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A macro-paradigm of adolescent psychopathologies in low socio-economic settlements in Eldoret town, Kenya

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ABSTRACT

The aim of this study was to investigate the adolescent psychopathologies among youth in Eldoret town. The objectives of the study were; to investigate the psycho-physical manifestations of psychopathology among youth in Eldoret town, the etiological factors in the psychopathologies and the relationship between the psychopathology and socio-economic factors. The study adopted the expost-facto research design. The study sample was 72 adolescents from low socio-economic status estates of the town which include Langas, Kamukunji, Kambi Nyasi, Munyaka, King'ong'o and Huruma estates. The common psychopathologies were aggression, anxiety disorders, depression, learning disorders, eating disorders and the conduct disorders. The etiological factors for the psychopathologies were peer influence, bad role models, influence of the environment and genetic factors. The psychopathologies were common in large families that that had five or more children implying laxity in control by the parents. The prevalence of the psychopathologies was high in less well-to-do families as well as those that had uneducated parents.

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Introduction

Psychopathology refers to forms of behavior that seem so dysfunctional that they denote ill-health. It refers to those "morbid" mental phenomena that some people must deal with some of the time and other people must endure all of the time. It is, in short, the "systematic study of abnormal experience, cognition and behavior — the study of the products of the disordered mind" (Oyebode, 2008).

According to Feldman & Elliott (1990) adolescence is a particularly compelling period of development and one that lends itself to investigations guided by a developmental psychopathology perspective. Biological, psychological, and social systems undergo marked developmental changes during adolescence. Building on the normative advances accompanying adolescence, research conceived within a developmental psychopathology framework not only can inform knowledge of adolescent psychopathology but also can contribute to an enhanced understanding of developmental processes more generally (Sameroff, 1990).

Maddux *et al* (2005) argue that over the life course, adolescence is characterized by a rather lengthy transition phase in which the individual is neither a child nor an adult. Although the adolescent strives to move toward acquiring independence and the attainment of the perceived rewards of adulthood, parents and social institutions, recognizing the adolescent's relative lack of preparedness for the assumption of full adult responsibilities, struggle with relinquishing their perceptions of the adolescent as a child. Consequently, the flux and renegotiation inherent in this developmental period increase the potential for both internal and external conflict. Concomitantly, however, opportunities for growth and the realization of new possibilities occur (Cicchetti &Toth, 1995). Adolescence has in the past been characterized as a period of "storm and stress" and the extreme problems in adjustment exhibited by a few were

generalized as normative experiences for all adolescents. However, the storm and stress of adolescence is neither universal nor inevitable. Most adolescents cope successfully with the developmental demands of this period and do not evidence extremes of mal-adaptation. Nevertheless, adolescence typically does generate more turmoil than either childhood or adulthood.

Arnett (1999) identifies three central features of this turmoil that may be heightened in adolescence: mood disruptions, risk behaviors, and conflict with parents. Although adolescents exhibit large individual differences in these areas, the fact that mood disruptions and increased risk taking are not atypical during this period of development suggests that behaviors associated with internalizing and externalizing forms of psychopathology are in ascendance. Thus, the boundaries between normal and abnormal, as well as between normative struggles and psychopathology, become less clear. When are irritability, dysphoria, and emotional lability part of normative adolescent self-searching versus symptoms of mood disorder? When does experimentation with alcohol and drugs lapse into substance abuse? Which adolescents are most vulnerable to moving into the psychopathological extremes? Why do many adolescents adapt successfully, and what protects adolescents from developing significant disturbance? What current and historical developmental factors influence the trajectories engaged that involve normative struggles versus emerging disorder? What are the future ramifications of adolescent psychopathology? These are some questions relevant to adolescence that can be better understood by invoking a developmental psychopathology perspective.

Signs of adolescent psychopathologies

An enquiry into the issue of psychopathologies is not complete without considering some of the symptoms and signs that an individual has a disorder. According to Sims (2002) there

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are some obvious signs that indicate the need for immediate and effective intervention, including violence against other persons or animals, or when peers are involved in destructive processes (crime, truancy, drugs). Or, a parent may simply have an instinctive feeling that something serious is happening. An important first step to find out what is going on is to try to talk to the adolescent and other family members about what is happening, possible reasons, and potential solutions. Others who know the adolescent and family, like teachers or caregivers, may also be able to provide information about the youth's mood or behaviors outside of the home to help assess the severity of the problem.

According to Arnett (1999) many factors put youth and families at risk for juvenile delinquency, though they do not necessarily cause delinquency. Such factors include youth attention and hyperactivity problems and learning disorders, volatile temperament, and even the early onset of puberty and sexual development. All these factors affect the way an adolescent feels and acts and also how peers, family, and society view the adolescent. Similarly, parental problems, such as depression, substance abuse, and domestic violence can interact negatively with a youth's developing path of delinquency. Rather than causing delinquency, factors such as these tend to place youth at increased risk, intensify the downward spiral, and in turn add to the difficulty in changing these processes for the better.

Purpose of the study

The purpose of this study was to investigate the adolescent psychopathologies among youth in Eldoret town. The objectives were; to investigate the psycho-physical manifestations of psychopathology among youth in Eldoret town, the etiological factors in the psychopathologies and the relationship between the psychopathology and socio-economic factors.

Data and Methods

Population and Sample: The population comprised all the youth in Eldoret town residing in the low socio-economic status estates of the town which include Langas, Kamukunji, Kambi Nyasi, Munyaka, King'ong'o and Huruma estates. The identification of the research subjects in each of these estates was done with the help of a village elder, social workers who operate in the estates as well as the health care givers. These people were conversant with all the youth (adolescents in particular) and they were able to easily identify those who had a psychopathology. In total 72 adolescents participated in the study

Research design: The study adopted the expost-facto research design. The design enabled the researcher to analyze the relationships between study variables without being able to manipulate the independent variable. Cross-tabulations were used to highlight relationships between the psychopathologies and various factors.

Instruments: The study used a questionnaire for data collection. The questionnaire comprised open ended questions that encouraged the respondents to provide information they deemed relevant. The instrument was guided by the study objectives.

Study results

The prevalent psychopathologies

The study established that most of the study participants (53%) manifested aggression but while the aggressive behaviors are viewed as deviant by the mainstream societies, in the study socioeconomic groups they were associated with prestige and high status.

Anxiety Disorders were also found to be prevalent among the study subjects. The most common anxiety disorder was phobias, which are unrealistic and overwhelming fears of objects or situations. This was manifested by 27.1% of the research subjects. Probed about the cause of the phobia, most of them mentioned school related stimuli and attributed it to the unpleasantness experienced while at school.

The punishment given at school was identified as a cause of the panic disorder, which causes terrifying "panic attacks" that include physical symptoms, such as a rapid heartbeat and dizziness. Over 15% (11) mentioned that they had suffered a panic attack at least once.

A total of 9 (12.5%) respondents had experienced the post-traumatic stress disorder which the study linked to the horrifying experiences that the subjects went through during the post-election violence. The main symptoms of the post-traumatic stress disorder that were observed were a pattern of flashbacks and other symptoms and occurs in children who have experienced a psychologically distressing event, such as abuse, being a victim or witness of violence, or exposure to other types of trauma such as wars or natural disasters.

Of the adolescents who participated in the study, 8 (11.1 %) had suffered or was suffering from some kind of depression. Among the affected individuals, some of the noted changes were: changes in emotions in which the 5 female students who were depressed often felt sad, cry, or feel worthless. Concerning the physical well-being of the adolescent, some experienced changes in appetite or sleeping patterns and may have vague physical complaints. Those who were at school reported lose of interest in play activities, or schoolwork declines. The female adolescents who had this disorder believed that they were ugly, unable to do anything right, or that the world or life is hopeless. It also is important for parents and caregivers to be aware that some children and adolescents with depression may not value their lives, which can put them at risk for suicide.

A total of 59 respondents (81.9%) had learning difficulties that made it harder for the adolescents to receive or express information could be a sign of learning disorders. The observed learning disorders presented as problems with spoken and written language, coordination, attention, or self-control. As other studies have established, eating disorders are more prevalent in females than in males. In this study 4 (5.6%) of the respondents were suffering from anorexia nervosa and had difficulty maintaining a minimum healthy body weight.

On the other hand, bulimia nervosa was common among male compared to female subjects (2 females compared to 13 males). The psychopathology involves being compelled to binge (eat huge amounts of food in one sitting). After a binge, in order to prevent weight gain, they rid their bodies of the food by vomiting, abusing laxatives, taking enemas, or exercising obsessively.

The main feature of conduct disorder is that adolescents with conduct disorder usually have little concern for others and repeatedly violate the basic rights of others and the rules of society. Conduct disorder causes children and adolescents to act out their feelings or impulses in destructive ways. The offenses these children and adolescents commit often grow more serious over time. Such offenses may include lying, theft, aggression, truancy, the setting of fires, and vandalism. The study found out that 9 males (24.3%) and 2 females (5.7%) had this disorder.

Perceived etiological factors of the psychopathologies

The study sought to investigate the causes of the psychopathologies and the main ones were peer influence, bad role models, influence of the environment and genetic factors. A total of 24 females (68.6%) and 15 males (40.5%) believed that the disorders were caused by peer influence. Others (6%) believed that the psychopathologies were as a result of some genetic factors. In total, 29 (40.3%) respondents felt that the environment of upbringing had a contribution to their being psychopathological.

The relationship between the psychopathology and socio-economic factors

Gender and psychopathology

The study sought to analyze the distribution of the individuals with psychopathologies by gender and the findings are presented on table 1.

Table 1: Gender and psychopathologies

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Psychopathology/Gender	Male		Female		Total		
	Freq	%	Freq	%			
Aggression	30	81	8	22.9	38		
Anxiety disorder	10	27	10	28.6	20		
Depression	3	8.1	5	14.3	8		
Learning disorders	31	83.8	28	80	59		
Eating disorder	3	8.1	17	48.6	20		
Conduct disorder	14	37.8	3	8.6	17		

From table 2, it is apparent that most of the adolescents with the psychopathologies are males, a majority of them exhibiting aggression, learning disorders and conduct disorders. A fairly large number of female respondents (28) had learning disorders. An equal number of male and female respondents (10 per gender category) had anxiety disorders.

Family economic status and psychopathology

The study established that most of the adolescents with the said psychopathologies (87.6%) came from less well-to-do families (families that have a daily income of US \$ 1.5 per day) while the rest (12.4%) came from families that had well-to-do status.

Parental educational status and psychopathology

Concerning the educational back ground of the parents, there was a balance between disordered adolescents with educated parents and the disordered adolescents with uneducated parents (42.7% and 57.3% respectively). The implication here could be that uneducated parents are likely to emphasize less on their children's discipline and order compared to the educated parents.

Family size and psychopathology

The study sought to describe the distribution of the individuals with psychopathologies by family size and the findings are presented on table 2.

Table 2: Psychopathologies and family size

Psychopathology/Family size	Small (0-4 children)	Big (> 5 children)	Total
Aggression	11	27	38
Anxiety disorder	6	14	20
Depression	2	6	8
Learning disorder	16	43	59
Eating disorder	5	15	20
Conduct disorder	3	14	17

Form table 2, it is apparent that most respondents with psychopathologies come from big families. Clearly, there is a sense of order and parental control in small families compared to large ones. The parents in small families are able to pay individual attention to the conduct and behavior of their (few) children.

Conclusions

The study established that the common psychopathologies in the low socio-economic settlements are aggression, anxiety disorders, depression, learning disorders, eating disorders and the conduct disorders. The etiological factors for the psychopathologies were peer influence, bad role models, influence of the environment and genetic factors. The psychopathologies were common in large families that that had five or more children implying laxity in control by the parents. The prevalence of the psychopathologies was high in less well-to-do families as well as those that had uneducated parents.

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