Knowledge and Attitude towards Depression among Adults

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Abstract

A research approach was selected for this study non-experimental descriptive design for assessing the knowledge and attitude of an adult towards depression in selected urban community,Ward-4,Ward-5, Abu road, Rajasthan. The population includes an adult who resides and between 21-40 years of age. The sample for this study comprised of 60 and adults. Convenient sampling technique was used to select the sample for this study. Section 1 of the tool consisted of the following six items: age, gender, education, occupation, income and marital status, type of family. Section 2 consists of 25 items deals with knowledge data of an adult. Section 3 consists of 20 items. It deals with attitude of an adult towards depression. Data analysis shows that mean knowledge score of an adults was 19.63, median 19.00 and S.D, 3.130, the mean attitude score 68.65, median is 69.50 and S.D. is 15.601.The co-efficient of correlation was computed by Karl Pearson's co-efficient correlation method. Co-efficient i.e. knowledge and attitude is + 0.86. Significant association found between knowledge and selected demographic variables like occupation (21.74%), income (55.942%), marital status 38.26%), type of family (21.03%). There is significant association between attitude and selected demographic variable such as education (9.91%), occupation (20.07%), income (51.37%), marital status (32.12%), and type of family (14%) adults.

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Introduction

Depression is a state of low mood and aversion to activity that can affect a person's thoughts, behaviour, feelings and sense of well-being. Depressed mood is not always a psychiatric disorder. It may also be a normal reaction to certain life events, a symptom of some medical conditions, or a side effect of some drugs or medical treatments [1]. Depressed mood is also a primary or associated feature of certain psychiatric syndromes such as clinical depression. There have been tremendous advances in our understanding of the causes and treatment of depression. Most of these treatments can be provided effectively by a general or community health worker [2].

Depression includes a broad range of health problems. For most people depression is a thought of illness associated with severe behavioural disturbances such as violence, agitation and being sexually inappropriate. Such disturbances are usually associated with severe mental disorders [3]. However, the vast majority of those with a depression behaves and looks no different from anyone else. These common mental health problems include depression, anxiety, sexual problems and addiction [4].

Epidemiological surveys done in India as well as in many other parts of the world have amply confirmed that at any given time one to two percent of the population suffers from serious depression [5]. While 10 to 15 percent suffers from so called mental disorders like anxiety, depression, somatic symptoms due to tension, alcohol and drug abuse etc. One to two percent of Indians suffer from manic- depressive

illness alone. Nine millions people have schizophrenia in India [6].

By assessing knowledge and exploring attitude of people towards depression, it is likely co-related prognosis of depression with reaction of significant others. The more favourable behaviour they exhibit the better outcomes [7]. Hostile attitude towards depression are omnipresent, self inflicted and other grave depression are unlikely to accessed prompt treatment unless significant others including health team members have thorough knowledge and positive attitudes towards depression [8].

Therefore, the researcher realized the need to study association of knowledge and attitudes of people toward depression in order to attribute conclusive environment to the patients so the researcher will come across the problems.

Methodology

A research approach was selected for this study non-experimental descriptive design for assessing the knowledge and attitude of an adult to-wards depression in selected urban community, Ward-4, Ward-5, Abu road, Rajasthan. The population includes an adult who resides and between 21-40 years of age. The sample for this study comprised of 60 and adults. Convenient sampling technique was used to select the sample for this study. After obtaining written consent tool was administered to the participants. Assurance was given regarding confidentiality and conducive environment was maintained. The average time taken by the respondents to complete the questionnaire was approximately 20 minutes. Section 1 of the tool consisted of the following six items: age, gender, education, occupation, income and marital status, type of family. Section 2 consists of 25 items deals with knowledge data of an adult. Section 3 It consists of 20 items. It deals with attitude of an adult towards depression.

Major Findings

In the present study majority of 39 adults (65%)

Table 1: Sample characteristics

S. No	Variables	Frequency	Percentage (%)
	Gender		
1.	Male	39	65%
2.	Female	21	35%
	Age		
1.	**21 – 25 Years**	06	10%
2.	26 –30 Years	30	50%
3.	31 – 35 Years	15	25%
4.	36 – 40 Years	09	15%
	Education		
1.	Secondary	06	10%
2.	Hr. Secondary	09	15%
3.	Graduate	27	45%
4.	Post Graduate	18	30%
	Occupation		
1.	Daily Wages	06	10%
2.	Private Employee	24	40%
3.	Government Employee	21	35%
4.	Others	09	15 %
	Income / month		
1.	< 5000 Rs.	12	20%
2.	5001 – 10000 Rs.	12	20%
3.	10001 – 15,000 Rs.	24	40%
4.	>15,000 Rs.	12	20%
	Marital status		
1.	Married	36	60%
2.	Unmarried	18	30%
3.	Divorced	03	5%
4.	Widow	03	5%
	Type of family		
1.	Joint	24	40%
2.	Nuclear	33	55%
3.	Separated	03	05%
4.	Other	00	00%

were male and 21 adults (35%) were female. Regarding age, that is 30 (50%) adults out of 60 were in age group between 26-30 years. Followed by 15 adults (25%) in age group 31-35 years, 9 adults (15%) were in age group 36-40 years and 6 adults (10%) were in age group 21-25 years. About basic education level, majority of respondents 27 (45%) were graduate, 18 (30%) were post graduate, 09 (15%) were Hr. Secondary and 06 (10%) were secondary. In the present study majority that is 24 (40%) were private employee, 21 (35%) were government employee, 9 (15%) were others and 06 (10%) were daily wages employees. In the present study majority that is 24 (40%) adults were Rs. 10001- 15,000 income / month, 12 (20%) adults were <Rs.5000 income/ month, and 12 (20%) adults

were >Rs.15,000 income and 12 (20%) adults were Rs.5001-10000. Regarding marital status majority of 36 (60%) adults were married, 18 (30%) adults were unmarried, 3 (5%) were divorced and 3 (5%) female were widow. Regarding type of family majority of family 33 (55%) were nuclear, 24 (40%) were joint family, 3 (5%) were separated and 0 (0%) were other.

It shows that shows mean knowledge score of an adult was 19.63, median 19.00 and S.D.

3.130, the mean attitude score 68.65, median is 69.50 and S.D. is 15.601. The co-efficient of correlation was computed by Karl Pearson's co-efficient correlation method. Co-efficient i.e., knowledge and attitude is + 0.86.

Table 2: Mean, Median and standard deviation of knowledge Attitude score of an adult

Scale	Mean	SD	Correlation	P
Knowledge	19.63	3.130		
Attitude	68.65	15.601	+ 0.86.	0.05

Table 3: Association between demographic variables knowledge, attitude levels of adults

Variables	Knowledge Chi-square	Df	P	Attitude Chi-square	Df	P
Age	9.592	6	NS	8.404	6	NS
Gender	0.215	2	NS	1.348	2	NS
Education	5.093	4	NS	9.910	4	S
Occupation	21.747	4	S	20.077	4	S
Income	55.942	10	S	51.376	10	S
Marital status	38.268	12	S	32.127	12	S
Type of family.	21.033	2	S	14.001	2	S

NS- Not significant, S- significant at p<0.05 level

Discussion

The First and Second Objective was to Determine the Level of Knowledge and Attitude of Adults towards Depression

Out of 60 samples 43.33% had excellent knowledge, 48.33% had good knowledge and 8.34% had moderate knowledge. 57 % had favourable attitude and 3% had unfavourable attitude.

The Third Objective was to Find out the Co-Relation between Knowledge and Attitude in Adult towards Depression.

There was statistically high significant positive correlation (r= +.86), (p<0.05) exists between knowledge and attitude towards depression among adults.

The Fourth Objective was to Find out the Association between Knowledge and Attitude of Adults towards Depression in Selected Demographic Variables.

Significant association found between knowledge

and selected demographic variables like occupation (21.74%), income (55.942%), marital status 38.26%), type of family (21.03%).

There is a significant association between attitude and selected demographic variable such as education (9.91%), occupation (20.07%), income (51.37%), marital status (32.12%), type of family (14%).

Conclusion

Study findings revealed that most of the adults are having adequate and favourable attitude towards depression, These results could be changed through raising awareness among adults by including awareness program and psychotherapy, life style modification. Health education should also be administered among adolescents to change their attitudes and opinions particularly on management on depression. In addition, society must have

extensive knowledge on depression and management which through increasing the number of educational programs in media like TV, radio and newspapers is an option which should be considered for mass outreach. Further study has to conduct in other settings with large amount of population with implementation of nursing related depressive care. An extensive study in all governorates in India should be done to get a clear understanding towards such an important health issue.

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