

# Effectiveness of Selected Intervention on Depression Among Menopausal Women In Selected Areas of Jabalpur, MP

Mrs .SaritaSuryavanshi<sup>1</sup>, Prof.Dr.Jinu K Rajan<sup>2</sup>

<sup>1,2</sup>Malwanchal University

## I. INTRODUCTION

The purpose of this research was to see if autogenic relaxation has any influence on depression in postmenopausal women living in Jabalpur, MP. The experimental group(50) and control group were selected using simple random sampling (50). The amount of depression was assessed using a 5-point likert scale as a data collection method. Before administering autogenic relaxation to the experimental group, the severity of depression was measured using the pre-test. It took four weeks for the post-test depression to be assessed after autogenic relaxing. An in-depth statistical analysis was conducted on the collected data.

## II. TAKEAWAYS FROM THE EXPERIMENT

In both the experimental and control groups, menopausal women older than 50 years old made up the majority (38.33 percent) (54.67 percent ). The experimental group's menopausal women had a higher level of education (52.12%), whereas the control group's menopausal women had a lower level of education (1.87%). 96.2 percent of the menopausal women in the experimental group were married, compared to 83.3 percent of the menopausal women in the controls. The experimental group's menopausal women were 80% Hindu, while the control group's women were 72% Hindu. Women in both the experimental and control groups (68.33 percent) were mostly housewives (62.67 percent ). Menopausal women in the experimental group (46.66 percent) and in the control group (53.33 percent) are more likely to have had two children. Most menopausal women (65.33 percent) in both the experimental and control groups are part of a nuclear family (60 percent). Menopausal women in the experimental group (56.66 percent) stopped menstruating before a year, while 46.6% of those in the control group stopped menstruating before two years after menopause began. The experimental group's menopausal women (56.34 percent) and the control group's women (54.33%) had no issues with their husbands. Menopausal women in the experimental group (61.67 percent) and menopausal women in the control group (64.11 percent) reported financial

difficulties. In both the experimental and control groups, 56.67 percent of menopausal women were free of any health issues. On the 22nd of December, the experimental group's mean depression level was lower than the experimental group's mean depression level before the test (45.13). At a 0.05 significance level, the 't' value of 9.33 is statistically significant.

The experimental group's mean post-test depression level (22.12) was lower than the control group's mean post-test depression level (42.03). The 't' value of 8.45 that was obtained was statistically significant at the 0.05 level.

When it came to post-test depression, there was no statistically significant link between it and demographic factors including age, educational attainment and married status as well as religious affiliation and family size as well as the time between menstruation and the end of the menstrual cycle. Demographic factors like occupation (2=12.54) and marital problems were statistically linked to post-test depression levels (14.32).

## III. DISCUSSION

Researchers discovered that autogenic relaxation therapy significantly reduced depression symptoms in postmenopausal women, proving the efficacy of the therapy in treating the condition. Depressive symptoms in menopausal women can range from mild (43.33 percent) to moderate (56.67 percent). This shows how autogenic relaxation meditation can help with depression. There was no difference in the reduction of depression in menopausal women between the experimental group and the control group.

The pre- and post-test scores of the experimental group were compared to determine the efficacy of autogenic relaxation. The experimental group's mean post-test depression level (22.12.) was lower than the experimental group's mean pre-test depression level (45.13). At a 0.05 significance level, the 't' value of 9.33 is statistically significant. Following is a list of studies that support the

conclusions from this one: Menopausal women were studied by Bernstein and Borkovec et al. (1973), who found that using the Hamilton Depression Scale, 40 out of 60 women who took autogenic relaxation weekly for three weeks saw a significant reduction in their symptoms of depression. Relaxation training, such as progressive muscular relaxation, autogenic relaxation, and meditation, was studied by Deffenbacher, Me Namara et al. (1990). Using autogenic relaxation as a treatment for menopausal depression, Lehee and Woolfolk (1993) came to the conclusion that it works. Autogenic training was demonstrated to be useful in the treatment of depression by Heimberg (1989). Autogenic relaxation has also been studied for its effect on menopausal depression in numerous research. Following an in-depth study, it was discovered that autogenic relaxation may assist improve quality of life while reducing symptoms of stress and anxiety. Studies like cognitive behavior therapy and autogenic relaxation with biofeedback were found to alleviate depression in a meta-analysis of 20 trials.

In terms of treating anxiety and depression symptoms, there is a good deal of data to back up relaxation methods. Researchers found that relaxation techniques (such as Jacobson progressive relaxation, autogenic training, and meditation) were helpful after reviewing 27 trials in 2008. One of the indications for autogenic relaxation therapy is the management of depression, according to the theoretical review. (Johannz). Theoretically, the above-mentioned viewpoint applies to this investigation as well.

Furthermore, the researcher's findings add to the efficacy of autogenic relaxation in the treatment of depression. Experimental and control groups' post-test scores were compared to bolster the case. The experimental group's mean post-test depression level (22.12) was lower than the control group's mean post-test depression level (42.03). At a 0.05 significance level, the 't' value of 8.45 was found to be significant.

Age, educational status, married status, religion, number of children, family type, menstruation cessation period, financial problems, and medical problems had no statistically significant relationship with the mean post-test degree of depression. There was a statistically significant link between marital problems (14.32 and post-test depression) and marital status ( $t=12.54$ ). An in-depth study of the statistical data shows that regardless of the demographic variables considered (such as marital status or age), autogenic relaxation had a positive effect on everyone. This was true for women regardless of menstrual cycle length, marital troubles or financial difficulties.

In peninsular Malaysia, a household survey was conducted to look at the incidence of depression symptoms in middle-aged women and the factors that contribute to it. For women between the ages of 40 and 60, sociodemographic characteristics, menopausal state, depressive symptoms, connection with their husband, and coping mechanisms were assessed. This study had a total of 3934 female participants, with an average age of 51 years. Depressive symptoms were seen in 54.2% of people. There was a strong correlation between depressive symptoms and marital status ( $p.001$ ) and occupational status ( $p.001$ ). There was a link between depressive symptoms and marital dissatisfaction. The study's key strength, according to the researcher, is that this therapy is straightforward but underutilized because there isn't enough research on it. Nursing will benefit from the study's findings and its topic since new information will be added to the field.

#### IV. CONCLUSION

According to the study's goals, theoretical foundation, and hypothesis these findings have been reviewed. The majority of menopausal women in Jabalpur (56.67 percent) were depressed to a moderate degree. The amount of depression experienced by menopausal women in the study was reduced because to autogenic relaxation. It was discovered that autogenic relaxation may be given to all postmenopausal women to help them cope with their feelings of sadness and loneliness.

#### REFERENCES

- [1] Brow.,J,P&Gallichio, L (2009). Menopausal Women with Depression. *Journal of Obstetrics and Gynecology* 17(3), pp. 121-123.
- [2] Bhargari Davar (1995). Mental Illness among Indian women. *Economic and Political Weekly* 11(2), pp 28.
- [3] Chedraws, A. Guicophobia, C (2008). Menopausal Women with Depression. *Journal of obstetrics and Gynaecology* 17(3), pp 121-123.
- [4] Dennerstein , L. Dudley, E. Hopper, J (2000). a Prospective population based study of menopausal symptoms, *journal of obstetrics & gynecology* 9(6) pp 22-23.
- [5] Ernst, E. Kanji, N (2000). Autogenic relaxation on Depression. *Journal of Clinical Psychology* 32(4), pp 306-308.
- [6] Graziottin, A. Sarafini . (2009). Menopausal women with Depression. *Internal Journal of Human Development* 4(13), pp 225-265.
- [7] Irvin, H. Domar, C. Clark . (1996). The effects of relaxation response training of menopausal symptoms.

The journal of psychosomatic obstetrics &gynecology  
18(3) pp 143-145.

- [8] Kaurt, P. Gillber,P (2008). Menopausal women with Depression. Journal of Community health service 4(2),pp 143-148