



A STUDY TO ASSESS THE EFFECT OF AROMATHERAPY ON DEPRESSION PATIENTS IN SELECTED MENTAL HOSPITALS

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Abstract

Depression is becoming one of the common health morbidity affecting 350 million people globally. To overcome depression, people are considering aromatherapy a popular intervention against it. Due to its increasing publicity of aromatherapy for alleviating depressive symptoms, in-depth evaluation of the clinical efficacy of aromatherapy is urgently needed. Considering the same researcher has undertaken the project to analyze the efficacy of the same. **Material & method:** Quantitative research approach was adopted with quasi experimental research design. 30 samples were selected through Non probability sampling and randomly allocated in both the groups. Written informed consent was obtained from all the participants. The General depression Scale (GDS) was selected to be used as the tool. The purpose of this questionnaire is to assess the level of depression in the mentally ill patients. The General Depression Scale has 30 items with yes /no type responses. Each item measures a specific symptom of depression. **Result:** The analysis was done using paired and unpaired' test. The difference of mean in depression reduction in experimental group was 16.1 where as in control group it was 21.8. Hence, Aromatherapy was effective in reducing the depressive symptoms. **Conclusion:** Aromatherapy helps to reduce depression level if it is practiced for a longer period. There has been a phenomenal increase in the popularity of various alternative therapies and medicines in recent years and many of them can be excellent when it comes to reducing depressive symptoms and treatment.

Keywords: Depression, Aroma Therapy, Mental illness, GD Scale

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Need of the Study:

Depression is an important global public health problem due to its relatively high lifetime prevalence and the significant disability that it causes. In 2022, depression accounted for 4.5% of the worldwide total burden of disease (in terms of disability-adjusted life years). It is also responsible for the greatest proportion of burden attributable to non-fatal health outcomes, accounting for almost 12% of total years lived with disability worldwide. Without treatment, depression has the tendency to assume a chronic course, to recur, and to be associated with increasing disability over time. This disability can be overcome if the mind and body function in harmony. If the mind is giving an instruction and the body is unable to carry it out, or if the body is capable of the movement but there is a barrier in the mind, then there will be disruptions in movement expression. A conflict between the mind and body results, therefore, in a hindered movement pattern. The direct relationship between the mind and the body therefore indicates that if there is a psychological change, there will be a movement change and also, that through movement change it will be possible to bring about a psychological change. Aromatherapy provides the structure for developing body sense and brings out further individual responses related to emotion and memory. When this happens, in case a feeling has been blocked or disguised in the individual, it finds scope for release. Also, cognition and intellectual awareness are necessary for any kind of change. Aromatherapy uses the lavender oil and its inhale as tools that work towards that awareness of the self. Aromatherapy is important due to its accuracy as a communicative force. Considering this researcher has undertaken the research on Effect of Aromatherapy on Depression Patients

1. Research methodology

Institutional Ethics Committee permission was sought to conduct the research. Later permission was obtained from selected Mental Hospitals and Informed consent was taken from the research subjects. Quantitative research approach was adopted to conduct this study and the design used was quasi experimental research design. A non-probability convenience method of sampling was used for the selection of the representative samples for the study. The sample size was 30 and they were selected through Non Probability Purposive Technique. The General depression Scale (GDS) was selected to be used as the tool. The purpose of this questionnaire is to assess the level of depression in the mentally ill patients. The General Depression Scale has 30 items with yes/no type responses. Each item measures a specific symptom of depression.

2. Results

The following are the major findings of the study: Section-I, Describes the frequency and percentage distribution of demographic variables. The findings show that majority of the samples, i.e. 10 (66.66%) out of 15 samples were male in the control group. 13(86.66%) out of 15 samples were between the age less than 35 years in the control group. 11(73.35%) out of 15 samples were higher secondary in the control group. 8(53.33%) out of 15 samples were single in the experimental group. 13(86.66%) out of 15 samples were monthly income above 16000Rs in the experimental group. 12(80.00%) out of 15 samples were joint family in the experimental group. 14(93.34%) out of 15 samples were staying with family in the experimental group. 11(73.34%) out of 15 samples were duration of illness >-5year in the control group.

Section-II Deals with the Pre-test depression level of mentally ill patients in control group and experimental group. The findings show that all the 30(100%) samples, experienced moderate and severe level of depression in the pre-test scores.

Section-III Describes the Post-test depression level of mentally ill patients in experimental group. Findings of this section show that in the experimental group, all 15 patients (100%) showed mild and moderate level of depression.

Section-IV describes the Comparison of the pre and post test levels of depression of mentally ill patients in control and experimental group. The analysis was done using paired and unpaired 't' test. The difference of mean in depression reduction in experimental group was 16.1 where as in control group it was 21.8.

Section-V Deals with the Association between the selected demographic variables and level of depression are not significant. If an association has to be established statistically, it is just like associating independent variable like age and the same is applicable in the mentally ill patients.

3. Conclusion

Depression is a mood disorder marked by symptoms as depressed mood, loss of pleasure in activities, sleep difficulties, appetite or weight changes and thoughts about suicide or death. Factors such as Cumulative adverse experiences, Poor interpersonal skills coupled with negative thought processes, negotiating changing relationships with peers and families, searching for autonomy while trying to fit in,

trying to succeed in a competitive academic and social environment. Poor academic achievement, increased risk-taking behavior, depressing life events like exposure to family or community violence, chronic poverty, child physical and sexual abuse, bereavement, or parental divorce or separation. All these Life events involving loss are specifically associated with depression. Depressed individuals are at greater risk of experiencing more stressors and vice-versa, which in turn lead to increased levels of Depression. Aromatherapy helps to reduce depression level if it is practiced for a longer period. There has been a phenomenal increase in the popularity of various alternative therapies and medicines in recent years and many of them can be excellent when it comes to reducing depressive symptoms and treatment.

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