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FAMILY ENVIRONMENT, PARENTING AND CHILD MENTAL HEALTH IN DISPLACED COMMUNITIES (INTERNALLY DISPLACED PERSONS) OF MANIPUR

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ABSTRACT

Internal displacement occur due to conflict has profound consequences on family structures and child mental health. In Manipur, the ethnic violence that erupted from 3rd May 2023 displaced over 60,000 individuals, including more than 12,694 children, forcing families into overcrowded relief camps under uncertain and stressful conditions. This study examines the relationship between family environment, parenting practices, and child mental health among internally displaced populations (IDPs) in Manipur. The paper adopts a qualitative and analytical approach, drawing upon existing literature, recent empirical studies, and secondary data. Findings suggest that displacement significantly disrupts family functioning, increases parental stress, and weakens caregiving capacities. A recent study conducted in Manipur relief camps found that 65.8% of displaced individuals exhibited symptoms of post-traumatic stress disorder (PTSD), while a considerable proportion also experienced anxiety and emotional distress. These psychological burdens directly influence parenting behaviours, often leading to reduced emotional support, inconsistent caregiving, and increased harsh discipline. Children in displaced communities are particularly vulnerable to mental health issues such as anxiety, depression, trauma, and behavioural problems. However, supportive family environments, positive parenting practices, and access to education and psychosocial support services act as protective factors that enhance resilience and recovery. The study concludes that strengthening family systems, promoting positive parenting, and integrating mental health services into educational and community frameworks are essential for improving child well-being in displacement settings. The findings highlight the urgent need for targeted interventions and policy measures in Manipur to address the psychosocial needs of displaced families and children.

Keywords: Internal displacement, family environment, parenting, child mental health, Manipur

INTRODUCTION

Manipur, a state in northeastern India covering about 22,327 square kilometres, along the India-Myanmar border and has a population of around 2.8 million comprising diverse ethnic groups such as the Meitei, Naga, Kuki

communities, Nepali, Bengali, Marwari, Bihari and other Communities, reflecting significant geographical and socio-cultural diversity.

The internal displacement crisis in Manipur emerged following the outbreak of ethnic conflict between the Meetei/Meitei and Kuki-Zo Communities started from 3rd May 2023, which resulted deaths of 258, over 60,000 individuals. This conflict has been displaced more than 12,694 children in widespread violence and the breakdown of social harmony between communities which is continuing till today.

This forced displacement has profoundly affected family systems, which are the primary source of emotional security and psychological development for children. The breakdown of normal living conditions has resulted in widespread disruption of family stability, economic insecurity, and the erosion of social support networks. As a result, families are exposed to continuous and cumulative stress, which further weakens their capacity to provide adequate care and emotional support to children.

Within this context, the family plays a crucial and central role in shaping children fs emotional well-being and psychological resilience. However, in displacement settings, the ability of families to function effectively is often compromised. Factors such as financial hardship, overcrowded living conditions, parental psychological distress, and lack of privacy contribute to strained family relationships and weakened caregiving capacities. These disruptions directly influence parenting practices, often resulting in reduced emotional availability, inconsistent discipline, and diminished responsiveness to children fs needs.

Children living in such conditions are particularly vulnerable to multiple forms of adversity, including exposure to violence, loss of home and security, disruption of education, separation from extended family members, and persistent uncertainty about the future. These stressors collectively contribute to heightened emotional distress and significantly increase the risk of developing mental health problems such as anxiety, depression, and post-traumatic stress disorder (PTSD) 65.8% of displaced individuals in the State. The absence of stable routines and safe environments further intensifies psychological vulnerability during critical developmental stages.

CONTEXT OF INTERNAL DISPLACEMENT IN MANIPUR

The internal displacement crisis in Manipur emerged following the outbreak of ethnic conflict in May 2023, which resulted in widespread violence and the breakdown of social harmony between communities. This conflict led to large-scale forced migration, with thousands of families abandoning their homes to seek safety in relief camps and temporary shelters across different districts of the state. The displacement has not only created a humanitarian crisis but has also deeply disrupted the socio-economic and psychological stability of affected populations.

Displaced families are currently residing in overcrowded relief camps that are characterized by inadequate infrastructure, limited sanitation facilities, and insufficient access to necessities such as healthcare, nutrition, and clean drinking water. The lack of privacy and space within these camps further intensifies stress levels among families, making it difficult to maintain normal family functioning and emotional well-being.

Children constitute one of the most vulnerable groups in these displacement settings. Their daily lives have been significantly disrupted, particularly in terms of education, social interaction, and emotional security. Many children have experienced prolonged interruptions in schooling due to the closure of educational institutions or their conversion into relief shelters. This disruption not only affects academic progress but also removes a critical source of routine, structure, and psychosocial support.

In addition to educational disruption, children in relief camps are often exposed to indirect forms of violence, distressing narratives, and heightened community tensions. The absence of safe and child-friendly spaces further limits opportunities for play, learning, and emotional expression. These environmental conditions contribute to a heightened

sense of fear, insecurity, and uncertainty among children.

FAMILY ENVIRONMENT IN DISPLACED COMMUNITIES

The family environment plays a foundational role in shaping children fs emotional, social, and psychological development. In displacement settings such as the conflict-affected regions of Manipur, the family environment is often significantly disrupted due to violence, loss, and instability. These changes create both risks and, in some cases, opportunities for resilience among children. They are:

a. Disruption of Family Structure

Displacement frequently leads to separation of family members due to migration, death, or safety concerns. Many households become single-parent families or are headed by extended relatives. This disruption weakens traditional caregiving systems and reduces emotional and social support for children.

b. Economic Hardship and Poverty

Loss of livelihood and income sources is a major consequence of displacement. Families struggle to meet basic needs such as food, shelter, and healthcare. Financial stress contributes to tension within the household and limits parents f ability to provide a supportive environment.

c. Overcrowded and Inadequate Living Conditions

Families in relief camps often live in congested spaces with limited privacy and poor sanitation. Overcrowding increases stress, conflicts, and exposure to unsafe conditions, negatively affecting both parents and children.

d. Breakdown of Social Support Systems

Displacement disrupts extended family networks, community ties, and cultural support systems. The absence of these social structures reduces emotional and practical support for families, increasing isolation and vulnerability.

e. Changes in Family Roles and Responsibilities

Displacement often alters traditional roles within the family. Parents may lose their role as providers, while children may be forced to take on adult responsibilities. These role shifts can create confusion, stress, and role strain within the household.

PARENTING IN DISPLACEMENT SETTINGS

Parenting in displacement settings, such as relief camps in conflict-affected regions like Manipur, is profoundly shaped by stress, instability, and loss of resources. These conditions significantly influence caregiving practices and parent-child relationships. These are some changes and in parenting:

a. Increased Parental Stress and Psychological Distress

Displacement exposes parents to trauma, financial hardship, and uncertainty about the future. This chronic stress often leads to anxiety, depression, and emotional exhaustion, reducing their capacity to provide consistent and supportive care.

b. Parenting Capacity and Caregiving Quality

The overall family environment influences parenting capacity. High stress, trauma, and lack of resources can reduce parents f ability to provide consistent, nurturing, and responsive care, affecting children fs emotional security.

c. Economic Hardship and Its Impact on Parenting

Loss of livelihood and financial instability limit parents f ability to meet basic needs such as food, education, and healthcare. Economic strain increases family tension and reduces the quality of caregiving.

d. Disruption of Parent-Child Attachment

Frequent displacement, separation, or loss can disrupt secure attachment relationships. Children who lack stable attachment figures are more vulnerable to emotional and behavioural difficulties.

e. Reduced Parental Monitoring and Supervision

Due to competing survival demands, parents may have less time and energy to supervise their children. This can expose children to unsafe environments and negative influences.

MENTAL HEALTH OUTCOMES AMONG DISPLACED CHILDREN

Children in displacement settings such as conflict-affected areas of Manipur face multiple psychological risks due to trauma, instability, and disruption of normal developmental environments. The following are mental health outcomes observed among displaced children:

a. Post-Traumatic Stress Disorder (PTSD)

Displaced children are highly vulnerable to PTSD due to exposure to violence, loss, and fear. Symptoms include intrusive memories, nightmares, hypervigilance, and avoidance of reminders of traumatic events. Without intervention, PTSD can severely impair emotional and cognitive development.

b. Anxiety Disorders

Chronic uncertainty, insecurity, and fear of further violence contribute to high levels of anxiety. Children may exhibit excessive worry, restlessness, sleep disturbances, and difficulty concentrating, affecting their daily functioning and academic performance.

c. Depression

Feelings of sadness, hopelessness, and loss are common among displaced children. Depression may manifest through withdrawal, lack of interest in activities, low energy, and negative self-perception. Prolonged displacement increases the risk of severe depressive disorders.

d. Academic Difficulties

Disrupted schooling and psychological distress contribute to poor concentration, memory problems, and reduced academic performance. Learning gaps can have long-term consequences for future opportunities.

e. Risk of Long-Term Psychological Disorders

If not addressed, early exposure to trauma and chronic stress can lead to long-term mental health conditions in adolescence and adulthood, including chronic anxiety, depression, and personality-related difficulties.

RELATIONSHIP BETWEEN FAMILY ENVIRONMENT, PARENTING, AND CHILD MENTAL HEALTH

The relationship between family environment, parenting practices, and child mental health is central to understanding the well-being of children in displacement settings due to heightened stress, instability and exposure to trauma.

The interaction can be understood through the following process:

Displacement Family Stress Changes in Parenting Child Mental Health Outcomes.

Displacement acts as a primary stressor that disrupts family functioning, which in turn alters parenting behaviours and ultimately influences children fs psychological well-being. Some points showing relationship between them are:

a. Impact of Displacement on Family Environment

Displacement leads to economic hardship, loss of housing, disruption of social networks, and exposure to unsafe conditions. These factors create a stressful and unstable family environment characterized by insecurity, overcrowding, and limited resources, which negatively affect family functioning.

b. Family Stress and Emotional Climate

High levels of stress within families often result in a negative emotional climate. Frequent conflicts, tension, and reduced emotional warmth can create an environment that is not conducive to healthy child development.

c. Changes in Parenting Practices

Parental stress and trauma significantly influence parenting behaviours. Common changes include:

i. Increased irritability and harsh discipline
ii. Reduced emotional responsiveness
iii. Inconsistent caregiving

These shifts weaken the quality of parent- child interactions.

d. Intergenerational Transmission of Trauma

Parents who experiencing anxiety, depression, or trauma may unintentionally transmit stress and fear to their children through emotional reactions,

communication patterns (i.e., verbal and non-verbal) and coping behaviours leading to emotional distress in children.

e. Theoretical Perspectives

This relationship is supported by main psychological theories:

i. **Family Stress Model (Conger et al., 1994 & 2000):** Economic and environmental stress affects parenting, which in turn impacts child outcomes includes environment & social stress like conflict/displacement.

ii. **Attachment Theory (Bowlby, 1969):** Secure parent.child relationships are essential for emotional stability.

iii. **Ecological Systems Theory (Bronfenbrenner, 1979):** Child development is influenced by multiple environmental systems, with family being central.

ROLE OF EDUCATION AND PSYCHOSOCIAL SUPPORT

In Manipur, where internal displacement has disrupted normal family life, schooling, and community systems, these interventions serve as both protective and rehabilitative mechanisms. Some roles of education and psychosocial support:

a. Provides Routine and Stability

Education restores a sense of daily structure and predictability, which is crucial for children exposed to chaotic and unstable environments. Regular school routines help reduce anxiety, create a sense of normalcy, and restore emotional balance in displaced children.

b. Supports Emotional Expression

Psychosocial interventions such as counselling, art activities, storytelling, and play therapy provide children with safe opportunities to express emotions such as fear, grief, and anger. This emotional expression is vital for trauma processing and psychological healing.

c. Identifies Mental Health Issues Early

Teachers and trained psychosocial workers play a key role in early identification of emotional and behavioural problems. Early detection of distress symptoms allows timely intervention, preventing the development of severe mental health disorders.

d. Builds Resilience

Both education and psychosocial support contribute to building resilience, enabling children to adapt positively despite adversity. By developing coping strategies and problem-solving skills, children become better equipped to manage stress and uncertainty.

e. Supports Cognitive Development

Continued access to education ensures that children maintain academic progress and intellectual development. It prevents learning loss and supports cognitive growth, which is essential for long-term life opportunities.

CHALLENGES

Addressing the mental health and psychosocial needs of children in internally displaced communities in Manipur is highly complex due to a combination of structural, social, and institutional barriers. These challenges significantly limit the effectiveness of interventions aimed at improving family functioning, parenting practices, and child mental health outcomes. They are as follows:

a. Lack of Mental Health Services

One of the most critical challenges is the severe shortage of mental health infrastructure and services in displacement settings. Relief camps and affected areas often lack access to psychologists, counsellors, and psychiatric care. Even when services exist, they are frequently limited in reach, inconsistent in delivery, and not tailored to the specific needs of children and families experiencing trauma.

b. Poverty and Unemployment

Displacement often leads to the loss of livelihoods, resulting in widespread poverty and economic insecurity among affected families. This financial instability increases parental stress and reduces the ability of families to meet basic needs such as nutrition, healthcare, and education. Economic hardship also negatively affects parenting quality and increases the risk of emotional neglect and family conflict.

c. Disrupted Education

The disruption of education is a major challenge affecting displaced children. Many schools are either inaccessible or repurposed as shelters, leading to prolonged learning interruptions. This not only affects academic performance but also removes a critical source of structure, routine, and psychosocial support for children.

d. Social Stigma and Lack of Awareness

Mental health issues are often associated with social stigma and misunderstanding, which prevents families from seeking help. Lack of awareness about psychological distress leads to underreporting of symptoms and delays in intervention. Cultural beliefs may also discourage open discussion about emotional problems, further limiting access to care.

e. Limited Trained Professionals

There is a significant shortage of trained mental health professionals, social workers, and child psychologists, particularly in rural and displacement-affected areas. This lack of human resources severely limits the capacity to provide timely and effective psychosocial interventions for children and families in need.

RECOMMENDATIONS

Considering the significant challenges faced by internally displaced populations in Manipur, particularly children and families, a comprehensive and multi-sectoral response is essential. The following recommendations aim to strengthen family environments, improve parenting practices, and promote positive child mental health outcomes in displacement settings. They are:

a. Expand Mental Health Services

There is an urgent need to strengthen and expand Mental Health and Psychosocial Support (MHPSS) services in displacement-affected areas. This includes deploying trained psychologists, counsellors, and social workers in relief camps, as well as establishing mobile mental health units to reach remote populations. Services should be culturally sensitive, child-friendly, and accessible.

b. Establish Temporary Schools

To ensure continuity of education, temporary learning centres should be established within or near relief camps. These schools should provide structured learning environments, trained teachers, and basic educational resources, helping children maintain academic progress and emotional stability.

c. Improve Living Conditions

Living conditions in relief camps must be improved by ensuring adequate shelter, sanitation, privacy, and access to clean water and healthcare. Improved physical environments directly contribute to reduced stress and better mental well-being for both parents and children.

d. Promote Livelihood Opportunities

Economic insecurity is a major source of stress in displaced families. Therefore, skill development programs, financial assistance schemes, and livelihood opportunities should be introduced to restore economic stability and reduce parental stress, thereby improving family functioning.

e. Ensure Policy Implementation

Existing policies related to child protection, mental health, and disaster response must be effectively implemented at the ground level. Monitoring and accountability mechanisms should be strengthened to ensure that services reach the intended beneficiaries.

CONCLUSION

This study highlights the critical role of family environment and parenting practices in shaping the mental health and overall well-being of children living in internally displaced communities. In contexts of forced displacement, such as the ongoing humanitarian situation in Manipur, the breakdown of normal family structures, loss of livelihoods, and exposure to chronic stress have significantly altered caregiving patterns and increased psychological vulnerability among children.

The findings suggest that conflict-induced displacement has severely disrupted family systems, weakening emotional bonds, reducing parental availability, and increasing levels of stress within

households. These disruptions have contributed to a rise in mental health challenges among children, including anxiety, depression, emotional instability, and trauma-related symptoms. The absence of stable routines, safe environments, and consistent caregiving further intensifies these risks during critical stages of child development.

However, the study also emphasizes that negative outcomes are not inevitable. Strong family bonds, supportive and responsive parenting, and access to education and psychosocial support services can serve as powerful protective factors. These elements help to restore a sense of stability, security, and normalcy in the lives of displaced children, enabling them to cope more effectively with adversity and develop resilience.

Furthermore, the integration of mental health support within educational settings, along with community-based interventions, can significantly enhance recovery and well-being. Strengthening parenting capacities through targeted support programs and improving living conditions in displacement settings are also essential strategies for mitigating psychological distress.

In conclusion, addressing the mental health needs of displaced children in Manipur requires a holistic and multi-dimensional approach that focuses on strengthening family systems, improving parenting practices, and ensuring access to education and psychosocial care. Such integrated efforts are crucial not only for immediate psychological relief but also for promoting long-term resilience, development, and well- being among affected children.

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