"A Study to assess the risk factors of paranoia among adolescents with psychotic condition at SMVMCH, Puducherry"

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ABSTRACT:
The study to assess the risk factors of paranoia among adolescents with psychotic condition at SMVMCH, Puducherry. A Quantitative Research approach was adopted for this present study. This study adopted descriptive research design. The study setting at Sri Manakula Vinayagar Medical College and Hospital, Kalitheerthalkuppam, Puducherry. Population includes all adolescents in SMVMCH, Puducherry. Sample of the study comprises of adolescents with psychotic condition in SMVMCH, Puducherry. Sample size consists of 30 adolescents who fulfilled inclusion criteria. Purposive sampling technique was adopted for this present study. The level of risk factors of paranoia among adolescents with psychotic condition, it reveals that 13 (43.3%) had low level of risk factors, 13 (43.3%) had high level of risk factors, 4(13.4%) had Very low level of risk factors.
KEYWORDS:
Paranoia, Risk factors, Adolescents, Psychotic condition

I.   INTRODUCTION:

"Paranoia is just another mask for ignorance."

– Hunter S. Thompson

Paranoia is a thought process characterized by excessive fear or anxiety to the extent of delusion, and it includes persecutory belief of threats, unwarranted jealousy, and/or exaggerated self-importance. Adolescence can be a challenging time, characterized by self-consciousness, heightened regard for peer acceptance, and fear of rejection. Psychosis is a condition in which a person loses touch with reality. It shows up in the late teen or early adult years. Psychotic disorder statistics shows ~3% of the people of the U.S. experience at least 1 psychotic episode during their lives, ~100,000 teens each year experience their 1st psychotic episode. Average age of psychosis onset is 24. In New Delhi, Panic to paranoia: One year on, mental health crisis still unfolding across India, Indians locked down in their homes as Covid-19 tightened its grip over the country. When they emerged months later, tentative and timorous, the world many knew had changed, perhaps forever, leaving them grappling with a spectrum of mental health issues ranging from depression to paranoia. The risk factors that may increase the likelihood of a person to develop persistent paranoia, such as Memory loss, reduced brain circulation due to high blood pressure, Impaired hearing, Discrimination and victimization, Low Self-Esteem, Tendency to jump to conclusions and assumptions, Childhood abuse, Traumatic experiences in the past, Domestic violence, social repression or racial persecution, social withdrawal or living in isolation.

STATEMENT OF THE PROBLEM:

A Study to assess the risk factors of paranoia among adolescents with psychotic condition at SMVMCH, Puducherry"

OBJECTIVES:

❖   To assess risk factors of paranoia among adolescents with psychotic condition.
❖   To associate risk factors of paranoia among adolescents with psychotic condition withtheir selected demographic variables.

II.   MATERIALS AND METHODS:

The research approach used for this study was quantitative research approach. A descriptive research design was used to assess the risk factors of paranoia among adolescents with psychotic condition at SMVMCH, Puducherry. By using purposive sampling technique 30 sample was selected for the present study. The period of data collection was two weeks. The tool consists of demographic data, assessment tools for risk factors of paranoia

among adolescents with psychotic condition. The outcome of the study was evaluated by using descriptive and inferential statistics.

DESCRIPTION OF THE TOOL:
Section A: Demographic variables consisting of Age, Sex, Religion, Education, Parent marital status, Types of family, Parent's Occupation, Residency, Family income, Family history of psychiatric illness,Previous psychiatric treatment, History of substance abuse.
Section B: Assessment of risk factors of paranoia among adolescents with psychotic condition was done by using self -structured assessment questionnaire. It consists of 20 yes or no questions.

SCORING INTERPRETATION:

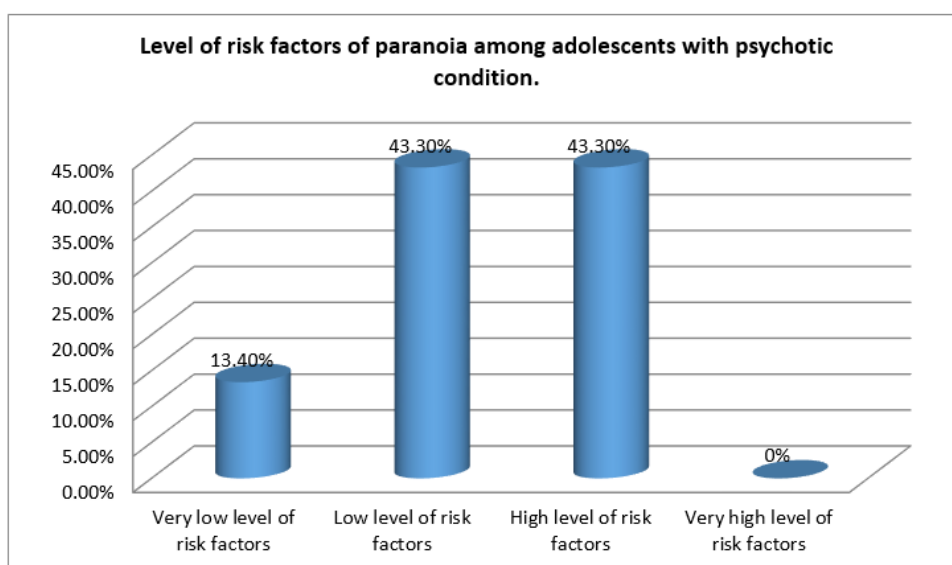| 01-05	Very low level of risk factors
06-10	Low level of risk factors
11-15	High level of risk factors
16-20	Very high level of risk factors

III.   DISCUSSION:

The first objective of the study was to assess risk factors of paranoia among adolescents with psychotic condition.
Table – 1 shows frequency and percentage wise distribution of level of risk factors of paranoia among adolescents with psychotic condition. Majority of the adolescence 13 (43.3%) had Lowand high level of risk factors, 4(13.4%) had Very low level of risk factors and the mean and standard deviation the level of risk factors of paranoia among adolescents with psychotic condition is (9.50+3.149) respectively.
Table 1:- Frequency and percentage wise distribution of the level of risk factors of paranoia among adolescents with psychotic condition.

(N = 30)

LEVEL OF SYMPTOMS OF PARANOIA	FREQUENCY (n)	PERCENTAGE (%)
Very low level of risk factors	4	13.4
Low level of risk factors	13	43.3
High level of risk factors	13	43.3
Very high level of risk factors	0	0
Total	30	100
Mean+Standard deviation	9.50+3.149	

The second objective of the study to associate risk factors of paranoia among adolescents with psychotic condition with their selected demographic variables.

Table - 2 depicts that the demographic variable, Age, Parent marital status and History of other abuse or dependence had shown statistically significant association between the level of risk factors of paranoia among adolescents with psychotic condition with their selected demographic variables. The other demographic variable had not shown statistically significant association between the level of risk factors of paranoia among adolescents with psychotic condition with their selected demographic variables respectively.

Table –2: Association between the level of risk factors of paranoia among adolescents with psychotic condition with their selected demographic variables.

(N=30)

SL. NO	DEMOGRAPHIC VARIABLES	LEVEL OF SYMPTOMS OF PARANOIA						Chi-square X^2 and p-value
		Very low level of risk factors		Low level of risk factors		High level of risk factors		
		N	%	N	%	N	%	
1	**Age**							**X^2=12.44 Df=6 p =0.005 *S**
	a) 10-13 years	0	0	1	7.7	0	0	
	b) 13-15 years	2	50	2	15.4	0	0	
	c) 15-17 years	2	50	2	15.4	7	53.8	
	d) 17-19 years	0	0	8	61.5	6	46.2	
2	**Sex**							X^2=0.577 Df=2 p =0.749 NS
	a) Male	2	50	4	30.8	4	30.8	
	b) Female	2	50	9	69.2	9	69.2	
3	**Religion**							X^2=8.661 Df=4 p =0.070 NS
	a) Hindu	3	75	9	69.2	4	30.8	
	b) Muslim	0	0	2	15.4	8	61.5	
	c) Christian	1	25	2	15.4	1	7.7	
	d) Others	0	0	0	0	0	0	
4	**Education**							X^2=6.90 Df=6 p =0.330 NS
	a) Illiterate	0	0	2	15.4	2	15.4	
	b) Primary education	1	25	2	15.4	7	53.8	
	c) Secondary education	2	50	8	61.5	3	23.1	
	d) Graduate	1	25	1	7.7	1	7.7	
5	**Parent marital status**							**X^2=12.84 Df=2 p =0.003 *S**
	a) Consanguineous marriage	2	50	3	23.1	6	46.2	
	b) Non - Consanguineous marriage	2	50	10	76.9	7	53.8	
6	**Types of family**							X^2=3.71 Df=2 p =0.156 NS
	a) Nuclear family	4	100	8	61.5	6	46.2	
	b) Joint family	0	0	5	38.5	7	53.8	
7	**Parents Occupation**							X^2=3.53 Df=2 p =0.17 NS
	a) Employed	3	75	13	100	10	76.9	
	b) Unemployed	1	25	0	0	3	23.1	
8	**Residency**							X^2=3.61 Df=2 p =0.164 NS
	a) Urban	3	75	8	61.5	4	30.8	
	b) Rural	1	25	5	38.5	9	69.2	
9	**Family income**							X^2=4.89 Df=4 p =0.298
	a) Below Rs.5000 per month	0	0	2	15.4	3	23.1	

	b) Rs.6000-10000 per month	2	50	6	46.2	9	69.2	NS
	c) Above Rs.10000 per month	2	50	5	38.5	1	7.7	
10	**Family history of psychiatric illness**							X^2=0.007 Df=2 p =0.996 NS
	a) Yes	1	25	3	23.1	3	23.1	
	b) No	3	75	10	76.9	10	76.9	
11	**Previous psychiatric treatment**							X^2=2.11 Df=2 p =0.347 NS
	a) Yes	0	0	2	15.4	4	30.8	
	b) No	4	100	11	84.6	9	69.2	
12	**History of other abuse or dependence**							**X^2=7.62 Df=2 p =0.045 *S**
	a) Yes	0	0	3	23.1	4	30.8	
	b) No	4	100	10	76.9	9	69.2	

-p < 0.05 significant, NS-Non significant

IV.   CONCLUSION:

A descriptive study to assess the risk factors of paranoia among adolescents with psychotic condition at SMVMCH, Puducherry. The findings of the study revealed that Out of 30 samples, 13 (43.3%) had Low level of risk factors, 13 (43.3%) had high level of risk factors, 4(13.4%) had Very low level of risk factors.

BIBLIOGRAPHY:

BOOK REFERENCE:
[1].   A guide to mental health and psychiatric nursing by R.sreevani, Jaypee brothers publications,4th edition, pg: 317-320,331-334
[2].   Essentials Of Mental Health Nursing 1st Edition By Sharma, pg: 321-325
[3].   Mental Health and Psychiatric Nursing (PB 2019), by k.lalitha ,pg: 432-435
[4].   A textbook of psychology for nursing, by Dr.S.K.mangal avichal publications, second edition, pg: 412-424

JOURNAL REFERENCE:
[5].   P.E. Bebbington, O. McBride, C. Steel, E. Kuipers, M. Radovanovič, T. Brugha, R. Jenkins, H.I. Meltzer, D. Freeman, The structure of paranoia in the general population Br J Psychiatry, 202 (2013), pp. 419-427, 10.1192/bjp.bp.112.119032
[6].   V. Bell, C. O'Driscoll, The network structure of paranoia in the general population Soc Psychiatr Psychiatr Epidemiol, 53 (2018), pp. 737-744, 10.1192/bjp.bp.112.119032
[7].   Janssen, I, Krabbendam, L, Bak, M, Hanssen, M, Vollebergh, W, De Graff, R, van Os, J. Childhood abuse as a risk factor for psychotic experiences. Acta Psychiatrica Scand 2004; 109: 38–45.
[8].   A. Elahi, G. Perez Algorta, F. Varese, J.C. McIntyre, R.P. Bentall, Do paranoid delusions exist on a continuum with subclinical paranoia? A multi-method taxometric study, Schizophr Res, 190 (2017), pp. 77-81, 10.1016/j.schres.2017.03.022

NET REFERENCE:
[9].   https://www.medindia.net/patientinfo/paranoia-references.htm
[10].   https://www.mind.org.uk/information-support/types-of-mental-health- problems/paranoia/about-paranoia
[11].   https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5793931/
[12].   https://www.mhanational.org/conditions/paranoia-and-delusional-disorders