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ORIGINAL

Nursing care in the mental health of school adolescents residing in a vulnerable area of North Lima

Cuidados de enfermería en la salud mental de adolescentes escolares residentes en una zona vulnerable de Lima Norte

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ABSTRACT

Mental health during the COVID-19 pandemic has been one of the greatest negative impacts that the population has had worldwide, which makes them more susceptible to mental disorders as a result, so the research objective is to determine the mental health of School Adolescents residing in a vulnerable area of North Lima. It is a quantitative, descriptive-transversal study, with a population of 306 participants who answered a questionnaire of sociodemographic aspects and the scale of depression, anxiety and stress. In the results we observed that 30,7 % presented extremely severe depression, 8,8 % severe depression, 19,3 % moderate depression, 12,4 % mild depression and 28,8 % normal depression. In conclusion, measures should be taken to provide mental health care to vulnerable School Adolescents.

Keywords: Mental Health; Pandemic; Coronavirus; Anxiety; Depression; Stress.

RESUMEN

La salud mental durante la pandemia del COVID-19 ha sido uno de los mayores impactos negativos que ha tenido la población a nivel mundial, lo que los hace más susceptibles a padecer trastornos mentales como consecuencia de ello, por lo que el objetivo de la investigación es determinar la salud mental de los Adolescentes Escolares que residen en una zona vulnerable de Lima Norte. Es un estudio cuantitativo, descriptivo-transversal, con una población de 306 participantes que respondieron un cuestionario de aspectos sociodemográficos y la escala de depresión, ansiedad y estrés. En los resultados observamos que 30,7 % presentaron depresión extremadamente severa, 8,8 % depresión severa, 19,3 % depresión moderada, 12,4 % depresión leve y 28,8 % depresión normal. En conclusión, se deben tomar medidas para proporcionar atención en salud mental a los Adolescentes Escolares vulnerables.

Palabras clave: Salud Mental; Pandemia; Coronavirus, Ansiedad, Depresión, Estrés.

INTRODUCTION

The World Health Organization (WHO) defines mental health as "a state of well-being in which each individual develops his or her potential, can cope with the stresses of life, can work productively and fruitfully, and can contribute something to his or her community".^(1,2) It also defines mental health and psychosocial support as "any type of local or external support aimed at protecting or promoting psychosocial well-being and/or preventing or treating mental health disorders".⁽³⁾

Nurses are central professionals in the provision of health services, however there is a deficit of professionals around the world and this is more marked in the midst of humanitarian emergencies, in the field of mental health there are various challenges in front of human resources with sufficient training and / or experience, deficient physical infrastructure, cultural barriers among others, several studies recommend expanding research on mental health nursing care in armed conflict settings.^{4,5,6}

Nursing care is provided 24 hours a day and involves aspects of team responsibility since the conditions acquired by the patient, not determined by clinical conditions, are capable of causing deaths, sequelae, psychic suffering, in addition to increasing costs with the provision. care.⁽⁷⁾

Nursing actions are characterized by being versatile, highly flexible, with a great multidisciplinary content, but also full of paradoxes; We are asked to develop critical thinking, analytical skills, to consider the elements of globalization that affect health systems. It also requires technical skills of very high level maintaining a great sensitivity for the humane treatment of individuals who are in situations of health-disease.^(8,9)

The mental health crisis brought the presence of mild psychological symptoms such as insomnia, dysphoria, apathy, irritability, appetite disorders, sadness and anxiety in older School Adolescents since the pandemic began, however, School Adolescents with pre-existing psychosis have come to develop paranoid symptoms such as delirium.⁽¹⁰⁾

In a study conducted in Brazil 112 School Adolescents participated in the research, of whom 52,68 % presented symptoms of depression, 57,14 % of anxiety and 78,57 % of stress. There was an association of depression with the position of nurse, with the fact of being under psychological accompaniment prior to the pandemic, with the absence of participation in training for assistance. Anxiety was associated with female sex and fear of getting sick. Stress was associated with a younger age, 30 to 39 years and marital status married or in stable union.^(11,12,13,14)

In another study conducted in Brazil 146 students participated in the study, with a mean age of 23,6 years. The prevalence of common mental disorders was 68,5 % and was associated with female gender, self-declared autochthonous race, history of confinement, lack of discipline and irregular situation in the course, and feeling of incapacity for the future due to the COVID-19 pandemic. It was observed that 67,1 % of the students used some form of mental health management, and perceived psychological support, psychotropic drugs and music therapy as therapeutic, among other strategies.^(15,16)

In another study conducted in Chile 54,82 % of the sample presented some level of alteration or risk of suffering from anxiety, 47,59 % of stress and 31,33 % depression. In relation to the level of schooling of the father and mother, the highest percentage corresponds to the category of complete secondary education (father 37,95 % and mother 36,14 %).⁽¹⁷⁾

Therefore, the research objective is to determine the mental health of School Adolescents residing in a vulnerable area of North Lima.

METHODS

In the respective research, de according to its properties for data collection is quantitative approach, with non-experimental escriptive-transverse methodology.^(18,19)

The population is made upof a total of 306 participants from a vulnerable area in North Lima

Inclusion criteria:

- Participants who are over18 years old
- Participants living in a vulnerable area of Carabayllo district
- Participants who voluntarily agree to participate in the study

The data collection technique was the survey, in which sociodemographic data and the instrument are found.

of depression, anxiety and stress (DASS-21).

The DASS-21 instrument has 3 dimensions containing 14 elements, divided into subscales of 2 to 5 elements with similar content. The depression scale assesses dysphoria, hopelessness, devaluation of life, self-loathing, lack of interest or participation, anhedonia and inertia. The anxiety scale assesses autonomic arousal, skeletal muscle effects, situational anxiety, and subjective experience of anxious affect. The stress scale is sensitive to levels of chronic non-specific arousal. It evaluates difficulty relaxing, nervous excitement and discomfort, agitation or irritation, over reactivity and impatience. It consists of 4 answer alternatives, 0 "not at all", 1 "sometimes", 2 "much of the time" and 3 "most of the time" that serve to rate the degree to which each state has experienced during the past week.

For the validation of the instrument was done through the sample adequacy of Kaiser-Mayer-Olkin obtaining a result of 0,963 ($KMO > 0,6$), while Bartlett's sphericity test obtained significant results (X^2 approx. = 7050,46 6; $gl = 212$; $p = 0,000$).

With respect to the reliability of the instrument was made through Cronbach's Alpha, obtaining a result of 0,9 75($\alpha > 0,6$).

The survey was carried out with prior coordination with management members of the human settlement, for the necessary permits in the research, in turn coordinated with the heads of families giving an explanation about what the study is about.

RESULTS

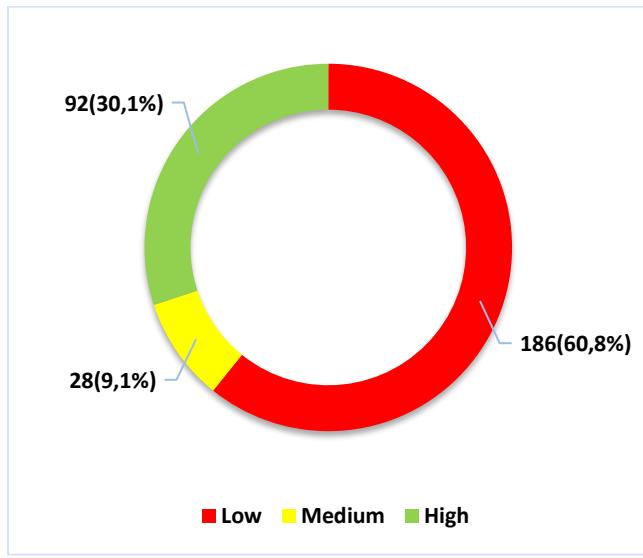


Figure 1. Mental health of School Adolescents residing in a vulnerable area of North Lima

In figure 1, we can see that, with respect to the mental health of the participants, 60,8 % (n=186) have low mental health, 9,1 % (n=28) have a mean mental health and 30,1 % (n=92) have high mental health.

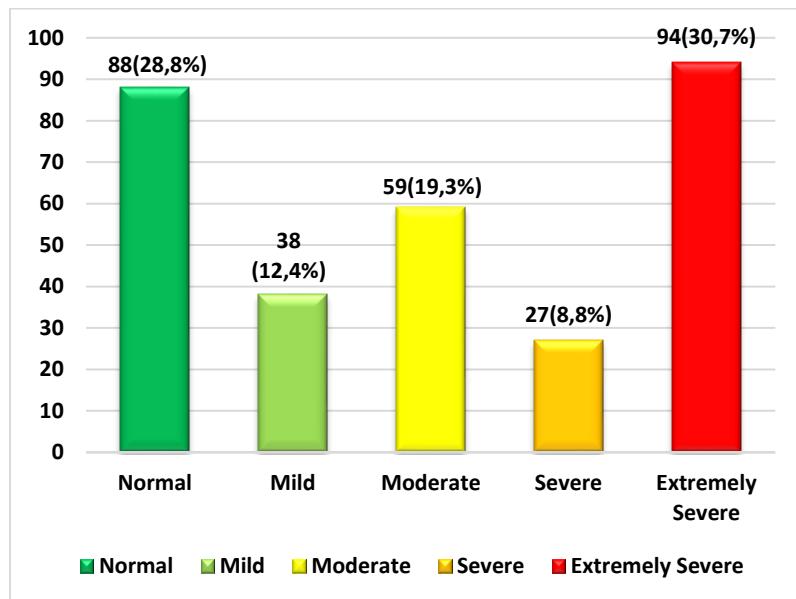


Figure 2. Depression of School Adolescents residing in a vulnerable area of North Lima

In figure 2, we can see that, with respect to the depression dimension, 28,8 % (n=88) have normal depression 12,4 % (n=38) mild depression, 19,3 % (n=59) moderate depression, 8,8 % (n=27) severe depression and 30,7 % (n=94) extremely severe depression.

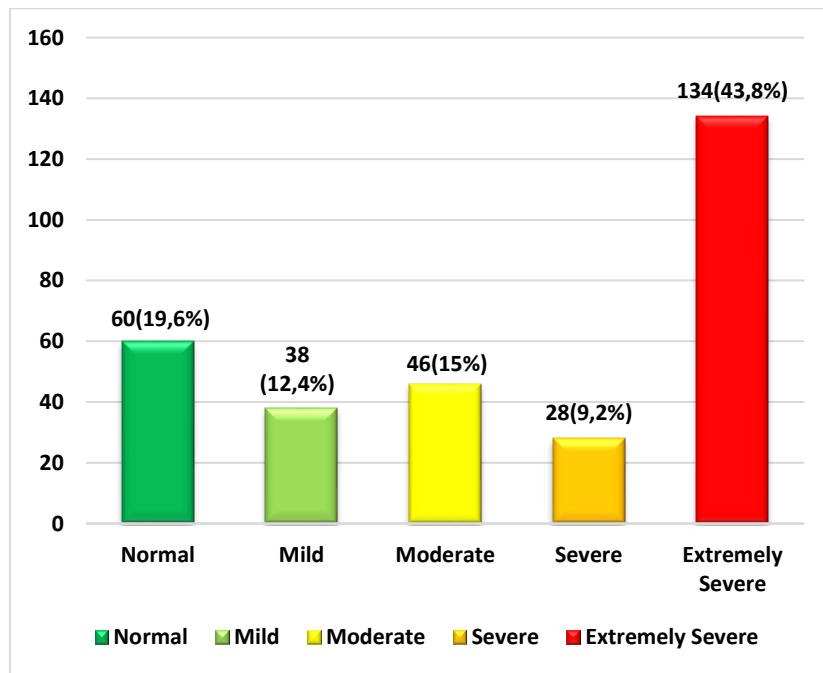


Figure 3. Anxiety of School Adolescents residing in a vulnerable area of North Lima

In figure 3, we can observe with respect to the anxiety dimension that, 19,6 % (n=60) have normal anxiety, 12,4 % (n=38) mild anxiety, 15 % (n=46) moderate anxiety, 9,2 % (n=28) severe anxiety and 43,8 % (n=134) extremely severe anxiety.

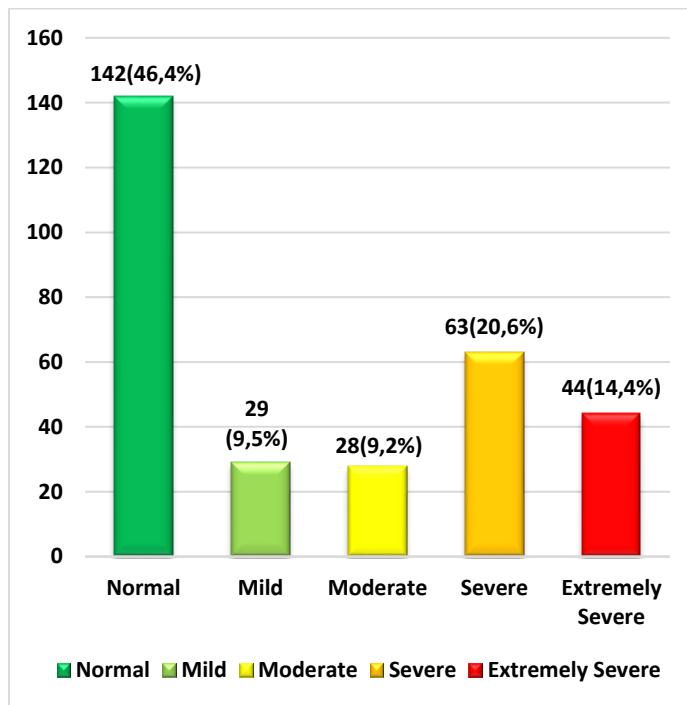


Figure 4. Stress of School Adolescents residing in a vulnerable area of North Lima

In figure 4, we can see that 46,4 % (n=142) of the participants have normal stress 9,5 % (n=29) mild stress, 9,2 % (n=28) moderate stress, 20,6 % (n=63) severe stress and 14,4 % (n=44) extremely severe stress.

DISCUSSIONS

In the present research, it is based from the perspective of mental health in the study population, which seeks to develop strategies to prevent mental disorders during the COVID-19 pandemic and thus maintain stable mental health.^(20,21,22,23,24)

In the results of the main variable mental health, it is observed that most participants had low levels in their mental health, this, we can interpret that, due to situations that School Adolescents go through during COVID-19 for two years it has an impact on their mental health, where factors such as anxiety, depression and stress,^(25,26,27,28,29,30,31) they are factors that are mainly considerably affecting the mental state of the person, and that currently product of the pandemic, these factors have increased their rates of symptoms, since, at present as the disease gradually decreases, the symptoms of anxiety, stress and depression have been increasing, because School Adolescents do not receive the support they need to minimize these symptoms of mental disorders.^(32,33,34,35,36)

Regarding the results of the dimensions, it is observed that in the dimensions depression and anxiety are those that are compromised with extremely severe levels in the participants, this, we can interpret it in that, during the pandemic, many School Adolescents developed depressive, anxious and stressful pictures, due to factors such as social isolation, quarantine at home and the contagion of a family member by COVID-19, caused the symptoms of the aforementioned mental disorders to increase, and that after two years post-COVID-19, many of the School Adolescents continue to present anxious and depressive

pictures, since not knowing how to handle the situations that make their mental state vulnerable, affects these symptomatic pictures, affecting their life in the long term.^(33,34,35,36)

CONCLUSIONS

It is concluded that counseling should be provided to School Adolescents who present anxious and depressive symptoms, given that mental health after the COVID-19 pandemic has been violated

It is concluded that a public and mental health intervention should be carried out, providing promotion and prevention in mental health due to the sequelae left by the COVID-19 pandemic.

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CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

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