

Mental health problems in migrant workers' children

Smriti Ghimire¹, Karuna Kunwar², Smriti Mishra³

Introduction

Foreign Employment has become one of the important livelihood strategies for Nepalese people. Every year more than five hundred thousand Nepalese youth migrate to various countries for work, among them 85% were migrated in Malaysia and Gulf countries only. Family migration can generate significant impact on child development. Parent's migration often results in family dysfunction and adverse child psychological outcomes. Children affected by migration are at a great risk of suffering from a broad range of psychological problems, such as depression, anxiety, loneliness and negative self-perception; they may also exhibit behavioral problems. This study examined psychological and behavioral problems in left-behind children of migrant workers.

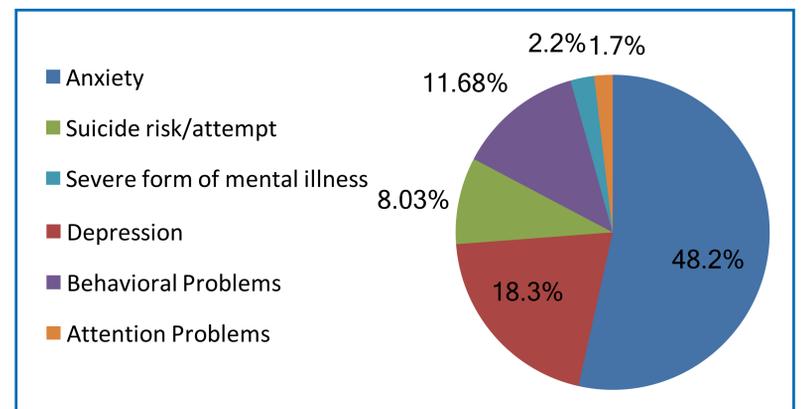
Method

It was a cross sectional study, 137 children left behind were identified by psychosocial counsellors in nine districts (5 Hills and 4 Terai) where intervention program is implemented in 2014-2018 by Safer Migration Project. Only distressed left behind whose family members had migrated to six Gulf countries and Malaysia were interviewed using Nepali adopted parent version of child behavior check list (CBCL). Data were analyzed using SPSS 20th version for frequencies and percentage.

Result

There were altogether 137 children and adolescents attended by psychosocial counselors, among them 28.47% were below 12 years and 71.53% were 12-18 years and 58.4% were girls and 41.6% boys. Anxiety problems rated highest (48.2%), depression 18.3%, 8.03% suicidal thoughts, behavioral problems 11.68% (rules breaking, aggression), 2.2% severe form of mental illness and attention problems 1.7%. Result showed mental health problems highly prevalent in left behind children and adolescents of migrant workers and urged the need for mental health services for them. Death of migrated parent, remarriage by either parent, contact less status of migrated parent, mother experienced domestic violence, social blame and sexual abuse were observed major contributing factors for the occurrence of mental health problems.

Graph1: Psychosocial Problems



Graph2: Gender Age Classification

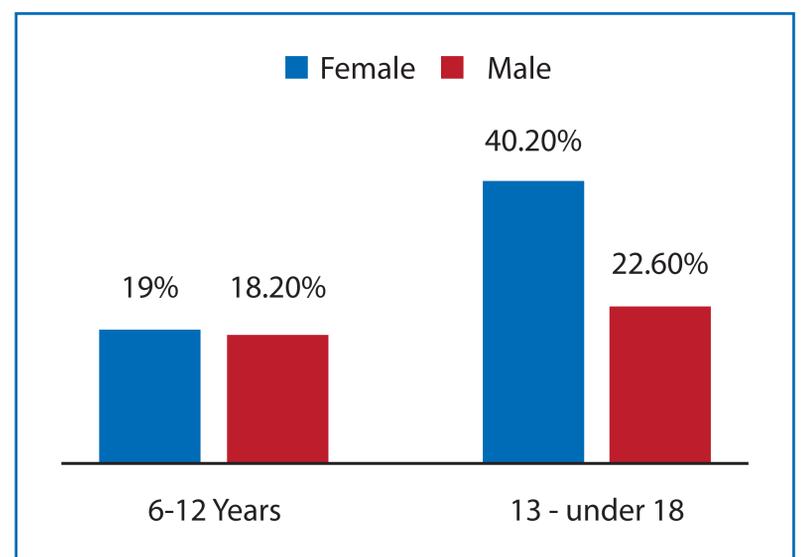


Table 1: Major contributing factors for Psychosocial Problems

Death of Parents	14 (10.21%)
Suicide by either of the Parents	4 (2.9%)
Social Blaming	4 (2.9%)
Contactless Parents	14 (10.21%)
Remarriage by either of the parents	18 (13.13%)
Domestic Violence	13 (9.5%)
Sexual Abuse	4 (2.9%)

Conclusion

Studies have shown that the left behind children of migrant workers were more vulnerable to have psychological problems which will have long lasting impact on overall psychosocial life of child and adolescent. Supportive program activities have to be considered to prevent future mental health problems in such risk group.

¹ Smriti Ghimire, MA, Psychosocial Supervisor, SaMi Project, Centre for Mental Health and Counselling-Nepal | Email: cmee.munu@gmail.com

² Karuna Kunwar, MA, Senior Psychologist, Centre for Mental Health and Counselling-Nepal

³ Smriti Mishra, MPH, Documentation and Monitoring Officer, SaMi Project, Centre for Mental Health and Counselling-Nepal