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Mental health status among females aged 15 to 45 years in Medical Officer of Health area, Kayts

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Objective: To describe mental health status among females aged 15-45 years in Medical officer of Health area, Kayts.

Methodology: This was a descriptive cross-sectional study carried out in Kayts MOH Division during the period between October and November 2006. The study population consisted of 365 females of age 15- 45 years. Data collection was made using the GHQ-30 and a self-administered questionnaire, which included socio-economic data and exposure to adverse effects of war and social support received. Data analysis was done by applying chi-square test and multiple logistic regression.

Results: Of 365, 278 females had a GHQ-30 >5 giving a prevalence of poor mental health status of 76.4%. Of them 27(7.7%) experienced loss of a limb, 126(35.9%) complained loss of assets such as jewelry or furniture, 17(4.8%) experienced disappearance of family members or relatives, 94(26.8%) had partially and 84(23.9%) fully damaged houses. There were statistically significant association between poor mental health status and single marital status (OR:2.2; 95%CI:1.3-3.7; P=0.005), experience of displacement (OR:2.4; 95%CI: 1.1-5.2; P=0.03) and receiving of any form of assistances (OR:0.3; 95%CI: 0.2-0.6; P=0.001). There were no statistically significant associations between poor mental health status and age, religion, educational level, employment, income, experience of injury, loss of a family member and property or having partially or fully damaged houses.

After controlling for confounding effect by applying multiple logistic regression statistically significant associations were observed between poor mental health status and experience of displacement (OR:3.4; 95%CI: 1.4-8.2; P=0.006) and receiving any form of assistance (OR:0.3; 95%CI: 0.1-0.5; P=0.000). There was no statistically significant association between poor mental health status and single marital status (OR:1.7; 95% CI: 0.9-3.0; P=0.08).

Conclusion: Prevalence of poor mental health status was very high in the area. It was associated with experience of displacement and receiving assistance.