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ORIGINAL

Nursing Care in the Mental Health of adolescents from an educational population in San Juan de Lurigancho, Lima-Peru

Cuidados de Enfermería en la Salud Mental de adolescentes de una población educativa de San Juan de Lurigancho, Lima-Perú

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ABSTRACT

Mental health worldwide was in crisis due to the COVID-19 pandemic, in situations that compromised their lives and that of their family, so in response people demonstrated negative factors such as depression, anxiety and stress, so the research objective is to determine nursing care in the mental health of adolescents from an educational population in San Juan de Lurigancho. It is a quantitative, descriptive-cross-sectional study, with 480 participants who answered a survey with sociodemographic data and the scale of depression, anxiety and stress. The results show that 39,8 % have normal depression, 13,5 % mild depression, 27,1 % moderate depression, 4,8 % severe depression and 14,8 % extremely severe depression. In conclusion, coping strategies should be developed for young people and adults, which allow them to maintain their mental health in situations of risk that compromise their lives and their family.

Keywords: Mental Health; Vulnerability; Stress; Depression; Anxiety.

RESUMEN

La salud mental a nivel mundial estuvo en crisis debido a la pandemia del COVID-19, en situaciones que comprometieron su vida y la de su familia, por lo que en respuesta las personas manifestaron factores negativos como depresión, ansiedad y estrés, por lo que el objetivo de la investigación es determinar los cuidados de enfermería en la salud mental de los adolescentes de una población educativa de San Juan de Lurigancho. Es un estudio cuantitativo, descriptivo-transversal, con 480 participantes que respondieron una encuesta con datos sociodemográficos y la escala de depresión, ansiedad y estrés. Los resultados muestran que el 39,8 % tiene depresión normal, el 13,5 % depresión leve, el 27,1 % depresión moderada, el 4,8 % depresión severa y el 14,8 % depresión extremadamente severa. En conclusión, se deben desarrollar estrategias de afrontamiento para jóvenes y adultos, que les permitan mantener su salud mental en situaciones de riesgo que comprometan su vida y la de su familia.

Palabras clave: Salud Mental; Vulnerabilidad; Estrés; Depresión; Ansiedad.

INTRODUCTION

The coronavirus (COVID-19) pandemic, which began in Wuhan, China, has spread to many countries; causing that in January 2020, the Emergency Committee of the World Health Organization (WHO) classified the outbreak as a global health emergency based on the increasing number of cases in China and other countries.^(1,2,3,4,6) Due to its highly contagious nature of the virus and the increasing number of confirmed cases and deaths worldwide, not only did the virus begin to spread, but also negative feelings and thoughts that threatened the mental health of the population.⁽⁷⁾ In addition, during confinement, the possibility of psychological and mental problems increased, mainly due to the distance between people.⁽⁸⁾ In the absence of interpersonal communication, depressive and anxiety disorders are more likely to occur or worsen.⁽⁹⁾

Findings in the United States, it was dated that people who overcome COVID-19 may have an increased risk of having sequelae in their mental health.⁽¹⁰⁾ Currently, according to statistical data, 1 in 5 people who have passed the disease have faced a diagnosis of anxiety, depression or insomnia for the first time, and are also twice as likely to have them as people with other pathologies.⁽¹¹⁾ Adding to this during the pandemic, suicidal thoughts increased between 8 % and 10 %; especially in young adults rising between 12,5 % and 14 %.⁽¹²⁾

The World Health Organization (WHO) defines mental health as: “A state of well-being in which the individual is aware of his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community”.⁽¹³⁾

According to the Pan American Health Organization (PAHO) it tells us that fear, worry and stress are normal responses at times when we face uncertainty, or the unknown or situations of change or crisis such as the COVID-19 pandemic.⁽¹⁴⁾

The new infectious disease of the SARS-CoV-2 coronavirus that affected worldwide, having no specific antiviral therapeutic drugs or vaccine, contributed to the increase of negative emotions such as fear, anxiety, stress, frustration or vulnerability; causing uncertainty in many aspects of our lives.⁽¹⁵⁾

In the study conducted in Cuba, it was revealed that the COVID-19 outbreak proved to be stressful for many people. The fear and anxiety as a result of the lockdown were overwhelming and provoked intense emotions in both adults and children.⁽¹⁶⁾ Since those who demonstrated a stronger stress response in this type of crisis are mostly more vulnerable populations.⁽¹⁷⁾

In Spain, a study carried out during the quarantine insulting 1596 people residing in 311 cities of 16 autonomous communities of the country, where the results found suggest that age works as a protective factor, so that at an older age the socio-health crisis caused by the pandemic seems to have less psychological impact on people.⁽¹⁸⁾ At the same time, they indicate that the population with less income and available space per person in housing are more vulnerable to the psychological impact of COVID-19.⁽¹⁹⁾

In Asia, a study in Singapore revealed an increase in negative emotions (anxiety, depression and indignation) and a decrease in positive emotions (happiness and satisfaction).⁽²⁰⁾ This generated erratic behavior among people, which is a common phenomenon, since there is much speculation about the mode and speed of transmission of the disease, currently, without a definitive treatment.⁽²¹⁾

In the study conducted in China, 1210 respondents from 194 cities in China showed that 24,7 % of participants have a moderate or severe psychological impact. Concluding that during the initial phase of the COVID-19 outbreak in China, more than half rated the psychological impact as moderate to severe and about one-third reported moderate to severe anxiety.⁽²²⁾

In Ecuador, a study of 766 people where about 8 % reported having been diagnosed with COVID-19 and 12,9 % experienced related symptoms.⁽²³⁾ Indicating 77,4 % have had no mental health problems in the past and 87,6 % have no such problems during the pandemic. However, 41 % acknowledged having greater psychological distress.^(24,25,26) Women and young adults were the most affected.

In Peru, with 560 adolescents participating in the study at the secondary and university levels; 45,6 % feel the appearance or increase of anxious symptoms and 36,8 %, depressive symptoms. Concluding that the COVID-19 pandemic and associated factors such as social isolation generate the appearance of symptoms that affect the mental health of adolescents, linked to anxiety and depressive disorders, with greater preponderance in women.^(27,28)

Therefore, the research objective is to determine the nursing care in the mental health of adolescents from an educational population in San Juan de Lurigancho.

METHODS

In the study, according to its properties is quantitative, with respect to its methodology is descriptive-transversal non-experimental.⁽²⁹⁾

The population consisted of a total of 480 participants from the ages of 18 to 60 years respectively.

Inclusion criteria:

- Participants who are of legal age
- Participants residing more than 1 year in the district of San Juan de Lurigancho
- Participants who voluntarily agree to be present at the study

The data collection technique was the survey in which the DASS-21 instrument is described.

The depression, anxiety and stress scale (DASS-21) has 3 dimensions divided into 14 elements each, and the dimensions are subdivided into indicators of 2 to 5 elements. The depression dimension evaluates devaluation of life, self-loathing, lack of interest or participation, hopelessness, dysphoria, anhedonia and inertia. The anxiety dimension assesses situational anxiety, skeletal muscle effects, autonomic arousal and the subjective experience of anxious affect. The stress dimension evaluates agitation, impatience, difficulty relaxing and nervous excitement. In which the response alternatives are on a Likert-type scale where, "0 = nothing at all", "1 = sometimes", "2 = much of the time" and "3 = most of the time", where the higher the score, as a result it will be observed if your mental health has experienced situations that compromise your mental health.

Regarding the validation of the instrument, it was performed by the Kaiser-Mayer-Olkin test obtaining a coefficient of 0,894 ($KMO > 0,8$) and the Bartlett sphericity test obtained significant results (Approx. $\chi^2 = 7767,328$; $gl = 210$; $Sig. = 0,000$).

And for the reliability of the instrument was performed by Cronbach's Alpha obtaining a score of 0,944 ($\alpha > 0,8$) for the 21 elements of the instrument, where we can determine that the instrument is reliable.

For the realization of the study, the coordination was first made with the head of family of each household of the inhabitants who live in the district of San Juan de Lurigancho, where they were explained about the surveys to be carried out and thus have the knowledge of the research topic to be treated.

In this flow diagram it is possible to describe the assessment made by the nursing professional in mental health, in which it is done through 3 techniques:

Observation technique: This technique is used by the nursing professional as a resource to evaluate mainly human behavior. In order to perform this technique, the observer must have an open attitude, free of prejudices and use their senses to perceive the user's behavior as they express it.

Interview technique: This technique used by the nursing professional is to obtain information through verbal communication, through manifestations of the person about their perceptions, ideas, beliefs, feelings and actions.

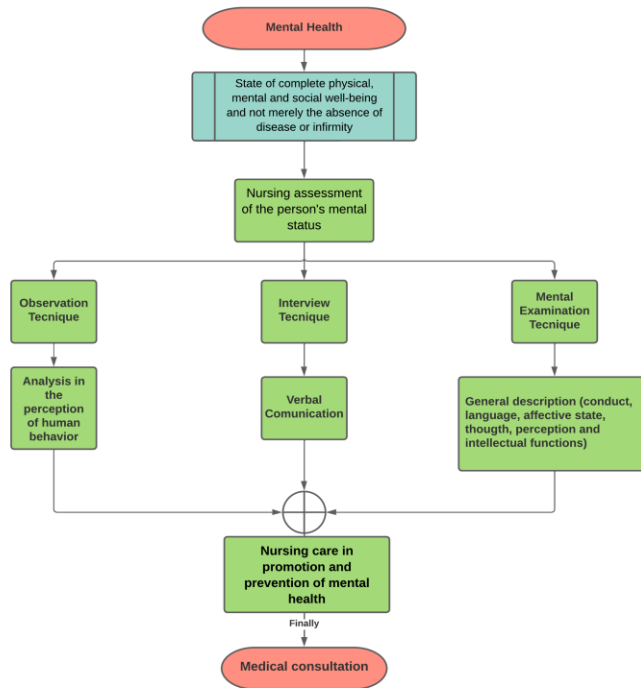


Figure 1. Flowchart on Mental Health Care Nursing Intervention

Mental examination technique: This technique the nursing professional will record in a descriptive way the mental functions of the person as a result of the observation, orderly and systematic exploration of the signs and symptoms at a given time, evaluating (appearance, behavior, language, affective state, thought, perception and intellectual functions).

Once the 3 procedural techniques for the evaluation of the person's mental health have been carried out, the nursing professional will carry out the promotion and prevention of factors that compromise mental health, where they will finally be directed to medical consultation in which it will be detailed if their mental health is altered or not.

RESULTS

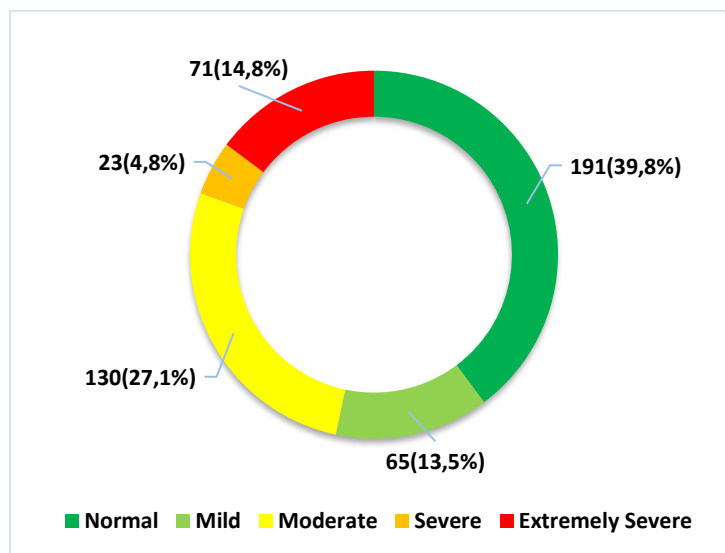


Figure 2. Depression in an underserved population in San Juan de Lurigancho

We can see in figure 2 that 39,8 % (n=191) of the participants presented a normal level of depression, 13,5 % (n=65) a level of mild depression, 27,1 % (n=130) level of moderate depression, 4,8 % (n=23) level of severe depression and 14,8 % (n=71) level of extremely severe depression.

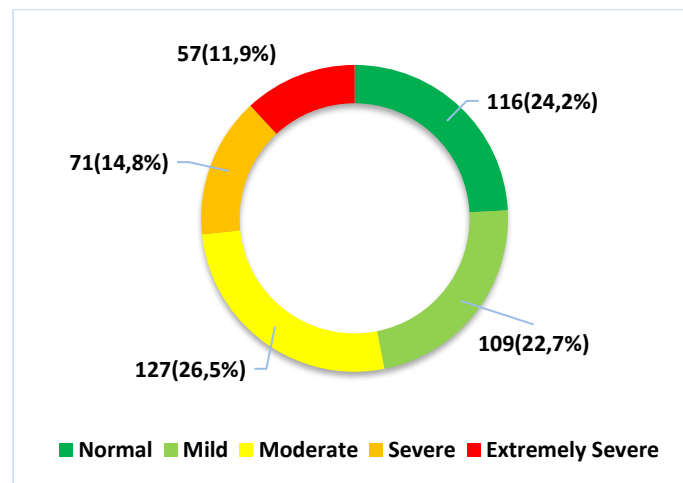


Figure 3. Anxiety in an underserved population in San Juan de Lurigancho

We can see in figure 3 that 24,2 % (n=116) of the participants have a normal anxiety level, 22,7 % (n=109) a mild anxiety level, 26,5 % (n=127) a moderate anxiety level, 14,8 % (n=71) a severe anxiety level and 11,9 % (n=57) an extremely severe anxiety level.

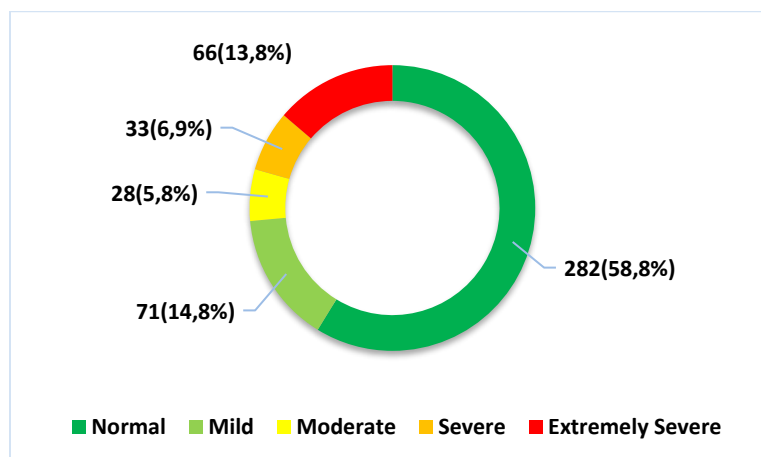


Figure 4. Stress in an underserved population in San Juan de Lurigancho

We can see in figure 4 that 58,8 % (n=282) of the participants had a normal stress level, 14,8 % (n=71) a mild stress level, 5,8 % (n=28) a moderate stress level, 6,9 % (n=33) a severe stress level and 13,8 % (n=66) an extremely severe stress level.

DISCUSSIONS

In the present study, we cover nursing care towards the mental health of the population, whose purpose is to develop strategies to improve coping skills or styles for the person where their mental health is vulnerable.⁽³⁰⁾

In the results of the main variables, depression, anxiety and stress, it is observed that in the variable where the evidence of a mental health alteration of the study population is most found was in the variable

anxiety, this is because, especially in young people and adults, they do not have the necessary information about the necessary care that must be taken into account for their mental health.^(31,32,33,34) Since anxiety at higher levels, we can have symptoms of headache, gastrointestinal pains, fatigue, mood swings and insomnia, all these factors that anxiety produces in the person, are symptoms in which the person is entering a case of somatization either situational or temporary, product of the disease and also by the situation of the COVID-19 pandemic.⁽³⁵⁾

In addition, many mental health problems such as depression, anxiety and stress, are pictures that during the COVID-19 pandemic, their levels have been increasing, given that factors such as quarantine, social isolation of an infected family member, the death of a family member due to COVID-19, changes in routines, sedentary lifestyle, melancholic, sadness and fatigue, are factors that have predisposed the person to present alterations in their mental state, making them vulnerable to any situation that compromises their health well-being.^(36,37,38,39)

Therefore, it is important to develop measures that reduce or minimize depression, anxiety and stress, since, as a result of COVID-19, it has generated conflict at the psycho-emotional level in the person, causing risks in mental alteration, in such a way that it can cause a mental disorder product of depression, anxiety or stress.⁽⁴⁰⁾ Therefore, the mental health protection measures of the person must be taken into account, since there are multiple factors that make the mental state of the person vulnerable.

CONCLUSIONS

It is concluded that, it is necessary to carry out motivational counseling in young people and adults, mediante programs of promotion and prevention of mental health in situations that can compromise it.

It is concluded that, health professionals should be guided in the early recognition of mental health problems in the person.

This research work will be beneficial for other studies to develop on this topic, given that mental health interventions are sometimes scarce and thus be able to minimize the risks produced by alterations in mental health.

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CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

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