To assess Bio-Psycho-Social Problems among the Patient's Undergoing Psychotherapy of Selected Rehabilitation Centers at Dharwad

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Abstract

Context: Study can help in identifying gaps in care and areas needing improvement, leading to better overall patient management. The findings may inform policymakers and healthcare administrators about the needs and challenges faced by patients in psychotherapy settings.

Aim: The current study aimed to identify Bio-Psycho-Social Problems among the patient's undergoing psychotherapy of selected rehabilitation centers.

Methodology: A quantitative technique and descriptive survey design were utilized, with Rosenstock's Health Belief Model serving as the conceptual underpinning for the study. A sample of 50 patients was chosen using a non-probability convenient sampling technique.

Statistical analysis used: The structured questionnaire technique was employed to evaluate the psycho-social issues. The findings were elucidated through the utilization of descriptive and inferential statistics.

Results: The study result reveal that, with regard to psycho social problems, the mean score of subjects was 37.08 with Standard deviation of ±16.55, median of 34 and a range of 15-64 as against possible range of 00-75. Majority 20(40%) of subjects were had moderate nature of problems, 16(32%) of subjects were had mild nature of problems and remaining 14(28%) of subjects were had severe nature of psycho-social problems.

The computed Chi-square value for association the psychosocial problems of patient undergoing psychotherapy is significantly associated with their age and occupation at 0.05 levels.

Conclusion: Insights gained from this study can be used to develop training programs for healthcare professionals.

Keywords: Psycho-social problems; Patients undergoing psychotherapy; Rehabilitation.
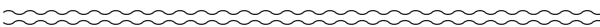
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INTRODUCTION

In contemporary healthcare, especially within the realm of mental health, understanding the multifaceted nature of patient well-being is crucial. The biopsychosocial model is an integrative framework that emphasizes the interconnection between biological, psychological, and social factors in assessing and treating health conditions. This model is particularly relevant for patients undergoing psychotherapy, as it provides
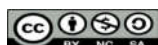
a comprehensive approach to understanding their needs and challenges. Aimed at improving patients' psychological well-being. However, there is limited empirical research on how well these centers address the biopsychosocial problems faced by patients. The biopsychosocial model is instrumental in this context because it helps in identifying and addressing complex interactions between biological factors (e.g., neurological conditions), psychological aspects (e.g., cognitive and emotional states), and social influences (e.g., family dynamics and socio-economic status).

Need for the Study: Traditional assessments may focus predominantly on psychological symptoms or medical diagnoses. By employing a biopsychosocial approach, the study aims to capture a more holistic view of the patient's experience, which is essential for effective treatment planning and intervention. Understanding how biological, psychological, and social factors interact can help therapists and healthcare providers tailor their interventions to meet the specific needs of patients. This can lead to more personalized and potentially more effective therapy. The study can reveal whether existing rehabilitation centers in Dharwad adequately address all dimensions of patient well-being. This can help in identifying gaps in care and areas needing improvement, leading to better overall patient management. The findings may inform policymakers and healthcare administrators about the needs and challenges faced by patients in psychotherapy settings. This can guide the allocation of resources and the development of policies aimed at enhancing the quality of care in rehabilitation centers.

OBJECTIVES

1. To assess the Bio-Psycho-Social Problems among the patient's undergoing psychotherapy of selected rehabilitation centers.

2. To find out an association between Bio-psycho-social problems the patients undergoing psychotherapy of selected rehabilitation centers with their selected demographic variables.

Hypotheses

The following hypotheses are formulated for the study and will be used at 0.05 level of significance.

H$_1$: There will be statistical association between psycho social problems undergoing psychotherapy at 0.05 level of significance.

METHODOLOGY

Tool Used For Data Collection: Following tools used for the data collection

Section I: Demographic data: It consists of 8 items related to demographic data of participants

- ✓ Research Approach : Quantitative Research Approach
- ✓ Research Design : Descriptive survey design
- ✓ Sampling technique : Non-Probability; Convenient Sampling Technique
- ✓ Sample size : 50
- ✓ Setting of study : Selected rehabilitation centers of Dharwad district, Karnataka
- ✓ Population : Comprises patients undergoing psychotherapy

Section II: Structured psycho social problems assessment scale: Structured psycho social problems assessment scale consisted of 25 items.

Procedure of Data Collection:

Study was approved by the institute ethical committee. Formal administrative permission was obtained by the centers. Data was collected from 15-03-2024 to 16-04-2024 by investigator. Samples were selected as per the sampling criteria. The purpose of the study was explained and co-operation required from the respondents was explained to them and confidentiality was assured. Consent to participate in the study was obtained from each sample. The data was collected by self-administration of questionnaire method and it took 23-30 minutes to collect data by each sample. Each day data was collected 5 subjects by investigator. Totally it took 10 days to collect data from all 50 samples.

RESULTS

Section I: Description of Selected Personal Variables

Table 1: Frequency and percentage distribution of subjects according to their socio demographic variables

n=50

Subjects Characteristics	Frequency (F)	Percentage (%)
1. Age in Years		
a) 30-40 Years	7	14
b) 41-50 Years	12	24
c) 51-60 Years	15	30
d) Above 60 Years	16	32

Table Cont...

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2. Religion			
a)	Hindu	25	50
b)	Muslim	16	32
c)	Christian	7	14
d)	Others	2	4
3. Education			
a)	No Formal Education	13	26
b)	Primary School	14	28
c)	High School	14	28
d)	Puc And Above	9	18
4. Occupation			
a)	Not Employed	8	16
b)	Agriculture	10	20
c)	Self Employed	17	34
d)	Govt / Private Job	15	30
5. Type of Family			
a)	Nuclear	29	58
b)	Joint	21	42
6. Dietary Pattern			
a)	Vegetarian	26	52
b)	Mixed Diet	24	48
7. Duration Of Psycho Social Problems			
a)	1- 2 Years	21	42
b)	3 - 4 Years	20	40
c)	Above 4 Years	9	18
8. Associated Disorders			
a)	Yes	29	58
b)	No	21	42

Section 2: Description of Findings Related To Psycho-Social Problems Among Patients Undergoing psychotherapy.

a. The description of psycho-social problem scores among patients undergoing psychotherapy.

The psycho-social problems scores obtained by the subjects were tabulated to a master sheet and the total scores obtained for each subjects were tabulated. Mean, standard deviation, median and range of scores were computed. The findings are presented in the table 2.

Table 2: Mean, standard deviation, median, and range of psycho-social problems scores of subjects

n=50

Psycho-social problems				
Mean	**Median**	**Mode**	**SD**	**Range**
37.08	34	19	16.55	15-64

The data presented in the Table 2 shows that, description of scores of psycho-social problem scale-

With regard to psycho social problems, the mean score of subjects was 37.08 with Standard deviation of ±16.55, median of 34 and a range of 15-64 as against possible range of 00-75.

b. Description of findings related to level of bio psycho social problems among participants of rehabilitation.

In order to find out the level of psycho-social problems by subjects the scores obtained by the patients were tabulated into mater sheet and then categorized into 3 levels as mild nature, moderate Nature and severe nature. The data are presented in the

Table 3: Level of Psycho-social problems by respondents

n=50

Mild Nature (0-25)		Moderate Nature (26-50)		Severe Nature (51-75)	
f	%	f	%	f	%
16	32%	20	40%	14	28%

The data presented in the Table 3 shows that the majority 20(40%) of subjects were had moderate nature of problems, 16(32%) of subjects were had mild nature of problems and remaining 14(28%) of subjects were had severe nature of psycho-social problems.

Fig. 1: Frequency and percentage distribution of subjects according to their level of psycho-social problems

Section 3: Description of findings related to association between the psychosocial problems among patients undergoing psychotherapy of selected rehabilitation with their selected demographic variables.

To find out the association between the levels of psychosocial problemsand selected personal variables, Chi square was computed

and the following research hypothesis is stated the computed Chi-square value for association between psychosocial problems of subjects is found to be statistically significant at 0.05 levels for socio demographic variables like their age occupation where as it is not found significant for other selected sociodemographic variables at 0.05 levels. Therefore, the findings partially support the hypothesis H_1. inferring that the psychosocial problemsof patient undergoing psychotherapy is significantly associated with their age and occupation.

CONCLUSION

In summary, Insights gained from this study can be used to develop training programs for healthcare professionals, ensuring they are equipped to address the complex interplay of biological, psychological, and social factors in patient care.

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