

A descriptive study to assess the general wellbeing and psychological distress of leprosy patients in selected leprosy centre at Indira Gandhi Medical College And Hospital, Shimla (h.p.) India

Corresponding Author: Reena Dogra

Date of Submission: 08-07-2020	Date of Acceptance: 23-07-2020

I. INTRODUCTION

Throughout its history, leprosy has been feared and misunderstood. For a long time leprosy was thought to be a hereditary disease, a curse, or a punishment from God. Before and even after the discovery of its biological cause, leprosy patients were stigmatized and shunned. For example, in Europe during the middle Ages, leprosy sufferers had to wear special clothing, ring bells to warn others that they were close, and even walk on a particular side of the road, depending on the direction of the wind. Even in modern times, leprosy treatment has often occurred in separate hospitals and live-in colonies called leprosarium's because of the stigma of the disease. Leprosy has been so prevalent in various areas as certain times throughout history that is has inspired art work and influenced other cultural practices (Litchfield, AAOHN, 2010).

Statement of the Problem : A Descriptive Study to Assess the General Wellbeing and Psychological Distress of Leprosy Patients in Selected Leprosy Centre at Indira Gandhi Medical College and Hospital Shimla (H.P.)

Objectives:

- 1. To assess the general wellbeing of the leprosy patients.
- 2. To assess the psychological distress among the leprosy patients.
- 3. To find the association between general wellbeing and psychological distress with their selected demographic variables.

II. METHODS AND MATERIALS

Research Approach: A Quantitative approach was adopted to accomplish the objectives of the study that is to assess the general wellbeing and psychological distress of leprosy patients. **Research Design:** Non experimental descriptive design was adopted to accomplish the main objectives of study. **Setting of Study:** The present study was conducted in leprosy centre. The rationale for selecting these setting for the study was the geographical proximity and availability of data. **Population:** The target population of study was all leprosy patients of leprosy centre. Sample and Sampling Technique: 100 leprosy patients will be selected by convenient sampling technique, the subjects who will be available in leprosy centre at time of data collection wills taken as sample. Development of the Tool: The tool was constructed to assess the general wellbeing & psychological distress of leprosy patients. The tool was developed after extensive review of literature, experts' opinion and researcher's own experience in clinical area as well as in teaching institution. Positive **Statements** were

Negative statements were 1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,17, 25, 41, 46 18,19,20,21,22,23,24,26,27,28,29,30,31,32, 33,34,35,36,37,38,39,40,42,43 44,45,47,48, 49, 50. Scoring: Each item was given score accordingly Positive items: Negative items: Outstanding wellbeing 1 Outstanding wellbeing = 4 Good wellbeing 2 Good wellbeing 3 Some wellbeing 3 Some = wellbeing risk = 2 Serious risk= 4 and unnecessary Serious and unnecessary risk=1 Maximum Score = 200Minimum Score = 50Criteria measure for each domain Outstanding wellbeing = > 161 Good wellbeing 124-161 Some wellbeing risk 87-124 = Serious and unnecessary risk = < 87 Criteria measure for each domain



Outstanding wellbeing = > 34,Good wellbeing = 34-26

Some wellbeing risk = < 26- 18, Serious and unnecessary risk = < 18

Section C: Three point rating scale to assess the psychological distress of leprosy patients. It consisted of total 40 items.

Scoring: Each item was given score accordingly: Always = 3, Sometimes= 2, Never = 1

Maximum Score = 120, Minimum Score = 40

Criteria measure < 67 = Mild psychological distress, 67-94 = Moderate psychological distress > 94 = Severe psychological distress

Tryout: Tryout of tool was done for clarity and feasibility of conducting the study. necessary modifications were made after tryout.

Content Validity: It was determined by experts 'opinion, the tool was given to experts from the field of psychiatry, experts of psychiatry and mental health nursing from various nursing and medical colleges. Certain additions, deletions and refinement of items were done after the suggestions of experts.

Reliability of Tool: Reliability of three point rating scale was determined by split half method, using Spearman brown's formula. The value of r was found to be 0.838. Hence tool was considered reliable.

Ethical Considerations: Approval was taken from the ethical and research committee of the institution. Permission was taken from head of

selected leprosy centre. Before data collection. Written informed consent was taken from individual subject before administering the tool.

Pilot Study: Pilot study was conducted in the month of February 2017 on 10 leprosy patients of selected leprosy centre. Analysis and interpretation of data collected in pilot study was done in accordance to objectives and feasibility was assessed.

Data Collection Procedure: Data collection procedure will carried out in the month of March 2017.Written permission was taken from the incharge of selected leprosy centre. Before data collection researcher will introduced herself, explained the purpose of study, clarified queries and took consent from individual subject.

Difficulties faced by researchers: Problems faced were: Some time subjects got irritated because of their condition, so they avoided to interact: Difficulty in seeking permission from the institution.

PLAN FOR ANALYSIS: Analysis and interpretation of data was done according to the objectives using descriptive and inferential statistics. The level of significance at p level 0.05 was chosen.

ANALYSIS AND INTERPRETATION OF DATA:

The collected data was tabulated and analyzed using descriptive and inferential statistics under following headings:

Socio Demog	graphic Variables		N=100
		Frequency(f)	Percentage(%)
Age (in years)	20-40	7	7%
40-60		51	51%
	60-80	42	42%
	Any Other	0	0%
Gender	Male	44	44%
	Female	56	56%
Educational Illiterate		99	99%
Status	Primary	1	1%
	Middle	0	0%
	Matric	0	0%
	Higher Secondary	0	0%



	Graduation and above	0	0%
Occupation	Unemployed	100	100%
	Private Service	0	0%
	Self Employed	0	0%
	Govt. Services	0	0%
Marital Status	Unmarried	0	0%
	Married	94	94%
	Widow	0	0%
	Divorced	6	6%
	Separated	0	0%
Religion	Hindu	100	100%
	Muslim	0	0%
	Sikh	0	0%
	Christian	0	0%
Monthly	Rs. < 3,000	100	100%
Family income	Rs. 3,001- 4,000	0	0%
	Rs. 4,001- 5,000	0	0%
	Above Rs5,000	0	0%
Residential	Urban	100	100%
Place	Rural	0	0%
Type of Family	Nuclear	38	38%
	Joint	62	62%
Duration of	20-30	13	13%
your suffering with leprosy	31-40	20	20%
1 2	41-50	67	67%
Duration of	20-30	3	3%
stay in leprosy centre	31-40	17	17%
	41-50	80	80%



CRITERIA MEASURE OF WELLBEING SCORE					
Category Score	Frequency	Percentage			
Outstanding wellbeing(>161)	0	0%			
Good wellbeing(124-161)	9	9%			
Some Wellbeing Risks(87-124)	78	78%			
Serious and Unnecessary Risks(<87)	13	13%			

Maximum Score=200 Minimum Score =50

TABLE NO. 4.

3: Descriptive statistics of general wellbeing of leprosy patients.

N=100								
Descriptive StatisticsMeanSDMedianMaximumMinimumRa								
Wellbeing Score	101.48	13.86	100.00	145	80	65		
Maximum= 200 Minimum= 50								

TABLE NO. 4.4: Descr	iptive statist	ics of Area	wise analysis o	of general wellbeing score	of leprosy patients

Descriptive Statistics	Physical Health	Social Health	Emotional Health	Spiritual Health	Intellectual Health	Overall
Mean	28.40	40 15.96 21.13 18.32 17.67		101.48		
S.D.	4.723	4.007	2.565	4.886	3.461	13.863
Median	28	15	21 17 16.5		100	
Maximum	40	30	27	36 29		145
Minimum	19	19 10 16 10		10	12	80
Number	100	100	100	100	100	100

TABLE NO. 4.5: Item wise analysis of	of general wellbeing	g score of leprosy patient	s (refer Figure 4.19)
--------------------------------------	----------------------	----------------------------	-----------------------

	Area	Itemwise Analysis	4 %(f)	3 %(f)	2 %(f)	1 %(f)
ng		Qno.1	15	6	6	73
Ilbei	General Welllbein General Welllbein General Mealth General Mealth	Qno.2	80	20	0	0
Wel		Qno.3	81	15	4	0
eral		Qno.4	90	7	1	2
Gen		Qno.5	35	13	2	50
		Qno.6	10	32	7	51
		Qno.7	44	29	1	26



		Qno.8	49	34	8	9
		Qno.9	80	16	1	3
		Qno.10	4	0	2	94
		Qno.11	12	61	5	22
		Qno.12	8	7	9	76
		Qno.13	61	12	8	19
		Qno.14	8	2	6	84
		Qno.15	2	0	1	97
	Social Health	Qno.16	0	10	1	89
		Qno.17	5	1	8	86
		Qno.18	11	2	0	87
		Qno.19	5	1	4	90
		Qno.20	1	10	3	86
		Qno.21	65	26	2	7
		Qno.22	15	14	3	68
		Qno.23	6	58	4	32
		Qno.24	1	76	7	16
	Emotional Health	Qno.25	0	30	3	67
		Qno.26	27	58	3	12
		Qno.27	2	28	1	69
		Qno.28	5	43	8	44
		Qno.29	4	6	1	89
		Qno.30	4	7	2	87
		Qno.31	0	2	5	93
		Qno.32	29	40	4	27
		Qno.33	12	66	11	11
		Qno.34	57	19	3	21
	Spiritual Health	Qno.35	2	17	3	78
		Qno.36	2	8	5	85
		Qno.37	6	11	1	82
		Qno.38	2	4	4	90
		Qno.39	14	11	2	73
		Qno.40	6	24	0	70
	Intellectual Haalth	Qno.41	10	78	8	4
	Intellectual Health	Qno.42	2	25	14	59



I				1	
	Qno.43	1	10	2	87
	Qno.44	0	8	10	82
	Qno.45	4	9	6	81
	Qno.46	0	78	13	9
	Qno.47	0	15	13	72
	Qno.48	7	39	2	52
	Qno.49	7	8	4	81
	Qno.50	1	26	7	66

TABLE NO. 4.6: Frequency and percentage of psychological distress score of leprosy pa	atients
---	---------

CRITERIA MEASURE OF PSYCHOLOGICAL DISTRESS SCORE								
Category Score	Frequency	Percentage						
Severe(>94)	29	29%						
Moderate(67-94)	71	71%						
Mild(0-67)	0	0%						

Maximum Score=120 Minimum Score=40

TABLE NO. 4.7: Descriptive statistics of psychological distress score of leprosy patients

N=100

Г

Descriptive Statistics	Mean	SD	Median	Maximum	Minimum	Range			
Psychological Distress Score	92.72	4.207	93.00	103	83	20			
	Maximum- 120 Minimum- 40								

Maximum= 120 Minimum= 40

TABLE NO. 4.8: Item wise analysis of psychological distress score of leprosy patients (refer Figure 4.24)

	Areas	Itemwise Analysis	Always %(f)	Sometimes %(f)	Never %(f)
ore		Qno.1	52	47	1
Psychological Distress Score		Qno.2	59	39	2
stres		Qno.3	14	82	4
l Dis	ပု	Qno.4	18	78	4
gica	Section-C	Qno.5	34	62	4
holo	Sec	Qno.6	11	89	0
Psyc		Qno.7	10	88	2
-		Qno.8	43	57	0
		Qno.9	75	23	2



 1	1		
Qno.10	75	19	6
Qno.11	19	80	1
Qno.12	18	80	2
Qno.13	12	86	2
Qno.14	36	64	0
Qno.15	66	32	2
Qno.16	12	83	5
Qno.17	39	61	0
Qno.18	74	22	4
Qno.19	54	38	8
Qno.20	24	76	0
Qno.21	54	44	2
Qno.22	77	16	7
Qno.23	47	47	6
Qno.24	52	46	2
Qno.25	14	86	0
Qno.26	15	79	6
Qno.27	39	55	6
Qno.28	18	82	0
Qno.29	43	57	0
Qno.30	60	38	2
Qno.31	58	40	2
Qno.32	12	74	14
Qno.33	13	85	2
Qno.34	49	49	2
Qno.35	63	37	0
Qno.36	26	70	4
Qno.37	18	82	0
Qno.38	20	76	4
Qno.39	8	55	37
Qno.40	2	84	14

TABLE NO. 4.9: Association between the general wellbeing of leprosy patients in selected leprosy centre with their selected Socio Demographic Variables

Demogra	Demographic Variables			Levels(N=100)			ciation wi	th W	ELLBEI	NG Score
Variable	Opts	Outstanding wellbeing	Good wellbeing	Some Wellbeing Risks	necessal Ricke	Chi Test	P Value	df	Table Value	Result



Age (in	20-40	0	7	0					
years)	40-60	4	41	6	3.20	0.524	4	0.400	Not
	60-80	5	30	7	8	0.524	4	9.488	Significa nt
	Any Other	0	0	0					
Gender	Male	4	38	2	5.02	0.001	2	5 001	Not
	Female	5	40	11	6	0.081	2	5.991	Significa nt
Education	Illiterate	9	77	13					
al Status	Primary	0	1	0					
	Middle	0	0	0					Not
	Matric	0	0	0	0.28	0.867	2	5.991	Significa
	Higher Secondary	0	0	0					nt
	Graduation and above	0	0	0					
Occupatio	Unemployed	9	78	13					
n	Private Service	0	0	0	NA				
	Self Employed	0	0	0	NA				
	Govt. Services	0	0	0					
Marital Status	Unmarried	0	0	0	1.80 0				Not Significa nt
Status	Married	9	72	13				5.991	
	Widow	0	0	0		0.407	2		
	Divorced	0	6	0					
	Separated	0	0	0					
Religion	Hindu	9	78	13	-				
	Muslim	0	0	0	NA				
	Sikh	0	0	0					
	Christian	0	0	0					
Monthly Family	Rs. < 3,000	9	78	13					
income	Rs. 3,001- 4,000	0	0	0	NIA				
	Rs. 4,001- 5,000	0	0	0	NA				
D 11	Above Rs 5,000	0	0	0					
Residentia l Place	Urban	9	78	13	NA				
	Rural	0	0	0					
Type of Family	Nuclear	4	34	0	9.16	0.010	2	5.991	Significa
-	Joint	 5	44	13	1		2	5.991	nt
Duration of your	20-30	0	13	0	13.8				Significa
suffering	31-40	0	20	0	92	0.008	4	9.488	Significa nt
with	41-50	9	45	13					

DOI: 10.35629/5252-45122323 | Impact Factor value 7.429 | ISO 9001: 2008 Certified Journal Page 609



leprosy									
Duration	20-30	0	3	0					Not
of stay in leprosy	31-40	0	17	0	7.05	0.133	4	9.488	Significa
centre	41-50	9	58	13	1				nt

TABLE NO. 4.10: Association between the psychological distress of leprosy patients in selected leprosy centre
. Their selected Socio Demographic Variables.

Demograp	hic Variables	Le	evels(N=100)	1	Association with PSYCHOLOGICAL DISTRESS Score				
Variable	Opts	SEVERE	MODERA TE	MILD	Chi Test	P Value	df	Table Value	Result
Age (in	20-40	0	7						
years)	40-60	15	36		3.246	0.197	2	5 001	Not Signific
	60-80	14	28		5.240	0.197		5.991	Signific ant
	Any Other	0	0						
Gender	Male	12	32		0.114	0.726	1	2.041	Not
	Female	17	39		0.114	0.736	1	3.841	Signific ant
Educational	Illiterate	29	70						
Status	Primary	0	1		-				
	Middle	0	0						Not
	Matric	0	0		0.413	0.521	1	3.841	Signific
	Higher Secondary	0	0						ant
	Graduation and above	0	0						
Occupation	Unemployed	29	71						
	Private Service	0	0						
	Self Employed	0	0		NA				
	Govt. Services	0	0		-				
Marital	Unmarried	0	0						
Status	Married	29	65						Not
	Widow	0	0		2.607	0.106	1	3.841	Signific
	Divorced	0	6						ant
	Separated	0	0]				
Religion	Hindu	29	71						
					NA				
	Muslim	0	0		1				



ı	1	1	I	1	1	I	I	l	
	Sikh	0	0		-				
	Christian	0	0						
Monthly	Rs. < 3,000	29	71						
Family income	Rs. 3,001- 4,000	0	0						
	Rs. 4,001- 5,000	0	0		NA				
	Above Rs 5,000	0	0						
Residential	Urban	29	71		NA				
Place	Rural	0	0		INA				
Type of	Nuclear	6	32		5 105	0.022	1	3.841	Signific
Family	Joint	23	39		5.195	0.023	1	5.841	ant
Duration of	20-30	0	13						
your suffering	31-40	4	16		8.346	0.015	2	5.991	Signific ant
with leprosy	41-50	25	42						an
Duration of	20-30	0	3						Not
stay in leprosy	31-40	4	13		1.669	0.434	2	5.991	Signific
centre	41-50	25	55						ant

Summary of Major findings : Majority of patients were in age group of 40-60 years (51%), were females (56%) were illiterate (99%) and (94%) married. Majority (62%) were living in joint family. All the subjects (100%) were Hindu, unemployed, having monthly income < 3000Rs and were from urban area. On the basis of total mean general wellbeing score it can inferred that general wellbeing of leprosy patients was some wellbeing risk.

III. DISCUSSION

First objective of present study was to assess the general wellbeing among leprosy patients. Study results revealed that none had outstanding wellbeing, 9% had good wellbeing.78 % had some wellbeing risk and 13% had serious and unnecessary risk wellbeing. The mean score of general wellbeing was101.48,

IV. SUMMARY AND RECOMMENDATIONS:

The present study was conducted to assess the general wellbeing and psychological distress among leprosy patients in selected leprosy centre. Conceptual frame work was developed based on Roy adaptation model (1964) Convenient sampling technique was used for selection of samples. Pilot study was conducted during the month of February 2017 on 10 subjects in leprosy centre.

REFERENCE

- [1]. Anandaraj <u>H</u>. Measurement of self esteem and dehabilitation in patients of leprosy indian <u>J</u> Lepr. 1995 Apr-Jun;67(2):153-60.
- [2]. An JG, Ma JH, Xiao SX, Xiao SB, Yang F. Quality of life in patients with lepromatous leprosy in China. J Eur Acad Dermatol Venereol. 2010 Jul;24(7):827-32. Epub 2009 Dec 15.
- [3]. Baumann H, Stingl P, Van Wijnen A, Loscher T. Psychosocial, economic and physical status of former leprosy patients in Uganda. Gesundheitswesen. 2000 Jun; 62(6):342-6.
- [4]. Boku N, Lockwood DN, Balagon MV, Pardillo FE, Maghanoy AA, Mallari IB, Cross H. Impacts of the diagnosis of leprosy and of visible impairments amongst people affected by leprosy in Cebu, the Philippines.Lepr Rev. 2010 Jun;81(2):111-20
- [5]. Barkataki A, Nanda NK, Kumar S Rao PS, Raju MS, . Extent and correlates of leprosy stigma in rural India. Indian J lepr. 2008 Apr-Jun; 80(2): 167-74.



- [6]. Bharath S, Shamasundar C, Raghuram R, Subbakrishna DK. Correlates of psychiatric morbidity in patients with leprosy. Indian J Lepr. 2001 Jul-Sep;73(3):217-28.[cited 2009 nov 2] Available from:URL:PMID: 11840594 [PubMed - indexed for MEDLINE].
- [7]. Cotterill A,c Cunlife WJ: suicide in dermatological patients . Br .J Dermatolol 1997 1997,137 (20. Dernolunch1997,137(2):246-250 Pub med abstract.
- [8]. Chakraborty A, Mahato M, Rao PS. Selfcare programme to prevent leprosy- related problems in a leprosy colony in Champa, Chattisgarh. Indian J Leper. 2006oct-dec; 78(4): 319-27.
- [9]. D'Almeida L, Seck AM, Picard P, Sylla O, Stephany J. [The patient with Hansen's disease confronts his distress] Acta Leprol. 1986 Jan-Mar;4 (1):59-72. 266[cited 2009

oct18]. Available from PMID: 3526795(Pub Med-indexed for MEDLINE).

- [10]. De Groot R, Van Brakel WH, De Vries HJ. Social implications of leprosy in the Netherlands--stigma among ex-leprosy patients in a non-endemic setting. Lepr Rev. 2011 Jun;82(2):168-77.
- [11]. George B.Julia Nursing Theories The base for professional nursing practice 6th edition,2011. Published by Pearson.
- [12]. Heijnder ML. Experiencing leprosy: Perceiving and coping with leprosy and its treatment. A qualitative study conducted in Nepal. Lepr Rev. 2004 dec; 75(4):327-37.
- [13]. Joy Rafferty (2005) Curing the stigma of leprosy Lepr Rev (2005) 76
- [14]. Kaur H, Van Brakel W. The Leprosy Mission India, New Delhi 110001,India. Kaur-harvinder@hotmail.com . lepr Rev. 2003 sep; 74(3): 280-1.