VALIDATION AND SENSITIVITY PICTORIAL PEDIATRIC SYMPTOM CHECKLIST

MASTER THESIS
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Introduction

Mental orders in children and adolescents, which are not treated, lead to more severe mental illnesses that are resistant to treatment in the later phases of life.

Introduction

Many benefits such as prevention of potential chronic problems in advance, improving the school success of children, and decreasing treatment costs through early diagnosis of psychosocial problems are valid for our country.
Introduction

There are numerous studies on psychosocial problems in childhood in the world, whereas such studies are limited in Turkey.
Purpose

It is aimed that a serious gap in our country in the related field will be filled through translation of this tool, which enables the recognition of children with problems in early periods.
Purpose

It brings about advantage in terms of reaching more children and obtaining reliable results since it is easy to be implemented, does not place an additional financial burden and it can be filled in a short time.
Materials and Methods

Type of Study

This study was carried out methodologically in order to adapt the Pictorial Paediatric Symptom Checklist improved by Leiner et al. (2007) to the Turkish society.
Population and Sampling

The population of the study consisted of 2613 parents, whose children were attending 2 state primary schools which are located in the Maltepe district of Istanbul province, which have a student population of over 1000 and which agreed to collaborate for the study.
Population and Sampling

- 838 people out of 2613 parents agreed to take part in the study.
- A total of 799 parents formed the sample of the study.
Materials and Methods

Criteria to be admitted to the study:
The parent assessments below were included in the content of the study:

✓ Those parents who have children aged between 6 and 16,
✓ Parents whose children have not been diagnosed with a psychosocial and behavioural problem,
✓ Parents whose children have not received treatment in this respect before.
✓ The survey papers on which there were 4 and more empty items were excluded from the study.
Data Collection

As the data collection tool,

1. Information Form consisting of 20 questions, (Independent Variable),

2. Pictorial Pediatric Symptom Checklist (PPSC) (Dependent Variable) were utilized.

- The data of the study were collected during the 2011-2012 school year by the researcher.
Scanning Tools

Information Form

The information form consists of 20 questions and it includes demographic features of children like age, gender and class as well as family features and assessments about the existence of a psychosocial disorder that has been diagnosed before.
Scanning Tools

Pictorial Pediatric Symptom Checkllist (PPSC)

✓ PPSC is used by parents for early diagnosis of psychosocial disorders in childhood (6-16 age) by assessing the behaviours of their children.

✓ The Checklist is a Likert type scale consisting of 35 questions.

✓ The expressions and pictures in the scale are marked by parents as “Incorrect/Never”, “Sometimes/Slightly Correct” or “Often Correct”.

Experienced in children's health go together in children. Assess parents are often the first one with their child's behaviour, emotions, or learning, you may help your children get the best care possible by answering these questions.
Scanning Tools

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Pictorial Pediatric Symptom Checklist (PPSC)

- The items marked are scored as 0, 1, and 2, respectively.
- Possible score rate consists of grades between 0 and 70.
- If the items 1-3 are not marked by the parents, the score is accepted as (0).
Scanning Tools

Pictorial Pediatric Symptom Checklist (PPSC)

- If 4 or more of the items are not marked, the survey is declared null.

- In Leiner et al. (2010), the cut off rate was given as 28 and higher for children in the 6-16 years of age group.
Preliminary Implementation

✓ A preliminary implementation was performed on 20 parents that were not included in the sampling.

✓ Pilot implementation lasted for about 3 weeks.

✓ Item 18 was revised in line with recommendations.
Assessment of Data

✓ The data of the study were assessed using the SPSS 20.0 program.

✓ Descriptive statistical analyses were used in the analysis of the data (frequency, percentage, mean, standard deviation),

✓ Student-t test was used to compare the means of variables with two subgroups,

✓ ANOVA test was used to compare the means of variables with more than two subgroups.
Assessment of Data

✓ p value was accepted as <0.05 for statistical significance.

✓ Internal consistency was assessed with Cronbach alpha.

✓ The factor structure of the scale was built through factor analysis technique.
Ethical Issues

- The first person to develop the Illustrated Psychosocial and Behavioural Problems Checklist was Dr. Marie A. Leiner. She is currently working as a professor of paediatrics in Health Sciences Centre, Texas Tech University.

- We contacted her on November 2011 via e-mail and the required written permission to use the scale was obtained through e-mail.
Findings

When the socio-demographic features of the parents are studied;

- Their mean age of them is 36.69+5.77.
- The average number of children they have is 2.47+1.16.
- 80% of the parents are female, and (n=636) and 95.2% (n= 757) are married.
- 64% (n=504) do not work.
- The income level of 78% (n=613) is medium.
Findings

When the socio-demographic features of the parents are studied;

✓ 69.8% of mothers (n=554) and 59.1% of fathers (n=472) are primary school graduates.

✓ 3.2% of the parents (n=25) and 1.3% of the spouses of parents (n=10) have psychosocial problems.

✓ 4.7% of the parents (n=22) and 1.5% of the spouses of parents (n=7) have been treated due to these problems.
Findings

When the distribution of socio-demographic features of the children is examined;

✓ Their mean age of them is 10.17± 2.24.

✓ 53% of the students consists of females (n=423) and 19.5% of them (n=155) are in the fifth grade.
Findings

When the Distribution of Item-Total Correlations of the PPSC and Internal Consistency is examined:

- All the items display a highly significant correlation (p<0.001).
- The lowest correlation value is 0.26 (Item 20) and the highest correlation value is 0.64 (Item 13).
- Total alpha was found to be 0.89.
Findings

When the distribution of parents’ responses to the PPSC items is examined;

 ✓ Item 9: The expression “Easily distracted” is the first with 20.7% (n=165),

 ✓ Item 34: The expression “Takes belongings that do not belong to him/her“ is the last with 0.8% (n= 6).
In this study the Cronbach Alpha was found 0.89. This result is equal to the results of Filipino adaptation attempt of the PPSC (0.89) .(Canceko-Llego et al. 2009).

"According to the analysis of equivalent halves, another value of reliability, the reliability level of one half of the scale (r=0.751) and that of the whole (r=0.858) was found satisfactory with respect to the recommended levels."
When the assessment of the PPSC in terms of gender is studied, it was observed that the scores obtained in the Turkish PPSC were similar to the results of two studies conducted by Leiner et al. in 2007 and 2010 in Mexican society.

In all three studies the scores of males were higher than those of females.
Discussion

In this study, Turkish PPSC scores were found to be significantly higher in children of parents:

✓ who are not married,

✓ who have a low level of income,

✓ who have any mental disorders,

✓ who thus have had medical treatment.

✓ It was stated in other studies in which the PPSC was used that the prevalence of psychosocial disorders was high among children from similar families. (Canceko-Lleko et al. 2009)
Discussion

- No difference was observed in the scores of the PPSC in terms of parents’ education levels.
- This finding was contrary to those of Jellinek et al. (1999).
Discussion

✔ When assessed according to cut off scores, it was determined in Turkish PPSC that 11 out of 100 children had serious psychosocial disorders.

✔ These rates are lower than the studies conducted by Canceko-Llego et al. (2009) in Filipino society, Leiner et al. (2010) in Mexican society, and by Canceko-Llego et al. (2009) in Filipino society, though they are close to their results.
Discussion

To summarize the results of this study;

The study shows that

✓ to have a male child,

✓ to be a single parent,

✓ to have low income,

✓ to have parents with mental disorders are significantly related to positive and negative results of the PPSC.
Discussion

Moreover;

☑ The Turkish PPSC is a reliable and valid tool to examine psychosocial and behavioural problems among children aged 6-16 living in urban societies with low income levels.
Discussion

- It can be implemented by trained health workers and it is a scale that can be used particularly in social areas.

- There is need for further studies to verify the suitability of the four-factor structure that emerges during the validity process of Turkish PPSC.


