

PREVALENCE AND ASSOCIATED FACTORS OF DEPRESSION AMONG PARENTS WITH LOW SOCIO-ECONOMIC STATUS IN THE COMMUNITY IN KUALA LUMPUR, MALAYSIA

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Abstract

Background: Past research evidenced that the individuals from low socio economic status (SES) families were having a higher prevalence of mental health problems when compared to higher income families. Therefore, this study aimed to examine the prevalence of the depressive symptoms among parents by socio-demographics profile: age, number of children living in a household, marital age, and household income.

Objective: The purpose of this study also aims to examine other variables that correlate to the symptoms.

Methods: A total of 205 participants consisting of fathers and mothers from four People's Housing Projects (PHP) around Kuala Lumpur completed a self-report questionnaire which included a demographic profile form, Beck's Depression Inventory (BDI), Parenting Daily Hassle Scale (PDHS) and Social Support Scale were used in order to measure all the variables that possibly added to the depressive symptoms among the parents. Correlation analyses were used to assess the relative significance of all the variables tested in this study.

Results: 40.4% of the respondents reported a mild depression whilst another 4.4% reported a moderate level of depressive symptoms and 2.4% of them reported a severe level. The majority of the respondents reported a moderate to a high level of daily hassles and reported that their spouses were their supporters in any difficult situation. From the correlation analysis, only three variables; the household income, parenting daily hassles score and social support found the significance correlation to the depressive symptoms among the low SES parents in Kuala Lumpur.

Conclusion: The prevalence of the depressive symptoms among the low SES and the correlated variables were determined. Further research on intervention to educate parents is needed to react to the present findings and to reduce the transmission risk to the children as well as to develop a healthy nation.

Keywords: *Depressive symptoms, Low SES, Parents, Depression, Mental health problems*

Introduction

Depression is a common condition among adults, many of whom are parents with children (1,2) who are struggling to adapt to parenthood (3). Raising children is a challenge for parents from all walks of life (4). Therefore, parents who experience social and economic disadvantages face particular challenges in trying to meet the needs of their children (5,6). Meta-analysis studies consistently show a similar pattern of low socioeconomic status (SES) parents reporting to have a double risk for developing depressive symptoms (7,8). The number of children in the households (9), the characteristics of the child (10), lower education (11), and low social support (12–14) are also associated with the availability of mental health cases including depression among parents.

According to the key psychosocial factors in the etiology of depression, a life span model (15), the low SES is also stated as a key for developing depression among the mothers together with the stressful life events, low social support, coping style and self-esteem. The potential effects of stress depressive will depend on the situation of the individual, for example, having children living at home may appear to increase their vulnerability to depression if what is examined is any severe event. In summary, the high rates of depression are associated with the multiple stressors in the family.

The depression among parents commonly become an attention among researchers due to the transmission of risks to their children. Depression is significant to negative parenting (1,10), increased hostility and more negative interactions especially from the mothers (16,17). Furthermore, the children of depressed parents are approximately three times more likely to experience a life time episode of depression compared to children of non-depressed parents (16). Hence, to react on the serious matters, the researcher found the need to determine the prevalence and the associated factors of depressive symptoms among parents with low income socio-demographic status. This study focused on the

community from the People's Housing Project (PHP) in the Kuala Lumpur area.

Methods**Participants**

205 respondents or participants for this study included fathers and mothers with children that meet the criteria (married for 10 years) who had completed a self-report questionnaire which included their demographic profile form, Beck's Depression Inventory (BDI), Parenting Daily Hassle Scale (PDHS) and Social Support Scale in order to measure all the variables that possibly caused the depressive symptoms among the parents. The study involved the disadvantaged community which were from four People's Housing Projects (PHP) around Kuala Lumpur. Of this total, 28.8% (n = 59) were fathers and the rest 71.2% (n = 146) were the mothers. The parents' mean age was 30.27 (SD = 5.26) and their average children's number was 2 (SD = .94), with the average years of marriage being 6.28 (SD = 3.29) and their average household income is between RM2001 to RM3000. Among the participants, 93.2% (n = 191) of them are Malays and only 6.8% (n = 14) participants are Indians. Based on that, the Malay language was the primary language for the participants and all the instruments were translated to their spoken language.

Measurement and statistical analyses

The participants completed the 21-item Beck Depression Inventory (18) to assess the overall prevalence and severity of depressive symptoms and behaviours among the parents (Cronbach's alpha = .93). The other tools used to determine the factors that correlated to the depressive symptoms are Parenting Daily Hassles Scale (PDHS) and Social Support Scale. PDHS is a 20-item scale that was used to highlight the areas for future discussion on parenting issues to be addressed (19). All the 20 potential hassles contained the challenging behaviours and the parenting tasks, scoring by Likert scale 0 to 4 with the total scores above 50 indicated on the one hand as having a high frequency of potentially hassling happening. The Social Support Scale indicates the person who has the top priority in sharing the sadness

and difficulties which occur in certain circumstances. This scale consists of 4 items which measures the individual social support system which occurs and it includes the spouse, friend, parents and siblings. The questionnaires were translated into Malay as it is the first language of the participants. All of the questionnaires used in this study were tested in a pilot study to assess the internal consistency of items. The data were entered and analyzed using the IBM SPSS Statistics Version 21.0. The data were checked and verified. The relationship between the variables were analyzed using the Pearson Correlation.

Ethical approval

This research was approved by the ethical committee board of the National University of Malaysia Medical Centre (JEP-2018-076). We followed the standard guidelines for conducting empirical research. All the participants filled up the inform consent with the guarantee of confidentiality and anonymity.

Results

Overall, 40.0% (n = 82) of the respondents reported a mild depression whilst another 4.4% (n = 9) reported a moderate level of depressive symptoms and 2.4% (n = 5) of them reported a severe level. The comparison between the prevalence of depression among the fathers and the mothers showed that the mothers' level of depression was found to be higher, 43.2% (n = 63) in the mild level of depression compared to the fathers, 32.2% (n=19) (Figure 1). The fathers reported more than 60.0% of them are at a normal level of depression, while the mothers reported more numbers as having a severe level of depression, 5.5% (n = 8) compared to the fathers which is only 1.7% (n = 1) from the 59 of the total fathers' respondents.

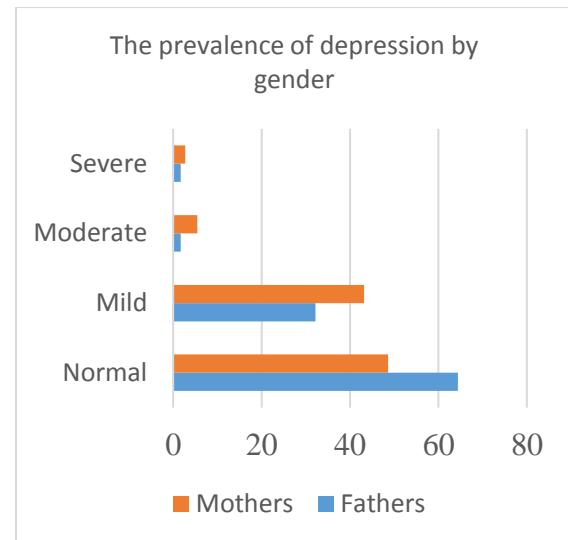


Figure 1: The prevalence of depression by gender

The other instruments that measured the parenting daily hassles and the social support received by the respondents showed that a majority of the respondents reported a moderate to a high level, 72.5% (n = 145) of daily hassles and 74.6% (n = 150) reported their spouses as supporters in any difficult situation they faced. Further analysis was done to examine whether the variables found associated with the depression levels among the respondents.

Factors associated with depression

This study also aimed to examine the factors that were associated with the depression. Based on the previous studies, the researcher decided to test the socio-demographic profiles that have been proved earlier as the factors of depression among parents. The socio-demographic profiles that were tested in this study were age, number of children living in a household, marital age, and household income. The results from the analysis found that among the socio-demographic characteristics, only the household income was found to be associated with depression ($p < 0.01$). Table 1 shows the association between socio demographic profiles and depression.

Table 1: The association between socio-demographic characteristics and depression

Variables	Depression	p < 0.05
Age, years	-.059	.398
Number of children	.027	.699
Marital age, years	.102	.145
Household income	-.212**	.002

***. Correlation is significant at the 0.01 level (2-tailed)*

As shown in Table 1, the correlation of the household income among the respondents was negatively significant with the depression which means that the low income respondents had a greater risk of depression and the higher income respondents showed a lower risk of developing depression. To fulfill the last objective of this study, a similar test using the Pearson Correlation was done to the other variables measured to determine the other factors that correlate with depression. The results are shown in Table 2.

Table 2: The relationship between the parenting daily hassles, social support and depression

Variables	Depression	p < 0.05
Daily hassles	.210**	.003
Social support	-.235**	.001

***. Correlation is significant at the 0.01 level (2-tailed)*

According to Table 2, the findings revealed the significant correlated factor, the total score of the daily hassles, the social support and the depression among the respondents. The daily hassles were found to have a negative significance to the depression ($p < .01$) which means that the higher number of scores for daily hassles indicates a higher risk for developing depression among the parents and vice versa. The social support as a variable which is carried out from the self-report by the respondents on their spouses' support in any situation, -- the result showed a negative

significance between the social support and the depression ($p < .01$) among the respondents. This means that the low social support indicates a higher risk of depression and the high support will decrease the depression among the respondents. However, the correlation indicates that the strength of association between the variables is very low for both variables, which are daily hassles ($r = -0.235$) and social support ($r = .210$).

Discussion

The participants were categorized as having a low SES according to their low household incomes. The results showed that a higher number of mothers were having mild, moderate and severe depression compared to the fathers. Even though the number of fathers in this study was lesser, the prevalence showed a clear difference between the mothers and fathers in terms of the percentage of the depression level. This finding was in line with the previous researches that stated a woman has a double risk of developing depression compared to a man, especially a mother who is facing the multifactor of depression (2,20,21). The findings also revealed the significant correlated factor, the household income, the score of daily hassles and the social support they received might increase the risk of developing depression among the parents who participated in this study. The higher score of the daily hassles brought an overview of the hassles frequency in the family and it will increase directly the BDI scores as well as the depression levels. The correlation analysis result is in line with the past research which found that the household income (22–24), the child characteristics (25) and social support (11,26) as the associated factors for depression in parents. Hence, this finding becomes another contribution in this area to support the previous study on the associated factors of depression among parents.

In addition, based on the divorce rate report, the higher deterioration of marriages in Malaysia is among the couples who are married for a shorter time that is commonly below 10 years in marriage (Islamic Federation of Malaysia, JAKIM). Therefore, it is important

to determine the parents' levels of depression, their daily hassles and the support system they received in order for early detection. So far, the previous researchers were only keen on the parents' hassles and stress on taking care of the disabilities in their children (27–30); however, the depression developing among parents not only depends on the children's characteristics. Even though the factors of depression among parents have been revealed by many researchers all over the world in a few settings since many decades ago, there are also many theories on depression as well as the parenting stress and depression that came out to respond to the findings of past research (10). The low SES parents evidenced as a group of double risk of developing depression (2,8,31). Following that, from the findings of this study, it is important to find an overview on what is happening in the low income population which is from the four People's Housing Projects (PHP) around Kuala Lumpur. This is also important to provide empirical data to inform the policy makers and the related organizations, especially on the parents' side to do an intervention for them to reduce the transmission risk to their children as well as to develop healthy nations. So far, the parents' education interventions were found to be effective in helping parental stress, parental practice, social support, children's behaviours and emotional difficulties perceived by the parents (32). Furthermore, the family module intervention by the past researchers also proved to be successful in reducing the depressive symptoms among the fathers and mothers. (33–36). Besides, based on the previous research, the psycho-education intervention was shown to be the most relevant intervention to the current analyses on decreasing the depressive symptoms (36–38).

Limitations

There are several limitations to this research study. First, the small sample size of the fathers in this study compared to the mothers. There is a problem to get the assessments from the fathers due to the fathers' working shifts as they mostly refused to participate in any research in the community. Secondly, this

study only involved four PHPs from four different areas in Kuala Lumpur. This study can be extended to more communities around Kuala Lumpur, so the findings can be generalized and be of benefit for the low SES community. However, the researcher found a new way to attract the fathers and hope that the best number of participants from other communities for the second data collection can be obtained for another intervention later for another study.

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