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Youth interrupted: Early separation, well-being and suicidal behaviour

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One in five adolescents in the world hails from the Indian subcontinent, have the highest rates of suicides in the world and is the second leading cause of death in the 5-24 years age group.

Aim: Epidemiological studies have been done from a cross section of adolescents living in rural and urban in-tact families. However, less focus has been given to the psychological well-being and suicidal behaviour of adolescents with early parental separation, traumatic life experiences and living in non-biological homes.

Method: Paper and pencil method assessed socio-demographic, suicide behaviour (SBQ-4) and psychological well-being (WHO-5) among 73 adolescents aged 10-18 years, living in ten relocated homes, registered with child welfare committee, using purposive sampling, descriptive cross sectional and single-subject design. Managers of two homes refused permission and thirteen schedules were excluded. Leading questions pertaining to early familial life or experiences in present homes were avoided due to the adolescent's vulnerable situation. Confidentiality assured. Data was analysed using descriptive statistics, T Test and correlation (SPSS 16), with 95% CI.

Results: Mean age was 13.86 (\pm 1.93) years, more girls in 10-12 years (p<0.001), residing in homes for 7-10 years (p<0.001). One-fourth of boys were studying in high school and almost a third of girls in middle school. While girls had significantly (p<0.05) higher overall scores on SBQ (5.59 \pm 2.17), more boys had made/thought about killing themselves (1.51 \pm .91), while significantly more girls (p<0.05) were contemplating suicide (1.39 \pm .65). Significant differences in well-being seen in one in five adolescents (p<0.001), indicating poor well-being and need for further evaluation.

Recommendations and Conclusion: Adolescents will be the productive workforce in the next five to ten years, account for about a third of all suicides in the country and a large majority of these young attempters, have not received any kind of psychosocial interventions. The absence of accurate estimates has resulted in a serious mental health treatment gap among child and adolescents in low and middle income countries. A multi-disciplinary team approach can solve the human-resource gap in healthcare, with psychiatric social workers' evidence-based services playing a major role in the prevention, management and policy of mental, neurological and substance use disorders, including family and school based identification and preventive interventions.

Biography

J Harini Christopher is the recipient of the Best Free Oral Paper awarded by the 21st World Congress on Mental Health, 2017 and another on mental health in the work place, WCMH, 2017 and co-author of Lester Fernandez Studentship, 2016. She obtained her Doctoral degree in Social Work. Prior to taking a position at Sampurna Monfort College, she worked as Professor at the CMR University, Bangalore and BALM, Chennai, affiliated to the TISS University, Mumbai and earlier at the Dept. of Psychiatry, SJMCH. She has worked in the field of mental illness for over 19 years and her main activities revolve around clinical work, academia and research relating to psychological well-being of different sections of society, which have been presented at National and International conferences and published. She has conducted training programs with NIMH, NTA, KPAMRC and RCI and founding board member of the persons with Cerebral Palsy and Neuro Muscular Disorders and Board Director of the Centre for Counseling, Research, Training and Consultancy.

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