

To Assess the Problem Faced and Coping Strategies Used by Adolescents with Mentally Ill Parents in Selected Hospitals, with A View to Develop Information Guide Sheet'

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Abstract: *Adolescents living with a mentally ill parent face a lot of challenges in their daily life. Involving the adolescents in the planning of treatment and care of the parent can help the adolescents gain a better insight into the condition of their parents and in dealing with them. Therefore, a study was conducted to assess the problems faced and coping strategies used by adolescents with mentally ill parents in selected hospitals, with a view to develop information guide sheet'' The Sister Callista Roy's Adaptation Model of Psychiatric Nursing Care was used as the conceptual framework. A descriptive survey approach with survey research design was used in the study. Structured interview schedule and non-probability convenient sampling was used to collect data. In this study sample are adolescent whose parent suffers from major mental illness in the mental health unit of selected hospital, with sample size 100. The study showed that majority of the adolescent's ie. 62 % faced moderate problems, 25% faced severe problems and 13 % of the adolescents faced mild problems. Area -wise analysis of the problem revealed that the highest problems faced were in family relationship (5.53±1.89) and least problems were experienced in the financial (2.88±1.03) aspects. In coping strategies used by adolescents with mentally ill parent (62%) were maladaptive coping strategies and (38%) were adaptive coping strategies. On the basis of finding, guide sheet was developed and disseminated to enable the adolescents to cope effectively with these problems.*

Keywords: Problems faced, Coping Strategies, Adolescents, Major Mental Illness, and Parent with mental illness

I. INTRODUCTION

Preamble

“Carrying out significant caring tasks and assuming a level of responsibility for another person which would normally be undertaken by an adult.” (The Princess Royal Trust for Carers). Adolescence is a period full of challenges as a result of all the physical, emotional and hormonal changes taking place. Adolescents at times have a tough time in their relationships with parents as they can be rebellious, especially in early adolescence. Adolescents must determine their identity. They are vulnerable to peer influence and may adopt unhealthy or maladaptive lifestyles. Emotional emancipation from parents is necessary for an adolescent to grow.

While many people who have a mental illness are also capable parents, mental health problems can affect parent-child interaction in a variety of ways. For example, parents with depression, when ill, are less able to be affectionate and responsive, and parents who have schizophrenia may have unusual or inappropriate affective responses to their child and loss of custody. In addition, when a parent is affected by a mental illness, the family is at greater risk of experiencing relationship discord, discontinuity of care, poor general parenting skill, social isolation, and poverty and its sequelae, such as poor housing and lack of transport.

Many children will grow up with a parent who, at some point, will have some degree of mental illness. Most of these parents will have mild or short-lived illnesses, and will usually be treated by their general practitioner. A few children live with a parent who has a severe mental illness such as schizophrenia or bipolar disorder. In fact 68% of women and

57% of men with a mental illness are parents. In addition many children live with a parent who has long-term mental health problems, as well as alcohol or drug dependence and personality disorders. Young children of mentally ill parents are at increased risk of medical problems, including injuries, convulsive disorders and increased frequency of hospitalization.

Background

Children of parents with severe and enduring mental illness can experience greater levels of emotional, psychological and behavioral disturb than their peers. In fact, the relationship between psychiatric disorder in parents and the wellbeing of their children has been recognized for more than 30 years, and it is suggested that between 25% and 50% of children experience some form of psychological disorder during their childhood or adolescents, and between 10% and 14% will be diagnosed with a psychotic illness during their lifetime. Setting aside genetic factor, these children are likely to face considerable psychological and social stress; poverty, unemployment, increased familial stress, or decreased social support.

Another study states that Children of parents with severe and enduring mental illness can experience greater levels of emotional, psychological and behavioral disturb than their peers.

A case –control study was conducted to determine the prevalence of psychological problems in children of parents having mental illness and to compare it with children of parents without any diagnosed psychiatric problems from January to April 2008 in Lahore. The study revealed that children of parents with psychiatric problems had almost two times higher rate of mental health problems compare to controls(55% vs 28%; $p<0.001$). Emotional difficulties ($p=0.028$) and conduct problems ($p=0.025$) were found to be statistically significant. Boys were more likely to be hyperactive and social difficulties. Girls had higher rates of emotional problems.

The highest risk for developing alcoholism exist for individuals who start using alcohol as adolescents ,have a high family loading for alcohol problem and display a cluster of behavior traits described as disinhibited ,under controlled or impulsive ,which are usually evident in childhood and persist into adulthood.

Need of the study

WHO fact sheet (August 2010) reports that in any given year, about 20 percent of adolescent will experience a mental health problem, most commonly depression or anxiety. The risk of violence, humiliation, devaluation and poverty is increased. Suicide is one of the leading causes of death in young people. Building life skills in children and adolescent, and providing them with psychosocial support in schools and other community setting can help promote mental health .

A research study reported that many recent cases in which children are killed by a mentally ill father or mother have attracted much attention and a strong emotional response from the public .In German ,about two children under the age of 15 die on average ,each week as the result of violence ,physical abuse and neglect. Mental illness in the parent is a major risk factor for such tragic events .

Adults with severe and enduring mental health problems are amongst the most marginalized and vulnerable people in our society. In providing care for these individuals, mental health professionals may potentially overlook the fact that many of these people are also parents: There are an estimated 50,000 – 200,000 young people in the UK caring for a parent with mental health problems; Many of these young people will provide help and support for a parent; Some of these young people will be providing care beyond a level that is inappropriate for their age. They will be ‘young carers’; this inappropriate level of care puts young carers’ own physical and mental health at risk.

A study was conducted on Nutritional neglect and physical abuse in children of alcoholics. Children of alcoholics are at higher risk for physical injuries and malnutrition. In this study nutritional neglect and physical abuse in children of alcoholics has been compared with children of non-alcoholics in a General Hospital attached to a Medical College.72 children of alcoholics were compared with 81 normal controls. 86.1% in case group and 49.4% in control group had malnourishment of various grades.45% of the children of alcoholics had physical injuries in contrast to 23.4% of children of non-alcoholics. Malnutrition co-existed in almost all injured children of alcoholic’s .Alcoholism in parents of malnourished and injured children are frequently ignored in routine clinical evaluation. If the risk children are identified early some of the morbidity can be avoided.

Research found that youth who had a mother with a mental illness were four times more likely to commit serious criminal behaviours.

Problems Statement

“To assess the problem faced and coping strategies used by adolescents with mentally ill parents in selected hospitals, with a view to develop information guide sheet”

Objectives

- To assess the problems faced by adolescents whose parents suffer from major mental illness.
- To assess coping strategies used by the adolescents in dealing with these problems.
- To find out relationship between problems faced and the selected demographic variables.
- To develop guide sheet to enable the adolescents cope effectively with these problems.

Hypotheses

- H0- There is adaptive coping strategies adopted by the adolescents with mentally ill parent's.
- H1- There is maladaptive coping strategies adopted by the adolescents with mentally ill parent's.

Scope of the study

1. Hospital: The nursing personnel should be able to sensitize the family members and relatives of adolescent with a mentally ill parent about needs of their adolescent which often tends to get ignored.
2. Community: At community level there should be provision of psycho-education for the adolescent to help them to understand their parent's illness and for better communication and relationship with their parents.
3. Education: Counseling needs of the adolescents as a result of their parent's mental illness need to be emphasized during the clinical experience of the students in Hospital And Community Setting

ASSUMPTIONS

- Adolescents may have to face many problems due to parent's mental illness.
- Adolescents may use different coping strategies to deal with problems faced due to parent's mental illness.
- Development of information guide sheet may help adolescents to cope effectively with these problems.

Operational Definitions

- Assess: It refers to the statistical measurement of problems faced and coping strategies based on the obtained score.
- Problems :Includes all the difficulties /challenges faced by the adolescent in the cognitive, affective, physiological, behavioral and social domains.
- Coping Strategies:It refers to the coping or problem solving behavior used by the adolescents to manage the problems faced while their parent suffer from major mental illness.
- Adolescent :A person of either sex between the age group of 10 to 19 years .
- Major Mental Illness: Parents diagnosed with schizophrenia, bipolar disorders, depression and alcoholism with symptoms so severe as to cause impairment in daily functioning.
- Information Guide Sheet: Refers to learning material prepared by the investigator based on the response given by adolescent of major mentally ill parent's regarding problem faced and coping strategies used by them.

II. REVIEW OF LITERATURE

Review of literature on problems faced by adolescents with mentally ill parents.

A study was conducted to assess the problems faced by adolescents whose parents suffered from major mental illness at selected mental health institutes of Delhi. The objectives also included assessment of the coping strategies of the adolescents in dealing with these problems. The study showed that majority of the adolescents had moderate problems

as a result of their parent's mental illness. Area-wise analysis of the problems revealed that the highest problems faced were in family relationship (1.16) and support and majority of the adolescents used maladaptive coping strategies (58%). A set of guidelines on effective coping strategies was disseminated to these adolescents.

A longitudinal study was conducted on using a family risk approach, and with a goal to evaluate suicidal thoughts and behaviors longitudinally from childhood to young adulthood in children of mothers with Bipolar disorder (BD), Major depressive disorder (MDD), and well mothers. Few group differences were found for cross-sectional assessments of suicidal thoughts and behavior in young adulthood; the offspring of Major depressive disorder (MDD) demonstrate an earlier onset and more persistent suicidality than other groups. The longitudinal assessments reveal a pattern of higher suicidal risk in Major depressive disorder (MDD) offspring, more intermediate risk in Bipolar disorder (BD) offspring, and lower risk in well offspring.^[26]

A study was conducted on Effects of parental anxiety disorders in children at high risk for panic disorder: a controlled study at Massachusetts General Hospital, Pediatric Psychopharmacology Research, Boston. The findings suggest that differing risk factors underlie the expression of individual anxiety disorders in children at risk for panic disorder.

Children who live with a mentally ill parent are viewed primarily as being 'at risk' of developing a mental illness themselves and those who remain well are considered extraordinarily resilient. Childhood is seen as a critical period of development during which children need protection due to their physical and psychological vulnerabilities.

Methodology

Research approach- Descriptive survey approach was used for the study

Research design- The survey research design was used for the study.

Sample and Sampling techniques- In this study sample are adolescent whose parent suffers from major mental illness in the mental health unit of selected hospital who were fulfilling the inclusion and exclusion criteria with sample size 100. The sampling technique used in the study was non probability convenient sampling.

Setting – The setting selected was mental health unit of the selected hospitals.

Tools

Structured interview schedule is used as the tool:-

Tool has 3 sections as follows.

Section A: Consist of question related to the demographic data like age, gender, religion, type of family, education level, monthly family income, number of sibling in the family, birth order, number of mentally ill in family, who is mentally ill (mother/father), the nature of parent mental illness, and duration of parent mental illness.

Section B: Consist of structured interview related to assess various problems that may be faced by the adolescents as a result of their parent's mental illness.

Scoring

The responses were scored from 2 to 0 respectively for 25 items based on the problems faced by the adolescents. Reverse scoring from 0 to 2 was used in 5 items of the interview schedule.

The possible range of scores was from 0- 60 .

Based on the scores obtained a range was created to divide the problems into mild problems, moderate problems and severe problems.

Interpretation

TABLE 1: Grading of problem faced by adolescents

Sr. no.	Types of problem	Score range	Percentage range (%)
1	Mild Problems.	0-20	
2	Moderate Problems.	21-40	
3	Severe Problems	41-60	

Section C: A structured interview schedule to assess the coping Strategies of the subject with mentally ill parent.

Scoring

The responses were scored from 3 to 0 for the adaptive coping strategies and 0 to 3 for the maladaptive coping strategies

The possible range of score 0-42

A higher score on the scale indicated adaptive coping strategies

These scores were divided into two categories, score above and below median value.

Interpretation

TABLE – 2 : Grading of coping strategies

Sr. no.	Type of coping strategies	Score range	Percentage range (%)
1	Maladaptive Coping Strategies	0-21	
2	Adaptive Coping Strategies	22-42	

Validity : To ensure the content validity of tools structured interview schedule ,assessment of problems faced and coping mechanism used by adolescents with mentally ill parent by using rating scale were submitted to 17 experts from the Department of Psychiatry and Psychiatric Nursing.

Reliability: Reliability analysis of tools was done by Pearson’s correlation coefficient split half method was used.

Procedure for Data Collection : Formal approval was obtained from the concerned authorities to conduct the final study. The purpose of the study was explained to them. The confidentiality was explained to the subjects and after getting the individuals consent, the actual procedure was carried out. After obtaining their willingness to participate in the study the adolescents were interviewed using the structured interview schedule was adopted for the data collection. The average time taken to administer the tool was 25 to 30 minutes. Non probability convenient sampling technique was used and Sample comprised of 100 adolescents whose parent suffer from major mental illness in mental health unit of selected hospitals. Data analysis was planned based on the objectives and hypotheses stated in the study by using descriptive and inferential statistics.

III. FINDINGS AND RESULTS

The major finding of the study are as follow:

Section A: Among the selected adolescents majority of the sample according to their age revealed that 54% of them belonged to the age group of 18-19, 29% of them were in the age group of 16-17 years and 17% in 10-up to 15 years; majority of the sample according to their gender , 54% of them were males and 46% were females; majority of the sample according to their religion ,50% were Hindu,36% were Buddhist, 5% of them were Muslim and Christian, and remaining 4% were of other religion; the sample according to their type of family 41% were having joint family, 39% were having nuclear family, 14% single family and 6% extended family. The sample according to their educational level revealed that 48% were higher secondary, 46% were secondary, 5% were primary ,1% were uneducated . Majority of the sample according to their monthly family income reveals that 53% had family income between 10001-20000, 33% had family income below 10000,11% had family income between 20001-30000 where as 3% had above 30001. Majority of the sample according to their number of sibling , 52% were having two , 37% were having three , 8% were having one and , 3% were having four and above. The sample according to their birth order revealed that 49% were fell in second order ,44% in first order ,7% in third order ,and there was zero value in four or more . The sample according to their number of mentally ill in the family revealed that 88% had only one person in family and 12% had two person in family .In parent mental illness of adolescents 50% were fathers and 50% were mothers. The sample according to their nature of parent’s mental illness revealed that 37% of them had Schizophrenia, 20% of them had Bipolar Affective Disorder, 24% of them had Alcoholism, 19% of them had Depression. The sample according to their duration of parent’s mental illness 36% suffered 2 years or above, 36% 1-2 years, 22% 6 mth-1 year, 6% had 6 months duration with major mental illness .

Section B: Assessment of problems faced by adolescents whose parents suffered from major mental illness. Majority of the adolescent's i.e. 62% faced moderate problems, 25% faced severe problems and 13% of the adolescents faced mild problems.

TABLE 3: Frequency and percentage distribution of samples with regards to the severity of problems faced due to parent mental illness. (N = 100)

Problems faced	Score range	Problems faced by Sample	
		Frequency	Percentage
Mild Problems	0-20	13	13.00
Moderate Problems	21-40	62	62.00
Severe Problems	41-60	25	25.00

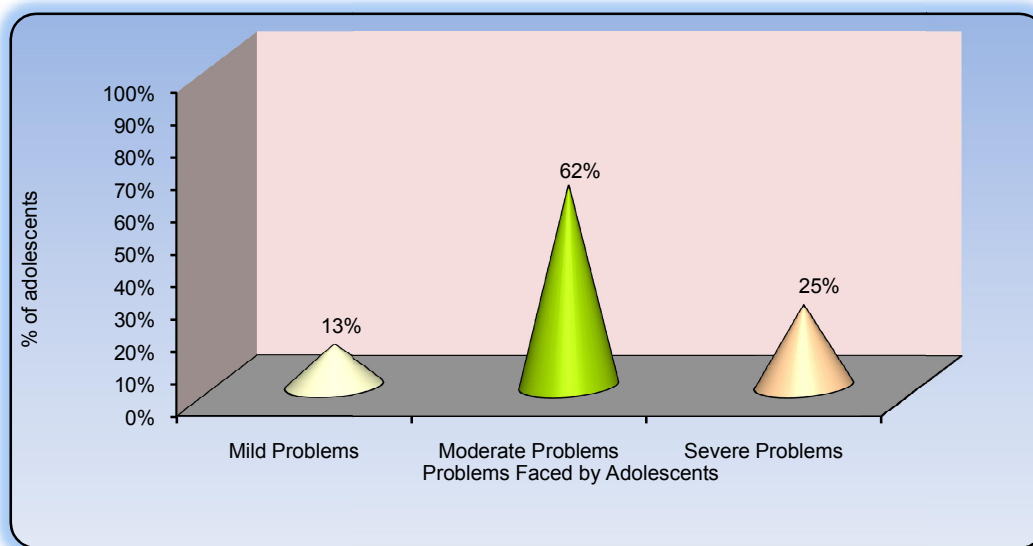


Fig. 1: Frequency and percentage distribution of sample with regards to the severity of problems.

B) Area wise assessment of problem faced by adolescents with mentally ill parents

Area-wise analysis of the problem revealed that the highest problems faced were in family relationship (5.53±1.89) and least problems were experienced in the financial (2.88±1.03) aspects.

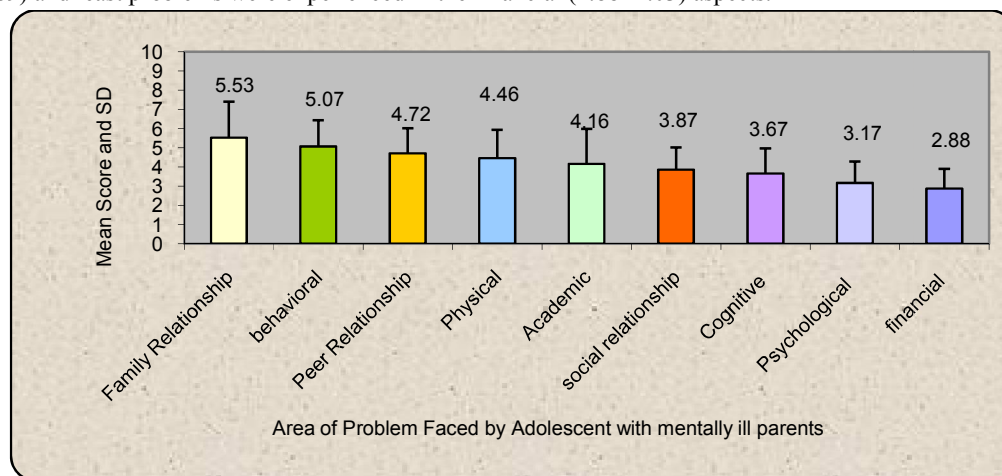


Fig. 2. Area wise assessment of problem faced by adolescents with mentally ill parents

The descending order of problems faced by the sample as a result of their parents mental illness was in relation to the area of family relationship was 5.53 ± 1.89 , for behavioral problem it was 5.07 ± 1.37 , for peer relationship it was 4.72 ± 1.31 , in the area of physical problem it was 4.46 ± 1.48 , in the area of academic it was 4.16 ± 1.84 , in social relationship it was 3.87 ± 1.16 , for the area of cognitive it was 3.67 ± 1.31 , for psychological it was 3.17 ± 1.12 , for financial it was 2.88 ± 1.03 , respectively.

Section C: A. Assessment of coping strategies used by the sample in dealing with problems faced with mentally ill parents.

The majority ie .62% of the adolescents used maladaptive coping adaptive coping strategy and 38% of them used adaptive coping strategy respectively. The minimum coping score used by adolescents with mentally ill parent was 13 and the maximum score was 37 the mean opinion score was 20.35 ± 4.60 and mean percentage score was 48.45 ± 10.97 .

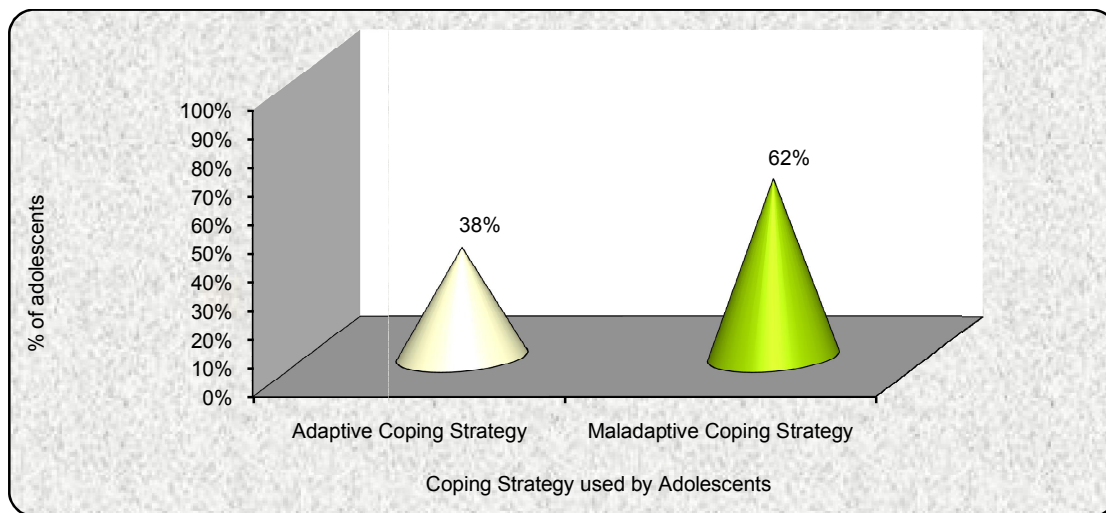


Fig: 3.General assessment of coping strategy used by the adolescents with mentally ill parent

B) Distribution of samples to find out relationship between adaptive and maladaptive coping strategies used by sample to deal with problems faced with parent mental illness.(N=100)

Coping strategies	Number .of Sample	Total score	Mean	z-valve	p-value
Maladaptive	62	1090	24.86 ± 4	6.01	0.00 S, $p < 0.05$
Adaptive	38	945	18.25 ± 6		

This table shows the relationship between adaptive and maladaptive coping strategies adopted by adolescents with mentally ill parents. The tabulated 'z' values was 1.96 (df=99) which is less than the calculated 'z' i.e. 6.01 at 5% level of significance. Also the calculated 'p'=0.00 was much less than the acceptable level of significance i.e. 'p'=0.05. Hence it was interpreted that majority of adolescents with parent mental illness were using maladaptive coping strategies to deal with above problems.Hence H1 is accepted and H0 is rejected.

Section D:Relationship of problems faced by sample with mentally ill parent in relation to selected demographic variables

There was statistically significant relationship between problem faced by adolescent as a result of their parents mental illness with type of family. But there was no significant relationship between problems faced and other selected factors such as age, gender, education level, family income, number of siblings in family, who is mentally ill(mother or father), and duration of parent mental illness.

IV. DISCUSSION

The first objective of the study was “to assess the problems faced by adolescents whose parents suffered from major mental illness.” The present study shows that majority of the adolescents i.e. 62 % faced moderate, 25% of the adolescents faced severe problems and 13 % of the adolescents faced mild problems. It is very important for parents, teacher, health professional to be aware of the possible stressors and problems on the adolescents with an mentally ill parents, and to recognize that a adolescents difficult behavior may be a cry for help. It is important that nurses in adult mental health service are provided with information and skill training to assist them to support client’s parenting roles and to protect adolescents with a parent mental illness who may be at risk for harming the adolescents health or development. The second objective was” to assess coping strategies used by the adolescents in dealing with these problems`. The present study also revealed most of the adolescents(62%) using maladaptive coping strategies in dealing with the problems they faced as a result of their parent’s mental illness .These include :keeping to oneself, denying the existence of problem, displacing on others ,drug addiction(alcohol, tobacco, smoking),isolating parents from others, going and taking opinion from black magician, wandering from home ,involving in minor criminal activity. The adaptive coping strategies such as asking others for help, spending time and feeling with friends , finding way to relax ,accepting parent with mental illness, faith and prayer, planning for home management ,contacting mental health professional for help were utilized only by 38 % of the samples. Hence it was statistically proved that majority of adolescents were used maladaptive coping strategies to deal with above problems faced with parent mental illness .So H1 is accepted. The third objective was to find out relationship between problems faced and the selected demographic variables. There was only statistically significant relationship between problems faced by adolescents with type of family. In today’s life nuclear family has become the fashion and couples don’t want to stay with joint family and extended family .In such situation there was nobody to take care of each other especially when there was mental illness in family .Joint family or extended family stand with each other in every difficulty of life and provide support and help to overcome with such problems. The adolescents with mentally ill parents need lot of support help and care to overcome their problems and to have positive attitude toward life which will help them to make use of adaptive coping strategies and have fewer adjustment problems in dealing with these problems faced due to parent mental illness. The fourth objective to Develop guide sheet to enable the adolescents cope effectively with these problems. Based on the assessment of the problems faced and the coping strategies used by these adolescents guide sheet on effective coping strategies was developed for the adolescents whose parents suffer from major mental illness. This was validated by experts and then disseminated to these adolescents. It was found that find that majority of adolescents (62%) were using maladaptive coping strategies to overcome the problems faced by parent mental illness. While interviewing the adolescents the investigator realized that in many adolescents there was lack of knowledge regarding parent’s mental illness due to which they find difficulty in accepting the parents with mental illness. Involving the adolescents in the planning of treatment and care of the parent can help the adolescents to gain a better insight into the condition of their parents and in dealing with them .Information guide sheet is a useful framework to support the adolescents to address the challenges that might arise from parental mental illness, and to built adaptive coping strategies. While interviewing the adolescents the investigator realized that the process of trying to understand the problems that these adolescents faced was itself a form of intervention .There was purification that happening as they shared their feelings and expressed their concerns.

Implications of the study

1. Nursing Services

This study will help Nurses to create awareness among peoples in hospital and in community regarding the problems and needs of adolescents who live with mentally ill parents. The nursing personnel should be able to sensitize the family members and relatives of adolescent with a mentally ill parent about needs of their adolescent which often tends to get ignored.

2. Nursing Education

The study will create awareness in teachers to educate the students regarding counseling needs of the adolescents as a result of their parent’s mental illness which are lacking somewhere. At community level there should be provision of

psycho-education for the adolescent to help them to understand their parents illness and for better communication and relationship with their parents.

3. Nursing Administration

As a Nursing Administrator one can use the findings of this study as a topic for conducting group discussion, symposiums and continuing education programs. This would not only update the knowledge of nursing staffs ,but also recommendation suggested by the participant help in modifying policies and planning of the government in the areas of prevention and rehabilitation . Also it would help the nursing administrator to create awareness in staff nurses for counseling needs of the adolescents as a result of their parent's mental illness.

4. Nursing Research

This research is an attempt to update the existing body of the knowledge in the nursing profession. The result of this study would trigger a researcher's instinct to conduct further studies in the field of prevention and control etc. The tool and technique used has added to the body of knowledge and can be used for further references.

Limitations

Obtaining the desired sample within in a limited time period was a little difficult for the investigator. The sample size is moderate and limited only to selected institute's .Therefore generalization could not be made. Helpfulness and usefulness of the guide sheet could not be ascertained due to limitation of time.

Recommendation

Since the present study was conducted on moderate sample, more extensive studies on wider sample is recommended. Similar study can be conducted by self-instruction module (SIM) on effective coping strategies for the adolescents in dealing with the problems they faced as a result of their parent's mental illness. Follow –up studies could be conducted to evaluate helpfulness and usefulness of the guide sheet on effective coping strategies for the adolescents in dealing with the problems they face as a result of their parents mental illness. Comparative studies could be conducted on the problems faced by adolescents with and without mentally ill parents. Different studies can be conducted on family –focused Intervention for children and families affected by mental illness.

V. CONCLUSION

Parents with mental illness find it much tougher to raise their children in a healthy atmosphere. Adolescents alive with mentally ill parents face a lot of encounters in their day-to-day life. Involving the adolescents in the planning of treatment and care of the parent can help the adolescents gain a better perception into the condition of their parents and in dealing with them. Primary intervention approaches that include counseling therapy and guidance of adolescents. Dissemination of information on effective response or coping strategies through the information guide sheet had been done after assessing the challenges confronted and response strategies which will help adolescents to response or cope better with their challenges.

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