

Management of Depressive Disorder with Meaning Centered Counselling and Psychotherapy (MCCT): A Study

Nitin Gupta^{1*}, S. Azmal Basha²

ABSTRACT

The study was purposely conducted to find out the role of meaning centered counselling and psychotherapy (MCCT) in depressive disorders among adults. The adults were assessed pre and post intervention of Experimental and control group. The questionnaires used in the study were Personal Meaning Profile developed by Paul Wong (1998), Beck Depression Inventory-II developed by Aaron T. Beck, Robert A. Steer, and Gregory K. Brown (1996) and Rosenberg Self Esteem Scale developed by Rosenberg, M. (1965) in order to determine the level of depression and symptoms associated along with the anxiety perspectives, and measures global self-worth by measuring both positive and negative feelings about the self respectively. This is the study of twenty depressive adults of Positive Essence Psychology, Thamarassery, Calicut, Kerala. The Experimental and Control group were assessed pre intervention and the data were recorded. Then the Experimental group intervened with meaning centered counselling and psychotherapy (MCCT) for the period of twelve week (two sittings per week and per sitting is of 50 minutes duration) and again both the group reassessed on the research tools. Statistical analysis student 't' test were used for analysis and the results of the study reflected statistically significant. The results of the study indicate that the adults experienced significant reduction in depressive symptoms and had shown significant increase in Self-Esteem.

Keywords: *Depressive Disorder, Counselling, Psychotherapy*

Depressive disorder is an illness that involves the dynamics perspective such as body, mood, and thoughts. It interferes with daily activities of life, common functioning, and causes pain for both the person with the disorder and those who care about him or her. Depressive disorders are in diverse forms like as is the case with other illnesses. There are different common types of depressive disorders and within these types there are variations in the number of symptoms as well as their severity and persistence.

A depressive disorder is not the similar as a passing blue mood. Depressive disorder is not a sign of personal limitation or a condition that can be wished away. People with a depressive illness cannot merely heave themselves collectively and get better. It is the condition which if

¹ Research Scholar (Psychology), R & D Centre, Bharathiar University, Coimbatore, Tamil Nadu, India

² Assistant Professor & Head, Department of Psychology, Sri Venkateswara Art College, Tirupati, Andhra Pradesh, India

*[Responding Author](#)

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not treated properly the symptoms can persist last for weeks, months, or years. Depression is a very common but serious illness, and most people who experience it need intervention or treatment to get better. Suitable treatment can help people to get rid of it who suffer from depression.

Major depression is manifested by a various types of associated symptoms that interfere with the ability to work, study, sleep, eat, and enjoy once pleasurable activities. The episode of depression may take place only once but more commonly prevail several times in a lifetime. There are various forms of depressive disorder in which people may experience slightly different characteristics or they may develop depression under some unique circumstances. However, not all researchers agree on how to characterize and define these forms of depression.

DEPRESSION SYMPTOMS

The common signs and symptoms in context of depression in children and teenagers are somehow similar to those of adults, but still there are some differences.

1. In younger children the persistent of sadness, irritability, worry, Denial to go to school, or being underweight.
2. In teens there is persistent of sadness, bad temper, poor attendance at school, feeling downbeat and worthless, annoyance, misunderstood and exceptionally sensitive, using recreational drugs / alcohol, eating or sleeping to a large extent, self-Injuries, loss of significance in normal activities, and escaping from social interaction.

Depression is not a common part of growing older and it should never be taken frivolously. The depression over and over again goes undiagnosed and untreated in older adults and they may feel reluctant to seek out help. Symptoms of depression may be different in adults, such as:

1. Memory complications or personality changes.
2. Physical aches (somatic).
3. Weariness, loss of appetite, sleeps problems or loss of interest in sex.
4. Regularly wanted to stay alone at home rather than going out to socialize.
5. Suicidal thoughts particularly in older men.

CAUSES

The exact cause of the depression is not known as with many mental disorders, a variety of factors may be involved, such as:

Biological Conditions

Individual with depression may appear to have physical changes in their brains. The significance of these changes is still uncertain, but in due course help pinpoint causes of the depression.

Brain Chemical Changes

Neurotransmitters secretions are naturally occurring brain chemicals and that is likely play a role in depression. The changes indicate that the effect of these neurotransmitters and how they interact with neuro-circuits involved in maintaining mood stability. The Neurotransmitter hormones may play a significant role in depression and its treatment.

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Hormones

The changes in the hormonal conditions may be involved in causing or triggering depression. Hormone changes can result with pregnancy and during and after delivery, from thyroid problems, menopause or a number of other conditions.

Inherited traits

Depression is more common in people whose near relatives also have depressive disorders. Researchers are exploring to find genes that may be involved in causing depression.

Types of Depression

Postpartum depression: It is relatively mild depressive and anxiety symptoms that typically clear within few weeks after delivery. Women with postpartum depression experienced during pregnancy or after delivery. It is characterized with the feelings of tremendous sadness, anxiety, and exhaustion that associated with postpartum depression mothers facing difficulties to complete daily care activities.

Psychotic depression: It is occurring when a person has severe depression in association of some form of psychosis such as having delusions or hearing distressing things that others cannot hear or see (hallucinations). The psychotic symptoms typically have delusions of guilt, poverty, or illness.

Seasonal affective disorder: It is characterized by the inception of depression during the winter months, when there is less sunlight. This depression generally lifts during spring and summer. Winter depression typically associated by social withdrawal, excess sleep and weight gain, predictably returns every year in seasonal affective disorder.

Bipolar depressive disorder: It is different from depression which included because someone with bipolar disorder experiences episodes of extremely low moods that congregate the criteria for major depression also known as bipolar depression. But a person with bipolar disorder also experiences extreme high euphoric, mania and hypomania.

Meaning Centered Counselling and Psychotherapy (MCCT)

MCCT is concerned with individuals' presenting problems and the larger context in which these problems are situated. The therapy is helpful for clients to be conscious that there are better forces that limit their sovereignty of choice. Macro-counseling skills help clients to view their predicaments in the larger scheme of things, thereby broadening and deepening their understanding of the meaning of their problems and their potential for positive change. The efficacy of the meaning centered counselling and psychotherapy (MCCT) module had been established in the management of depressive disorders among adults. Hence this study had applied such meaning centered counselling and psychotherapy (MCCT) Modules for the Management of depressive disorders in this study.

METHODOLOGY

The descriptive correlational study was purposely conducted on twenty adults of *Positive Essence Psychology*, Thamarassery, Calicut, Kerala, to find out the level of depressive disorder and efficacy of Meaning Centered Counselling and Psychotherapy (MCCT) intervention techniques for adults to reduce depressive disorder symptoms. The twenty adults were selected purposely for the study on the basis of their pre diagnosis as depressive disorder symptoms. The questionnaire *Personal Meaning Profile* developed by Paul Wong (1998), *Beck Depression Inventory-II* developed by Aaron T. Beck, Robert A. Steer, and

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Gregory K. Brown (1996) was adapted for measurement of depressive disorder symptoms and personal meaning of life. Another instrument was *Rosenberg Self Esteem Scale (RSE)* developed by Rosenberg, (1965) in order to measure global self-worth by measuring both positive and negative feelings about the self, pre and post intervention and compared for gain score. The statistical tools employed to analyze the data were mean, standard deviation and *t*-test. The group was treated with intervention is as follows: -

Interventions: The following interventions were given for the period of twelve weeks. Meaning Centered Counselling and Psychotherapy (MCCT) intervention techniques. They were used to create reciprocal inhibition in the depressive disorder symptoms, and thus they had learned the new behaviour to form adaptive and being able to relax with the stimulus and formed new habit towards depressive disorder symptoms and self-esteem.

RESULTS AND DISCUSSION

Table 1 Personal Meaning Profile, Beck Depression Inventory-II and Rosenberg Self-Esteem scores before and after intervention (N = 10)

Nomenclature	Before intervention Mean score (SD)	After intervention Mean score (SD)	Mean difference	Critical ratio
PMP Score Range 1 to 7 (1 to 7) (1 to 2 Not at all meaning 3 to 5 Moderately 6 to 7 A great deal)	1.75 (0.44)	3.75 (0.91)	02.00	8.82**
BDI - II Score Range 14 to 63 (Mild: 14-19 Moderate: 20-28 Severe: 29-63)	25.30 (3.57)	16.00 (1.95)	09.30	10.22**
RSE Score Range (10-40) (Low = 10-20 Average = 21-30 High = 31-40)	12. 35 (1.53)	22.65 (1.87)	10.30	19.04**

** $p < 0.01$

Note: PMP: Personal Meaning Profile, BDI-II: Beck Depression Inventory-II and SE: Self Esteem.

Adults were assessed on Personal Meaning Profile Pre intervention the sample score of the group is 1.75 (Low personal meaning of life) with standard deviation of 0.44 and post intervention the score of the sample group is 3.75 (Moderate personal meaning of life) with standard deviation of 0.91. The mean difference is 02.00 and Critical Ratio is 8.82. Pre intervention the sample score of the group in Beck Depression Inventory-II is 25.30 (Moderate depressive disorder) with standard deviation of 3.57 and post intervention the score of the sample group is 16.00 (Low depressive disorder) with standard deviation of 1.95. The mean difference is 09.30 and Critical Ratio is 10.22. Pre intervention the sample score of

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the group in Rosenberg Self Esteem Scale is 12.35 (low Self-Esteem) with standard deviation of 1.53 and post intervention the score of the sample group in Rosenberg Self Esteem Scale is 22.65 (Average Self-Esteem) with standard deviation of 1.87. The mean difference is 10.30 and Critical Ratio is 19.04.

Depressive disorder found to be incompatible with it; adults were responded well to these interventions after twelve weeks and the adults were reassessed. Personal Meaning Profile (CR: 8.82), Beck Depression Inventory-II (CR: 10.22) and, and Rosenberg Self Esteem Scale (CR: 19.04). Results shows that depressive disorder symptoms were reduced significantly and self-esteem of the adults has been improved significantly. The results revealed that the adults had become more balanced in their approach and reducing depressive disorder behaviour. These exercises, through principle of Reciprocal Inhibition, developed alternate emotional responses towards depressive disorder; the result shows that the levels of Personal Meaning Profile, Beck Depression Inventory-II, and Rosenberg Self Esteem Scale scores of experimental group before and after intervention differ significantly. On analysis by means of statistical analysis it is found statistically Significant at the level of 0.01. These results reveals that Meaning Centered Counselling and Psychotherapy (MCCT) intervention techniques is effective in reducing the depressive disorder symptoms post intervention in the experimental group confirms the efficacy of used intervention.

SUMMARY AND CONCLUSION

The aim of the study was to investigate the efficacy of Meaning Centered Counselling and Psychotherapy (MCCT) intervention techniques for adults to reduce depressive disorders and enhancement of Self Esteem. The objective assessment by psychometric scales namely Personal Meaning Profile developed by Paul Wong (1998), Beck Depression Inventory-II developed by Aaron T. Beck, Robert A. Steer, and Gregory K. Brown (1996) and Rosenberg Self Esteem Scale developed by Rosenberg, M. (1965) were used. Interventions Meaning Centered Counselling and Psychotherapy (MCCT) intervention techniques were used to treat the adults. Initially adults were assessed before interventions for Personal Meaning Profile, Beck Depression Inventory-II, and Rosenberg Self Esteem Scale. The Mean Scores of the adults on Personal Meaning Profile, Beck Depression Inventory-II, and Rosenberg Self Esteem Scale before intervention were 1.75, 25.30 and 12.35 respectively. Adults were given intervention for the period of twelve weeks with Meaning Centered Counselling and Psychotherapy (MCCT) intervention techniques. These exercises, through principle of Reciprocal Inhibition, developed alternate emotional responses towards depressive disorder.

Depressive disorder found to be incompatible with it; adults were responded well to these interventions and after twelve weeks the adults were reassessed on Personal Meaning Profile, Beck Depression Inventory-II, and Rosenberg Self Esteem Scale Mean Score were 3.75, 16.00 and 22.65 respectively. The statistical analysis was carried out using Mean, Standard Deviation and students 't' test. The critical ratio on Personal Meaning Profile, Beck Depression Inventory-II, and Rosenberg Self Esteem Scale were 8.82, 10.22 and 19.04 respectively. The critical ratio results were found statistically significant at the level of 0.01. The critical scores on Personal Meaning Profile, Beck Depression Inventory-II, and Rosenberg Self Esteem Scale score revealed that the adults had become more balanced in their approach and together with logic and intuition has a good scope in context of depressive disorder.

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To conclude, this study has shown that a Meaning Centered Counselling and Psychotherapy (MCCT) intervention technique is efficient in treating depressive disorder.

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Conflict of Interest

The authors carefully declare this paper to bear not conflict of interests

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