ABSTRACT

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The available data from World Health Organization (WHO) claims about 10-20% of children

worldwide have mental health problems. The behaviour of the children depends on a variety of

bio psychosocial attributes. These bio psychosocial attributes contribute in various degrees to a

particular behaviour in a child. Because of this variability it is often difficult to define what is

the behaviour of children. Only a few studies were normal and what is not normal in

performed on behavioural and emotional problems in children in Sri Lanka and this

observational study to measure the prevalence of behavioural and emotional disorders in a

group of 8-10 year-old school children in the Kandy -Educational zone is the first in Kandy.

The main objective of the study was to estimate the prevalence of behaviour and emotional problems in internalizing and externalizing sub categories and in sum disorder (the overall internalising, externalising and other problems are taken into consideration) in the study population.

This descriptive study was carried out in the community at the primary section of the schools.

The questionnaire, Child behaviour Checklist (CBCL) was utilized for the screening of the

problems. CBCL is translated and validated to Sinhala by Dr H. Perera and others in 2007. (1).

It was administered in a group setting to the main caregiver of 167 subjects selected by simple

random sampling. The questionnaire identified problems in 8 subscales, which come under

two main internalizing, and externalizing sub categories. Data were analysed statistically

using The Syndrome Scales for Boys and Girls developed for analysing the questionnaire,

CBCL and then using the Statistical Package for Social Sciences (SPSS). The identified

problematic children were interviewed according to the Diagnostic and Statistical Manual of

Mental Disorders IV th version (DSM-IV) to see the pattern of individual disorders.

The study results indicated a prevalence of 7.8% of emotional and behavioural problems in total (sum disorder) in the study population. Internalising problems were seen in 15.6% of the children of the study population while Externalising disorders were observed in 6 % of the children studied. These findings are in keeping with the prevailing rates from previous studies. The study also indicates better managed schools are showing less internalising problems in children which is an association previously established. This study confirms the usefuness of the CBCL as a screening tool of childhood mental health problems and provides an idea about the extent of the problem in the study population. It highlights the need for development of child and adolescent mental health services and the importance of training health care personnel in using the CBCLS to detect problematic children in the community at a national level in Sri Lanka

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