

Adult depression education and treatment research proposal sample

[Health & Medicine](#)



**ASSIGN
BUSTER**

Abstract

The objective of this paper is to discuss the most common mental disorders and depression tendencies that individuals with chronic somatic illnesses carry over to the adult stage of their development. This is not a very common topic and in fact, one of the most commonly taken for granted one. The paper will focus on the Health Related Quality of Life (HRQoL) of a short listed group of adults who have or had a disabling, impairing, or function-limiting disease during his or her childhood years. The health related quality of life would most likely correspond to the tendencies or chances that an individual would develop mental illnesses such as anxiety, stress disorders, and even depression .

Literature Review

Depression is one of the common problems that a lot of, if not all people, face every day. Society has left us a place where anyone or everyone can be bombarded by a lot of problems, be it a problems related to work, family, emotions, disease, or basically anything related to the individual, and as a result, studies have proven that depression is now one of the most common disorders that can impair a whole variety of an individual's functions today. Depression, compared to other diseases which already have a clearly-defined pathophysiology, etiology, and patho-mechanism, is less understood. The fact that even scientists and medical professionals do not know all things there is to know about depression adds to the list of factors that make the medical prognosis of an individual suffering from depression secondary to an idiopathic etiology even poorer.

In the past, people were led to believe that depression is a mental disorder that mainly occurs on adults and that it rarely, if ever, appears on children and even young adolescents. Unfortunately, this idea has already been debunked by numerous researches . Various studies have proven that even individuals in their young adolescent and even childhood developmental stages can have high tendencies of developing anxiety disorders or worse, depression . This is why it is important to identify factors that may predispose an individual to develop anxiety disorders—which could well develop into depression and other advanced mental illnesses and not just focus on a single developmental or chronological age group, like what most medical professionals who frequently deal with mental illnesses do. A set of factors and or protocols that target children, young adolescents, adults, and elderlies, would be of greater use, and more cost-effective, than a set of factors and or protocols intended to be used only by a single group or population .

Some of the identified chronic somatic disorders that could lead to an impairment, functional limitation, or worse, a disability include, but are not limited to visual impairments or blindness, rheumatoid arthritis, spasms, chronic fatigue syndromes, migraine, hearing impairments or deafness, back pains, epilepsy, gastrointestinal complaints, accident damage, cardiopulmonary and cardiovascular complaints, cancer, paralysis, osteoarthritis, kidney diseases, skin diseases, liver diseases, based on previous studies which also centered on health related quality of life and its relationship with depression .

All of these conditions would naturally make it harder for any individual to

perform their duties at home and at work. Some individuals with a certain level of chronic condition severity may not even be able to work either because they realize they are too handicapped to work or employers simply would not entrust the flow of their business to ill people , just to mention a few reasons.

Being unemployed can have a great toll on one's health. Numerous studies have proven the impact that being able to work and getting paid could have on one's perception of his self-actualization process. According to such studies, employed individuals have higher self-esteem, self-confidence, and health related quality of life index levels compared to those who are not regardless of the reason behind being so . Also, adults with “ visible and physical handicapping conditions usually find dealing with social contexts especially difficult; they are the ones who usually become marginalized by their peers, rejected for being different during a period in which body image and identity rely heavily on conformity” , which should support why individuals with chronic somatic illnesses such as the ones mentioned above usually have lower self-confidence, self-esteem, and health-related quality of life indexes compared to those who have normal physique and are not bothered by any impairment or disability.

Statement of the Problem

Studies have proven how depression has crawled up to the list of the most commonly diagnosed psychiatric disorders among individuals, especially those who consistently work under stress, pressure, and a high volume of workloads. This fact in itself is already a problem, and an alarming one at that. What makes this problem even more complicated is the fact that most

medical professionals, and even standardized psychiatric diagnostic tools, do not have the capability to identify, and thus address the root cause of the problem—which is depression. Studies have proven that depression can have a wide variety of causes, and can be affected by almost every factor or instance that an individual encounters, may encounter, or have encountered throughout his life. The main problem that the author of this paper is trying to look at is the relationship between an individual's tendencies of developing depression or at least symptoms of depression, and their health-related quality of life or HRQoL. That target population for this study would be adults who have had or still has physical or mental disabilities, impairments, or functional limitations, during their childhood years, as long as it happened in the past. The ideal subjects for this study would be those who are receiving insurances and benefits either from a government or a non-government organization as a result of their physical or mental disability, impairment, or functional limitation, or whatever type of condition one might have. The main problem that this paper tries to solve is the relationship between an individual's having a chronic somatic disorder and his or her tendencies of developing a psychiatric or mental disorder such as stress disorders, and depression, both of which can pave ways for even larger and more complicated ones.

Significance of the Study

This study can prove to be significant not only to the entire field or discipline of nursing but also to the patients who have suffered from the negative physical and mental effects of a chronic somatic disorder. Most of the patients who have had such conditions do not know that they have a lower

health related quality of life index than individuals who grew up and became active participants of the community or society (by having a job that pays, one becomes an active member of the community or society) without, which predisposes them to higher tendencies of developing depression and other mild to severe psychiatric conditions.

- Nursing Community

The findings in this study would be of great importance to the entire nursing community in a way that the findings can be used to revolutionarily change the way how medical professionals, particularly the ones who specialize in educating and treating patients with depressive and other psychiatric disorders, see the presumably inverse relationship that exists between health related quality of life and an adult's tendencies of developing depression and depression-related or triggered illnesses. Most psychiatric experts tend to miss the fact that having suffered from an illness during or from childhood can greatly affect an individual's tendencies of having depression, especially if there are several physical disabilities, impairments, and functional limitations involved . By studying the findings from this study, the entire nursing industry can finally have some evidence that health related quality of life should be included in the list of factors for consideration whenever a patient with depressive signs and symptoms is being assessed.

- Patients

Patients, especially those who are already showing signs and symptoms of depression are the ones who will benefit the most from the findings in this study. Firstly, the root of their depression will be more easily discovered and

from that, medical professionals can formulate more appropriate, cost-effective, and more direct to the point solutions for the condition. Mentally-ill patients would not have to undergo pointless clinical trials or failed attempts to address their depression-related conditions once the medical team already knows that the root cause of the depression is a health condition that existed in the past. However, other variables such as personal, social, environmental, and familial factors should never be taken for granted as numerous evidences have also proven that these variables also greatly contribute to an individual's tendencies of being depressed or having a depression-related condition .

- Future Researchers

The products of this research may well be used by other members of the academic community, as well as by other researchers as a solid starting point in researching about the other potential effects of an individual's health related quality of life aside from being a precursor of depression and/or other chronic illnesses. Statements from this research, which after the implementation period has been finished, can be used as a supporting evidence for another researcher's study, which would most likely be about health related quality of life or even mental health in general. One of the side goals of this paper is to fill the research gap that has been untouched for so many years both by researchers taking up courses in the field of general and mental health. This paper tries to delve deeper into the list of possible factors that might predispose an individual to having depression and or any other depression-related physical and mental disorder. All of these can be used by future researchers as evidence in writing their paper, and starting

points in a field of psychology that would have been dubbed as a dead end if not for the authors of this study.

Theoretical or Conceptual Framework

The goal of a theoretical framework is to explain the different possible interactions between the dependent and independent variables being presented in a paper or a proposal to write an academic paper. The conceptual framework above summarizes what this paper is all about or more specifically, what the assumptions or the hypotheses of the author/s of this paper are at the beginning of the study. What the conceptual framework above is trying to explain is that an individual's score in a health related quality of life index can be used as an independent factor in prognosticating or gauging an individual's depressive and other depression-related diseases development tendencies, which in this case, would be the dependent factor, as it is pretty obvious how largely it depends on an individual's health related quality of life index.

Hypothesis and Research Questions

These hypotheses lead us to the research question or title: the possible effects of an individual adult's health related quality of life index on his depression and depression related diseases development tendencies. To better narrow down the proposed research title or question, the research question will be stripped down into four sections: the population, intervention, comparison, and outcome and time. A research can still be done validly as long as there is at least three present, identifiable, and justifiable variable out of the six.

Population: Adults aged 18 and above with or who had a chronic somatic health disorder

Intervention: Health-related Quality of Life Questionnaire

Outcome: Health-related Quality of Life Index and their tendencies of having depression or a depression-related disease

Timeframe: Two months

Research Methodologies, Tools, Design and Strategies

It is important for a research, especially, if it is related to a population's health and well-being, to have measurable outcomes. This principle can very well be applied to this paper. Remember that the goal of this paper is to identify, and if possible, quantify, the type of relationship that exists between an individual's tendencies of incurring depression or any psychiatric disorders related to depression, and his score on a health-related quality of life questionnaire, or his health related quality of life index.

The RAND 36 Health Related Quality of Life Questionnaire

In this study, a questionnaire will be used to assess every individual subject's health related quality of life. And for that purpose, the RAND 36 questionnaire will be used. RAND developed this 36-item questionnaire. This tool was developed as a part of a Medical Outcomes Study or MOS, spearheaded by RAND—a study which the organization conducts every year, in an attempt to study, explain, and describe, the different variations in patient outcomes. “ RAND developed the 36-item Short Form Health Survey (SF 36) which is a set of generic, coherent, and easily administered quality of life measures, which rely upon patient self-reporting and are now widely utilized by managed care organizations and by Medicare for routine monitoring and assessment

of care outcomes in adult patients” . As mentioned earlier, this is tool that has been numerously tested for validity, reliability, and consistency . This 36 item questionnaire can be subdivided into eight individual subsets, each of which aims to describe a certain aspect on an individual’s health-related quality of life. Physical Functioning (PF), Social Functioning (SF), Role Limitations owing to Physical Health Problems (RP), Role limitations owing to Emotional Problems (RE), General Mental Health (MH), Vitality (VT), Bodily Pain (BP), and General Health Perceptions (GH). Each subset can be explained based on a zero to one hundred-scale or scoring system. A higher score in the Physical Functioning subscale for example, would indicate that an individual has a higher level of functioning or a higher level of perception on his quality of life with regards to his physical attributes, and vice versa for lower scores on that subscale.

Population and Sampling

There will be two groups of samples in this study. The first group will be composed of 50 adults who have had or still have a chronic somatic disorder. A chronic somatic disorder can be operationally defined within the context of this paper as any disorder that has or may have a disabling, functionally limiting, or impairing implication, any of which may also lead to an individual’s activity within a community—his ability to get employed, and do the things that a normal individual not affected by any disease or disorder can do. The other group would be the control group which will be composed of 50 normal and healthy individuals, without any chronic somatic disorder at present, and in the past.

Ethical Considerations

The questionnaire will be posted online so that the subjects would not have a hard time filling out the forms, and answering all of the 36 questions in the questionnaire, and other questions for identity verification. All in all, participants will only engage in a one-time access to the online-posted questionnaire. Every subject will be given an informed consent form that would require their signature. The informed consent form will contain all the necessary information that a participant has to know about the type of participation in the research such as the procedures that would be done, and the confidentiality of the information that the researchers would have to have access to. More importantly, the informed consent form shall contain articles that explain that all participants chose to become a part of the study voluntarily, without being forced by the researchers or any other third party entities. All information that the researchers will have access to such as the nature, type, and progression, and status of the chronic somatic disorders that subjects from the group aside from the control group are required to have as part of the inclusion criteria set by the researchers. Every procedure that will be done in the study will be subject for the review and approval of a pre-assigned ethics review panel, in order to ensure that all subjects will be handled ethically, morally, and professionally, and that all medical and research-related procedures in this study will be handled the same way.

References

- Brazier, J., Roberts, J., & Deverill, M. (2008). The Estimation of a Preference-based Measure of Health from SF 36. *Journal of Health Economics*, 271-292.
- Hallum, A. (2008). Disability and Transition to Adulthood: Issues for the
- <https://assignbuster.com/adult-depression-education-and-treatment-research-proposal-sample/>

- Disabled Child, the Family and the Pediatrician. *Curr Probl Pediatr*, 12-50.
- Hatzmann, J., Maurice, S., Heymans, H., & Grootenhuis, M. (2009). A Predictive Model of Health Related Quality of Life of Parents of Chronically Ill Children: the Importance of Care Dependency of their Child and their Support System. *Health Quality of Life Outcomes Journal*, 72.
- Jin, R., Shah, C., & Svoboda, T. (2008). The Impact of Unemployment on Health: A Review of the Evidence. *CMAJ*, 529-540.
- La Greca, A., Bearman, K., & Moore, H. (2012). Peer Relations of Youth with Pediatric Conditions and Health Risks: Promoting Social Support and Healthy Lifestyles. *Journal of Adult Psychology*, 565-572.
- Maslow, G., Haydon, A., McRee, A., Ford, C., & Halpern, C. (2011). Growing Up with a Chronic Illness: Social Success, Educational and Vocational Distress. *Journal of Adolescent Health*, 206-212.
- Mokkink, L., Lee, J., Grootenuis, M., Offringa, M., Praag, B., Heymans, H., et al. (2008). Extent and Consequences of Chronic Conditions in Children and Adults. Amsterdam, The Netherlands: Emma Children's Hospital, AMC.
- Pinquart, M., & Shen, Y. (2011). Anxiety in Children and Adolescents with Chronic Physical Illnesses: A Meta Analysis. *Acta Paediatrica*, 1069-1076.
- Spinoven, P., Ormel, J., Sloekers, P., Kempen, G., Speckens, A., & Van Hemert, A. (2008). Balancing Developmental Needs and Intensive Management in Adolescents. *Diabetes Spectrum*, 88-94.
- Stam, H., Grootenuis, M., Caron, H., & Last, B. (2008). Quality of Life and Current Coping in Young Adult Survivors of Childhood Cancer: Positive Expectations about the Further Course of the Disease were Correlated with Better Quality of Life. *Psychooncology Journal*, 31-43.

Van Der Zee, K., Sanderman, R., Heyink, J., & de Haes, H. (2009).

Psychometric Qualities of the Rand 36 item Health Survey 1. 0: A

Mutidimensional Measure of General Health Status. *International Journal of Behavioral Medicine*, 104-122.

Wiessberg, J., & Antisdel, J. (2010). Predictors of Delayed Social Maturation and Mental Health Disorders in Young Adults Chronically Ill Since Childhood.

Nord J Psychiatry , 237-242.