

**Title of the study :**

**General progress of the child, progress at school and in the daily activities during the treatment time in Family Guidance Center Saida**

SirkkuKivisto, LilianeYounes, Intissam Khalil, IrjaKandolin

We studied whether the support to the parents was helpful for the child's well-being. Families (n=61) answered to a survey Oct 2013. The results highlight the importance of guidance and home visits and form a strong recommendation to develop further the community based mental health approach.

## Parents about services of Family Guidance Center (FGC ) Saida.

### Background

October 2013 families who visited FGC Saida gave feedback about the service, after three year's period since opening of FGC Saida in July 2010. The survey was also an evaluation of the project "Mental health interventions in high risk conditions -Family Guidance Center Saida" (2011-2013) in cooperation with the Finnish Psychologists for Social Responsibility (FiPSR).

### The aim of the study

Survey questions were prepared by Liliane Younes, Ibtissam Al Khalil, Sirkku Kivistö and Dr Irja Kandolin. The aim was to know about the progress of the child, his/her progress at school and in the daily activities, reported by the parents. It was also important to learn about the factors associated with the progress during the treatment.

### Material and methods

We studied whether the support to the parents was helpful for the child's well-being, and how satisfied they were with the services. Further, we asked about the community attitudes towards mental health problems and about the recommendable services. Social workers of FGC Saida added information to the survey data about the length of the treatment, setting of the treatment in FGC, home visits and family workshops in. The number of respondents was 61 (6 fathers, 55 mothers). The answers concerned 51 sons and 10 daughters in the age range of 2-16 years. The treatment length was from 1 - 40 months, mean 23 months. Most of the children were seen by several professionals in the FGC.

### Results

The parents reported that the children learned better at school and especially, those children who were in special school or not at school at all, major part of them managed the daily activities better than before the treatment in FGC. During the treatment 57 % of children showed good progress, 26% some progress and 17% not much progress so far. At school 45% succeeded much better than before the treatment, 41% somewhat better, and 14% not any better. Daily activities of the children in special school or not at school at all 64% managed much better than before the treatment, 22% somewhat better and 14% not any better.

General progress of the child, progress in at school and in the daily activities during the treatment time, %

	General progress	Better learning at school	Better management of daily activities
Good progress	57	45	64
Some progress	26	41	22

Not much progress	17	14	14
Total	100	100	100

Those children learned better at school, whose parents reported that they had got help from the FGC staff to deal with the problems of the child and guidance to the problems among the siblings.

Among the parents major part reported the progress of children being better if the staff paid home visits ( $r=.38$ ,  $p<0.01$ ). Those parents also came more frequently to the group discussions of workshops in FGC. According to the social workers, one third of parents (30%) attends the workshops always when invited, 18 % sometimes, and 52% did not participate in the workshops held in FGC.

### Progress of the child during the treatment in FGC

(not much progress, some, good progress)

Guidance for parents often is helpful for the progress of the child

Correlations:

- help to deal with the child's problems .35 \*\*
- help for school problems .40 \*\*
- help with sibling relationships .32 \*
- home visits by social worker .38 \*\*
  
- length of the treatment .30 \*

Most of the parents expressed satisfaction to the services of FGC; 87% very much, 11% somewhat, 2 % not at all. All the respondents would recommend other families to contact FGC Saida, if they were concerned about their children's situation.

The parents were asked to give their opinion of how they are dealing with their children during the violent incidents in Ein el-Helweh camp and adjacent areas. In general, most of the parents (67%) calmed down and comforted their children. 23% of the parents paid some attention to the situation, 10% of parents did not take care of their children enough, according to the respondents in the FGC survey. The respondents recognized a change in the attitudes towards mental health problems and mental and developmental services; 93% reported that it is much or somewhat easier to seek help for the children than before. Minority of respondents reported that seeking help is still difficult.

### Discussion

Most children, about four of five, had benefitted remarkably from the treatment in FGC according to their parents. The parents are very satisfied with the service and they are ready to recommend the service to other parents if needed.

The cooperation of FGC staff and parents seems to be important, in addition to the individual treatment of the child. Those children, whose parents have got guidance of how to deal with problems of the child and how to solve the problems among the siblings, are better off. Also, discussions with parents on how to solve the problems at school result to the better progress of the child. Especially important is the guidance for the parents, whose children are not attending the regular, but special school or are staying at home.

The results highlight the importance of the home visits. Home visits activate the parents, they are willing to participate in workshops in the center, and the skills of their children both at school and in management of daily activities at home have improved.

The results can be interpreted as a strong recommendation to develop further the community based mental health approach.

## **b. Abstract Content and structure**

1. Content of the abstract must be topic related.
2. Must contain data and meet international ethical standards.
3. Abbreviations should be defined.
4. Abstract cannot contain more than **300 characters**
5. The abstract should be structured as follows.

- Objectives
- 
- Methods
- 
- Results
- 

## Conclusion **b. Abstract Content and structure**

1. Content of the abstract must be topic related.
2. Must contain data and meet international ethical standards.
3. Abbreviations should be defined.
4. Abstract cannot contain more than **300 characters**
5. The abstract should be structured as follows.

The aim of the study was to know about the progress of the child, his/her progress at school and in the daily activities, reported by the parents.

Methods

Results

Conclusion The results can be interpreted as a strong recommendation to develop further the community based mental health approach.