

National Consortium for Ph.D in Nursing

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Title: A randomised controlled trial to assess the effectiveness of acceptance & commitment therapy (ACT) on treatment outcomes among patients with depression at selected mental health centres in Karnataka.

Introduction: Depression is a leading cause of disability worldwide. It is estimated that 350 million people globally are affected by depression. In LMICs, more than 80% of years lived with disability (YLDs) were attributed to depression. In India, one in 20 (5.25%) people over 18 years of age have ever suffered (at least once in their lifetime) from depression, amounting to over 45 million persons with depression in 2015. The burden of depression, in terms of DALYs, increased by 67% between 1990 and 2013. By 2025, DALYs attributable to depression is projected to rise by roughly 2.6 million (22.5%) due to population growth and ageing. Depression is associated with high lifetime prevalence (6.5%–21%), increasing disability, association with chronic diseases, suicides, and sociocultural and economic changes, contributing to the rising burden. Depression leads to impaired relationships, reduced quality of life, and reduced income. The society is affected with loss in productivity, high rates of sick absence, and social and health care expenses. Both psychological and pharmacological treatments are found to be effective in management of depression. Certain psychological treatments can be as effective as antidepressant medications, with higher retention and better long-term effects. They are recommended as first-line interventions by WHO's Mental

Health Gap Action Programme (mhGAP). The National Mental Health Programme (NMHP) of India also focuses on workplace stress management and suicide prevention services. Nurse-led interventions such as Acceptance & Commitment Therapy (ACT) are evidentially promising in catering to issues of mental health. From an ACT perspective, a primary basis of suffering is psychological inflexibility, an inability to adjust, which is necessary to sustain value-directed behaviour. Research literature resulted that by increasing psychological flexibility, ACT is a promising treatment for depression.

Objectives:

1. To assess depression, psychological flexibility, negative cognition and functional ability among patients experiencing depressive symptoms.
2. To evaluate the effectiveness of acceptance & commitment therapy on depression, psychological flexibility, negative cognition and functional ability among patients experiencing depressive symptoms.
3. To identify relationship between depression, psychological flexibility, negative cognition and functional ability.
4. To find association between socio-demographic variables of patients experiencing depressive symptoms and depression, psychological flexibility, negative cognition and functional ability before the acceptance & commitment therapy.

Methods

The effectiveness of Acceptance and Commitment Therapy (ACT) was assessed using Randomised Controlled Trial (RCT). The population comprised patients with mild-moderate depressive symptoms seeking treatment at M.S. Ramaiah hospital psychiatric unit, Bangalore. The independent variable of this study was Acceptance and Commitment Therapy (ACT). The

dependent variables were depression, psychological flexibility, negative cognition and functional ability. Beck Depression Inventory-II & Acceptance & Action Questionnaire-II (AAQ-II) were used to assess depression & psychological flexibility respectively. The automatic Thoughts Questionnaire (ATQ) & Sheehan Disability Scale (SDS) were used to assess negative cognition & Functional ability respectively.

After establishing the validity and reliability of research instruments, patients who met the inclusion criteria were recruited for the study using the random sampling technique. After obtaining the consent and pre-assessment investigator-generated randomisation sequence method (www.randomizer.org) was used to allocate subjects to either Acceptance & Commitment Therapy (ACT) or treatment as usual (TAU) group. Subjects in the experimental group received six Acceptance & Commitment Therapy (ACT) sessions. Sessions were delivered on one to one basis on alternative days. Each session lasted for 30-45 minutes.

The sample size for this study consisted of 80 subjects, of which 35 subjects in experimental and control groups completed the study and were available for analysis. Post-assessment of dependent variables was carried out for the subjects in both groups after two weeks and three weeks of the gap from initiation of therapy. Data were analysed through suitable descriptive and inferential statistics.

Results

Analysis of data revealed that highly significant improvement with moderate to large effect size was observed in patients receiving Acceptance & Commitment Therapy (ACT) in the third and fourth week after the therapy with relation to depression ($P=.001$, $\eta^2 = 0.5$), ($P=.001$, $\eta^2 = 0.7$), psychological flexibility ($P=.001$, $\eta^2 = 0.5$), ($P=.001$, $\eta^2 = 0.2$), negative cognition ($P=.000$, $\eta^2 = 0.4$), ($P=.001$, $\eta^2 = 0.5$), and functional ability ($P=.001$, $\eta^2 = 0.3$), ($P=.001$, $\eta^2 = 0.5$) as compared to those receiving Treatment As Usual (TAU).

Significant positive correlation at $P < 0.01$ was found between the baseline levels of depression, negative cognition ($r = 0.636$) and functional ability ($r = 0.407$). Psychological flexibility had a strong negative correlation with depression ($r = - 0.644$), negative cognition ($r = - 0.746$) and functional ability ($r = - 0.569$).

A Chi-square association was evident between depression and the marital status of study subjects at $P = 0.017$.

Conclusion

The present study demonstrated that Acceptance & Commitment Therapy (ACT) is effective and superior to treatment as usual (TAU) in improving psychological flexibility and functional ability and reducing depression and negative cognition among patients with symptoms of depression who are seeking treatment at mental health centres. Nurse-led Acceptance & Commitment Therapy will be helpful in providing cost-effective quality care for patients with depression in India where the burden of depression is rising owing to increased disability.