

“Effectiveness of REBT on the level of depression among depressed patients.”

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Abstract

The aim of the study was to assess the effectiveness of REBT on the level of depression among depressed patients in selected rehabilitation centres. The final study include samples of 60 depressed patients. On the Purposive basis the sample are selected. In this study Beck’s Depression Inventory scale was used. The experimental group samples received 20 sessions of REBT intervention. Pre test and post test was done on experiment group. In the conclusion the result shows that there is reduce in the level of depression after the intervention of REBT therapy.

Material & Method:

An experimental study was conducted on 60 depressed patients admitted in selected rehabilitation centres. The samples were selected through non probability purposive sampling techniques. In this study Beck’s Depression Inventory scale was used which consist of 21 multiple choice self report inventory questionnaire.

Result: Out of 60 Samples in Pre interventional majority 80% samples were in the moderate level, 13.4% in the borderline level and 3.3% in the mild level of depression whereas in the post interventional majority 80% are in the mild level of depression, 13.4% in moderate and 3.3% in borderline and severe level of depression

Conclusion: REBT therapy was found to be highly effective in decreasing the level of depression among depression patients. This has been proof statistically as the calculated value is less than 0.05 level of significant.

Keywords: Depression, Depressed Patient and REBT

Introduction

REBT was founded by Albert Ellis in the year 1955. It was constructed on the concept that our emotion and behaviour stem from our cognitive process and our belief systems. Ellis claimed that as a human, we are biologically predisposed to think irrationally. Our thoughts, feelings and behaviour are the

interdependent psychological process. REBT helps clients to think more rationally about themselves, other people and the world. Therapy and therapist helps us to solve emotional riddles of our life.

Depression: The main characteristic of depression is loss of interest in pleasurable activities, low mood level and self esteem monotonous thoughts, decreased the level of daily activities. The high-risk level of suicidal thought patterns in most of the depressive person. According to WHO in India, depression is major pervasive, uncontrolled psychological disorder which need to be more focus by the psychiatric doctors, Counsellor, and Psychosocial worker to undertake this problem. REBT is a practical and action-oriented approach for dealing with emotional, cognitive and behavioural problems and improving psychological wellbeing and personal growth.

Material and method:

An experimental study was conducted on 60 depressed patients ; which were selected through non probability purposive sampling technique. The tool consisted of demographic variables such as age, gender, marital status, education, occupation, family income, Supporting system and duration of illness. Beck's Depression Inventory 21 multiple choices to assess the level of depression among depressed patients from selected rehabilitation centres.and REBT therapy was given for 20 sessions. Scoring-1-10 Normal,11-16 Mild mood disturbance,17-20 Borderline clinical depression,21-30 Moderate depression,31-40 Severs depression, Over 40 Extreme depression

Result and discussion :

In this study 60 depressed patients were selected for the data collection from selected rehabilitation centres.

Analysis related to Demographic variables of the depressed samples in terms of frequency and percentages.

Table no 1. Frequency Distributions of participants as per Demographic variables .
N=60

Sl.no	Demographic variable	Experimental group	
		Freq	%
1.1	Age		
	20 to 30 years	15	25%
	31 to 40 years	29	48.3%
	41 to 50 years	10	16.7%
	50 years and above	6	10%
1.2	Gender		
	Male	21	35%
	Female	39	65%
1.3	Marital status		
	Married	46	76.7%
	Single	12	20%

Sl.no	Demographic variable	Experimental group	
		Freq	%
	Divorced	2	3.3%
1.4	Education		
	Primary	8	13.3%
	Secondary	18	30%
	Graduation	25	41.7%
	Post-graduation	9	15%
1.5	Occupation		
	Services	26	43.3%
	Business	19	31.7%
	Unemployed	15	25%
1.6	Family income		
	Rs.5000-10000	1	1.7%
	Rs10,001-15000	1	1.7 %
	Rs 15001 -20000	24	40%
	Rs 20001 and above	34	56.6%
1.7	Supporting systems		
	Family	50	83.3%
	Friends	2	3.3%
	Relatives	8	13.3%
1.8	Duration of illness		
	1 to 2years	6	10%
	2 to 3 years	18	30%
	3 to 4 years	30	50%
	4 years and above	6	10%

Table no 2: Analysis of level of depression among depressed patients.

Depression	Frequency	%
Normal	0	0.0%
Mild(score 11-16)	2	3.3%
Borderline(score 17-20)	12	20%
Moderate(score 21-30)	43	71.6%
Sever(score 31-40)	3	5%
Extreme(score above 40)	0	0.0%

Table no 2. shows that majority 71.6% are in the moderate level of depression (score 21-30), 20% are in the borderline (score 17 -20), 3.3 % in the mild level (score 11-16) where as 5% are in the severe level of depression.

Table 3.Pre and Post Interventional level of depression among depressed patient in xperimental group.

EXPERIMENTAL GROUP				
SCORE	Pre interventional		Post interventional	
	Freq	%	Freq	%
Normal (score 0-10)	0	0.0%	0	0.0%
Mild (score 11-16)	2	3.3%	48	80 %
Borderline (score 17-20)	8	13.4%	2	3.3 %
Moderate((score 21-30)	48	80.0%	8	13.4%
Severe (score 31-40)	2	3.3%	2	3.3%
Extreme (Score above 40)	0	0.0%	0	0.0%

Two sample Z-test for the effect of REBT on the level of depression among depressed patients.

Group	Mean	SD	Z	df	P value
Experimental Group	12.1	4.0	19.4	118	0.000

Discussion and Conclusion

The purpose of the present study is to assess the Effectiveness of REBT on the level of depression among depressed patients in selected rehabilitation centres . Review of literature enhanced the investigator to collect the proof to support the study.

Target population: All depressed patients. Accessible population are patients with depression from selected rehabilitation centers of Pune city. Sampling technique are Non-probability Purposive sampling. Inclusion criteria are Patients with depression, Patients who can read understand English. Exclusion Criteria are Patients who are critically ill and mentally retarded sample size of 60 depressed patients. Content Validity of questionnaires was validated by a panel of 23 experts from Psychiatrist and nursing field, who had expertise in developing such instruments. The tool was tested for the reliability The pilot study was conducted on 06 patients.. The researcher concludes from the pilot study

that the study design was feasible and did not reveal any major problem. It gave a better insight to the researcher.

The results of the research were discussed and the following conclusion was drawn from the study findings. Study analysis shows that in Pre interventional majority 80% samples were in the moderate level, 13.4% in the borderline level and 3.3% in the mild level of depression whereas in the post interventional majority 80% are in the mild level of depression, 13.4% in moderate and 3.3% in borderline and severe level of depression. To assess the effectiveness of REBT on the level of depression Z test was used. Since the calculated value is 0.000 which is less than 0.05 level of significance, hence null hypothesis is rejected that shows that REBT is effective in reducing the level of depression among depressed patients.

BIBLIOGRAPHY

1. National Institute of Mental Health. Index @ Www.Nimh.Nih.Gov [Internet]. 2018. Available from: <http://www.nimh.nih.gov/health/topics/anxiety-disorders/index.shtml#part4>
2. Gururaj G, Varghese M, Benegal V, Rao GN, Pathak K, Singh LK et al. National Mental Health Survey of India, 2015-16: Summary. NIMHANS Publ. 2016;1-62.
3. Arvind BA, Gururaj G, Loganathan S, Amudhan S, Varghese M, Benegal V, et al. Prevalence and socioeconomic impact of depressive disorders in India: Multisite population-based cross-sectional study. BMJ Open. 2019;9(6).
4. Shidhaye R, Gangale S, Patel V. Prevalence and treatment coverage for depression: a population-based survey in Vidarbha, India. Soc Psychiatry Psychiatr Epidemiol. 2016;51(7):993-1003.
5. Lavina Ranbhise, Rutuja Patole, Shamal Patane Mrs. Monita Thokchom. Assess the Prevalence of Depression among the Adolescents People in Selected Community Area of Pune City. Publ. 2018. P 311 - 321.
6. Safwi S, Amir A, Khalique N, Gaur R. A cross-sectional study on depression from rural India. Int J Community Med Public Heal. 2016;3(7):1769-76.