun Rashid¹, Darya Khan Laghari², Khalil ur Rahman Kazi³ & Rahul Roy⁴**
Sir Cowasjee Jehnagir Institute of Psychiatry, Hyderabad
LUMHS Research Forum**Abstract:**

Background: Epilepsy is a problem of worldwide medical interest and in addition to incurring significant morbidity and mortality, it has a major psycho-social impact, that is limited not only to the individual experiencing seizures, but affects all members of the family. Younger members of the family have tender minds and are thus most affected.

Objective: To assess psychological distress among children being raised in families with epileptic mothers.

Methodology: This observational – cross-sectional analysis was conducted upon a sample of 100 children (of both genders and aged 3 to 6 years) presenting alongside their epileptic mothers to the Psychiatry Out-Patient Department of Liaquat University of Medical & Health Sciences and Sir Cowasjee Jehnagir Institute of Psychiatry, Hyderabad from January 2018 to June 2019. Basic bio-data of child and mother, sociodemographic details of family, disease history and particulars of the mother were obtained and recorded onto a structured questionnaire. Reduced version of Psychological Screening for Young Children aged 3 to 6" (PSYCAa3-6) tool was used to screen for psychological distress among children. The data obtained was analyzed using SPSS v.22 & Microsoft Excel 360.

Results: Among, the 100 children evaluated, 29% were females while the remaining 71% were males. Nearly 31% of the children were enrolled in schools. The mean number of siblings were 2 and most children were living with both parents. Psychological distress was present (in varying severities) in 59% of the children. The severity of psychological distress correlated with disease severity in mother. Other factors such as number of siblings, number of caretakers and socioeconomic status too played a part.

Conclusion: After careful consideration, it can be concluded that epilepsy among mothers does translate, more often than not, into psychological distress in children. Much care is needed to avert negative situation.

Keywords: Psychological Distress, Child Mental Health, Epilepsy, Child Behavior, Maternal & Child Health.

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INTRODUCTION:

Epilepsy is amongst the most common serious neurological conditions. The global prevalence of epilepsy is generally taken as between 5 and 10 cases per 1000 persons. Studies have shown various differences in epidemiological patterns of epilepsy around the world. ^[1] Few epidemiological studies of epilepsy are available from Pakistan. ^[2,3]

The recent estimates of population of Pakistan is nearly 200 million, whereas the total number of trained neurologists in Pakistan is estimated to be in just triple digits. Based on the available data, it is estimated that 1.38 million people are suffering from epilepsy in Pakistan, which makes it one neurologist available for an estimated 50000 sufferers of epilepsy. ^[4]

Epilepsy has a major psycho-social impact that is limited not only to the individual experiencing seizures, but affects all members of the family. Younger members of the family have tender minds and are thus most affected. Research suggests that discovered, in a comparison study, that epileptic families perceived themselves to be less close than either diabetic or control families. ^[5,6]

Withdrawal and social isolation may also occur within families, contributing to the overall pattern of social isolation. Anderson and Barton reported increased levels of anxiety among family members. A common preoccupation of family members was fear of injury and death of the patient occurring as a consequence of a seizure. Concern about the future of the person with epilepsy when family members were too old or too infirm to care was also expressed. ^[7,8]

Literature suggests that parents of children with a lower seizure frequency had fewer adjustment problems than parents of those with higher seizure frequency. Furthermore, parental perception of seizure control was positively related to parental adjustment in mothers. Rutter *et al.* reported in an epidemiological study carried out in the Isle of Wight that one-fifth of those mothers having children with epilepsy had a history of nervous breakdown; a greater incidence than in families with a child who had cerebral palsy or other chronic conditions. ^[9,10]

Researchers have investigated the psychological well-being, physical health, and social circumstances of families with an adult member who had intractable epilepsy. Forty-four family members completed the Hospital Anxiety and Depression (HAD) Scale. Elevated levels of psychological stress and social problems in families were noted when seizures were frequent and accompanied by injury. ^[11,12]

General physical health was poor. The levels of stress and dissatisfaction with their social situation were high. Poor emotional adjustment was associated with severity of tonic and atonic seizures, epilepsy type, and perceived low levels of support. Perceived practical and emotional support was derived mostly from the family. The perceived level of practical support received from services was inversely associated with depression, so that the lower the reported practical support, the higher the reported level of depression. Also, the lower the perceived emotional support from a partner, the higher the level of depression was reported.

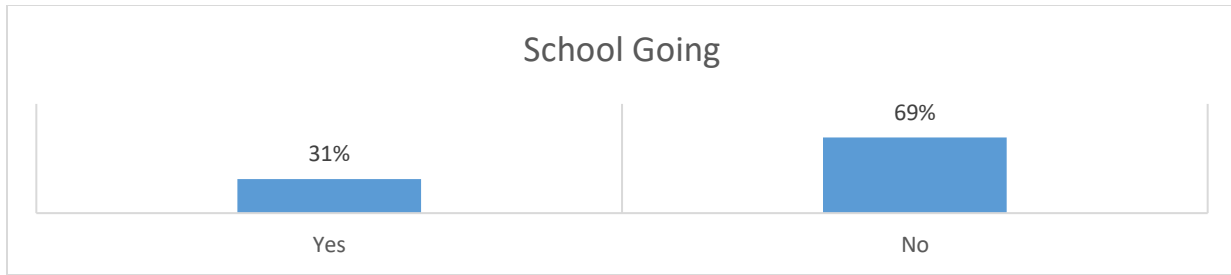
METHODOLOGY:

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RESULTS:

Among, the 100 children evaluated, 29% were females while the remaining 71% were males. Nearly 31% of the children were enrolled in schools.

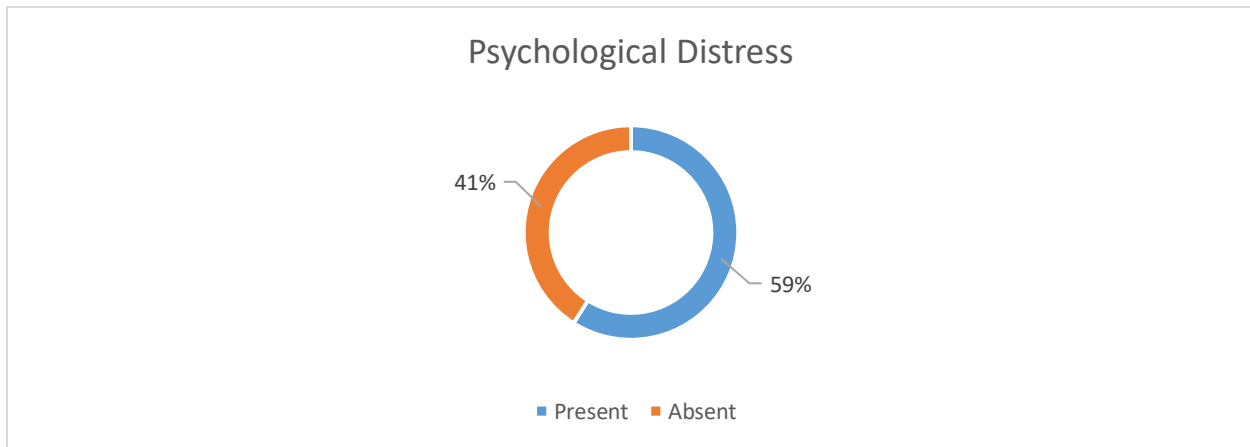
Age (Years)	Females	Males
3	11	14
4	16	26
5	7	10
6	7	9



The mean number of siblings were 2 and most children were living with both parents.

Siblings	Frequency
Up to 2	59
3 to 4	21
5 to 6	17
7 or more	3

Psychological distress was present (in varying severities) in 59% of the children.



The severity of psychological distress correlated with disease severity in mother. Other factors such as number of siblings, number of caregivers and socioeconomic status too played a part.

Variable	Mean PSYCa (Reduced Version – 22) Score	3–6
Disease Severity (Mother)	Mild	17
	Moderate	26
	Severe	37
Number of Siblings	Up to 2	31
	3 or more	19
Number of Caregivers	Up to 2	29
	3 or more	16
Socioeconomic Status	Low	35
	Middle	29
	High	17

DISCUSSION:

This survey has provided some support for our clinical impression of elevated levels of psychological stress

and social problems in families where an adult member has intractable epilepsy. The physical health of a number of individuals was also poor, although this

may be secondary to the older age group of this sample. ^[13]

It has been repeatedly reported in literature that chronic illness among parents (mothers) in particular, limits the ability of the family to care for the child and thus, opens the door for psychological distress associated with neglect. ^[14]

Additionally, witnessing ones mother suffer from repeated bouts of seizures has adverse effects on the psychological wellbeing of the child. The children at a younger age begin to fear for the safety of their mother and this sense of insecurity for their mother later translates into a deep rooted fear for their own wellbeing. ^[15]

Children begin to doubt whether in time of need, their mother would be able to come to their aid and their confidence and self-esteem begins to dip at a tender age when it is supposed to flourish. This state may follow them late into their adult years of life. ^[16]

CONCLUSION:

After careful consideration, it can be concluded that burnout among home caregivers of psychiatric patients is widespread and a real threat to not just the wellbeing and sanity of the caregivers but the patients as well since burnout impairs the caregivers ability to cater to the needs of the highly dependent and vulnerable psychiatric patients.

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