Impact of Counseling Intervention Program on Anxiety, Stress and Depression among Covid-19 Patients

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ABSTRACT

Objective of the study: To find out the Impact of Counseling Intervention Program on Anxiety, Stress and Depression among Covid-19 Patients. Hypothesis: There will be no significant difference between control group and experimental group with respect to Anxiety, Stress and Depression. Sample:- For the present research, the researcher was select 100 patients with Covid-19 for research from Beed District. The researcher was then randomly select 100 patients among them in the experimental group (N = 50) and 50 patients in the control group (N = 50). And Purposive sampling was used. Research Tools: Anxiety, Depression And Stress Scale (ADSS) Bhatnagar P., Singh M. and Pandey M. (2011) were used to assess anxiety, depression and stress .   Statistical Analysis:- t test used for the present study. Conclusion:- 1. Control group (Covid-19 Patients) had significantly high anxiety than the experimental group (Covid-19 Patients). 2. Control group (Covid-19 Patients) had significantly high stress than the experimental group (Covid-19 Patients). 3. Control group (Covid-19 Patients) had significantly high depression than the experimental group (Covid-19 Patients).

Keyword:- Counseling Intervention Program, Anxiety, Stress, Depression, Covid-19 Patients.

Importance of sport is evident and definite for people and societies, and its social, political and psychological aspects have been studied and a special attention has been paid to its connection with the psychological health. Many studies exist about the useful effects to sport and its relation to psychological happiness (Biddel, 1993; Thorlindsson, 1990) self-respect and self- controlling (Gil, 1986; Gilroy, 1989) and reduction to the negative and harmful behaviors such as smoking and drinking Alchohols (Marcus, 1993; Hastad, 1984) and increasing the age (Paffenbarger, 1986). Beside its valuable role in the physical health, sport also has a close relationship with the mental health specifically in preventing the mental disorders. People, who are not active, may face increasing risk of heart disease, mental problems, scruple and other health matters. (Vainio, 2002). Success in the various levels and aspects to life either personal or professional is a concern to whole people, who are physically and mentally normal. There are some definitions for the intelligence quotient (EQ) but the most comprehensive is that definition which has been suggested by (Ciarrochi, 2001)They consider the intelligence quotient as the ability to feel emotions to achieve practical emotions which can help in evaluating thought.

Introduction:-

The World Health Organization (WHO) recognized the outbreak of COVID-19 as a Public Health Emergency in January 2020). By March, the virus had spread to more than 115 countries and COVID-19 was declared a worldwide pandemic. Several countries adopted measures such as nation-wide lockdowns and home-confinement strategies to prevent further transmission of the disease. This led to social distancing, isolation and quarantine to become the norm in a matter of days. India reported its first case of COVID-19 on 30 January 2020 in the state of Kerala. By February, this number rose to 3 (Reid, 2020).

The rapid spread of the pandemic led the government to curb the spread of the virus using measures such as higher diagnostic testing, contact tracing and social distancing (Economic Times, 2020). Notably, a nationwide lockdown was announced by the Government of India on 24 March 2020 (Ray & Subramanian, 2020). Although the lockdown was initially announced for 21 days, it was extended twice, thus lasting for nearly two months in total (Ray & Subramanian, 2020). During this time, all non-essential movement was banned and people were asked to stay at home. Travel by road, air or railway was completely suspended. Most commercial and cultural establishments such as restaurants, historical sights and monuments, places of religious worship, cinema halls and malls were closed down. All educational institutions such as schools and colleges were completely shut down and examinations postponed till further notice.

People diagnosed with COVID-19 may experience a range of distress during their course of illness varying from shock, fear, denial to anger, irritability, frustration and many more. Though overcoming distress adaptively supports and accentuates the recovery of the patients with COVID19,sometimes, distress becomes so overwhelming for few that it has a deleterious impact on the patients' mental health, impeding recovery in many cases. Thus, an urgent need was realised for providing psychosocial care to the patients to optimise their mental health and well-being. Though psychosocial Intervention for managing disaster and other traumatic life events pre-exists, the global pandemic of COVID-19 has posed unique challenges to people, requiring reconsiderations to its effective management. For example, the difficulty in accepting the diagnosis, uncertainty about the course and progress of the illness, feeling of loneliness resulting from being quarantined etc.

Establishing a Therapeutic Relation: The patient may meet a counselor with a varied mindset (apprehensions, anxieties, misconceptions, fear etc.) which can be overcome by initiating a strong therapeutic relationship. An excellent way to build such a relationship is by counselor introducing themselves to the patient and clarifying the specific reason for their visit or the goal of counseling, followed by initiating an open communication with the patient about their life in a manner they want to outline. For those who find it difficult to talk about themselves initially, the counselor may introduce a variety of neutral topics to begin the conversation and gradually progresses on to the details of the patient's life, which they would want to talk about. The aim is to create a safe therapeutic environment based on trust where the client achieves a sense of comfort in expressing their concerns openly to the counsellor without fear of being judged or evaluated. Counsellor's ability to be empathic, congruent, and accepting of the client unconditionally is considered essential but sufficient conditions for bringing any therapeutic gains in sessions (Rogers, 1951,1957).

Objective of the study:

1) To find out the Impact of Counseling Intervention Program on Anxiety, Stress and Depression among Covid-19 Patients.

Hypothesis:

1) There will be no significant difference between control group and experimental group with respect to Anxiety, Stress and Depression.

Sample:-

For the present research, the researcher was select 100 patients with Covid-19 for research from Beed District. The researcher was then randomly select 100 patients among them in the experimental group (N = 50) and 50 patients in the control group (N = 50). And Purposive sampling was used.

Variables :-

Independent variable-

1) **Counseling Intervention Program**

   a) Those who patients Counseling Intervention Program during Covid-19 treatment Covid-19 treatment (Experimental Group)

   b) Patients who did not receive Counseling Intervention Program

   During Covid-19 treatment Covid-19 treatment (Control Group)

   Dependent Variable

1) Anxiety 2) Stress 3) Depression

Research Tools:

1) **Anxiety, Depression And Stress Scale (ADSS)**

Bhatnagar P., Singh M. and Pandey M. (2011) were used to assess anxiety, depression and stress. ADSS comprises of 48 items divided in to three subscales which are- 1. Anxiety subscale- comprises of 19 items covering various symptoms that are manifestation of anxiety. 2. Depression subscale comprises of 15 items representing the different symptoms of depression. 3. Stress subscale having 14 items and they are covering the symptoms that people experience in the state of stress. Responses of the items are in terms of yes or no.

Statistical analysis and discussion

Mean S.D. and "t" Value of Experimental Group and Control Group with respect to Anxiety, Stress Depression among Covid-19 Patients.

Dimensions	Experimental Group		Control Group		t
	Mean	SD	Mean	SD	Value
Anxiety	2.17	2.01	4.97	2.09	**6.82****
Stress	3.01	2.10	5.78	2.41	**6.12****
Depression	1.96	1.75	4.10	1.48	**5.75****

*** Significant at 0.01level, * Significant at 0.05 level and NS Not Significant**
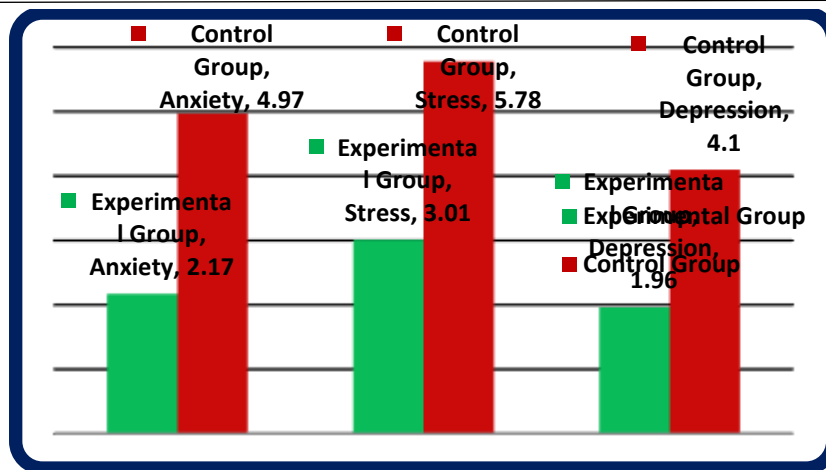
The results related to the hypothesis have been recorded. Mean of Anxiety score of the experimental group (Covid-19 Patients) Mean is 2.17, SD = 2.01 and that of the control group (Covid-19 Patients) Mean is 4.97, SD = 2.09 the difference between the two mean is highly significant ('t'= 6.82, df = 98, P < 0.01). It was found that the control group had significantly high anxiety than the experimental group.

Mean of Stress score of the experimental group (Covid-19 Patients) Mean is 3.01, SD = 2.10 and that of the control group (Covid-19 Patients) Mean is 5.78, SD = 2.41 the difference between the two mean is highly significant ('t'= 6.12, df = 98, P < 0.01). It was found that the control group (Covid-19 Patients) had significantly high stress than the experimental group (Covid-19 Patients).

Mean of Anxiety score of the experimental group (Covid-19 Patients) Mean is 1.96, SD = 1.75 and that of the control group (Covid-19 Patients) Mean is 4.10, SD = 1.48 the difference between the two mean is highly significant ('t'= 5.75, df = 98, P < 0.01). It was found that the control group (Covid-19 Patients) had significantly high depression than the experimental group (Covid-19 Patients).

Conclusion:-

1) Control group (Covid-19 Patients) had significantly high anxiety than the experimental group (Covid-19 Patients).

2) Control group (Covid-19 Patients) had significantly high stress than the experimental group (Covid-19 Patients).

3) Control group (Covid-19 Patients) had significantly high depression than the experimental group (Covid-19 Patients).

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