# A STUDY TO ASSESS THE EFFECTIVENESS OF COUNSELING ON DEPRESSION PATIENTS IN SELECTED PSYCHIATRIC REHABILITATION CENTRE AT ERODE, TAMILNADU, INDIA

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# **ABSTRACT**

Depression is a common illness worldwide, with more than 300 million people affected. Depression is different from usual mood fluctuations. It is at its worst at school and in the family. At its worst, depression can lead to suicide, close to 80,000 people die due to suicide every year (WHO - 22 March 2018). Depression is one of the leading causes of disability across the world. The world health organization 2006 estimates that depression will rank second only to heart disease by 2020 in terms of global disability. An estimated 3-4% of India's 100 crore plus population suffer from major mental disorders and bout 7-10% of the population suffers from minor depressive disorders (Sinha 2011).

Key word: Depression, counseling on depression patients, psychiatric rehabilitation centre.

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#### INTRODUCTION

Depression is a syndrome consisting of low mood and/ or loss of interest in usual activities, accompanied by psychomotor and cognitive manifestations, and representing deterioration from the individual's usual level of functioning. Historically, it is an illness called melancholia.

Depression continues to be a major health issue for older adults. It affects about 20% of adults, aged 65 and older, and regular depression can lead to higher risks of heart disease and death from illnesses. It also affects people's daily lives by making them more socially isolated and affecting cognitive function, especially memory. In fact, a study of 1,111 people (average age 71), published online on May 9, 2018, by *Neurology*, found that those who had greater symptoms of depression also had worse episodic memory, which is the ability to recall specific experiences and events.

There are many ways to treat depression. Antidepressants and psychotherapy are the usual first-line treatments, but ongoing research has suggested that regular counselling can help by changing how the brain responds to stress and anxiety in depression.

## **NEED FOR STUDY**

Depressive disorders are considered a serious public health problem, causing high levels of disability, impairment in quality of life, and decreased life expectancy. Moreover, depression is associated with enhanced healthcare visits, work absenteeism, decreased performances at work with elevated direct and indirect health costs. Epidemiological studies indicate that Depressive Disorders have a high prevalence in primary care, ranging from 2.6% to as high as 29.5%. Therefore, the role of general practice is central to organising care and research for mood disorders. In recent decades, a system of co-operation between general practice and secondary medical services has been established.

The length and severity of the symptoms and episodes of depression often determine the type of therapy. If you have been depressed for a length of time and the symptoms are severe, working with a psychiatrist or psychologist may be necessary since they deal more with issues from the past that may be deeply-rooted in your present feelings. But if the symptoms of depression are more recent or not as severe, working with a therapist in a counselling relationship may be the way to go.

During counselling, the therapist will use "talk therapy" to help you understand and work through the issues that are impacting your life in negative ways. Their role is to listen, provide feedback, and work with you to develop strategies to cope. They will also evaluate your progress and adjust the sessions accordingly. You may be asked to do homework that extends the learning from the counselling sessions. Often, this is in the form of tracking moods and feelings. Counselling for depression focusses more on present thoughts, feelings, and behaviours and how these things are affecting your life currently.

Counselling can help to change negative thinking that may be making the symptoms of depression worse. The focus is goal-oriented, with the patient, taking an active role. Since Counselling is generally considered short-term therapy, it is often a top choice for therapists when working with mild to moderate cases of depression that may not need long-term, in-depth psychotherapy. Evidence suggests that counselling works well in patients suffering from depression. It is also proven to reduce relapse or recurrence rates of depression once counselling has ceased.

The Counselling is another brief or short-term method used for depression patients that focusses on interpersonal conflict and poor social support, which can lead to feelings of depression. Counselling can help to communicate better and address issues that make the symptoms of depression worse. Evidence suggests that counselling is effective in acute treatment of depression, and it may help prevent new depressive disorders.

This Research aims to evaluate the effectiveness of an integrated intervention behavioural counselling on depressive patients. The aim of this study is to evaluate the efficacy and feasibility of an adjunctive counselling approach for patients with depression who have no ready access to secondary care or specialised psychotherapy. The subjective perception of quality of life is a construct that is very relevant to measures of outcomes in chronic disease,

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particularly in patients with diseases that impact heavily the daily life of the affected patients and their families such as depressive disorders.

#### STATEMENT OF THE PROBLEM

A Study to Assess the Effectiveness of Counselling on Depression Patients in selected Rehabilitation Centre at Erode, Tamilnadu in India

# **OBJECTIVES**

- 1) To assess the pre-test and post-test levels of patients with depression
- 2) To find out the effectiveness of counselling on patients with depression
- 3) To find out the association between pre-test levels of Depression among Patients and their demographic Variables

#### RESEARCH METHODOLOGY

Quantitative Research approach was used in this study. **Research design:** One Group Pre-test—Post-test design

Variables -

Independent Variable: Counselling

Dependent Variable: Depression

Setting of the Study: The study was to be conducted in a selected psychiatric rehabilitation centre.

Sample: 30 Samples were selected for this study

Sampling Technique: Non Probability - Purposive Sampling Technique was used for this Study.

Tool: Standardised Hamilton depression Scale

## **MAJOR FINDINGS**

Table - 1:- Mean and Standard deviation regarding depression

N = 30

Mean	Standard deviation	't' value
1.96	4.4	2.41

**Table – 1** reveals that mean score and standard deviation among depression patients was 1.96 and 4.4 respectively, and 't' value 2.41 shows significant effectiveness of counselling on depression patients. In this Study pre-test level of percentage of Depression showed - 4 Patients (13%) were in severe depression, 20 Patients (67%) were in moderate depression and 6 Patients (20%) were in Mild Depression. In Post-test level of Percentage of Depression 4 Patients (13%) were in severe depression, 14 Patients (47%) were in moderate depression and 12 Patients (40%) were in mild depression. There was an effectiveness of counselling on depressed patients since depression was reduced from Moderate to Mild depression. There is no association between pre-test score of depression when compared to age, sex, and marital status, types of family, monthly income, educational qualification, and religion except residual.

# **CONCLUSION**

This study assessed the effectiveness of counselling on Depression patients. The study findings revealed that there was a significant effectiveness of counselling on depressed patients. On the basis of the study, the researcher concluded that application of counselling has a significant effect on depression. Counselling is an effective, easy to apply and potentially risk free intervention.

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