

Caregiver and youth self-reported emotional and behavioural problems in Ugandan HIV-infected children and adolescents



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Introduction: We determined the prevalence of, and factors associated with, self-rated emotional and behavioural problems (EBPs) and assessed the agreement between self-rated and caregiver-rated EBPs in the 'Mental health among HIV-infected Children and Adolescents (CA-HIV) in Kampala and Masaka, Uganda' (CHAKA) study. Existing literature demonstrates that CA-HIV face increased mental health challenges related to a broad range of biological and psychosocial factors. There is scarce data on self-reported EBPs in CA-HIV.

Methods: In a cross-sectional sample, caregiver-reported EBPs were assessed with the Child and Adolescent Symptom Inventory-5 (CASI-5), and self-reported problems were evaluated with the Youth Inventory-4 (YI-4) in 469 adolescents aged 12–17 years and the Child Inventory-4 (CI-4) in 493 children aged 8–11 years. Logistic regression models were utilised to determine factors related to self-reported EBPs.

Results: Self-reported emotional problems (EPs) were present in 28.8% of the adolescents and were associated with caregivers being separated and having a lower level of education. Among adolescents, 14.5% had self-reported behavioural problems (BPs), and these were associated with caregiver unemployment and food insecurity. Self-reported EPs were reported by 36.9% of children and were associated with rural study sites, having missed school and caregivers having a lower level of education. There was only modest agreement (maximum $r = 0.29$) between caregiver- and CA-HIV-reported EBPs, with caregivers reporting more EPs and adolescents reporting more BPs.

Conclusion: Self-reported EBPs are frequently endorsed by CA-HIV, and these problems are related to unique psychosocial factors. Including CA-HIV, self-report measures can assist in identifying problems that caregivers may not be aware of, particularly BPs.

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