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#### **Research Article**

# MOOD DISTURBANCES IN PARENTS OF CHILDREN HAVING POOR ACADEMIC PERFORMANCE

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**Background:** A child with poor academic performance induces complex feelings in the parents who experience stress in coping with the child's disability. But parent's well-being is essential for managing the child's condition. In this background the present study is planned to assess the mood disturbances in parents of children having poor academic performance attending Psychiatry OPD.

Study Design: A hospital based cross sectional study.

**Methodology:** After obtaining informed consent and recording sociodemographic data, 60 parents of children having poor academic performance were administered Hospital Anxiety and Depression Scale (HADS) to elicit mood disturbances. In these 60 children, severity of Mental Retardation, Specific Learning Disability & its types and Psychopathology were assessed. Statistical analysis was done using SPSS version 22.

**Results:** Higher percentage of parents of children having SLD were cases as per HADS than those having MR and only psychopathology, but the difference was not statistically significant. Significantly higher number of parents of male children having poor academic performance were cases as per HADS. Severity of MR was not associated with case-ness on HADS. Parents of children having multiple SLDs were significantly more likely to be cases as per HADS.

**Conclusion:** Gender of the child and presence of multiple SLDs were associated with mood disturbances in parents of children having poor academic performance.

**Keywords:** Mood disturbance, Poor school performance.

# INTRODUCTION

Education is considered as an important factor to measure personal and societal development.<sup>1</sup> School education is an important segment of the whole educational structure and it is considered as a powerful instrument to develop student's behavior and hence the society. Low school enrollment, high dropouts and failure rates are reported characteristically in the weaker section of the society.<sup>2</sup>

In India, it is generally noticed that 20% of children in class rooms are performing poor in their academics and several Indian school surveys in the past decade have recorded prevalence rates of poor academic performance in school children that range between 20 and 50%. Poor academic performance is one of the biggest worries for parents in the current competitive world.<sup>3</sup> Thaker N et al and John P conducted studies in India showed that the children performing poor in their academics have co-morbid psychiatry problems. Various studies had showed that there was high degree of association between psychiatric morbidity and scholastic backwardness. According to Kappelman.et.al 35% of children attending learning disability clinic had psychiatric problems. Most of the times these underlying psychiatric problems are missed by parents and teachers due to ignorance.<sup>4</sup>

Identification of mood disturbances in parents of children having poor academic performance is important in management strategies for the child and psycho education for the parents. Studies which reflect ground reality in Indian scene are lacking.<sup>5</sup>

# **AIM**

To study mood disturbances in parents of children having poor academic performance.

#### **MATERIALS AND METHODS**

**Source of data:** Parents of children who presented to the Psychiatry OPD in a tertiary care hospital in central Karnataka, between November 2018 to November 2109.

**Study design:** A hospital based cross sectional study.

**Sample size:** 60 Parents of children having poor academic performance.

**Methodology:** 60 Parents of children having poor academic performance were administered Hospital Anxiety and Depression Scale (HADS) to elicit mood disturbances.

In these 60 children, severity of Mental Retardation, Specific Learning Disability & its types and Psychopathology were assessed.

The relationship between the mood disturbances in parents & psychological basis for poor academic performance in their children was assessed.

Statistical analysis was done using SPSS version 22.

#### **RESULTS**

Higher percentage of parents of children having SLD were cases as per HADS than those having MR and only psychiatric syndromes, but the difference was not statistically significant. (Table 1)

Significantly higher number of parents of male children having poor academic performance were cases as per HADS. (Table 2)

Parents of children having multiple SLDs were significantly more likely to be cases as per HADS. (Table 3)

Severity of MR was not associated with case-ness on HADS.

HADS	MR	SLD	ONLY PSYCHIATRIC SYNDROME	Total	
Case	10	11	2	23	
Non- Case	20	12	2	34	
Total	30	23	4	57	
Chi Square Test P<0.521, NS					

Table 1.COMPARISION OF DIFFERENT PSYCHOLOGICAL BASIS FOR POOR ACADEMIC PERFORMANCE

• DEMOGR	• HA	• HA	• Chi
APHY	DS	DS	sq
	CA	NO	test
	SE	N	
		CA	

		SE	
Age of the	• 5	• 10	• NS
child	• 10	• 8	p<0.
• < 10 yrs	• 8	• 19	194
• 11-13 yrs			
• 14-16 yrs			
Gender of	• 21	• 26	• S
the child	• 2	• 11	• P<0.
• Male			05
• Female			
• Education	• 4	• 2	• NS
status	• 8	• 16	• P<0.
• <5 <sup>th</sup> std	• 11	• 19	312
• 5-7 <sup>th</sup> std			
• 8-10 <sup>th</sup> std			

**Table 2: SOCIODEMOGRAPHIC DATA** 

SLD	HA	Total	
	Case	Non- Case	
Single	1	7	8
Multiple	10	5	15
Total	11	12	23
C	hi Square T	Test P<0.01,	S

Table 3: COMPARISON OF DOMAINS OF SLD

# **DISCUSSION**

Parents of children with poor academic performance often experience mood disturbances like depression and anxiety, which can create a stressful home environment that negatively impacts the child's ability to learn and perform well. These mood disturbances can be both a cause and a consequence of the child's struggles, leading to a cycle of parental stress, potential harshness or

lack of support, and a child's worsening academic performance. Studies consistently show that parents of children with academic and developmental challenges have significantly higher rates of depression and anxiety compared to parents of typically developing children.

In the present study, higher percentage of mothers of children having SLD had mood disturbances. This could be due to unfulfilled academic expectations from a child who looks apparently normal.<sup>7</sup>

Three fourths of mothers of children with SLD had mood disturbance (anxiety) and their most common worry was about their poor school performance (Karande S et al 2009).<sup>8</sup>

In this study, parents of male children having poor academic performance had significantly more mood disturbances. It is probable that expectations on a male child are comparatively higher. Earlier studies have not addressed such gender differences.<sup>9</sup>

Earlier studies report a higher prevalence of mood disturbances in mothers of female children with MR & children with more severe MR (Chandravanshi G et al 2017).

However current study did not reveal any significant differences in the caseness on HADS in parents of children with respect to gender & severity of MR.

Skills in parenting are key to facilitating healthy development in children. Qualities of parenting that have been found to be related to healthy development vary by age of the child. They range from the sensitive, responsive caregiving especially needed by infants to the monitoring that is particularly needed by adolescents. Important aspects of effective parenting across development include providing age-appropriate levels of warmth and structure to help children feel safe and to help regulate their emotions (e.g., Cole, Martin, and Dennis, 2004). Children also are dependent on their parents to facilitate their education and to obtain their medical care.

### **CONCLUSION**

Gender of the child with poor academic performance and presence of multiple SLDs were associated with mood disturbances in parents of children having poor academic performance.

Emotional disorders in childhood are one of the major factor for poor academic performance. like exam phobia, school refusal and school drop outs. Prevalence of phobic anxiety disorder mainly about school/exam is more. So early detection of associated psychiatric problems and early intervention will surely help to handle the further consequences. We hope that this basic research increasingly will be applied to improve the quality of lives of children.

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