



Full Length Research Article

EFFECT OF PSYCHO-EDUCATION ON SELF-ESTEEM OF PSYCHIATRIC PATIENTS

***Neeta Austin Singha**

College of Nursing, Christian Medical College and Hospital, Ludhiana, Punjab, India

ARTICLE INFO

Article History:

Received 03rd December, 2014
Received in revised form
08th January, 2015
Accepted 28th February, 2015
Published online 31st March, 2015

Key words:

Psycho-education,
Self-esteem,
Psychiatric patients.

ABSTRACT

The most basic task for one's mental, emotional, and social health, which begins in infancy and continues until one dies, is the construction of his or her positive self-esteem. A quasi experimental study was conducted to assess the effect of psycho-education on self-esteem of psychiatric patients attending psychiatric setting in CMC and H and DMC and H, Ludhiana. Data was collected from 40 psychiatric patients (i.e., 20 in control group and 20 in experimental group). Level of self-esteem was assessed by using Rosenberg self-esteem scale in the month of November and December, 2009. Findings revealed that level of self-esteem of psychiatric patients was low. Structured psycho-education on the different aspects like, cognition/insight, self-worth, problem solving, assertiveness, and negative thoughts were given to the experimental group. Post test self-esteem of the experimental group was assessed and found significantly raised.

Objectives:

1. To assess and compare the pre-test and post test self-esteem of psychiatric patients among control and experimental group.
2. To find out relationship of pre-test and post-test self-esteem among psychiatric patients with selected variables like age, gender, education, types of illness, duration of illness and duration of hospitalization among control and experimental group.

Materials and Methods

The study was conducted in psychiatric OPD and ward of Christian Medical College and Hospital and Dayanand Medical College and Hospital, Ludhiana, Punjab. 40 psychiatric patients were taken through purposive sampling technique. Five areas were covered under psycho-education to assess the effect on the self-esteem of the psychiatric patients of experimental group.

Results

Maximum number of psychiatric patients in both control and experimental group had moderate level of self-esteem (80%, 75%) respectively. Hence, patients with psychiatric illness had some impact on their self-esteem which indirectly represented low self-esteem. Maximum post-test self-esteem score in control group was moderate (90%) and high (5%) as compared to experimental group self-esteem score was moderate (80%) and high (20%). Hence it is concluded that most of the psychiatric patients of both experimental and control group have low self-esteem and there was an effect of psycho-education on self-esteem in experimental group as the subjects from the low level of self-esteem moved towards moderate and high self-esteem level after psycho-education in experimental group.

Conclusion: Psycho-education was effective in improving knowledge as well as self-esteem of psychiatric patients. Variables i.e., age, gender, education, type of illness, duration of illness and duration of hospitalization had no impact on level of self-esteem of psychiatric patients.

Copyright © 2015 Neeta Austin Singha. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

INTRODUCTION

Self-esteem is one's judgment of one's own worth that is how the person's standards and performance are compared to

***Corresponding author: Neeta Austin Singha**

College of Nursing, Christian Medical College and Hospital,
Ludhiana, Punjab, India

others and to one's ideal self. If a person's self-esteem does not match with the ideal self, then low self-concept results (Kozier, 2004). An adequate level of self-esteem is seen as an acceptance of oneself despite mistakes, defeats, and failure made in life. Hospitalized psychiatric patients often experience low self-esteem before hospitalization. They tend to minimize their own "positive attributes, strengths, and abilities. The

quality of this thinking is inflexible with unreasonably high standards. As a result patients frequently have difficulty accepting positive feedback because it does not coincide with their self-view or their current situation. Self-esteem is an important component of psychological health. Much previous research indicates that lowered self-esteem frequently accompanies psychiatric disorders. It has been suggested that low self-esteem is an etiological factor in many psychiatric conditions as well as in suicidal individuals. Self-esteem also plays some role in quality of life for psychiatric patients. Lowered self-esteem has been consistently found to occur in several psychiatric disorders. These include depressive disorders, eating disorders, anxiety disorders, and alcohol abuse (Ryan and Harter, 1989). Self-esteem interventions can be divided into treatment programs and primary prevention programs. Treatment programs focus on enhancing self-esteem among those who already have low self-esteem, whereas primary prevention program targets on non clinical population. Cognitive Behavior Therapy (CBT) seems to be effective in changing self-esteem (Emler, 2001). This type of intervention focuses on identifying dysfunctional beliefs and changing them into more realistic beliefs, in combination with behavior modification technique. Findings suggested that self-esteem enhancement requires the formation and acceptance of realistic goals that are personally relevant and a supportive social environment (Harter, 1999). Psycho education provides a cognitive framework that helps psychiatric patients understand their illness and the rationale for treatment. This framework may assist them in accepting their illness and increasing treatment compliance as the result of enhanced awareness and familiarity with treatment techniques.

Such an approach may help correct myths and prejudices toward mental illness by providing information in a context of cultural relevance, safety, respect, and hope and by extending the intervention to family members as well. Psychiatric patients who are educated about their condition are more likely to actively participate in their self-management and relapse prevention. This brings about positive social and self-esteem changes which all add to the individual's self-efficacy (Bergmans and Links, 2002). While reviewing literature investigator found that very few studies were there regarding enhancement of self-esteem of psychiatric patients with psycho education. This further motivated the investigator to select psycho education as the topic for study, so that staff nurses can also use this psycho education to give comprehensive care to their patients and patients can be benefited by enhancing their self-esteem.

MATERIALS AND METHODS

Content validity of the tool was established by seeking the opinion of guide, co-guide and experts from various nursing specialties. Modifications in the tool were made according to the suggestion and the guidance. Pilot study was conducted in the month of October, 2009. Analysis and interpretation of data was done by using descriptive and inferential statistics such as mean, mean percentage, SD, 't' value and ANOVA.

RESULTS

Table 1 reveal that majority of the psychiatric patients in control and experimental group (35%, 35%) fall in age group of 20-35 years, (35%, 35%) in age group 36-50 years and 30%, 30% in age group >50 years, respectively.

Table 1. Percentage distribution of Sample Characteristics

Characteristics	Control		Experimental		f	X ²
	n=20		n=20			
	n	%age	n	%age		
Age (years)						
20-35	7	35.00	7	35.00		NA
36-50	7	35.00	7	35.00		
>50	6	30.00	6	30.00		
Gender						
Male	10	50.00	10	50.00		NA
Female	10	50.00	10	50.00		
Education						
<10std	6	30.00	6	30.00		NA
10-12std	6	30.00	6	30.00		
Graduate	6	30.00	5	25.00		
Postgraduate	2	10.00	3	15.00		
Type of Illness						
Depression	7	35.00	7	35.00		NA
BPAD	6	30.00	6	30.00		
Anxiety	7	35.00	7	35.00		
Duration of Illness						
<6 months	5	25.00	5	25.00		NA
6 to 11 M	5	25.00	5	25.00		
1 to 2 Yrs	5	25.00	5	25.00		
>2 yrs	5	25.00	5	25.00		
Duration of hospitalization						
1-4days	7	35.00	7	35.00	2	0.62 ^{NS}
5-7days	5	25.00	7	35.00		
8-14days	6	30.00	6	30.00		
>14days	2	10.00	0	0.00		

NS-Non significant (p<0.05)

Table 2. Comparison of pretest and posttest mean Self-Esteem Scores (SS) of Psychiatric patients among control and Experimental group

SELF-ESTEEM SCORE							N=40
Group	n	Pre-Test		Post-Test		d.f.	
Control	20	Mean	SD	Mean	SD	t-value	
Experimental	20	(a)15.50	2.99	(a')16.20	3.12	0.72 ^{NS}	
		(b)15.30	3.27	(b')17.70	3.37	2.29*	
	d.f.	(a+b)		(a'+b')			
	t-value	0.20 ^{NS}		1.46 ^{NS}			

Maximum score=30
Minimum score=0

NS- Non significant
*significant at (p<0.05)

Table 3. Comparison of Pretest and Posttest mean improvement in different areas of Knowledge Score (KS) of Psychiatric patients among Control and Experimental Group

Areas of Knowledge	Control						Experimental					
	Pre-Test		Post-Test		% increase	Rank	Pre-Test		Post-Test		% increase	Rank
	Mean	Mean%	Mean	Mean%			Mean	Mean%	Mean	Mean%		
Cognition/ Insight	3.80	54.29	4.30	61.43	13.16	1.00	3.50	50.00	5.10	72.86	45.71	II
Self-worth	2.50	41.67	2.50	41.67	0.00	2.00	2.18	36.33	2.60	43.33	19.27	V
Problem solving skill	3.70	52.86	3.70	52.86	0.00	2.00	3.90	55.71	5.30	75.71	35.90	IV
Assertiveness	1.80	45.00	1.70	42.50	-5.56	4.00	1.20	30.00	2.60	65.00	116.67	I
Negative thinking	2.10	52.50	2.00	50.00	-4.76	3.00	1.70	42.50	2.40	60.00	41.18	III
F-ratio		12.07**		9.87**				14.39**		11.64**		
d.f.		4/95		4/95				4/95		4/95		

Maximum score=29
Minimum score=0

* *significant at(p<0.01)

In control group as well as in the experimental group 50% of the subjects were males and 50% of the subjects were females. Majority of the subjects in control and experimental group (30%, 30%) fall in education level of <10 std, (30%, 30%) in 10-12 std. (30%, 25%) in graduate and (10%, 15%) in post graduate respectively. According to type of illness (35%) of the subjects in both control and experimental group belongs to depression and anxiety disorder, (30%) were belong to BPAD in both control and experimental group respectively. According to duration of illness, 25% of the subjects in both the groups belong to <6 months duration, 25% were having duration of 6-11 months, 25% were having duration of 1-2 years and 25% were having duration of >2 years respectively.

According to duration of hospitalization majority (35%) of subjects were in the duration of 1-4 days in both control and experimental group, (25%, 35%) in 5-7 days duration in control and experimental group, (30%, 30%) fall in 8-14 days duration, and (10%, 0%) fall in > 14 days duration respectively. Hence it can be said that the majority of subjects were equally distributed in control and experimental group on the basis of age, gender, type of illness. Maximum subjects had education level <10 std and 10-12 std. maximum subjects were having hospitalization of 1-4 days. Table 2 depicts that pretest and posttest mean self-esteem score of experimental group (15.30, 17.70) was statistically significant at the level of 0.05, whereas the pretest and posttest mean self-esteem score of control group (15.50, 16.20) was not statistically significant. This table also depicts that pretest self-esteem score among control and experimental group (15.50, 15.30) was not statistically significant whereas posttest self-esteem score among control and experimental group (16.20, 17.70) was observe as not statistically significant. Hence the research hypothesis i.e., the self-esteem of psychiatric patients will be enhanced with psycho education as measured by self-esteem

scale at p<0.05 level was accepted. Table 3 depicts that pretest knowledge of psychiatric patients is high in area of cognition/insight (3.8) in control group as compared to experimental group (3.9) in area of problem solving skill whereas posttest knowledge is high (4.3) in cognition/insight in control group as compared to experimental group (5.3) in problem solving skill area. This table also depicts that on the basis of rank order, in control group the least ranked area is assertiveness (4) but in experimental group this area become the highest ranked (1) Based on ANOVA, the difference between the group and within the group was statistically calculated and it was found highly significant at p<0.01 level. Hence it may be inferred that there is significant difference between different areas of knowledge and there is significant improvement in the area of assertiveness after psycho education.

DISCUSSION

Frey (1992) *et al.* conducted an experimental study on 20 male subjects from nursing home. Samples were allotted in both the groups randomly. Control group described about current news events whereas experimental group got special psycho education to enhance self-esteem. Results showed that experimental group demonstrated significant improvement in self-esteem. Morrison, Ferns, Boardman, Elliott and Brown (2004) studied the effectiveness of a psycho education intervention in improving their self-confidence and self-esteem. Around 25 people attended the workshop which was run by two psychologists and two assistant psychologists. Education was given regarding information about the development of low self-confidence and emotional aspects including depression, cognitive aspects, identifying and challenging negative confidence. The self-confidence workshop led to statistically significant reduction in depression and distress as well as improvement in self-esteem.

Ethical clearance

Permission was taken from the participants. Confidentiality of the participants was maintained. Written permission was taken from the Head of the department of CMC and H and DMC and H, Ludhiana for the collection of data from the participants. Written permission was also taken from Principal, College of Nursing, CMC and H, Ludhiana for the conduction of the study.

REFERENCES

Bergmans Y. and Links P.S. 2002. A description of a psychosocial/ psycho educational intervention for persons with recurrent suicide attempts. *Crisis*. 23(4): 156-160/.

- Emler, N. 2001. *Self-esteem: The costs and causes of low self-worth*, New York: Joseph Rowntree Foundation.
- Harter, S. 1999. *The construct in of the self. A development perspective*, New York: Guildford press.
- Kozier Barbara, Erb Glenora, Berman Audrey and Barke Karen, 2007. *Fundamentals of nursing: concept, process, and practice*. 7th Edition. New Delhi. Dorling Kindessely (India) Pvt Ltd.
- Morrison, J., Boardman, J., Elliott, S.A. and Brown, J.S.L. 2004. Meeting the unmet need for depression services with psycho education self-confidence workshops. *The British Journal of Psychiatry*, 185, 511-515.
