

Functional status outcomes of adolescents with mental disorders: A descriptive study

Resultados del estado funcional de adolescentes con trastornos mentales: un estudio descriptivo

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SUMMARY

Introduction: Mental disorder impacts various aspect of an individual's ability to function in daily life and their living environment. There are still limited studies that describe the functional health status of adolescents with mental disorders. This study aimed to determine the functional status of adolescents with mental disorders. **Methods:** This study was cross-sectional. Data were obtained from 50 family caregivers of adolescents aged 12-18 who experience mental disorders. The sample was conducted by purposive sampling. The variable measured in this study was functional status. The data was measured

using a questionnaire and analyzed using descriptive analysis. **Results:** The functional status of adolescents with mental disorders, such as activity engagement (50 %), hope (50 %), and speech components (38 %), are in good categories. Adolescents often have trouble sleeping (48 %), tiredness (46 %), eating patterns (64 %), mood depression (92 %), concentrating on schoolwork (78 %), and feeling bad about themselves (76 %). **Conclusion:** Adolescents with mental disorders still have poor functional abilities, especially trouble sleeping, tiredness, poor eating patterns, mood depression, concentrating on schoolwork, and feeling bad about themselves. Family caregivers need to increase their understanding and recognize adolescents' abilities in carrying out their daily activities, facilitate the importance of having positive expectations, and give an understanding of the importance of having goals in life to achieve and recognize the problem of sleep patterns, tiredness and mood in adolescents to help overcome the issues in adolescents.

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RESUMEN

Introducción: Los trastornos mentales afectan varios aspectos de la capacidad de un individuo para funcionar en la vida diaria y en su entorno vital. Aún existen estudios limitados que describen el estado de salud funcional de los adolescentes con trastornos mentales. Este estudio tuvo como objetivo determinar el estado funcional de los adolescentes con trastornos mentales.

Métodos: *Este estudio fue un estudio transversal. Los datos se obtuvieron de 50 cuidadores familiares de adolescentes de 12 a 18 años que padecen trastornos mentales. La variable medida en este estudio fue el estado funcional. La muestra se realizó mediante un muestreo intencional. Los datos se midieron mediante un cuestionario y se analizaron mediante análisis descriptivo. Resultados:* El estado funcional de los adolescentes con problemas psiquiátricos, a saber, la participación en la actividad (50 %), la esperanza (50 %) y los componentes del habla (38 %) se encuentran en categorías buenas. Los adolescentes a menudo tienen problemas para dormir (48 %), cansancio (46 %), patrones de alimentación (64 %), depresión del estado de ánimo (92 %), concentración en el trabajo escolar (78 %) y sentirse mal consigo mismos (76 %). **Conclusión:** Los adolescentes con trastornos mentales aún presentan capacidades funcionales deficientes, especialmente problemas para dormir, cansancio, malos patrones de alimentación, depresión del estado de ánimo, concentración en las tareas escolares y sentirse mal consigo mismos. Los cuidadores familiares deben aumentar su comprensión y reconocer las capacidades de los adolescentes para llevar a cabo sus actividades diarias, facilitar la importancia de tener expectativas positivas y hacer comprender la importancia de tener metas en la vida que alcanzar y reconocer el problema de los patrones de sueño, el cansancio y el estado de ánimo en los adolescentes para ayudar a superar los problemas en los adolescentes.

Palabras clave: *Adolescente, estado de salud funcional, trastorno mental*

INTRODUCTION

Adolescence, a phase that usually spans from ages 10 to 19, represents a pivotal stage of development characterized by the profound shift from childhood to adulthood. This transformative period encompasses substantial physical, cognitive, and emotional changes as individuals endeavor to shape their identities and strive for optimal well-being (1). The World Health Report (2000) stated that 20 % of children and adolescents have a mental illness severe enough to cause damage (2). The most common mental disorders experienced by adolescents were anxiety disorders, including social phobia and generalized anxiety disorder, at 3.7 % and was followed by major depressive disorder at 1.0 %, conduct disorder at 0.9 %, and both post-trau-

matic stress disorder (PTSD) and attention deficit hyperactivity disorder (ADHD) at 0.5 % (3). Another study found that the most prevalent diagnoses of mental disorders in children and adolescents were as follows: mood disorders at 8.6 %, ADHD at 7.4 %, conduct disorders at 6.1 %, and anxiety disorders at 4.8 % (4).

Children and adolescents with mental health disorders are likely to experience symptoms throughout their lives, which increases their risk of dropping out of school, substance abuse, suicidal thoughts, reduced physical activity, and more extended periods of mental health service utilization (5). Mental disorders in adolescents could interfere with their normal development and functioning (6). Hence, functional status has emerged as a crucial measure of outcome, as it evaluates how adolescents with mental disorders fare compared to those without such conditions. Although it is generally believed that functional status is low among adolescents with mental disorders, there is some variation in this regard.

Functional status refers to the disability a patient experiences due to their health condition in any domain (7). It reflects an individual's capacity to perform everyday activities, meet basic needs, fulfill typical roles, and promote health and well-being. Functional status assesses these health domains and evaluates the impact of disease on a patient's life (7). Past mental health status is important as information and to understanding current functional status in adolescents because disease parameters are often considered to affect adolescents' psychosocial adjustment (8,9) in the social aspect of adolescents.

Mental disorders impact various aspects of an individual's ability to function in daily life and their living environment (10). The Global Burden of Disease Study, using Disability Adjusted Life Years (DALYs), has shed light on the considerable impact of mental health issues on disability. Psychiatric disorders have been linked to decreased functional status and more disability days compared to not having a mental illness. A diagnosis of a mental disorder has a far-reaching effect on individuals and their families, affecting all areas of life, including daily functioning, planning, organizational skills, and consistent decline in performance (11). Mental disorder in individuals affect their functional outcomes

such as psychological outcomes, health behavior outcomes, economic and social outcome (8) and also well-being and functioning (12).

In Indonesia, approximately 6% of individuals aged 15 and above experience symptoms of anxiety or depression (13). Adolescent functional limitations are essential factors in disabled adolescents' psychosocial adjustment. There is a need for a broader range of preventive interventions in adolescents in mental health services. There are still limited studies that describe the functional status of adolescents with mental disorders. The objective of this study was to evaluate the functional capabilities of adolescents diagnosed with mental disorders.

METHODS

Study Design

This study was a cross-sectional study.

Participants

This study was conducted in a Mental Hospital in Surabaya. The study period was two months (September-October 2022). The population was family caregivers for adolescents aged 12-19 years with psychiatric problems who were on outpatient treatment at the Menur Mental Hospital in Surabaya. The number of participants was 50, who visited the hospital for a check-up and were chosen by purposive sampling. The inclusion criteria were families living at home with adolescents who experienced psychiatric problems for a minimum of 6 months and family caregivers aged >18 years. The exclusion criteria were families with psychiatric problems.

Data Collection

Data on adolescents experiencing psychiatric problems was obtained from outpatient data from mental hospitals. When the family was visiting outpatient care at the adolescent psychiatric clinic,

the researcher approached the family and asked whether the family met the criteria the researcher wanted. Prospective respondents who are willing to take part in the study are asked to fill out informed consent and fill out a questionnaire.

The instrument in this study used a demographic questionnaire, which contained the age of the adolescent patient, gender, length of illness, and diagnosis of psychiatric problems. The questionnaire, which was further modified from Patient Health Questionnaire-9 (PHQ-9) for adolescents (14). The question concerns nine symptoms that occurred during the past two weeks. The instrument assessed activity engagement, hope, speech, sleeping, tiredness, eating patterns, mood depression, concentrating on schoolwork, and feeling bad about self.

Ethical Consideration

This study was ethically approved by the ethical commission of the Faculty of Nursing Universitas Airlangga, number 2361.

Data Analysis

Data were analyzed using IBM SPSS with descriptive analysis.

RESULTS

As shown in Table 1, the results indicate that most adolescents with psychiatric problems are male (62%), the mean age is 14.74 years, the illness duration is 6.1 years, and the majority diagnosis is behavior disorder (42%). The health status of adolescents with psychiatric problems, namely the Activity engagement (50%), Hope (50%), and Speech components (38%), are in good categories. Adolescents often have trouble sleeping (48%), tiredness (46%), eating patterns (64%), mood depression (92%), concentrating on schoolwork (78%), and feeling bad about themselves (76%) (Table 2).

Table 1
Respondents Characteristics

Variable	Frequency (n)	Percentage (%)	Mean
Sex			
Female	19	38.0	
Male	31	62.0	
Age (year)			14.74
Illness duration (year)			6.10
Diagnosis			
Schizophrenia	4	8.0	
Depression	7	14.0	
Developmental disorder	11	22.0	
Behavior Disorder	21	42.0	
Anxiety	6	12.0	
OCD	1	2.0	

DISCUSSION

Almost half of the adolescents with mental disorders had activity engagement, hope, and speech ability in good categories. Activities of daily living (ADL) are the daily routine tasks that people perform, including eating, dressing, moving, and engaging with others, such as family and community. A previous study revealed that adolescents with intellectual disabilities generally demonstrate proficiency in performing ADL. However, it was noted that the abilities of adolescents with disabilities could not be directly compared to those of typical adolescents (15). Different diagnoses for mental disorders will affect the engagement ability in adolescents; for example, in school engagement (16). Adolescents with mental disorders should be actively involved in daily activities to enhance their independence in line with their abilities. Family caregivers need to understand the adolescents' capabilities better and support them in their daily tasks. Engaging in activities is vital for developing adolescents' self-care skills and fulfilling their needs. Adolescents with mental disorders should be encouraged to participate in daily activities to promote their independence based on their abilities. Family caregivers should strive to understand the adolescents' capabilities better and support them in carrying out their daily tasks. Engaging in activities is crucial for developing adolescents' self-care skills and meeting their needs.

The majority of adolescents had good hope. Adolescents with a strong sense of hope tend to experience higher physical and psychological well-being levels (17). Hope entails looking forward to the future with a positive outlook and purpose. It gives us the belief that there is a better future ahead and helps us deal with present challenges, encouraging us to view difficult times as opportunities for personal development (18). Hope is considered an essential value in the recovery from schizophrenia and mental illness in general (19). Adolescents with mental disorders need to understand the importance of having positive expectations and setting life goals to achieve them.

Adolescents who have emotional and behavioral disorders frequently exhibit limited proficiency in language and communication (20). Earlier research has indicated that specific elements of language and communication are closely linked to mental health. For instance, adolescent psychotic experiences have been associated with poor pragmatic language skills (21) and adolescents with depression (22). Intervention should apply in both speech and language therapy and psychotherapy for adolescents with mental disorders who experience speech difficulties.

Most adolescents with mental disorders in this study often have trouble sleeping, tiredness, poor eating patterns, mood depression, concentrating on schoolwork, and feeling bad about themselves.

Table 2

An adolescent with Mental Disorder Functional Status Characteristics

Variable	Frequency (n)	Percentage (%)
Activity Engagement		
Good	25	50.0
Average	13	26.0
Poor	12	24.0
Hope		
Poor	14	28.0
Average	11	22.0
Good	25	50.0
Sleep disorder		
Never	3	6.0
Seldom	10	20.0
Sometimes	13	26.0
Often	24	48.0
Tiredness		
Never	1	2.0
Seldom	14	28.0
Sometimes	12	24.0
Often	23	46.0
Eat pattern		
Good	10	20.0
Average	8	16.0
Poor	32	64.0
Speech		
Poor	14	28.0
Average	17	34.0
Good	19	38.0
Mood Depression		
Average	4	8.0
Poor	46	92.0
Concentrating on schoolwork		
Good	2	4.0
Average	8	16.0
Poor	39	78.0
Feeling bad for self		
Good	3	6.0
Average	7	14.0
Poor	38	76.0

The results of previous studies indicated that adolescents with mental disorders experience poor sleep quality, such as insomnia, delayed sleep-phase wake disorder, and poor sleep efficiency (23). Addressing fatigue and sleep problems in adolescents with mental disorders is challenging due to a lack of motivation among young people to make behavioral changes aimed

at managing fatigue and sleep difficulties (24). Difficulties with sleeping and persistent tiredness can be more than just standalone problems; they can also manifest as transdiagnostic symptoms across a range of mental health disorders (24). Healthcare professionals often do not prioritize common sleep and tiredness issues and do not emphasize addressing fatigue and sleep problems in the context of mental illness. Family caregivers must recognize the significance of sleep patterns in adolescents and provide support in overcoming any sleep problems they may have.

A prior study found that mental disorders such as depression related to lower academic scores, especially in math achievement (25). School is crucial for supporting adolescents with conditions like mental disorders and can provide primary treatment support (26). Thus, schools, like other organizations, play an essential role in supporting and promoting mental health among adolescent students with mental disorders.

A prior study found that unhealthy dietary patterns are associated with behavioral issues in children (27). Overeating and undereating have a complex impact, sometimes improving feelings of well-being and at other times leading to guilt, depression, anxiety, and deprivation (28). Family caregivers should monitor the changing eating patterns of adolescents to identify any problems they are experiencing.

Adolescents grappling with depression often describe experiencing heightened and varying negative emotions, such as intensified feelings of sadness, anger, and nervousness. Additionally, they may note a decreased balance between positive and negative emotions (29). Experiencing mental disorders in adolescents was described as an unplanned journey. The mood shown by adolescents in everyday life cannot be predicted, but most of them show a depressed mood. This result had implications for nursing practice, included developing interventions and conducting health education for adolescents with mental disorders about the development and enhancement of healthy coping skills (30).

Most adolescents with mental disorders experience difficulty concentrating on schoolwork. Previous research has indicated that a rise in depressive symptoms correlates with a range of factors indicating diminished academic

performance (31). Suffering from mental health disorders can heighten the likelihood of skipping school, having to repeat a grade, and ultimately leaving school altogether (32). The educational setting significantly influences the development of adolescents with mental disorders. Adolescents spend a substantial portion of their time at school, where they navigate social interactions, academic pressures, cognitive challenges, and psychological stress. Psychiatric nurses should join forces with school nurses, mental health professionals, parents, teachers, and school administrators to gain insight into the unique factors that impact the academic achievement of adolescents with mental health conditions. This collaboration is essential for identifying and implementing targeted interventions.

The findings of this study have implications for nurses and health workers to improve caregiver knowledge in recognizing the daily abilities of adolescents with psychiatric problems. It's important to note that this study has limitations. It cannot be used to establish cause-and-effect relationships, and it only provides a general understanding of the functional health status of adolescents

CONCLUSION

Adolescents affected by mental disorders often exhibit compromised functional capabilities, mainly manifesting as disruptions in sleep patterns, fatigue, irregular eating habits, and mood dysregulation. Familial caretakers must cultivate an enriched comprehension of the adolescent's proficiency in executing their routine pursuits. This finding necessitates fostering optimistic prospects and teaching the significance of formulating and pursuing life objectives while concurrently acknowledging and addressing sleep irregularities, fatigue, and mood-related challenges that adolescents encounter. These efforts can significantly contribute to alleviating the hurdles faced by adolescents.

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