

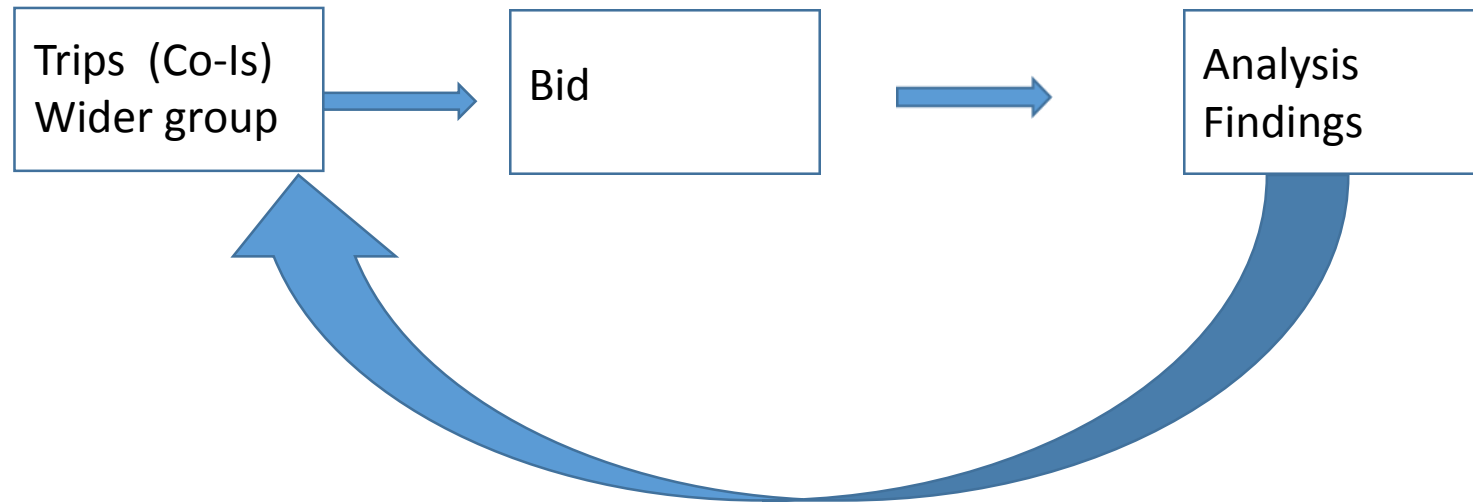
Risk and resilience in child mental health: Stories from the field

Ginny Russell, Abby Russell, Daisy Elliott



Risk and resilience in child mental health: ESRC SDA bid

- Analysis of existing dataset “Young lives”
- Trips to contextualise data and build relationships



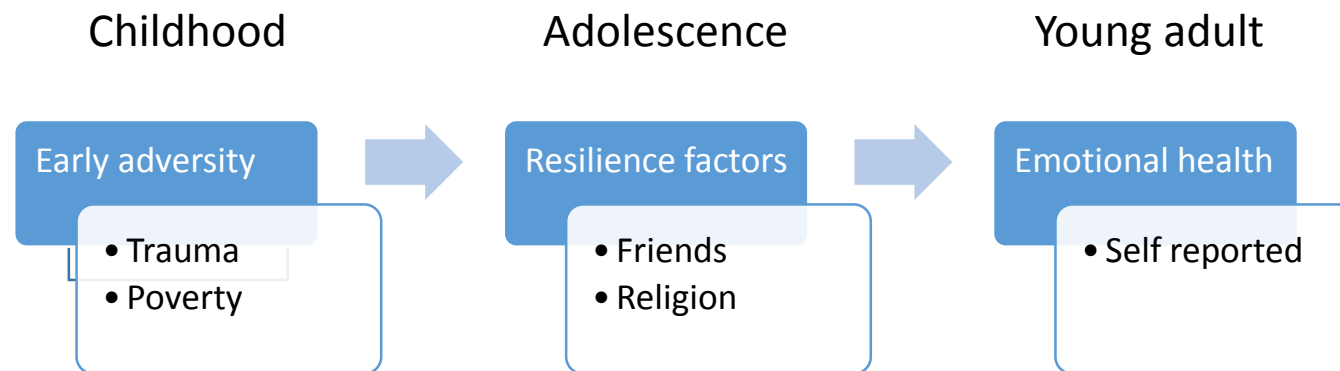
Young Lives -existing dataset



SDQ -Strengths and Difficulties Questionnaire

Proposed research questions on ESRC bid

- Is the SDQ internally reliable and does it demonstrate construct validity in India, Vietnam and Peru?
- Does gender inequality predict poor mental health outcomes in girls, independently of socio-economic inequality?
- Which factors during girls' adolescence predict girls' resilience to emotional health problems at 19 years old? Do these translate across cultures?



NGOs: Save the Children, UNICEF, Equal measures



Our trips

- Visiting research fellows- build relationships with Co-Is (one each)
 - Itineraries, Work books, Reflexive diaries, What's App, AirBnB
 - History and social context, Young Lives
 - Pathways to care for children with MH problems
 - Boys vs girls/gender inequality
-
- Situated knowledge, illustrate our learning with photos and anecdotes

Young Lives Peru

Organisation of the
country:

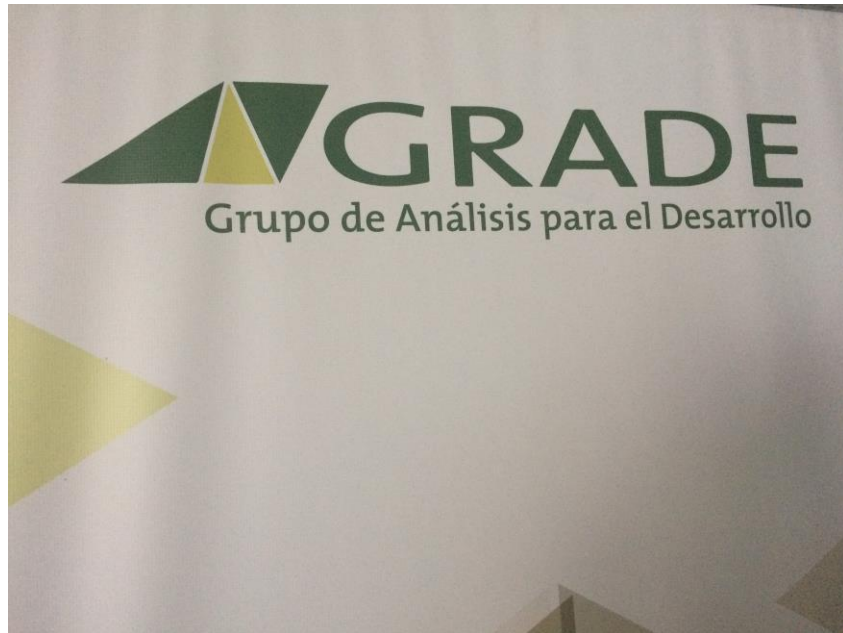
- Department
- Province
- District
- Neighbourhoods
/Centros

*Poblados/Asenta
miento Humano*

Figura 2. Zonas del estudio Niños del Milenio en el Perú



Grupo de Analisis para el Desarrollo (GRADE: Group for the Analysis of Development)



Setting the scene...

[La Florida, Cañete](#)



Context



Extended family from Iquitos
(jungle region)



A mother and her baby from the
highlands (near Cusco) selling hand
woven scarfs and blankets



A picture I took walking through
Miraflores, Lima

Peru at a glance

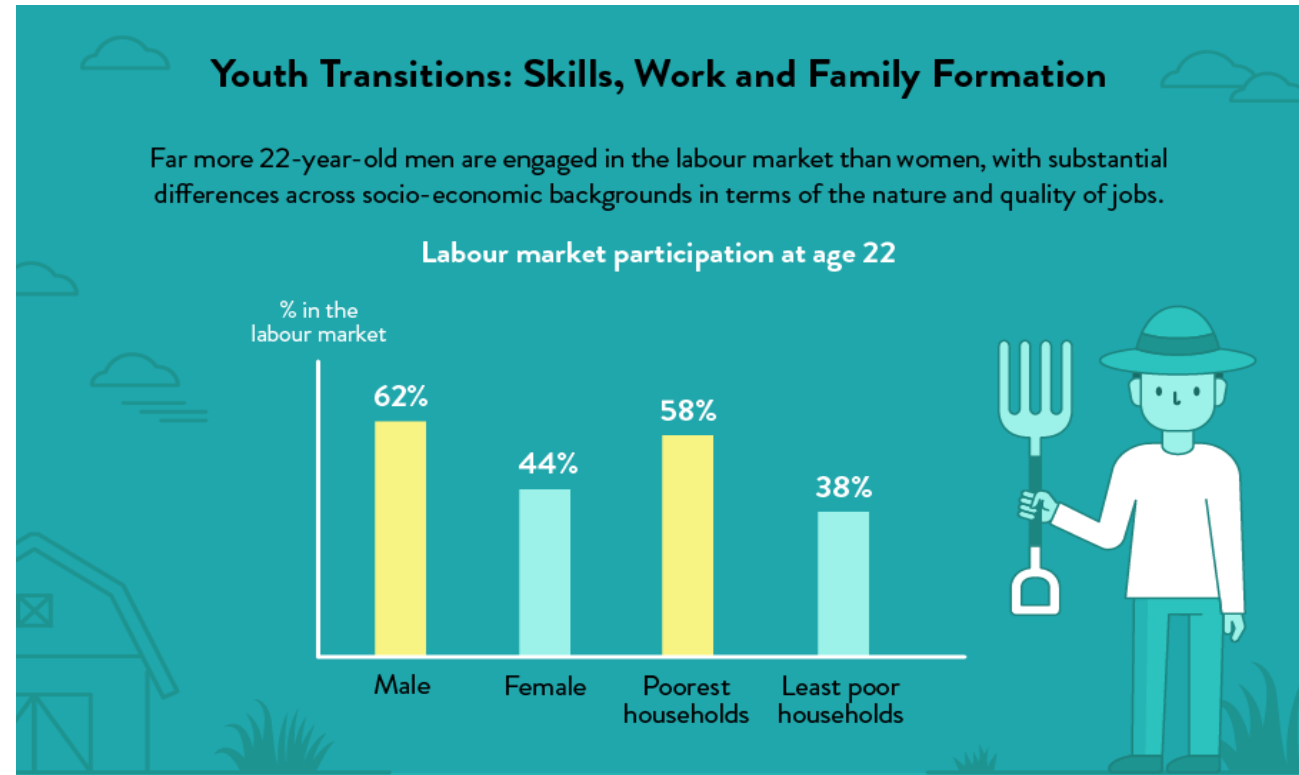
- Infant mortality rate is 1.7%
- Children stunted is 18.1%
- Physical or sexual violence committed by husband/partner 37.2%
- People living under the national poverty line is 21.7% of the population
- Total expenditure on health is 5.5% of GDP – compared to UK at 9.8%



Lifestyles



A merchant



Retrieved from Young Lives website

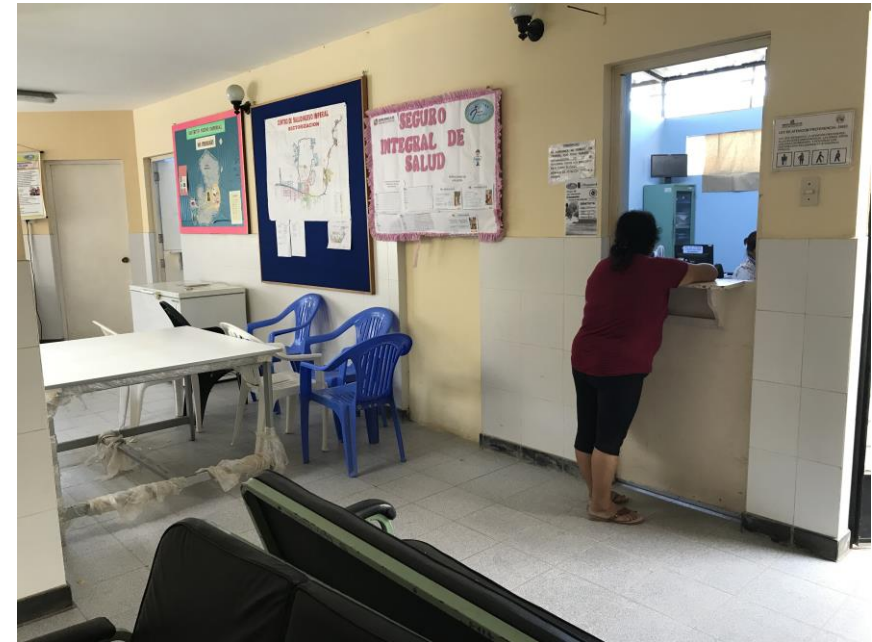
Colonial History



Getting a Mental Health Appointment



Health Centre



Work load and availability of the psychologists



“Oh look, there’s
the psychologist
doing nothing”



Ideas of Mental Health and Child Mental Health

“They’ll grow out of it”

This is what Mariella, Adolescent Mental Health Consultant at UNICEF Peru, said is the view among most Peruvians about child mental health



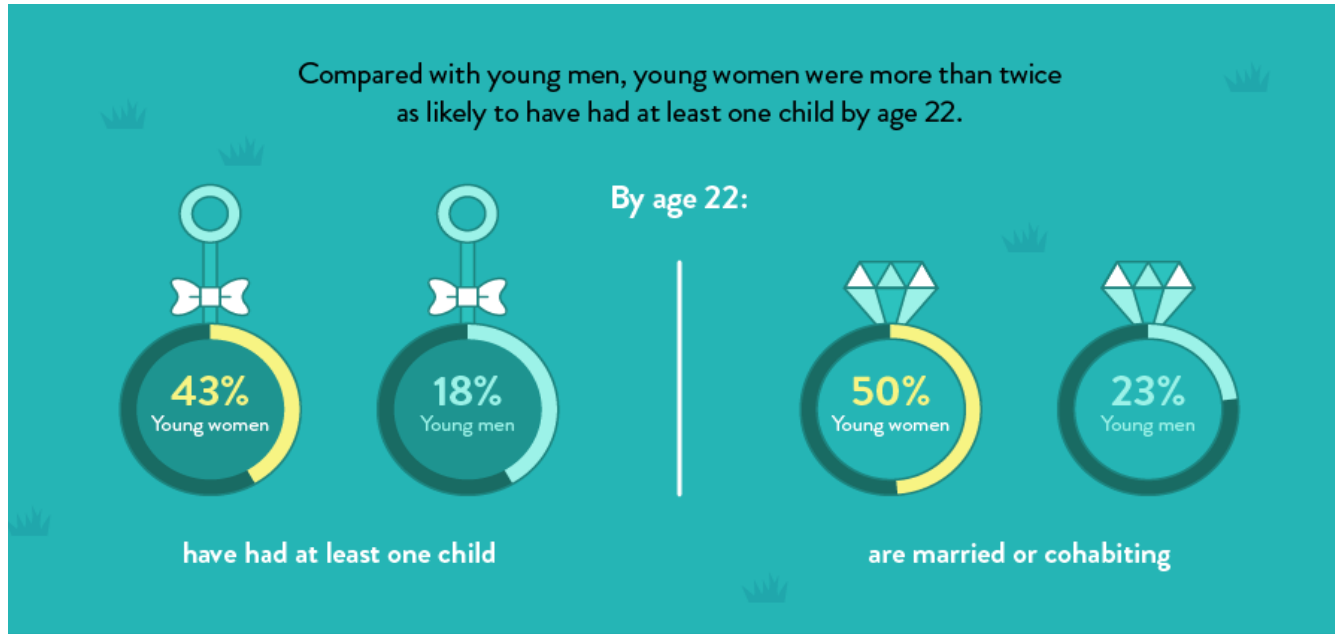
Example of UNICEF Peru's Community Mental Health Centre: *Centro de Salud Mental Comunitario San Gabriel Alto*

Violence and Mental Health



Retrieved from Young Lives website

Gender



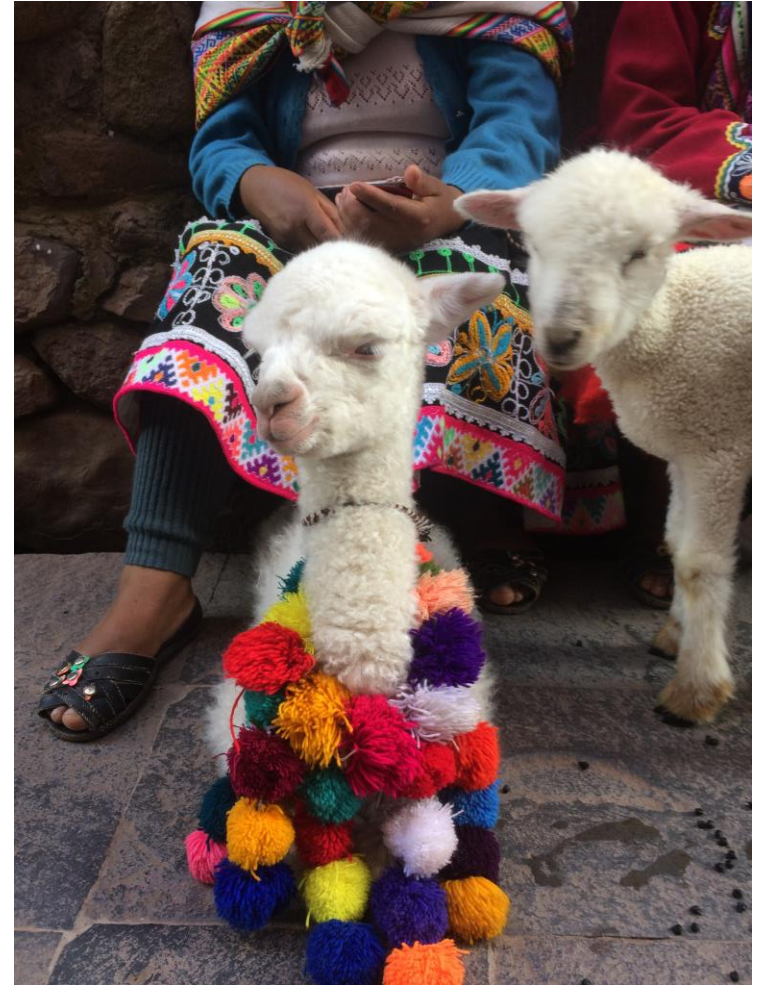
Retrieved from Young Lives website



A gendered role: weaving

Summary

- MH a relatively unknown concept
- Under resourced area in Peru
- Appointments are hard to get
- Girls' aspirations are limited by caring roles for children



India (Telangana and Andhra Pradesh)



Centre for Economic and Social Studies



Co-I

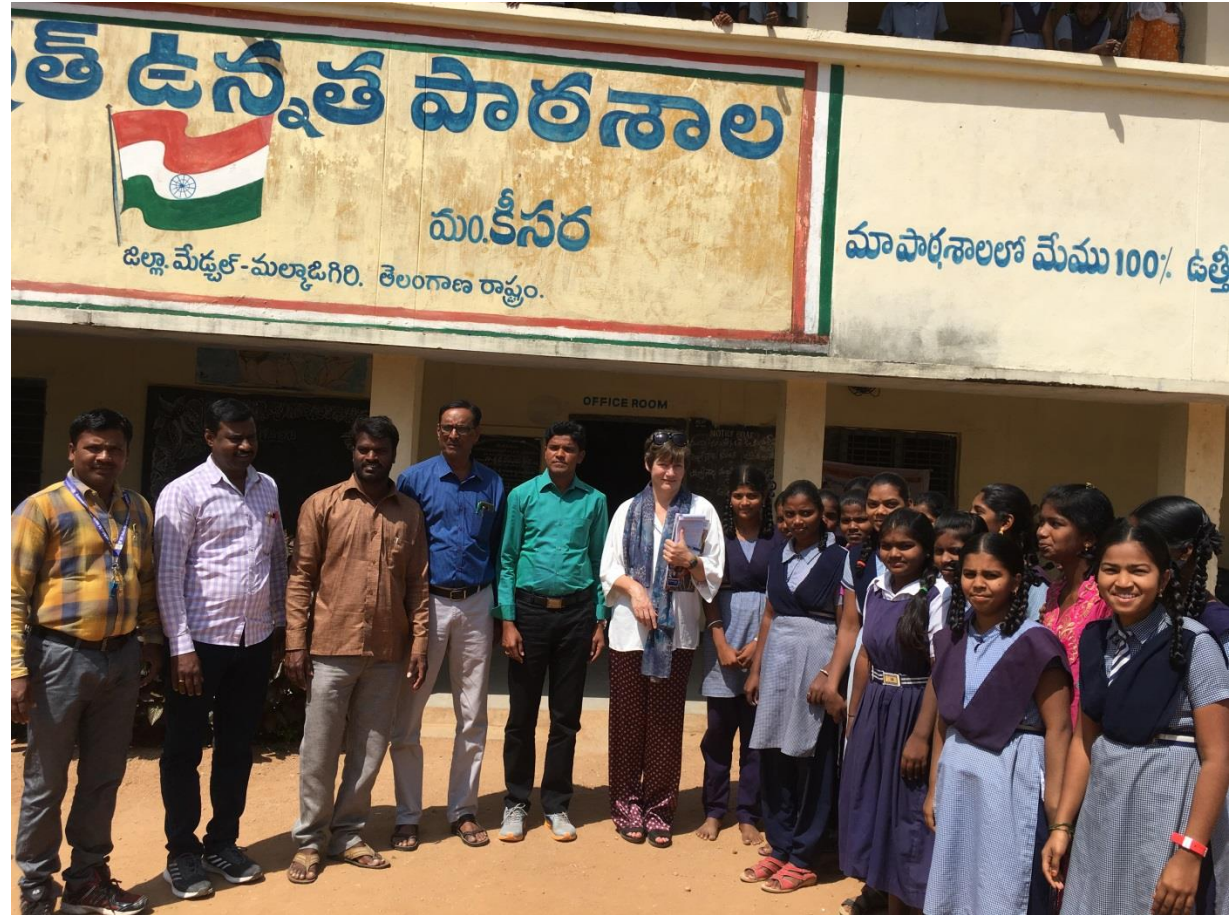


Location

[Hyderabad](#)



At school



State schools



State schools & mental health



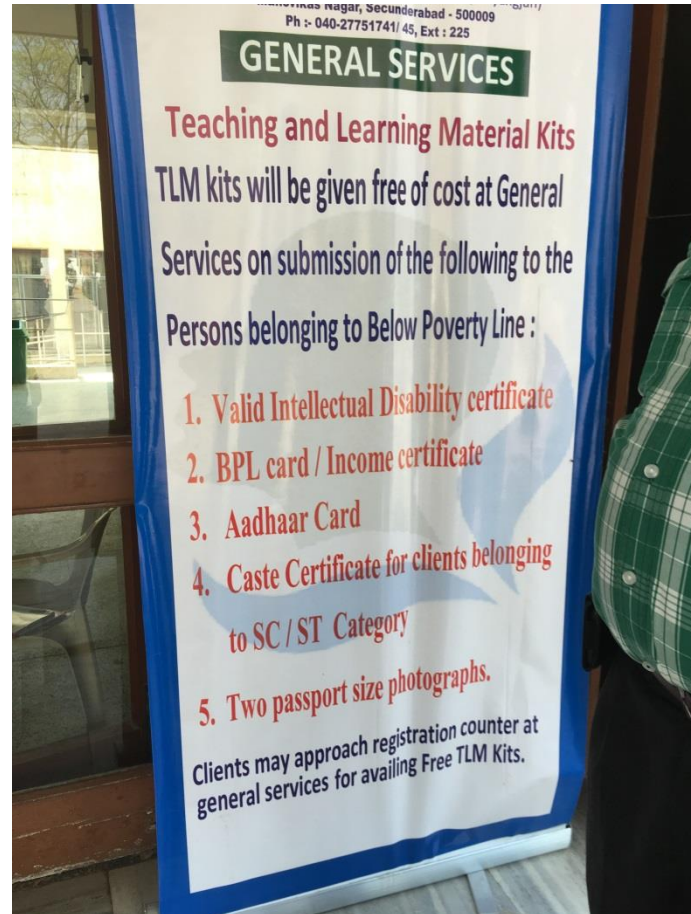
Boys and Girls at school



Pathways to care (for children with ID)



Disability payment



Hand to mouth



Pathways to care



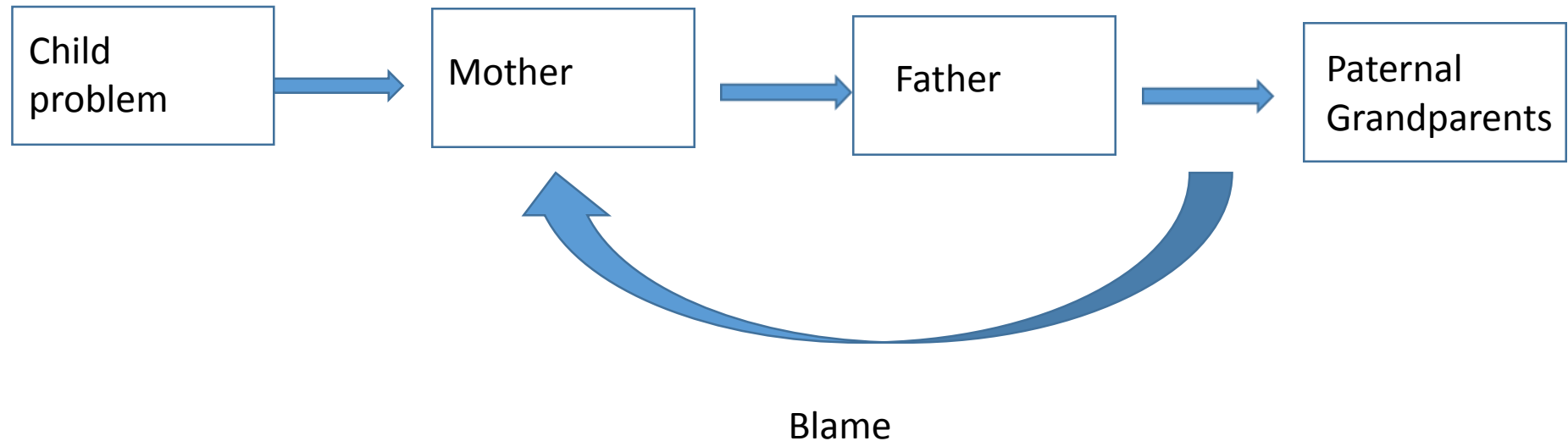


Child Marriage



Family hierarchies

- Decision making
- Child decisions may be left with mother



How do people think about mental health?

- For most, milder problems not picked up. Severe neurodevelopmental problems recognised, but may be ignored, neglected or misdiagnosed
- Increasing use of western system in urban middle class (e.g. ADHD)
- Rural areas may still rely on traditional medicine
- Poverty may prevent access to identification or health services-hand to mouth existence
- Quick fix /instant cure expected from visit to doctor
- Diagnosis needed for benefits
- Status important- hierarchy of paternalistic decision making
- Urban educated talk about Mental Health but not really a generic concept

Việt Nam



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History and context: Confucius



History and context: Buddhism





A rapidly changing country





Host and work



Current issues facing children

- Marriage and children
- Academic culture
- Violence against children
- Trafficking
- Social networks
- Child labour



Mental health- pathways to care



National and Provincial hospitals

Commune clinics, social workers
NGO/third party clinics

Social networks

Ministry of Health

Ministry of
Labour, Invalids
and Social Affairs

Recognised “mental health”
problems: psychosis and
schizophrenia, epilepsy, bipolar
disorder

700 Psychiatrists
No psychologists

Child mental health- knowledge and understanding



- Mental health literacy is low
- Priority is academic attainment
- Ghosts and stigma
- Autism and Down's syndrome, epilepsy, developmental delay
- Stress, hyperactivity
- Treatment options
- School enrolment for children with mental health problems
- Contrasts with demand on psychiatrists at children's hospital

Boys and Girls in Vietnam



- General perceptions of gender equality
- Issues facing girls:
 - Drop out of school for work or caring responsibilities
 - Violence
 - Trafficking
 - Early marriage (rural)

Over to you

- What was the point of these trips? Can we really learn anything?
- Universality of child development models
- Validity of comparing across countries given the cultural differences within and between countries
- Mental health as a construct

