EFFECT OF DANCE THERAPY ON QUALITY OF LIFE AMONG MENTALLY ILL PATIENTS AT SELECTED SETTING IN BANGALORE.

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ABSTRACT

A study to assess the effectiveness of dance therapy on quality of life among mentally ill patients at selected setting in Bangalore was undertaken with the main objective was to assess the quality of life among patients with mental illness and determine the effectiveness of dance therapy on quality of life among patient with mental illness. A true experimental design was used and 60 patients with mental illness were selected by purposive sampling 30 in the experimental group and 30 in the control group. The study was conducted at spandhana hospital Bangalore. The tools used for the data collection was Modified brief psychiatric rating scale. After assessing pretest dance therapy was given to the subjects in the experimental group for 20 min once a day for 15 consecutive days and usual care for the subjects in the control group. After 15 days post test was conducted using the same tool for the groups.

Quality of life was improved among patients with mental illness after 15 sessions of dance therapy. Dance therapy was effective on quality of life. There was a significant association between post test level of quality

of life and past history of hospitalization, sex among patients with mental illness in the experimental group. There was no significant association between the level of quality of life and other socio demographic variables.

Key words: Effectiveness, Dance therapy, Quality of life, Mentally ill patients.

STATEMENT OF PROBLEM

A study to assess the effectiveness of dance therapy on quality of life among mentally ill patients in spandhana hospital Bangalore during the year 2014-2015

OBJECTIVES

- ➢ To assess the quality of life among patients with mental illness in experimental group and control group before and after dance therapy.
- ➢ To determine the effectiveness of dance therapy on quality of life among patient with mental illness in experimental group and control group.
- ➢ To find out the association between the post test scores on quality of life among patient with mental illness in experimental group and control group with their demographical variable.

HYPOTHESIS

- ➢ H1 : There will be a significant difference in the quality of life among patients with mental illness in experimental group and control group before and after dance therapy
- ➢ H2: There will be a significant effectiveness in dance therapy on quality of life among patients with mental illness in experimental group than control group
- ➢ H3: There will be a significant association between the post test score of quality of life among Patients with mental illness in experimental group and control group with their demographic variable.

OPERATIONAL DEFINITIONS

EFFECTIVENESS: It refers to the extent to which the dance therapy helps in achieving the desired effect in improving quality of life among patient with mental illness

DANCE THERAPY: It includes structured group dance forms like: snake dance, peacock dance, modern dance, and kathak. In this study it's given for 20 min once a day for 15 consecutive days

QUALITY OF LIFE: Quality of life has also been defined "as the satisfaction of an individual's values, goals and needs through the actualization of their abilities or lifestyle" As measured by Modified brief psychiatric rating scale.

MENTALLY ILL PATIENTS: Persons who are diagnosed to have mental illness and are admitted at selected hospital (spandhana Hospital).

ASSUMPTIONS

1. It is assumed that dance therapy may have a significant effect on quality of life among patients with mental illness.

CONCEPTUAL FRAME WORK

The Conceptual frame work selected for this study was based on general System, Theory by BERTANLANFFY (1968).

Review of literature

Literature review for the present study was organized under the following headings,

　　I.　Studies related to dance therapy on mental illness.

　　II.　Studies related to quality of life among mental illness.

　　III.　Studies related to effect of dance therapy on quality of life among patient with mental illness.

METHODOLOGY

Research Approach

A quantitative evaluative approach was used in this study.

Research Design

The research design selected for the present study is, true experimental two groups pre-test and post-test design, for the experimental group pre-test is conducted followed by administering dance therapy then post-test for the same group after 7th day. And in control group there is no intervention but the pretest is given and then the post test is conducted after 7th day.

VARIABLES UNDER STUDY

VARIABLES

Independent Variable: In this study the dance therapy

Dependent variable : In this present study dependent variable refers to Quality of life among patients with mental illness.

Socio demographic variables:

The demographic variables in this study were Age, sex, past history of Hospitalization, Family History of Mental Illness, Taking Medication and Duration of Illness.

SETTING OF THE STUDY:

The study was conducted at spandhana hospital, Bangalore.

Target Population

Target population for the present study were all patients with mental illness

Accessible population

The accessible population for the present study was the patients with mental illness who were admitted in Spandhana Hospital Bangalore.

Sample

The sample for the study was patients with mental illness who were admitted in Spandhana Hospital Bangalore and those who fulfilled the inclusion criteria.

Sampling Technique

The sample was selected by using purposive sampling technique.

Sample size

The sample size was 60 patients with mental illness, out of which 30 were in experimental group and 30 were in control group.

Criteria for Selection of Sample.

Inclusion Criteria:

❖ Patients with mental illness,

❖ Age group between 20 – 50 yrs

❖ Both male and female

❖ Who are present during the period of data collection

❖ Suffers from schizophrenia, depression and alcohol dependence.

Exclusion Criteria:

❖ Physically disabled

❖ Patient suffering from mania, epilepsy and mental retardation.

Tool and Technique

Technique: Structured interview schedule was used for data collection.

Tool

Section A: It consisted of Demographic variables of patients with mental illness which includes Age, sex, past history of Hospitalization, Family History of Mental Illness, Taking Medication and Duration of Illness.

Section B: Modified brief psychiatric rating scale

This scale consisted of 16 symptoms, each to be rated on a 4 – point scale of severity ranging from " not present to severe''. The 16 – symptoms are somatic concern, anxiety, emotional withdrawal, disorganization, guilt feelings, tension, mannerisms and posturing, grandiosity, depressive mood, violent activities, suspiciousness, hallucinatory behavior, motor retardation, un cooperativeness, blunted affect and excitement.The scoring procedure consisted of 4 scores, not present (1), mild (2), moderate (3)and severe (4). Minimum score was 16 & Maximum score was 64.

Section C: Modified Quality of life assessment scale ;

It consisted of physical fitness, feelings , daily activities, social activities and overall health. The scoring consisted of 5 scores, very well (1), pretty good (2), good and bad (3),

Pretty bad (4).

Content validity

Content validity of the tool was established by obtaining suggestions from 10 experts. 6 from psychiatric nursing, 2psychiatrist, 1 clinical psychologist and 1statistician.

Reliability

Split half method was used to test the reliability of the scale, and found to be reliable (r 1=0.88 for Modified brief psychiatric rating scale and r 1= 0.87 for Modified Quality of life assessment scale).hence the tool was found to be reliable and was used in the study.

Pilot study

A pilot study was conducted among 10 patients with mental illness at Abaiya hospital, Bangalore, to find out the feasibility and practicability of the study. The findings of the study suggested that the study was feasible and practicable to conduct the main study.

Data Collection Procedure

The data was collected for a period of 4 weeks. Pretest was conducted by using modified brief psychiatric rating scale and modified quality of life assessment scale for experimental group and control group. Then dance therapy was given for 20 minutes once a day for 15 consecutive days for experimental group. Whereas no intervention was given for patients in the control group. After 15 days post test was conducted by using modified brief Psychiatric rating scale and modified quality of life assessment scale for both the groups.

Findings of the study

➢ Distribution of patient with mental illness according to their age group wise in experimental group shows that 55% of patient with mental illness belong to 31-35 years, 20% and 15% of patient with mental illness were the age group of 21-25 years and 26-30 years 43% and 22% of patient with mental illness were the age group of 21-25 years and 41-50 years comes under control group respectively.

➢ Distribution of patient with mental illness according to their sex in experimental group shows that 85% patient were male and 15% were females where as in the control group 90% of the patient are male and 10% of patients are female.

➢ Distribution of patient with mental illness according to their past history of hospitalization reveals that most (55% and 45%) of patient had past history of hospitalization in the both groups, however 90% and 10% of patient had no history of hospitalization in both the groups.

- Distribution of patient with mental illness according to their family history of mental illness shows majority (90% and 100%) of patient had no family history of mental illness in the both groups and only 10% of patient had family history of mental illness in experimental groups.

- Distribution of patient according to patient taking medication in experimental group 65% of the patient taking regular medication and 55% of patient taking regular medication in control group.

- Distribution of patient according to the duration of illness 35% patient have below one year in experimental group. In control group the highest percentage (50%) of patient with mental illness comes under more than three years. However 10% of patient with mental illness comes under < 1 year and 2-3 year respectively.

- Highly significant effectiveness was found in experimental group (Pre and post test scores)of patients with mental illness in quality of life. The total paired 't' value was 90.41, when compared to 't' value (2.09) is high, at the level of significant ($P<0.05$).

- In experimental group pre and post test scores of mean, standard deviation & mean percentage shows that, In overall mean percentage in pre test was 88.98% whereas in post test was 36.96%, showing a difference of 52.02%.

- In control group pre and post test scores of mean, standard deviation & mean percentage shows that , In overall mean percentage in pre test was 82% whereas in post test was 82% whereas in post test was 80.89%, showing a difference of 1.11%.

- Moderately significant effectiveness was found between experimental and control group post test scores of patients with mental illness in quality of life. The total unpaired ' value was4654, when compared to 't' value (2.05) is high, at the level of significant ($P<0.05$).

- In experimental & control group post test scores of mean, standard deviation & mean percentage shows that, overall mean percentage in pre test was 36.96% whereas in post test was 80.89%, showing a difference of 43.93%.

- There was a significant association between post test scores of psychiatric symptoms in experimental group when compared to past history of hospitalization and taking medication($P>0.05$).

➢ There was no significant association when compared to age, sex, family history of mental illness and duration of mental illness. (P>0.05).

➢ There was no significant association between post test scores of psychiatric symptoms of control group when compared to age, sex, past history of hospitalization, Family history of mental Illness, taking medications and duration of illness.(P>0.05)

➢ There is significant association between post test scores of quality of life in experimental group when compared to sex, past history of hospitalization and taking medication. There was no significant association when compared to age, Family history of mental illness and duration of mental illness .(P>0.05)

➢ There was no significant association between posttest of quality of life in control group when compared to age, sex, diagnosis of the patient, past history of hospitalization.

Conclusion

✓ Highest percentage of patients with mental illness were in the age group of 41-50years, Most of them were Male, Past history of hospitalization, No Family history of mental illness, taking medication regularly and also duration of mental illness in < 1 year.

✓ Dance therapy was highly effectiveness on quality of life among patients with mental illness.

✓ Significant association was found between post test level of quality of life among patients with mental illness and sex, past history of hospitalization.

✓ There was no significant association between post test level of quality of life among Patients with mental illness and socio demographic variables in the control group.

NURSING IMPLICATIONS

NURSING PRACTICE

The important functions of nurse is to promote health, to prevent illness and to restore health. Nurses working in the community and hospitals play a vital role in identifying patients with mental illness.

They can teach the patients about Dance therapy. This therapy can be used in all age group of patients in hospital and community and also used to implement among the care givers of the patients in various settings.

NURSING EDUCATION

Nursing educator should educate the nursing personnel about the therapy in all the wards and find out the effectiveness. The researcher educates the personnel in the mental health unit to follow this therapy for reduction of mental illness.

NURSING RESEARCH

The findings of this study serves as a base for further reference. Further large scale study can be done in different settings; they are workshops and industries, among the employees and employers in schools, colleges among the teachers and students in prisoners, police officers, orphanages and geriatrics care centers.

RECOMMENDATIONS

➢ A similar study can be conducted on large sample size.

➢ A comparative study can be conducted between rural and urban settings.

➢ A similar study can be done to the group using various other interventions and strategies among patients with mental illness.

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