INTRODUCTION:
Having children with congenital anomalies, particularly congenital talipes equinovarus (CTEV) may impact the psychological wellbeing of the parents. Hence, this study is aim to assess the psychological impact of CTEV, the related factors, and the coping strategies used by the parents in Hospital Tengku Ampuan Afzan (HTAA), Kuantan, Malaysia.

METHODS:
A cross-sectional study involving 43 parents with CTEV child was conducted from 18 July till 27 August 2016. Self-administered Malay version of Depression Anxiety and Stress Scale 21 items (DASS-21)¹ is used to measure the psychological wellbeing of the parents and the Malay version of Brief COPE is used to measure coping strategies. Data were analysed using frequencies, percentages and Chi-square $\chi^2$ test.

RESULTS:
There were 43 respondents, majority were Malay (90.7%), female (86%), and married (97.7%). Average age were 30.3 years old. 70% of the respondents were having a positional CTEV child and 30% have structural CTEV. Overall, prevalence of depression, anxiety, and stress among parents were very low. Only 9.3% experience depression, 11.6% experience anxiety, and only 2.3% was reported to be stress. The psychological wellbeing of the parents was not related with the parental age, gender, marital status, education level, and monthly income. The most common coping strategy used is religion, acceptance and positive reinterpretation.

DISCUSSIONS:
To our knowledge, this is the first to describe the relationship between depression, anxiety, and stress among parents with positional CTEV child in Malaysia. We found out that the prevalence of depression, anxiety, and stress among parents with CTEV child were way below compared to studies done in Pakistan, South Africa and the United Kingdom. It could be due to huge cultural, religion, and socio-economic differences between Malaysia and the above countries. We practice collectivist culture; hence they tend to adopt authoritative parenting.² We also observed that emotion focused coping mechanism particularly religion tops the coping mechanism employed followed by problem focused and dysfunctional focused.

CONCLUSION:
Only a few parents with structural and positional CTEV reported symptoms of depression, anxiety, and stress and most of them use positive coping strategies such as religion, problem focused and dysfunctional focused.

REFERENCES: