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## FAMILY PRACTICES REGARDING THE CARE OF THEIR CHILDREN'S MENTAL HEALTH IN THE CONTEXT OF ESSENTIAL NEEDS

*Práticas familiares quanto ao cuidado da saúde mental de suas crianças no contexto das necessidades essenciais*

*Prácticas familiares respecto del cuidado de la salud mental de sus hijos en el contexto de las necesidades esenciales*

Lany Leide de Castro Rocha Campelo<sup>1</sup> 

Delmo de Carvalho Alencar<sup>2</sup> 

Aline Raquel de Sousa Ibiapina<sup>3</sup> 

Margareth Angelo<sup>4</sup> 

### ABSTRACT:

**Objective:** reveal family practices regarding the care of their children's mental health in the context of essential needs. **Method:** qualitative research, with 22 families of school-age children in the city of Picos, Piauí, Brazil. Data were collected through semi-structured interviews, analyzed using content analysis, in light of the theoretical framework of Children's Essential Needs. **Results: the content was analyzed into two categories:** "Care that impacts the physical and mental health of school children", with three subcategories relating to the affective, physical and moral domains; and "Parenting and children's mental health", with subcategories referring to actions aimed at the child's healthy mental development. **Final considerations:** knowledge of the aspects that guide the way families' care enables nurses, within the scope of primary care, to implement strategies aimed at meeting care needs that ensure children develop fully.

**DESCRIPTORS:** Nursing; Child; Family; Mental health; Child development.

<sup>1,3</sup> Federal University of Piauí, Picos, Piauí, Brasil.

<sup>2</sup> Regional University of Cariri, Iguatu, Ceará, Brasil.

<sup>4</sup> University of São Paulo, São Paulo, São Paulo, Brasil.

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**Corresponding Author:** Delmo de Carvalho Alencar, delmo-carvalho@hotmail.com

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**RESUMO:**

**Objetivo:** desvelar as práticas familiares quanto ao cuidado da saúde mental de suas crianças no contexto das necessidades essenciais. **Método:** pesquisa qualitativa, com 22 famílias de crianças em idade escolar do município de Picos, Piauí, Brasil. Os dados foram coletados por meio de entrevistas semiestruturadas, analisadas por meio de análise de conteúdo, sob a luz do referencial teórico das Necessidades Essenciais das Crianças. **Resultados: o conteúdo foi analisado em duas categorias:** "Cuidados que impactam na saúde física e mental de crianças escolares", com três subcategorias relativas aos domínios afetivo, físico e moral; e "Parentalidade e saúde mental da criança", com subcategorias referentes a ações direcionadas ao desenvolvimento mental saudável da criança. **Considerações finais:** o conhecimento dos aspectos que conduzem a forma de cuidar das famílias, possibilitam à enfermeira, no âmbito da atenção primária, implementar estratégias que visem ao suprimento de necessidades de cuidados que garantam às crianças desenvolver-se plenamente.

**DESCRITORES:** Enfermagem; Criança; Família; Saúde mental; Desenvolvimento infantil.

**RESUMEN**

**Objetivo:** revelar prácticas familiares respecto del cuidado de la salud mental de sus hijos en el contexto de las necesidades esenciales. **Método:** investigación cualitativa, con 22 familias de niños en edad escolar en la ciudad de Picos, Piauí, Brasil. Los datos fueron recolectados a través de entrevistas semiestructuradas, analizadas mediante análisis de contenido, a la luz del marco teórico de las Necesidades Esenciales de la Infancia. **Resultados: el contenido fue analizado en dos categorías:** "Cuidados que impactan la salud física y mental de los escolares", con tres subcategorías relacionadas con los dominios afectivo, físico y moral; y "Crianza de los hijos y salud mental del niño", con subcategorías referidas a acciones dirigidas al sano desarrollo mental del niño. **Consideraciones finales:** el conocimiento de los aspectos que orientan la forma de cuidar de las familias permite al enfermero, en el ámbito de la atención primaria, implementar estrategias encaminadas a satisfacer las necesidades de cuidado que aseguren el desarrollo pleno de los niños.

**DESCRIPTORES:** Enfermería; Niño; Familia; Salud mental; Desarrollo infantil.

**INTRODUCTION**

Studies on events that can influence the development and mental health of children based on the influence of parental characteristics indicate that parenting practices constitute risk and protective factors, potentially affecting children independently.<sup>1-3</sup>

Protective factors are considered to be conditions that allow for strengthening, coping, growth, and full development of the developing being. Conversely, risk factors are variables or conditions that interfere with the well-being, health, or social performance of an individual or social group, causing negative results for their development.<sup>4</sup>

Throughout middle childhood, increasing cognitive maturity allows the child to develop more complex concepts, understand and better control their own emotions, and respond to others' emotional suffering. Although children in this phase tend to spend more time away from home, usually at school or visiting and socializing with their peers, the home and family remain an important part of their lives, influencing their development and mental health.<sup>5</sup>

In addition to understanding the main aspects related to development, considering what interferes with the processes of change and stability pertinent to their current life period, it is also necessary to rely on theoretical frameworks appropriate to their specificities as a developing subject to undertake comprehensive child care.<sup>6</sup>

With this in mind, this study took the Essential Needs of Children as the starting point to think about the care of scho-

ol-aged children, a period that includes the segment of life that extends from 6 to 12 years old and receives various names related to important characteristics of the period, such as middle childhood and school years, as it begins with entering the school environment and has a significant impact on development and relationships.<sup>7</sup>

The framework consists of the types of care without which children cannot grow, learn, and develop. Once these care needs are recognized, it is possible to think of ways to ensure they are met. The essential needs identified by the authors are: ongoing supportive relationships; physical protection, safety, and regulation; experiences that respect individual differences; developmentally appropriate experiences; setting limits, organization, and expectations; and stable, supportive communities with cultural continuity.<sup>8</sup>

Thus, knowledge of the developmental aspects that should be considered in care, combined with the Essential Needs of Children framework, provides specific support for care that allows the child to grow and develop happily, confidently, creatively, intelligently, and emotionally healthy, becoming an adult capable of creating and educating their own children, and being sufficiently reflective to navigate a diverse and complex world in the future.<sup>8</sup>

From this perspective, the theoretical framework of Children's Essential Needs offers a foundation for understanding the child and their development process, as well as enabling health professionals to think about the operationalization of actions aimed at care. Therefore, the present study aimed to reveal family practices regarding the care of their children's men-

tal health in the context of essential needs.

## METHOD

This qualitative research involved 22 families of school-age children registered with a family health team in the municipality of Picos, Piauí, Brazil. The inclusion criteria for the study were: being over 18 years old; being a parent, guardian, or family member responsible for the child's care; living in the same household as the child; being available to participate in the research; and not having health conditions that would hinder or prevent participation in the study.

Data were collected between January and March 2018 through semi-structured interviews. The invitation to families was made at their homes and considered their interest in their child's mental health. The interviews were audio-recorded and lasted on average 45 minutes to two hours.

Considering the stigma surrounding the topic of mental health and its usual association with pathological issues, before starting the interviews, the researchers deemed it necessary to discuss the impact of consistent and confident care by an adult sensitive to children's needs. Additionally, a brief conceptualization of mental health was provided, associating the term "mental health" with expressions like "emotional health," "well-being," "happiness," "a way of thinking and acting," "feeling good about oneself," and "dealing with daily life pressures."

After data collection, the obtained data were transcribed and subjected to the method of content analysis,<sup>10</sup> using the Essential Needs of Children framework as the theoretical reference.<sup>8</sup>

For the operationalization of content analysis, a three-step method was used: in the pre-analysis, the material was organized after transcription of the records. Floating readings were made, and the themes that emerged most frequently formed comparable units of categorization for thematic analysis. During the material exploration phase, raw data were aggregated into units.

The treatment of the results consisted of comparing the categories with each other, seeking concepts that unified them or found similarities and differences between themes through a return to the theoretical framework used in the research.

The study complied with Resolutions 510/2016 and 466/2012 of the National Health Council and received approval from the Research Ethics Committee of the School of Nursing of the University of São Paulo (EEUSP) under opinion number 2286130. All participants signed the Free and Informed Consent Form, and their anonymity was guaranteed by replacing their names with fictitious names.

## RESULTS

Content analysis of the interviews and reports obtained allowed the recognition of two categories: care that impacts the physical and mental health of school children and the percep-

tion of parenting as a guide for care. The first category included three subcategories related to the affective, physical, and moral domains (Figure 1).

**Figure 1** - Categories and subcategories obtained in the study. Picos, PI, Brazil, 2019



Category 1: Care that impacts the physical and mental health of school children Subcategory 1: Affective domain

The affective domain includes manifestations of affection corresponding to the demonstration of love, care, interest, support, and attention to the child; actions or behaviors aimed at promoting harmonious environments, whether in the home or other environments where the child moves; actions such as dedicating time to the child, playing with them, being their friend; promoting their emotional security; establishing a trusting relationship with them, and knowing how to handle their behavior.

"I think the attention we give to our children, the contact, is essential. Attention in the sense of having activities with them, both school activities and leisure, I think is very important. Attention to share moments with them, being close, sharing moments with them." (Íris, mother of Igor, 9)

"The family, the home, the environment the child is in, that they live in. Not just the home, but the school, the group of friends, the family in general. We try to live in an environment that has peace, dialogue, we don't consume alcohol, drugs, these things are not in our home." (Hélio, father of Hélen, 12,

and Hugo, 6)

Parents reinforce the importance of playing with toys and also playing as an action, which does not always require a physical toy, an object, but the physical interaction, the fun arising from playful interaction and imagination.

"I think one of the big problems in raising children in today's world is the issue of time and dedication! I often say that if we have time to play with a child, they don't need any toy, no TV, no tablet, no video game! Just attention! We have to play at least half an hour with them because if we just give the toy, it means nothing to them! If we really take some time for them, they like it a lot!" (Caetano, father of Carlos, 6)

The physical domain includes family care actions regarding physical needs they believe interfere with their children's mental health, such as nutrition, hygiene, education, behavior, sleep, sports practice, disease prevention, medical follow-up, physical safety, comfort promotion, and attention to growth and development aspects.

"I think these daily care actions I have with her, if she is eating well, if she is behaving well because for me, that's very worrying if she is studying." (Fernanda, mother of Flávia, 10)  
 "Davi going to karate was our thought of putting him in some physical activity, but when he started, he wasn't even that chubby, it was really for him to practice some physical activity." (Dinha, mother of Davi, 8)

The moral domain concerns actions undertaken by parents aimed at shaping their children's character, disciplining them on how to behave in society, teaching them to discern between right and wrong, considering the consequences of their choices, and following the family's ethical and moral principles, as well as the child's spiritual and religious orientation.

"In the case of drugs, for example [...] our life is free will, you can choose what is right and what is wrong! [...] so I always try to mature his awareness about it so that he doesn't fall into these situations." (Bianca, mother of Beto, 12)

Parents feel responsible for offering spiritual and religious guidance to their children. Religious in the sense of presenting them with a religion that underpins their practices, behaviors, and family rituals in respect to a belief. Spiritual in the sense of showing them that there is a higher being whom they should respect and fear, cling to and trust, regardless of the religion they decide to follow.

"Moral, spiritual guidance, showing that there is God, that there is a being superior to us, is also very important for him to know that he has something to fear or respect or value outside of what he sees." (Bianca, mother of Beto, 12)

## Category 2: Parenting and children's mental health

This category refers to family members' understanding of their role as those responsible for their children's development and mental health, allowing them to understand the meaning of their care actions, which are influenced by social and cultural factors.

I do so much, I'm a mother, I'm a father, I'm everything, I do everything in these children's lives, everything I can do, everything. (Paula, mother of Pedro, 11 and Paola, 6)

When I have to choose between doing something for myself or for them, I stop and do it for them! Always, so I stop and do for them, each thing in its own time. (Ellen, mother of Eduardo, 12, Erick, 7, and Esdras, 6)

Faced with the responsibility of meeting so many needs for their children to develop in a physically and emotionally healthy way, fathers and mothers recognize the importance of their parental role and of offering the best of themselves so that their children become good citizens and develop their full cognitive potential.

We are opinion formers for our children, our children will look at us and try to imitate, they will try to do something similar, they will try to copy certain models, so every day we have to reflect, we have to police ourselves so that we don't pass on negative knowledge and opinions to the children. (Alexandre, father of Alex, 6)

## DISCUSSION

Analyzing the care that impacts children's physical and mental health in its affective domain, it was possible to see that families are attentive and responsive to the need for ongoing supportive relationships. Families understand the importance of manifestations of affection, such as care, love, attention, and dedication, as essential for good physical and emotional development. Loving and supportive relationships are the primary basis for children's intellectual and social growth.<sup>8</sup>

The promotion of harmonious environments, including home and society, was the aspect of the need for supportive relationships that stood out the most in this study. For families, experiences of affection experienced in the child's intimate universe are important for emotional well-being and for the child to feel welcomed, safe, and confident. The context of essential needs reiterates that the types of environments and priorities desired for children align with how much these care impacts the regulation of behaviors, moods, feelings, and intellectual development.<sup>8</sup>

The meaning of playing is influenced by the systems of meaning collectively shared by the group to which the child belongs, involving the beliefs and values of the responsible adults but

also constructed in the daily life and interactions of children with their peers and other people they interact with.<sup>11</sup>

Thus, for the families in this study, playing is understood as a way of dedicating time to children in an affective manner, especially when the act of playing itself is more important and stimulating than playing with the toy, promoting child development in terms of creativity, social interaction, and promoting the child's well-being and happiness.

Establishing a trusting relationship with the child through affective interactions between parents and children was reported as a promoter of emotional security for children who, secure in their parents' affection and support, will be more protected against emotional and environmental risks.<sup>12</sup>

It was possible to see that families are attentive to the need for physical protection of their children, both to meet their physical well-being and their emotional needs. Care regarding nutrition, education, behavior, sports practice, comfort, and physical safety were highlighted.

The results indicate that parents recognize they can contribute to forming healthy eating habits in their children. The family routine provides a predictable daily life that guides behavior and emotional climate, also affecting language development, academic performance, and social skills, being therefore an important field for early intervention practices.<sup>13</sup>

Although studies indicate that children's eating style is strongly influenced by the behavioral interaction pattern between children and their caregivers,<sup>13-14</sup> families in this study recognize that their children tend to consume less healthy foods when they have the opportunity to choose their food, constantly needing parents' supervision and guidance regarding ideal nutrition.

The results regarding educational support showed that families are attentive to the support needs their children have as they go through various stages of cognitive development concerning learning concepts and the quality of relationships and interactions that promote such learning. Thus, taking them to school safely, helping with schoolwork, closely monitoring education, participating in the school routine, monitoring interaction with peers, and emotional performance were some of the identified and met needs by parents.

Conversely, children who do not have an adult to support them emotionally, experience a conflicting parent-child relationship, and face academic difficulties are likely to have even lower cognitive and academic development and more behavioral problems.<sup>15</sup>

The practice of physical activity emerged as a need for developmentally appropriate experiences, being recognized for its important role in promoting socialization and interaction, cognitive development, and self-esteem enhancement, as well as playing an important role in combating obesity and related diseases, corroborating studies emphasizing these findings.<sup>16</sup>

Considering that biological and environmental components affect the neural substrate, causing brain dysfunctions, and that the response to social environments and exposure to unfavo-

nable environments pose a risk to children's mental health,<sup>17</sup> it is essential to reduce these risk factors by promoting physical health, safe environments, and appropriate physical and mental development, as pointed out by families in this study.

Corroborating other studies,<sup>17-18</sup> families believe that meeting children's different development needs includes paying attention to the time they spend in front of the TV and computer, as these are the main competitors for children's hearts and minds, reducing parent-child interaction and often contributing to a different upbringing than parents intended.

Regarding care related to the moral domain, it referred to actions aimed at character formation, guidance on how to behave and act in society, considering the consequences of choices and the family's ethical and moral principles, as well as the child's spiritual and religious orientation. Such care can correspond to meeting the need for stable, supportive communities with cultural continuity, as they are supported and determined by cultural norms and traditions.<sup>8</sup>

The community and culture structure the meeting of needs and provide support for families and children's development. Stable and supportive communities, as well as exchanges between people, lead the child to feel they belong to a family and community,<sup>6</sup> contributing to their emotional security, as the feeling of belonging to a network of mutual support relationships minimizes the chances of experiencing prolonged feelings of loneliness and emotionally destructive lifestyles.<sup>19</sup>

A study observed that the responsibility for child care is seen in most cultures as an intrinsic principle of parenting.<sup>20</sup> Studies highlight parental functions that align with the parental roles identified by this study's participants, namely: meeting the most basic survival and health needs, responsibility for child care where parents feel responsible for dedicating themselves unconditionally to the child, meeting their needs for food, health, education, and family values.<sup>20-22</sup>

Study limitations included the small number of participating families and the few families from less favored socioeconomic classes, which may have contributed to not identifying children with symptoms indicating the need for specialized referral, although it was possible to identify several isolated psychosocial symptoms.

## FINAL CONSIDERATION

Families' recognition that their children's mental health results from meeting or not meeting the needs for ongoing supportive relationships, physical protection, safety and regulation, setting limits, cultural continuity, experiences that respect individual differences, and developmentally appropriate experiences proved essential for good child development and mental health.

Families' sensitivity to needs related to child mental health also seems to reflect the supportive interactions and affectionate care by promoting safety, physical protection, nutrition, shelter, education, affection, and emotional security for their

children.

Conversely, difficulties in dealing with certain child behaviors highlight the need for a closer look from the nurse to provide support to children and families, helping them recognize emotional needs and/or difficulties and find ways to address them.

Implications of this study include the possibility of expanding child care at the primary care level, including family interviews in the process of screening for psychopathological symptoms and implementing care actions that can strengthen the family-child, nurse-family, and nurse-child bonds, favoring the care process.

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