ORIGINAL ARTICLE





Assessing the psychological well-being among adolescent and children

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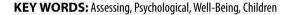
ABSTRACT

Aim: To assess the psychological well-being of children and adolescents, socio demographic distribution data of parents and children and to find out the relationship between psychological well-being of children and adolescents and their socio demographic characteristics.

Materials and Methods: A descriptive cross- sectional study to assess the psychological well-being of children and adolescents in Al-Nasiriyah schools. The study period was extended (from December 1, 2023 to April 1, 2024). A non-probability (purposive sample) consist of (200) children and adolescents.

Results: Results revealed That children and adolescent in current study have moderate levels of Psychological Well-Being, our study revealed that is significant correlation (between participants' age and Psychological Well-being, difference in psychological wellbeing between history of school fail, difference in psychological Well-being among between mother educational groups and difference in Psychological well-being among father job groups) and no statistically Significant (between difference psychological well-being and school history, difference in psychological well-being Among socioeconomic status groups, difference in psychological well-being among father level of education Groups and difference in psychological wellbeing among father job groups).

Conclusions: Study provides valuable insights into factors influencing the psychological well- being of children and adolescents, highlighting the complex interaction between age, social status, parental education, and parental occupation. Academic performance and school experiences play a significant role in psychological well-being, especially in cases of academic failure.



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INTRODUCTION

Creating a supportive school environment, empowering students, and addressing social and environmental factors are key to enhancing adolescent emotional well-being and resilience. Factors like social media impact, cyber bullying, and school pressures contribute to rising mental health issues among adolescents. A great deal of research has focused on the psychological well-being of children and adolescents, and therefore it is incredibly important that assessments are available to measure this trait [1]. Psychological well-being is a key facet of mental health, which is becoming of increasing concern, as demonstrated by the growing number of children and adolescents being referred to psychologists. The impact of these referrals is not only obvious in the short term but these emotional problems have the potential to continue into adulthood. A significant majority of people experiencing anxiety had first done so during childhood [2]. In order to discuss psychologi-

cal well-being, it is important to start with a definition of this construct. Psychological well-being is a broad term, and there is no consensus as to what exactly this term denotes; this is partly because the discipline of psychology has focused almost entirely on psychological ill-being [3]. Despite no initial consensus as to the nature of psychological well-being, some basic themes do tend to emerge. Indeed, the term 'psychological well-being' is used to refer to other terms which, when combined, provide an overall understanding or definition of the phenomenon. Such sub-themes include life satisfaction, positive affect, autonomy, self-acceptance, environmental mastery, and positive relations [4]. Mentally healthy children and adolescents tend to have high scores on one or all of these sub-themes, as well as on additional characteristics and outcomes that may be increased by one or more of these factors, such as scholastic competence and social skills [5]. The focus of research based on positive psychology has been the examination of increasing the presence of well-being using the theoretical perspective and ideas related to authenticity, happiness, and positive affect. Indeed, positive psychology is concerned with the scientific study of what makes life most worth living. In contrast, there has been a recent increase in resilience-based interventions in schools, due to the finding that resilient children are not only better adjusted but also have more optimal well-being than their non-resilient peers [6].

AIM

To assess the psychological well-being of children and adolescents, socio demographic distribution data of parents and children and to find out the relationship between psychological well-being of children and adolescents and their socio demographic characteristics.

MATERIALS AND METHODS

A descriptive cross-sectional study to assess the psychological well-being of children and adolescents in Al-Nasirihay schools, the study period was extended from (December 1, 2023 to April 1, 2024).

STUDY INSTRUMENT

A questionnaire was developed by the researcher through review of related literature. Thequestionnaire consists of four main parts for includes the following:

Part (I): Questionnaire Related to the Demographic Characteristics of the child

This part is concerned with the collection of basic demographic Data was obtained from the Child'sparents, consisting of the following items; Age, gender, residence, child's failure in school and typeof study.

Part (II): Questionnaire Related to the Demographic Characteristics of the parents this part is concerned with the collection of basic demographic data for parents, consisting of the following items; Educational level, occupation, economic status, Kinship link parents.

Part (III): Questionnaire Related to The psychological state of the child This part was constructed to assess Children's psychological well-being, It consisted of (25) a question.

Part (IV): Questionnaire Related to The difficulties the child faces, this part was constructed toassess the difficulties the child faces, It consisted of (4) questions.

STATISTICAL ANALYSIS

The statistical package of social sciences (SPSS) version (26), which included the functions for frequency, percent, arithmetic mean, standard deviation, mean of the score (MS), P-values, df, andx², was used to analyze the data.

RESULTS

The result indicate that the mean age is $1.84 \pm .702$; more than two-fifth age 10-13-years (n = 97;48.5%). Concerning gender, most are males (n = 149;74.5%) compared to females (n = 51;25.5%). As per monthly income, most have mild income (n = 145;72.5%), followed

Table 1. Distribution of Children according to their Sociodemographic Characteristics

No.	Characteristics		f	%
1		6-9 years	67	33.5
	A 712 (1222) M + SD = 1.94 + 702	10-13 years	97	48.5
	Age (year) M \pm SD = 1.84 \pm .702	14-16 years	36	18.0
	_	Total	200	100.0
		Male	149	74.5
2	Sex	Female	51	25.5
		Total	200	100
	Socioeconomic status -	Good	19	9.5
2		Mild	145	72.5
3		Poor	36	18.0
		Total	200	100.0
		Yes	155	77.5
4		No	45	22.5
	_	Total	200	100.0

No= Number, f= Frequency, %= Percentage, M= Mean, SD=Standard Deviation

Table 2. Assessing the Psychological Well-Being of Children and Adolescents

	Overstiens	Fa	lse	Some times		True		M	S.D.	Ass.
No	Questions	F	%	F	%	F	%			
1	Interested in the feelings of others	48	24.0	83	41.5	69	34.5	2.10	.66	М
2	Unquiet, overactive, cannot sit for a long time	59	29.5	106	53.0	35	17.5	1.88	.76	L
3	Often complains of headache, stomach pain, or nausea	40	20.0	109	54.5	50	25.0	2.05	.75	L
4	Easily shared with other children (candy, toys, pens, etc.)	20	10.0	106	53.0	74	37.0	2.27	.79	Н
5	Often screams angrily or is angry	54	27.0	99	49.5	47	23.5	1.96	.72	L
6	Be somewhat isolated and tend to play alone	61	30.5	87	43.5	52	26.0	1.95	.73	L
7	General obedience, usually does what adults ask	24	12.0	99	49.5	77	38.5	2.26	.72	L
8	Many anxiety, often seem anxious	50	25.0	81	40.5	69	34.5	2.09	.68	L
9	Useful if someone is injured, troubled or feeling sick		25.0	87	43.5	63	31.5	2.06	.69	Н
10	Stirring or swaying continuously		31.0	74	37.0	64	32.0	2.01	.72	L
11	Has at least one good friend		15.5	73	36.5	96	48.0	2.32	.70	Н
12	Often quarrels with or bullies other children		35.5	88	44.0	40	20.0	1.84	.76	L
13	Often unhappy, upset, or crying	59	29.5	95	47.5	46	23.0	1.93	.73	L
14	Generally loved by other children	24	12.0	81	40.5	95	47.5	2.35	.66	Н
15	Disperses easily, concentrates tense	44	22.0	103	51.5	53	26.5	2.04	.75	L
16	Nervous or attached to others in new situations, easily losing confidence	56	28.0	95	47.5	49	24.5	1.96	.56	М
17	Cute with younger children	26	13.0	72	36.0	102	51.0	2.38	.75	Н
18	Often lying or cheating	106	53.0	58	29.0	36	18.0	1.65	.66	L
19	Targeted or bullied by other children	63	31.5	92	46.0	45	22.5	1.91	.65	L
20	Often volunteer to help others (parents, dependents)	26	13.0	99	49.5	75	37.5	2.24	.44	М
21	Think about things before acting	56	28.0	87	43.5	57	28.5	2.00	.66	М
22	Steals from home, school or other places	152	76.0	37	18.5	11	5.5	1.29	.76	L
23	Deals better with adults than with other children	45	22.5	84	42.0	71	35.5	2.13	.75	L
24	Many fear, easily terrified	40	20.0	113	56.5	47	23.5	2.03	.79	L
25	Gets things done to the end, good attention	19	9.5	90	45.0	90	45.0	2.36	.72	Н

by those whoare poor income (n = 36; 18%), those who are good income (n = 19; 9.5%) (Table 1).

The study results reveals that most question answered with low levels (Table 2).

The study results reveals there is statistically no significant relationship between participants' ageand Psychological Well-being in Children and Adolescents at (r=-.075) (Table 3).

The study results reveal that there is no statistically significant difference between psychological well-being and their Gender at (p=.045) (Table 4).

The study results reveal that there is statistically significant difference in psychological well-being between history of school fail at (p = .000) when participant with history of fail most affected main=(52%) (Table 5).

The study results display that there is no statistically significant difference in psychological well-being among socioeconomic status groups (p-value = .188) (Table 6).

DISCUSSION

This finding suggests that, on average, the participants reported lower levels of psychological well-being. For children and adolescents, low psychological well-being can have a number of effects, including a higher chance of mental health conditions including anxiety and depression [7]. It's important to consider the factors contributing to these low levels, such as family dynamics, socioeconomic status, and school experiences, as they can provide insights into potential interventions to improve psychological well-being in this population. Age may not be a reliable indicator of psychological well-being in this population, as evidenced by the lack of a significant correlation between age and psychological well-being (r = -0.075). This finding contradicts some previous research indicating that there is a strong relationship between psychological well-being and age [8]. However, it's important to note that other factors, such as individ-

Table 3. Correlations among participants' age and Psychological Well-being

Correlations									
Age Overall									
	Pearson Correlation	1	075						
Age	Sig. (2-tailed)		.290						
	N	200	200						

Table 4. Gender differences in Psychological Well-being

				In	dependen	t Samples To	est			
		for Eq	e's Test uality iances		t-test for Equality of Means					
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Int	onfidence terval Difference
									Lower	Upper
Develope size	Equal variances assumed	3.245	.073	2.021	198	.045	3.245	.073	2.021	198
Psychological Well- being	Equal variances not assumed			2.195	101.600	.030			2.195	101.600

df: Degree of freedom; F: F-Statistics; Sig.: Significance; Std. Error Difference: Standard Error Difference.

Table 5. School history differences in Psychological Well-being

Table 5. School history unferences in a sychological well-being											
Independent Samples Test											
		Leve Test Equal Varia	for ity of			t-test	for Equality	of Means			
		F Sig.		t	Df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Interva	nfidence al of the rence	
									Lower	Upper	
Dose	Equal variances assumed	.071	.790	3.726	198	.000	2.87240	.77087	.071	.790	
fail in school	Equal variances not assumed				68.628	.001	2.87240	.79389			

df: Degree of freedom; F: F-Statistics; Sig.: Significance; Std. Error Difference: Standard Error Difference.

ual differences and environmental influences, may play a more significant role in shaping psychological well-being in children and adolescents. History of School Failure and Psychological Well-being: The statistically significant difference in psychological well-being between participants with a history of school failure (p = 0.000) suggests that this factor may strongly influence psychological well-being in children and adolescents. These results are consistent with study by [9] that found there is a negative association between the psychological well-being and academic achievement finding that participants

with a history of school failure are most affected 52% underscores the importance of addressing academic struggles and providing support to improve psychological well-being in this group. The fact that there was no statistically significant difference in psychological well-being between the socioeconomic status groups (p = 0.188) implies that psychological well-being may not be strongly predicted by socioeconomic position. This result is at odds with some other research that revealed that children and adolescents with lower socioeconomic status have worse psychological outcomes [10] (Reiss, 2013).

Table 6. Differences in Psychological Well-being among socioeconomic status groups

		ANOVA				
		Sum of Squares	df	Mean Square	F	Sig.
	Between Groups	105.643	3	35.214	1.611	.188
Psychological Well-being	Within Groups	4285.512	196	21.865		
	Total	4391.155	199			

df: Degree of freedom; F: F-Statistics; Sig.: Significance

CONCLUSIONS

The study provides valuable insights into the factors influencing the psychological well-being of children and adolescents. While age, socioeconomic status, parental education, and parental employment are important considerations, the findings suggest that their impact on psychological well-being can vary. Factors such as school history and academic experiences, particularly school failure, appear to significantly affect psychological well-being. Additionally, mother's education level and father's

job type were found to be associated with psychological well-being, highlighting the complex interplay of various factors in shaping children's mental health.

RECOMMENDATIONS

Provide educational support for parents, especially mothers with lower education, offer support for low-income families to access mental health services and Schools should offer mental health support services for students.

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CONFLICT OF INTEREST

The Authors declare no conflict of interest

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