

## Domestic Violence and Child's Mental Health

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Article History	Abstract
<b>Original Research Article</b>	<p><i>This research set out to answer the question, "How does domestic violence affect children's mental health in the three senatorial districts of Rivers State?" In this work, the researcher employed a descriptive survey approach. The researcher set out to investigate three hypotheses and evaluate two research topics. With Taro Yamane's guidance, the researcher was able to narrow it down to a sample size of 1,000. A self-made questionnaire was used to compile the data. The statistics show that females are disproportionately affected by domestic violence and that females are the primary targets of domestic abuse. Domestic violence against women may take many forms, including sexual assault, physical assault, verbal abuse, and emotional abuse. Furthermore, evidence from Pearson Correlation Analysis corroborate the idea that child maltreatment is linked to negative psychological growth. In addition, research shows a direct correlation between homelessness and domestic violence. Teaching people their place in the family system is one strategy proposed to put an end to domestic violence.</i></p> <p><b>Keywords:</b> Domestic Violence, Child, Mental Health.</p>
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### INTRODUCTION

Domestic violence is universally acknowledged by human development specialists around the globe as a significant societal problem and, at the very minimum, a breach of human rights. Discussions on the impacts of domestic violence on children's mental health are becoming more common. Domestic violence" is generally defined as circumstances within a domestic setting where one partner mistreats or physically or emotionally assaults the other. It is not a problem confined to one gender in a relationship, but rather it impacts any cohabitation arrangement between a man and a woman (Holt, et al, 2008)

Domestic violence is a gendered societal and public health issue that transcends national boundaries, cultures, religions, and economic classes (McIntosh, 2002; Dodd, 2009; UNIFEM, 2007; Mooney, 2000). It is also associated with certain cultural tribal communities or limited to specific segments of the population. Its pervasiveness has recently prompted increased focus and awareness, particularly concerning children's exposure to domestic abuse. Despite widespread consensus that intimate partner violence presents a societal problem extending beyond

nationality, race, culture, ethnicity, and tradition, increased attention is being paid to its impacts on children who are at risk (Hague & Mullender, 2006; Hazen et al., 2006).

Previous research has shown that children who witness domestic violence are more likely to display aggressive, scared, and antisocial behaviours as adults. Multiple studies, including one by Edleson and Nissley (2011) and two by Kitzmann et al. (2003) and Wolfe et al. (2003), have revealed that children who are exposed to unsafe environments as they develop have worse social skills and academic performance as adults. Thus, domestic violence crosses all demographic boundaries (McIntosh, 2002; Dodd, 2009). Surveys, however, reveal that low-income households are more vulnerable than middle- or upper-class ones, notwithstanding these statistics.

Children's mental, physical, and social growth may be stunted if they are raised in an unwelcoming atmosphere, according to studies. Therefore, children who witness or are associated with domestic violence have specific service requirements related to their protection and the effects on

their emotional, behavioural, and intellectual development. According to Dodd (2009), domestic violence has a negative impact on the cognitive and social development of children. This affects how they grow up emotionally, socially, behaviorally, and cognitively (Lazenbatt et al, 2009). Youth who are subjected to domestic violence often become more aggressive, anxious, and display changes in their social skills, especially in their relationships with those in positions of authority. Traumatic events have been connected to issues with repression and self-worth in children. This demonstrates that children who are exposed to DV suffer from social-cognitive issues and have difficulty addressing challenges. Sadeler (1994) shows a link between childhood maltreatment, neglect, perpetrating relationship violence, and sexual abuse as an adult. The child is there and witnesses the abuser mistreating the mother, which, in his view, was done on purpose. As a result, the mother suffers and the infant is exposed to a potentially harmful scenario (Damant et al., 2010).

Children who see their moms being physically assaulted are also at a substantially higher risk for developing post-traumatic stress disorder (PTSD; Lehmann et al., 1995). Capaldi and Clark (1998), Ehrensaft et al. (2003), and Osofsky (2003) are just some of the authors who have documented the increased risk of mental health problems, the transmission of spousal violence to offspring, and the significance of parental interactions that lead to children displaying behavioural problems among children exposed to domestic violence. Evidence suggests that being exposed to or experiencing violence as a child (Edleson, 1999; Lynch, 2003; Margolin & Gordis, 2004; Martinez & Richters, 1993) can lead to a variety of mental health issues, including depression, anxiety, low self-esteem, substance abuse, and dependence. Professionals in the field of child welfare are needed to provide psychosocial support and intervention during this encounter. They'll be encouraged to and given the tools for engaging in socio-cognitive activities like processing their experience, improving their situational judgement, learning to evaluate risks, making new friends, and discovering their community's positive aspects. Competence and confidence in one's own abilities and surrounding surroundings will also rise as a result (Straus & Gelles, 1990; Graham-Bermann et al., 2007).

## CONCEPTUAL CLARIFICATION

### CONCEPT OF DOMESTIC VIOLENCE

Domestic violence" is generally defined as circumstances within a domestic setting where one partner mistreats or physically or emotionally assaults the other. It is not a problem confined to one gender in a relationship, but rather it impacts any cohabitation arrangement between a man and a woman (Holt, et al, 2008)

Domestic violence may refer to a wide variety of violent acts. When one partner in a dating, familiar, or living setting repeatedly hurts or threatens to hurt the other, this is called domestic violence. Physical aggression or attack (such striking, kicking, biting, shoving, restraining, slapping, or hurling things) is only one kind of domestic violence. Violence against children may also take the form of economic deprivation and other forms of passive or covert abuse (Seimeniuk, et al, 2010).

Domestic violence may take various forms, including but not limited to physical assault, sexual assault, psychological violence, economic abuse, and cyberstalking and other kinds of online harassment, as stated by the National Network to End Domestic Violence (2011). Domestic violence is defined as "a pattern of abusive behaviour in any relationship used by one partner to gain or maintain power and control over another intimate partner" by the United States government's Office on Violence Against Women. This organisation highlights that domestic violence may affect everyone, regardless of race, class, religion, gender, sexual orientation, or age. This encompasses physical, sexual, emotional, financial, and psychological abuse. What the researcher refer to as "violence against women" includes not just physical and sexual assaults but also various types of maltreatment against women. The United Nations General Assembly defines violence against women as any act that causes or threatens to inflict physical, sexual, or psychological pain or suffering to a woman. This also includes resorting to force, intimidation, or the unlawful stifling of individual liberties.

The United Nations Declaration on the Elimination of Violence Against Women (1993) states that violence against women is a result of inequality and male domination in society. By the 1870s, the common law idea that husbands had the power to "physically chastise an errant wife" (Calvert, 1974) had lost judicial support in the United States.

In the past, British law allowed husbands to administer mild physical punishment to keep women "within the bounds of duty" (Encyclopaedia Britannica, 1911). The term intimate partner violence (IPV) describes violence against women in close relationships. The World Health Organisation (2002) reveals that between 40 and 70 percent of all female homicides are committed by male intimate partners, highlighting the significant role domestic violence plays in the broader issue of violence against women. Research also indicates that verbal and psychological abuses are as prevalent as physical ones. (Poureza, et al., 2004)

*Johnson (2006) characterizes the following forms of aggressive behavior:*

**a. Common Couple Violence (CCV):** This doesn't stem from a pattern of controlling behaviour but rather a specific incident in which one or both spouses' resort to physical violence.

**b. Intimate Terrorism (IT):** Abuse on an emotional or psychic level is also a possibility. Terrorism in the intimate sphere is part of a larger pattern of one spouse exerting dominance over the other. It's less prevalent than other forms of couple violence but may lead to more severe injuries and has a higher potential for escalation over time. Who kinds like "generally-violent-antisocial" and "dysphonic-borderline" have been found in close proximity to terrorist financiers. Men with psychotic and violent inclinations make up the first category. Men who are emotionally dependant on their partners make up the second category. Further assessments corroborate this classification scheme (Hamberger et al., 1996).

**c. Violence Resistance (VR):** This is often considered a kind of "self-defense." It's when the abused turn the tables and hurt the abuser.

**d. Mutual Violent Control (MVC):** It's quite unusual for both partners in a domestic violence situation to resort to physical violence. Domestic violence, which can include beatings or threats, sexual violence, which can include assault or harassment, physical violence, exploitation, police brutality, and harmful cultural attitudes and practices, which can include widowhood rites and the suppression of girls' education, are all forms of violence against women. Among the numerous forms of violence against women, this investigator is particularly interested in the phenomenon of husbands abusing their wives. When a married woman suffers significant physical abuse, such as beatings or repeated injuries, this is known as wife battering (Scott, 1991). A more severe and potentially life-threatening form of domestic abuse includes beating by a husband or other acts of violence with knives or weapons. Violence against women at home is often accepted in societies and even institutionalised. The general public's reaction to acts of violence might vary from pride to denial to subtle arrogance. According to Davis (1999), only around one-third of households experience domestic violence from a spouse. We can no longer turn a blind eye to the worldwide epidemic of violence by staying quiet, justifying or blaming the perpetrators or by embracing cultural or religious prejudices.

#### ***Impact of Domestic Violence on Children's Development***

Exposure to violence in childhood has been associated with negative effects on children's brain development and academic achievement. Lower test scores, delayed language development, problems with visual-motor integration, and attention and memory deficits have all been

linked to exposure to chronic abuse and violence. Cognitive difficulties connected with exposure to violence and abuse are one of the most direct trends impacting the development job of school adaptation and academic triumphs. The child's capacity to encode, organise, remember, and convey knowledge of new information—the core prerequisites of academic successes and school adaptation—is compromised by difficulties in attention management, language skills, and memory.

Children are known to mimic adult behaviour, as stated by Calvert (1993). Violence and emotional dependence are learned behaviours that are passed down from generation to generation, teaching youngsters that violence is normal and necessary in close relationships. Abused children are more likely to grow up to be aggressive adults or to be overbearing and dominating in their romantic relationships. Children who grow up seeing domestic violence sometimes fail to recognise that the issue lies with their parents. They internalize the message that it's possible to feel both affection and pain from a family member. As a kind of deterrence, they let their friends know that they believe what they see. According to The Standard, a woman poured boiling water over her husband on Monday, February 13, 2012, as their children watched. After a long day at the office, Mjuchiri informed the reporter that he went straight to bed. He "fell asleep and was woken up by some excruciating pain all over the body." Another of his three children, he added, was in the bedroom (which also serves as the kitchen) when he awoke.

There is considerable variation in the long-term effects on children who witness or take part in domestic violence. Children, as Florida (2001) notes, are susceptible to feeling a wide range of emotions, some of which may be unfamiliar and hence more distressing. The result is that kids worry about their futures being ruined by this. Anxiety and worry about the future may develop in children. A victim's perceptions often include the fears of being abused and abandoned. Children who see their parents being mistreated often develop a dread that they may be the next victims.

According to Royal (1990), rejected children see themselves as the focus of the world and attribute all events to having a direct impact on them. They feel hopeless and unloved since their parents argue or abandon them. Children who are at fault may experience feelings of guilt and humiliation if they are convinced that they are to blame for their parents' divorce or the violence that occurs between them. Children rely on their parents and other carers for emotional support and connection, he continues. Children grieve the loss of their parents when they endure divorce or witness domestic violence. Children between the ages of four and five have been observed by Waller and Kelly (1975) to exhibit irritation, weeping, bedtime anxiety,

and regressive scared behaviour. They share their sorrow and hope that their efforts to reunite their parents would help.

Children who have been exposed to violence during their developmental years are likely to experience negative impacts on their brain growth and academic prowess. Exposure to prolonged violence and abuse can lead to lower performance on standardized tests, a delay in language acquisition, problems in integrating visual and motor functions, and deficits in attention span and memory capabilities. The cognitive challenges tied to enduring violence and abuse are among the most significant impediments affecting a child's adaptation to school and their success in academic pursuits.

The fundamental processes necessary for academic triumphs and school adaptation, such as encoding, organizing, recalling, and transmitting knowledge about novel information, can be hindered by issues in attention regulation, language abilities, and memory. Children are known to imitate the behaviour of adults, as suggested by Calvert (1993). Through generations, violent behaviour and emotional dependency are learned and propagated, leading children to perceive violence as a typical and crucial aspect of intimate relationships. Children who have been subjected to abuse are more likely to evolve into aggressive adults, dominating and controlling in their romantic relationships. Often, children who grow up in an environment of domestic violence fail to understand that the problem originates from their parents. They internalize the notion that experiencing love and hurt from a loved one is possible. As a form of self-protection, they communicate their perceptions to their peers. A news report from *The Standard*, for example, covered a story of a woman who scalded her husband with boiling water in the presence of their children. Mjuchiri, the husband, reported that he was awakened from his sleep by agonizing pain all over his body. One of his three children, he said, was present in the bedroom-cum-kitchen when he was assaulted.

The long-term effects of domestic violence on children who witness or are subjected to it can vary significantly. As noted by Florida (2001), children are likely to experience a spectrum of emotions, some of which may be alien and, therefore, more unsettling. This may result in children becoming anxious about their future. Fears of being abused and abandoned may dominate a child's perceptions. Children who witness their parents' abuse often harbor the fear that they might be the next victims. Furthermore, Children who witness or are victims of emotional, physical, or sexual abuse are at higher risk for health problems as adults. These can include mental health conditions, such as depression and anxiety. They may also include diabetes,

obesity, heart disease, poor self-esteem, and other problems.

Royal (1990) suggested that neglected children tend to perceive themselves as the center of the universe and believe that all events directly influence them. They feel desolate and unloved as their parents quarrel or desert them. Children who feel responsible may experience feelings of guilt and shame, believing that they caused their parents' separation or the violence between them. Royal continues to elaborate that children lean on their parents and caregivers for emotional support and bonding. Children mourn the loss of their parents when they endure a separation or witness domestic violence. Waller and Kelly (1975) noted that children aged four and five exhibit annoyance, crying, anxiety at bedtime, and a regression into fear-based behaviors. They express their grief and harbor the hope that their endeavors might bring about a reunion between their parents.

### ***Domestic Violence Against Women***

Violence against women is defined differently by different academics and professionals (Mouzos & Makkai, 2004). Is it violent towards women, for instance, to assault a lady or to send her unpleasant text messages? Is it considered violence against women if a spouse verbally abuses his wife or has financial control over the household? Women who have been victims of violence by a stranger are more likely to perceive it as violent than those who have been victims of violence by a friend or acquaintance, according to research by Mouzos and Makkai (2004). Inconsistencies in estimates of the frequency of violence against women may be directly attributed to this disagreement about what constitutes such violence. However, it does not matter who the perpetrator is; violence against women is never acceptable. Whoever committed the conduct should be considered violent since it is a crime against women regardless of the victim's gender. Victimization patterns also vary across sexes, even though males are more likely to be assaulted than women. According to research by Bachman (1994) and colleagues Bachman and Saltzman (1995), intimate relationship violence affects much more women than males. According to Bachman and Saltzman (1995), most cases of domestic violence involve an intimate partner or a family member. According to research by Bachman and Saltzman (1995), intimate partner violence is more deadly for women than stranger violence. The International Violence Against Women Survey (IVAWS, 2004) evaluated three distinct categories of self-reported violence against women. They include:

1. Physical violence or threats.
2. Sexual violence, such as unwelcome sexual touching, and

3. **Violent treatment of the mind**, including humiliation, freedom restriction, and verbal abuse.

The United Nations defines gender-based violence as "any act of gender-based violence that leads to, or is likely to lead to, physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion, or arbitrary deprivation of liberty" (United Nations, 1993).

Ezeh & Gauge (1998) note that there is mounting evidence suggesting that the expectations partners have of each other's roles within relationships, as well as societal notions of appropriate gender roles, significantly influence domestic violence. They further explain that a woman's failure to meet her partner's expectations of her role often triggers domestic violence. Factors such as patriarchy, misogyny, and women's financial dependence on men contribute to the ongoing violence against women. They posit that the incidence of violence against women does not necessarily correlate with aspects like socioeconomic status or cultural norms. Society has, for a prolonged period, recognized only physical assault as an indicator of domestic abuse.

### *Forms of Domestic Violence Against Women*

Violence comes in a variety of forms, they include;

1. **Sexual Violence:** Sexual violence can occur within relationships, with intimate partner violence being the most common form. However, this is not limited to partners; sexual violence can be perpetrated by "non-partners," such as relatives, friends, acquaintances, neighbors, or even strangers, as highlighted in the Secretary-General's 2006 In-Depth Study. However, statistics regarding sexual violence perpetrated by "non-partners" are hard to acquire, especially in Africa, due to stigmatization of victims and underreporting. According to a study by José Alcalá (2005), it is estimated that one in five women may experience rape or an attempted rape during her lifetime. In many parts of Nigeria, victims often endure further trauma due to societal attitudes and judicial system shortcomings, as perpetrators are seldom held accountable.
2. **Physical Abuse:** This form of violence involves one person using physical force against another, leading to injury or placing the victim in imminent danger of injury.
3. **Emotional Abuse:** This is a form of non-physical violence that includes verbal degradation such as name-calling or continuous criticism. Nonverbal abuse may manifest as one person making all

decisions, effectively silencing the other party involved.

4. **Financial Abuse:** This type of abuse involves economic manipulation such as withholding resources, stealing from the victim, or incurring debt in the victim's name.

5. **Abuse using technology**

The perpetrator may utilize a computer or other electronic device to harass, stalk, monitor, isolate, punish, threaten, or embarrass the victim. In addition, offenders often spy on victims by monitoring their electronic gadgets.

6. **Spiritual abuse:** It's anything that gets in the way of you achieving your goals or enjoying life to the fullest. The victim is denied the opportunity to follow her moral, cultural, or religious convictions and is thus coerced into giving up what is most dear to her.

7. **Harmful Traditional Practices:** These are examples of violence against women that have persisted for a long enough time in certain cultures and civilizations to be recognised as normal. Among these infractions are:

- I. Female Genital Mutilation or cutting (FGM),
- II. Honor killings and
- III. Early marriage.

➤ **Female Genital Mutilation:** Female genital mutilation in traditional cultures may refer to a range of practices. Defendants of female genital mutilation have often argued that the treatment is morally acceptable because it helps young women maintain their "purity." The United Nations General Assembly estimates that over 130 million girls and women throughout the globe have experienced female genital mutilation (FGM), most often in Africa and several Middle Eastern nations, and that an additional two million girls are at danger of being mutilated each year. Since the 1980s, there has been a rise in both criticism of FGM and attempts to end the practise. The Secretary-General's In-Depth Study found that as of April 2006, 15 of the 28 African States with the highest rates of FGM have criminalised the technique.

➤ **Honor Killings:** Women who are victims of rape, premarital sex, or are found guilty of adultery in certain parts of Nigeria risk the death sentence since the violation of a

woman's virginity is seen as an insult to the honour of the family. Between 2,000 and 5,000 people are killed in "honour killings" per year, according to a report by the United Nations Population Fund in 2000.

- **Early Marriage:** Child marriage is a global phenomenon, more prevalent in Africa and South Asia. Recognized as a form of sexual violence, the forced marriage and subsequent sexual interaction of young girls destabilizes nations. The health of women is put at risk, they face an increased likelihood of contracting HIV/AIDS, and their educational prospects are curtailed due to this practice. Some families defend this practice, claiming it preps their daughters for adulthood. Families seeking economic and social advancement often marry off their younger daughters. Situations of instability, violence, and social disorder result in a surge of child brides. As per the United Nations (2002), in several war-afflicted African nations, early marriage is considered a means to protect girls from sexual violence.

#### ***Impact of Domestic Violence on Women:***

- **Physical Impact:** Immediate effects of domestic violence can require medical attention and hospitalization due to injuries like bruises, broken bones, head injuries, cuts, and internal bleeding (Jones, 1997). Domestic violence is linked to various chronic health conditions, such as arthritis and irritable bowel syndrome (Berrios, 1991). Pregnant victims of domestic violence face a heightened risk of miscarriage, premature birth, and fetal injury or death (Jones, 1997).
- **Psychological Impact:** Victims continuing to live with their abusers often exhibit high stress levels, fear, and anxiety. Victims usually experience depression after being continuously blamed for instigating the violence. The risk of suicide significantly increases, with an estimated 60% of victims meeting the diagnostic criteria for depression during or after terminating the abusive relationship (Barnett, 2001). Post-traumatic stress disorder (PTSD) is the most commonly referenced mental health outcome of intimate partner violence. Symptoms such as flashbacks, intrusive images, heightened startle response, nightmares, and avoidance of stimuli associated with the abuse are commonly reported by victims with PTSD (Vitanza, Vogel, & Marshall, 1995). These symptoms can persist long after the victim is no

longer exposed to the abusive situation. It is widely recognized that survivors of domestic violence may be accurately diagnosed with PTSD.

- **Financial Impact:** Upon escaping their abusers, victims often face the shock of how much control the abuser exerted over their financial circumstances. Victims of financial abuse are often left with limited resources and few support systems. According to research (Stop Abuse Against Women, 2010), this is one of the biggest obstacles faced by victims of domestic violence and is a strong deterrent against leaving their abusers. Victims of domestic violence often have numerous dependent children and limited marketable skills, making it challenging to secure gainful employment.
- **Long-term Impact:** A practitioner aiding a victim of domestic violence should be aware of the wide array of reactions victims may experience. Mental health disorders, chronic physical health problems, extreme poverty, and homelessness can be major outcomes of domestic violence victimization, particularly when the victim lacks financial independence.

#### **Warning Signs of Domestic Abuse:**

These are the indications that healthcare and clinical practitioners should be aware of to recognize potential abuse cases. These red flags can be subtle or blatantly obvious.

#### **Psychological red flags of abuse include**

- Symptoms of depression, anxiety, suicidality or PTSD,
- Clients showing anger or difficulty controlling their behavior,
- Highly paranoid clients,
- Clients describing high levels of insecurity,
- Clients showing significant personality changes such as an extrovert becoming suddenly introverted.

#### **Physical abuse red flags include**

- Clients who are frequently injured and attribute these injuries to "accidents,"
- Regularly missed appointments,
- Deliberate alteration of appearance to cover up injuries or bruises.

#### **Isolation warning signs include**

- Patients who report being barred from contacting loved ones,
- Patients who are extremely hesitant to go anywhere without their partner, and
- Clients who are short on money, credit, or transport.

#### **General warning signs include**

- Secretiveness about seeking treatment, particularly from a spouse or partner,
- Clients who display excessive timidity or neediness in relationships,
- Clients who frequently update their partner about their activities, incessant threatening phone calls from a spouse,
- Clients who express concerns about their partner's anger, jealousy, or possessiveness.

#### **Treatment of Domestic Abuse:**

While there is no universally effective treatment for intimate partner violence, there are a few promising approaches. A meta-analysis conducted by Corvo, Dutton, and Chen in 2007 found that personalized assessment and treatment held the most promise. Many programs rely on Cognitive Behavioral Therapy (CBT), but research into perpetrator and victim psychology suggests this successful approach may benefit from being tailored to the individual circumstances of each client.

A successful treatment program will consider the client's cultural background and history (Chang & Saunders, 2002), acknowledge the connection between domestic violence and substance abuse (Corvo et al., 2007), and concentrate on the client's relationships and attachment styles (Babcock et al., 2000).

#### **Solutions Focused Therapies:**

This is a comprehensive outline of solutions-focused treatment in the context of domestic violence. The focus on building from existing strengths and capacities rather than diagnosing or dwelling on past failures is a key distinction of this therapeutic approach.

#### **To elaborate further on some of the steps mentioned above:**

- ❖ **Task Assignments:** This component involves having clients practice certain behaviors or skills outside of therapy sessions. This could be anything from observing their own reactions to certain triggers to practicing new communication techniques with their partner. The goal is to help clients actively engage in changing their behavior

and to reinforce the skills they are learning in therapy.

- ❖ **Safety Planning:** This crucial aspect of treatment in cases of domestic violence involves creating a detailed plan for how clients can protect themselves and any dependents in the event of a violent incident. This might include preparing a bag of necessary items, planning a safe place to go, and establishing a support network of friends or family who are aware of the situation.
- ❖ **Scaling:** This technique is used to help clients assess the severity of their situation and track changes over time. By asking clients to rate their feelings or experiences on a scale of 1 to 10, therapists can help them to quantify and monitor their progress.

#### **The Domestic Violence Resource Center offers the following guidelines:**

- Safety during an Explosive Incident
- If an argument is unavoidable, the person should stay in an area where they have access to an exit.
- Practice getting out of the home safely.
- Keep a packed bag at a trusted relative's or friend's home.
- Tell trustworthy neighbors about the violence. Devise a code word or signal to use with children, family, friends, and trustworthy neighbors.
- Plan where you will go if you have to leave.
- Trust your instincts and judgment.
- Safety When Preparing to Leave
- Establish financial independence (credit card accounts).
- Leave money, extra keys, copies of important documents, etc. with trusted others.
- Keep hotline phone numbers handy.
- Safety in the New Setting
- If possible, obtain a restraining order.
- Inform schools or child caregivers of the situation.
- More specific safety planning templates are available from many sources and are an important part of the therapy process.

### **CONCEPT OF MENTAL HEALTH**

Mental wellness is a multifaceted concept that is crucial to overall wellbeing, signifying different things to different

people such as the absence of illness, optimal physical and mental health, or a sense of inner and outer harmony (Sartorius, 2002). How these aspects are prioritized depends on the degree to which individuals' basic health needs are met. Maslow's (1968) hierarchy of needs positions food, shelter, protection, community, social support, and relief from pain, environmental hazards, undue stress, and exploitation as fundamental human necessities.

A mentally healthy individual is capable of forging and maintaining positive relationships, acknowledging and expressing positive actions and thoughts, and handling negative emotions like grief. Good mental health enables a person to feel confident about themselves, be in control of their life, and possess an understanding of their inner and external world. As suggested by the Society for Health Education and Promotion Specialists (SHEPS, 1997), a mentally healthy mind consists of positive self and other perceptions and the ability to experience happiness, love, and contentment. Mental health is influenced by the same biological, social, psychological, and environmental factors that contribute to mental illness, encompassing both proximal and distal social environments. When a community collaboratively works towards enhancing the mental wellbeing of its members, it leads to collective benefits. Internal factors like inadequate emotional resilience, low self-esteem, perceived low social status, feelings of entrapment, issues related to sexual identity, isolation, and poor integration are associated with mental health deterioration as per the Health Education Authority (HEA, 1997) report. Poor social conditions like substandard housing, poverty, unemployment, experiences of discrimination or abuse, cultural conflict, stigma, and lack of autonomy are external factors that contribute to mental health vulnerabilities.

A mentally healthy individual is capable of enjoying their solitude while simultaneously forming healthy relationships with others. Cultural norms significantly influence self-perceptions, and depending on one's cultural background and personality, one may lean towards sociocentrism or egocentrism. Attempts to alter these self-perceptions can lead to cultural friction, conflict, and dissatisfaction. Positive mental health can yield several beneficial outcomes such as enhanced emotional, intellectual, spiritual, social, and personal development; formation and maintenance of meaningful relationships; increased self-awareness and empathy; viewing mental distress as an opportunity for growth and learning; and the ability to experience and express trust, competence, accomplishment, and humor among other things.

As indicated by the Mental Health Foundation (MHF, 2008), the way one perceives their own mental health and the world plays a significant role in their resilience in the

face of adversity. It is well acknowledged that an individual's mental health affects their ability to carry out daily tasks, seize opportunities, and participate actively in society, work, and chosen profession. The state of one's mind can exert both direct and indirect effects on physical wellbeing. "Mental health" refers to the capacity to manage one's own physical and emotional needs as well as their social and intellectual development. Constructive management of change, relationships, and emotions all contribute to overall functional success. The challenge for psychiatry is to integrate mental health preservation and promotion into clinical practice, academic research, and pedagogical efforts, as well as to incorporate these ideas into public health initiatives.

*Mental health problems can arise due to several factors, such as:*

- Childhood trauma, neglect, or abuse.
- Feelings of alienation from others.
- Exposure to various forms of prejudice, notably racism.
- Discrimination, poverty, or financial stress.
- Grief following the death of a loved one (bereavement).
- Extreme or chronic stress.
- Suffering from a chronic physical illness.

According to Kinnae (2021), there are various types of Mental Health Disorders or Illnesses, such as:

- a. **Anxiety disorders:** People with these diseases experience overwhelming anxiety and/or panic when confronted with certain events or objects. Anxiety disorders may develop when a person's response to danger is disproportionate, when they lack the ability to exert control over their reaction, or when their constant worrying interferes with their everyday life. Diseases of the anxious system include phobias, social anxiety, panic attacks, and GAD.
- b. **Issues with mood:** These are characterised by times of great pleasure or melancholy, or by a combination of the two. Depression, mania, and cyclothymia are all examples of common mood disorders.
- c. **Disorders in the psychotic spectrum** are characterised by perceptual and cognitive distortions. Hallucinations entail the experience of pictures or noises that aren't real, such as hearing voices, whereas delusions are erroneous, set beliefs that the individual holds despite evidence to the

contrary. An example of a psychotic condition is schizophrenia.

- d. **Disorders of eating** are characterised by strong reactions to one's own body shape and eating habits. Anorexia, bulimia, and binge eating disorder make up the trifecta of most prevalent eating disorders.
- e. **Disorders of impulse control** and addiction manifest in an inability to control one's impulses or stop from behaviours that might cause damage to oneself or others. Disorders like kleptomania, pyromania, and pathological gambling are examples. Substances like alcohol and drugs have a way of taking over a person's life to the point where they no longer care about their duties or the connections they once had.
- f. **Individuals with personality disorders** exhibit distressing and unchangeable personality features that get in the way of their daily lives, whether at work, in school, or with friends and family. Some examples of personality disorders include antisocial, obsessive-compulsive, and paranoid.
- g. **People with obsessive-compulsive disorder (OCD)** are afflicted by irrational, distressing obsessions and compulsions. An extreme case might be someone who constantly washes their hands out of an excessive paranoia about germs.
- h. **Traumatic experiences** like a sexual assault, the unexpected loss of a loved one, or a natural catastrophe may trigger post-traumatic stress disorder (PTSD).

#### **Some uncommon forms of mental disease were also recognized by Smitha (2023).**

- When a person's mental or behavioural health declines as a direct result of exposure to stress, they are said to be suffering from stress response syndromes, often known as adjustment disorders.
- Memory, consciousness, identity, and perception may all be impacted by dissociative disorders.
- An individual with a fictitious ailment willfully and repeatedly fakes symptoms of a mental or physical illness in order to get attention or sympathy.
- Sexual and gender-based disorders include those that affect a person's sexual orientation, libido, or ability to function sexually.
- Somatic symptom disorders include abnormally high levels of worry about bodily sensations.

- Disorders characterized by tics are referred to the occurrence of involuntary, fast, and repeated motor movements or vocalizations.

***There are several types of treatment for mental health problems as stated by the American Academy of Family Physicians (2023).*** They include:

1. **Psychotherapy or counseling.** "Talk therapy", also known as psychotherapy, is a common method used to aid individuals dealing with mental health problems. However, this approach is more than just discussing problems with a professional; it often involves learning aspects such as stress management, relaxation techniques, and coping mechanisms. Various forms of talk therapy exist, including Cognitive-Behavioral Therapy (CBT) and Dialectical-Behavioral Therapy (DBT). Sessions can be held individually or in groups, making it suitable for individuals going through challenging life events, even without a diagnosed mental health issue.
2. **Prescription medication:** refers to targeting the brain chemicals that regulate emotions and thoughts. While medication may not entirely cure mental or physical illnesses, it can significantly alleviate discomfort and potentially enhance the effectiveness of therapies such as counseling. Various types of medications work differently, and a medical professional will provide guidance and disclose any potential risks involved.
3. **Support groups** and self-help resources also play a crucial role in managing mental health issues. They provide a platform to connect with others, access valuable resources, and learn effective coping strategies. These groups can also help combat the feelings of isolation often associated with mental health problems.
4. **Electroconvulsive therapy (ECT)** or other brain stimulation therapies are other potential treatment options. ECT involves using electric currents to cause changes in the brain that can alleviate or even eliminate troubling symptoms. ECT and similar treatments are typically used when other therapy forms have proven ineffective.
5. **Eye Movement Desensitization and Reprocessing (EMDR)** therapy is another method used primarily to alleviate psychological stress. It's particularly effective in treating trauma-related conditions, including PTSD.

## **CONCLUSION**

In severe cases of mental health issues, hospital or residential treatment programs may be necessary. Such measures are typically required when an individual cannot take care of themselves, or there is an imminent risk of them

causing harm to themselves or others. Various alternative treatments can also contribute to improving mental health. These include physical activities like exercise and yoga, as well as creative therapies that use artistic expression as a therapeutic tool. The creative output can be visual, auditory, kinetic, or written.

## Recommendations

1. Educating individuals about their role in the family is an important step towards ending violence at home.
2. Traditional practices that restrict women's access to credit, economic resources, property rights, and the right to inheritance should be abolished via activism and law.
3. It is important to implement gender policies that outline measures to advance women's economic equality.

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