General and Mental Health of Poor and Multiproblem Families

Introduction

The main feature of the so called multiproblem families is the persistence along time of a set of problems in various areas of the individual's functioning in several family members (Alarcão, 2000; Sousa, 2005).

One of these problematic areas or risk domains (Pakman, 2007) is physical and mental health. The coexistence and persistence of many health problems in different individuals of the same families is quite frequent in multiproblem families, compromising their functioning.

Similarly, the relation between poverty and poor health is well established (Barger, 2010). Particularly, persistent poverty is associated with health problems, hindering people's ability to cope with everyday life.

Objectives

This research study aims:

- a) To identify and characterise the major health problems faced by the members of these families;
- b) To explore the perceived relevance of these problems;
- To explore the perceived effectiveness of health care interventions received by respondents;
- d) To explore the level of control perceived over these problems.

Methods

43 families, recipients of financial aid from the Portuguese State, living in Oporto, were interviewed according to the protocol proposed by Pakman (2005) for multiproblem families.

Results

Chronic diseases, both general and mental, are pervasive in this group. 61.1% of the participants were diagnosed with some kind of physical disease, among which 27.8% combined more than 3 different problems. Respiratory problems affected 11.1% of these participants. 50% had relatives (children and/or spouses) affected by some type of health problem. In children, learning difficulties, hyperactivity and other unidentified problems were prevalent. With regard to mental problems, depression affected 33.3% of the participants. Even if some cases of unemployment were due to their health

problems, these participants don't value them as critical factors for their current financial situation. Children's psychological problems are hardly understood by their parents. Overall satisfaction with the health care they receive; the family doctor is mentioned as a significant figure of their support networks.

KEYWORDS: Multiproblem families; high risk families; poor families; general health; mental health