

Effect of Group Interpersonal Psychological Therapy (IPT) Program on Female College Students with Depression

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ABSTRACT

Objective: it is purposed to observe the effect of the group interpersonal psychotherapy on the female college students with depression. Methods: 55 female college students with depression are selected to accept the group interpersonal psychotherapy program. It is required to compare the depression degree and the life quality of the patients before and after treatment. Results: after treatment, the SDS scores(27.48±3.36)and the HAMD scores(8.44±2.78)of the participants are significantly lower than the ones before treatment. The difference is statistically significant(P<0.05); after treatment, the IIP scores(0.75±0.58)and the SDSS scores(4.81±1.84)of the participants are significantly lower than the ones before treatment. The difference is statistically significant(P<0.05); after the treatment, the COOLI-74 scores(52.64±4.76)are significantly higher than (37.86 ± 4.32) before the treatment. The difference is significant(P<0.05). Conclusion: statistically the group interpersonal psychotherapy can significantly improve the depressive symptoms and the social ability of the female college students with depression and effectively improve the quality of life. The effect of treatment is good.

Keywords

group interpersonal psychotherapy; depression; social function; quality of life

1. INTRODUCTION

The depression is a common mental disease. The clinical symptoms mainly include the black mood, the slightest interest, the slow thought, the dropped volitional activity and the cognitive impairment^[1]. The patients with depression are mainly the young women and the female college students account for a large proportion in the young women. Due to the influence of family, learning and employment, the depressive symptoms and the social function damage are relatively serious and the severe patients will have the suicidal intention and behavior^[2]. Some studies have shown that the group interpersonal psychotherapy can effectively improve the depressive symptoms of the patients with depression and the social abilities^[3]. Therefore, 55 female college students with depression who are accepting the drug treatment in hospital have been selected in this study. Under the support of the doctors and the patients, they will accept the group interpersonal psychotherapy. During this process, the therapeutic effect of the group interpersonal psychotherapy program on the female college students with depression has been observed and analyzed so as to

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provide reference for the related treatment and work. The report is shown as follows.

IPT treatment: 55 female college students are divided into five groups with 11 people in each group. Each group should arrange a full-time group therapist as the leader of treatment group. The treatment is arranged once a week and a treatment should be conducted for 90min. There are 16 treatments.

2. GENERAL INFORMATION

2.1 General information

55 female college students with depression who visit a hospital in Xi'an from January 2015 to May 2017 have been selected. All patients are consistent with the diagnostic criteria of depression after being checked. The patients with the suicidal tendencies, the malignant tumor and the severe liver and kidney disease have been excluded. This study is supported by the medical ethics committee of the hospital and the patients and they have signed the informed consent. There are 55 female college students in this study with 17-25 years old. The average age is 21.47 years old. The course of disease is 4 months- 4 years and the average course of disease is (1.87 ± 1.03) years.

2.2 Treatment method

The conventional treatment: Pa Rossi Dean (China and the United States Tianjin Shike Pharmaceutical Co., Ltd) should be orally taken every day when having breakfast. The initial dose is 20mg each time and it should be taken once a day. The dose should be increased 10mg every week and the range of the therapeutic dose is from 20mg to 60mg, the medicine should be taken for several times and the treatment period is 12 weeks.

The whole treatment process is divided into three stages: the early stage refers to the first three treatments. It is required to understand the disease of the members of this group, explain the purpose of treatment and the treatment process, reach a consensus with the team, get familiar with each other and create a comfortable community atmosphere so as to ensure the group members to smoothly recall their depressive symptoms and the early treatment process. Finally, it is necessary to select the key interpersonal problems as the treatment goals. The mid-term stage refers to the treatments from the fourth one to the twelfth one. During this stage, the team members will discuss their own problems to help them to associate the depressive symptoms with the current treatment. At the same time, the members should listen to others and give suggestions to help others to find the fixed behavior and communication modes in life as well as help them to make changes and establish a new healthy social support system. The post stage refers to the treatments from the thirteen one to the sixteen one. During this stage, the team members will communicate with the changes of the depressive symptoms as well as the lifestyle changes brought by the changes of the

behavior and the interpersonal communication changes so as to help the team members to plan the future. Meanwhile, the team members should discuss the treatment experience.

2.3 Observation indicators

The Depressive Self-rating Scale (SDS) is employed to evaluate the depression situations, including the emotional symptoms, the somatic disorder, the psychomotor disorder and the psychological disorder of depression. The lower the score is, the lower the depression will be. The Miton Depression Scale (HAMD) is employed to evaluate the severity of depression. The lower the score is, the lighter the depressive symptoms will be. The Interpersonal Problem Questionnaire (IIP) is employed to evaluate the interpersonal function. The lower the score is, the less interpersonal problems will be. The Social Function Defect Screening Scale is used to evaluate the social functions. The lower the score is, the higher the social function will be. The Life Quality Assessment Questionnaire (GQOLI-74) is used to assess the quality of life. The higher the score is, the higher the quality of life will be^[4].

2.4 Statistical analysis

SPSS22.0 is employed to process the data.

" $\bar{x} \pm S$ "refers to the metering data and t-test is conducted between groups. "%"refers to the counting data and χ^2 test is conducted between groups, P<0.05. The difference is statistically significant.

3. RESULTS

3.1 Comparison of the depression degree before and after treatment

After treatment, the SDS scores (27.48 ± 3.36) and the HAMD scores (8.44 ± 2.78) of the participants are significantly lower than the ones before treatment and the difference is statistically significant (P<0.05), which is shown in Table1:

Table 1 Comparison of the depression degree before and after					
Time	IIP scoes	SDSS scores			
Before treatment	2.08 ± 0.64	13.15±5.58			
After treatment	$0.75 {\pm} 0.58$	4.81 ± 1.84			
t	5.964	5.497			
Р	0	0			

3.2 Comparison of the quality of life of the participants before and after treatment

After treatment, the IIP scores (0.75 ± 0.58) and the SDSS scores (4.81 ± 1.84) of the participants in five groups are significantly lower than the ones before treatment and the difference is statistically significant (P<0.05), which is shown in Table 2:

Table 2 Comparison of the interpersonal function and the social function							
of participants before and after treatment							
Time	SDS scores SAS scores						
Before treatment	60.94±4.78	23.17±5.73					
After treatment	27.48±3.36	8.44±2.78					
t	22.179	8.958					
р	0	0					

3.3 Comparison of the interpersonal function and the social function of participants before and after treatment

After treatment, the GQOLI-74 scores (52.64 ± 4.76) of the participants are significantly higher than (37.86 ± 4.32) before treatment and the difference is statistically significant (P<0.05), which is shown in Table 3:

Time	Social function	Material life	Physical function	Psychological function	Total scores
Before treatment	40.56±4.76	33.94±5.58	40.77±3.62	40.03±4.41	37.86±4.32
After treatment	55.58±6.52	38.32±1.85	45.41±4.82	54.37±3.67	52.64±4.76
t	7.206	2.886	2.981	9.680	8.906
Р	0.000	0.007	0.006	0.000	0.000

Table 3 Comparison of the quality of life of the participants before and after treatment

4.CONCLUSION

The female college students are susceptible to the depression, which is closely related with the social and environmental factors as well as their own psychological and physiological characteristics. They are not as strong as the male college students at the same age, but have to bear the enormous physiological pressure, which may be the direct cause of the depression^[5-6]. The modern society is in transition period. Compared with the male college students at the same age, the female college students face the pressure that can be described as no more in the aspects of study, employment and love.

However, in some process of treatment, especially for the female college students. The group interpersonal psychotherapy is a short-term, time-limited and operable treatment method, which can interdict the vicious cycle between the interpersonal problems and the depressive symptoms through improving the interpersonal problems and the depressive symptoms of patients so as to reach the purpose of treating the depression^[2].

Aspects of social life, they cannot get cares and they may be at a disadvantage state, which causes some female college students not to bear the burden and results in psychological and spiritual problems^[7-8]. With the improvement of people's living standards and the development of the times, the patients with depression not only require to cure the depressive symptoms, but also demand to improve their social function and quality of life in the the results show that the drug therapy and the group interpersonal psychotherapy can improve the depressive symptoms of the female college students, reduce their interpersonal problems and the social function defects as well as improve their quality of life. In this study, the effect of the group interpersonal psychological therapy on the female college students with depression has been analyzed. The results show that after treatment, the SDS scores, the HAMD scores, the IIP scores and the SDSS scores of these female college students are significantly lower than the ones before treatment (P < 0.05); the GOOLI-74 scores are significantly higher than the ones before treatment (P < 0.05) . The reason may be that the group interpersonal psychotherapy can make the participants realize the same experience with the members of the group, which can alleviate their psychological pressure, cultivate their interpersonal awareness and attitude and improve the interpersonal relationship so as to effectively improve the quality of life of the members of the group. The results of this study are consistent with the results of Stammberger HR and so on^[15-16]. Of course, the combination of the group interpersonal psychotherapy and the drug therapy is more effective.

To sum up, the group interpersonal psychological treatment can significantly improve the depressive symptoms of the female college students with depression, the interpersonal competence and the social competence as well as the quality of life. The effect of the treatment is well and it can be applied in clinical practice. As the psychological counselor, the author often contacts with the female college students with depression. Under the correct circumstances, it can be tried to contact with the hospital. The author can assist the hospital to carry out the group interpersonal psychotherapy, help these female college students to treat disease and improve their interpersonal competence and the social competence when the hospital conducts the drug therapy.

5. SUGGESTION

5.1 Problems in group psychotherapy

Generally speaking, group therapy is divided into four stages,

namely, initial stage, exploration stage, development stage and end stage, of which the first three stages are the most important. Therapists should pay attention to different tasks in different stages. In the initial stage of group psychotherapy, the main tasks of this stage are to get familiar with each other, establish a good relationship, promote the mutual acceptance and participation of group members, and form the cohesion of the group. In this process, it is found that there are awareness factors, emotional catharsis, self-knowledge, group cohesion, altruism, which occupy an important position, and are more obvious in the feedback of members. In the early stage of group psychotherapy, group members can insist on participating in each group, and they can listen to others with a more open attitude, accept others, and eliminate their own tensions in group activities. In the exploration stage of group music therapy, the main tasks of this stage are to promote and strengthen the mutual communication between group members, enhance self-awareness, guide members to perceive their emotional response in activities and find their positive emotions and positive internal resources outside the group and the group. But for patients with depression, this stage takes a long time, and some people begin to vent their negative emotions. In the exploration stage of group psychotherapy, the mechanism of interpersonal learning has been greatly improved. Therapists should pay attention to the guidance of positive emotions and positive social support. In the development stage of group psychotherapy, in addition to the tasks of the above two stages, leaders lead group members to enhance self-confidence, improve emotions, learn to manage and correctly handle their bad emotions in life become the most important task of this stage. In different stages of group music therapy, different therapeutic factors will have different changes, and influence and restrict each other. In a word, each therapeutic factor has different levels at different stages, but there is no absolute significance, so therapists should pay attention to timely observation and guidance.[17]

5.2 Family support and cooperation during treatment.

A lot of female college students' depression is due to the influence of family environment, or have some experience in childhood, to a certain time develop to the abnormal psychology, so parents cooperate to do a good job of students' social support is very important. During the treatment, the therapist will contact with the parents, inform them of the situation, and discuss with the parents the treatment plan at home. Some students' depression problems are mostly caused by family factors. To solve the problem, we need to tie the bell to others, and to cure the heart disease, we need a cardiologist. The patient enlightenment and relief of the family will have unexpected effects.

5.3 Popularize the knowledge of depression

in the population

It is very important to correctly guide people to understand the basic knowledge of mental health, the characteristics of depression symptoms and the environmental factors that induce depression for the prevention of depression and the cure of depression patients. But now there are quite a lot of people on this knowledge is a blank. When chronic depression occurs, female college students have the high sensitivity of being ignored and excluded and the ability of not being able to correctly treat the surrounding things. This requires teachers, class teachers and even the students around them to have a correct understanding of it, and can correctly distinguish whether a student is short-term unhappy or chronic or mild depressive symptoms when his mood is abnormal. If the teachers or students around do not understand the basic knowledge, it will aggravate the psychological burden of female college students. Therefore, the university should take mental health and mental health as a general course, popularize mental health knowledge to the university campus, and enhance the ability of self-regulation, self-defense and self-improvement of female college students' individual psychology, so as to lay a good foundation for the formation of healthy psychology of college students.[18]

5.4 Strengthen physical exercise

Many research results show that physical exercise can fight depression. Moderate exercise, on the one hand, helps to enhance physical strength and reduce the symptoms of skeletal deformation and muscle soreness caused by sedentary learning; on the other hand, it can distract attention and divert the thoughts of depression and fidgety, so as to relax the body and mind, regulate the mood, and help to transfer the experience of depression, so as to reduce the symptoms of depression. In recent years, some scholars put forward the monoamine hypothesis from the biochemical point of view. Exercise can increase the content of noradrenaline and 5-hydroxytryptamine (monoamines) in the blood circulation, while the content of both substances in the body of patients with depression is low. At the same time, there is evidence that the immune system is related to people's resistance to body diseases and brain function. Depression and stress events can change people's immune function, affect the body's susceptibility to diseases, and improve people's physical exercise to improve the immune function of depression. But the sports of Chinese female college students are not enough, so increasing physical exercise is also needed in the treatment.[19]

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