



A STUDY TO ASSESS THE EFFECTIVENESS OF A STRUCTURED TEACHING PROGRAM IN THE PREVENTION OF DEPRESSION AMONG THE ELDERLY IN SELECTED AREA OF INDORE, MADHYA PRADESH

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Abstract

Background: Life expectancy is a good indicator of socioeconomic development, and as an indicator of long-term survival, it can be considered a positive health indicator. The trends in life expectancy show that people are living longer; and they have a right to a long life in good health, rather than one with pain and disability. The need to provide quality mental health care for the elderly in home settings is a critical issue, as the aging population is growing rapidly and care is becoming a necessity for a higher proportion of the elderly. **Methods:** A quasi-experimental research approach was adopted to assess the effectiveness of a structured teaching program on knowledge regarding the prevention of depression among the elderly in the selected area of Indore, M.P. Sixty elderly individuals (>65 yrs old) were selected by a systematic random sampling technique; and a pre-test was arranged prior to the structured teaching program and a posttest afterward. The main limitation of this approach was the lack of a control group. **Results:** The knowledge in the majority of elderly individuals regarding the prevention of depression was average (45%) prior to taking part in the structured teaching program; however, their knowledge improved to 80% afterward. The difference between the mean pre- and post-test knowledge scores was highly significant ($p < 0.001$); hence, the null hypothesis H_0 was rejected and the research hypothesis H_1 was accepted, indicating that the structured teaching program had an impact on the knowledge in the elderly regarding the prevention of depression. In the pre-test, the majority of elderly individuals (45%) obtained an average knowledge score, 30%

obtained a below average knowledge score and 25% obtained a good knowledge score. In the post-test, the majority of the elderly (80%) obtained a good knowledge score and 20% obtained an average knowledge score. Conclusion: There was a statistically significant difference between pre- and post-test knowledge scores in the majority of variables, with the exception of gender and family type. Therefore, the elderly individuals should be given the necessary awareness in the prevention of depression.

Introduction

Depression among the elderly is relatively common; however, it is not often recognized and even when it is recognized it is often left untreated. Two inaccurate assumptions are commonly held; that, depression is inevitable in old age and therefore not worth treating, and that depression is a prodromal phase of dementia and therefore untreatable. Epidemiological studies regarding depression in old age have shown that, on average, approximately 10% of individuals over 65 yrs old have clinical symptoms of depression. Estimates of major depression levels in elderly individuals living in the community range from less than 1% to 5%, but rise to 13.5% in those who require home care. Almost 50% of the world's elderly live in Asia, of which 23% live in India. Depression causes significant suffering and is commonly seen in primary care. It is predicated that the identification of depression via screening programs will allow effective delivery of treatment, and that the benefits of treatment will outweigh the harm. Mental health disorders, including anxiety and depression, adversely affect physical health and the ability to function, especially in the elderly. The prevalence of depression in homebound elderly individuals is estimated to range from 26% to 44%.

Methods

A quasi-experimental research approach was adopted to assess the effectiveness of a structured teaching program on knowledge regarding the prevention of depression among the elderly in the selected area of Indore, M.P. This approach involved manipulation but lacked a control group. The investigator selected a sample of 60 elderly individuals by the systematic random sampling technique using the formula; $K = \text{number of subjects in target population} / \text{size of sample}$ i.e. $180/60=3$. Thus, every third individual in the list was selected as a sample for the study.

Results

The data collected through the self-structured multiple choice questionnaire regarding knowledge in the elderly were analyzed using descriptive and inferential statistics. In descriptive statistics, the mean, percentage and standard deviation were used to analyze the distribution of the elderly individuals according to their demographic characteristics. In inferential statistics, SPSS version 11.1 was used to perform a paired t-test and F-test. The mean pre-test knowledge score in elderly individuals belonging to 60–64 yrs old age group was the highest (18.79), followed by that in the 65–69 yrs old (17) and the 70 yrs old and above (14.08) age groups, showing statistical significance ($p < 0.001$ in an F-test). The mean post-test knowledge score in the elderly individuals belonging to 60–64 yr old age group was the highest (24.61), followed by that in the 65–69 yrs old (23.25) and 70 yrs old and above (20.92) age groups, showing statistical significance ($p < 0.001$ in an F-test).

Conclusion

The results of the present study suggest that the knowledge in the majority of elderly individuals regarding the prevention of depression was average prior to taking part in the structured teaching program; however, knowledge increased by 2-fold afterward. The difference between the mean pre- and post-test knowledge scores was highly significant ($p < 0.001$); therefore, the null hypothesis H_0 was rejected and the research hypothesis H_1 was accepted; that a structured teaching program had a significant impact on the knowledge in elderly individuals regarding the prevention of depression. Our findings reveal that there is a need for extensive research regarding the prevention of depression among the elderly, such that these individuals can be given the necessary awareness to prevent depression, presenting an avenue for innovative methods of prevention of depression.

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