'The Effect of Laughter Therapy on Depression In Elderly Residents Of Selected Old Age Home From Maharashtra.'



*Ms. Ambily Ulahannan,
*Clinical Instructor, Snehodaya College of Nursing,
ambily.ulahannan90@gmail.com
**Ms. Siman Xavier



** Associate professor , P.D Hinduja National Hospital College of Nursing, Mumbai simanxavier@yahoo.co.in

ABSTRACT

Background of the study: India has begun to feel the burden of an aging society. Aging individuals are now living longer with increasing life expectancy and availability of better health facilities but are also requiring more assistance or care to manage their day to day activities. Depressive syndromes are frequent in old age and especially frequent are minor forms of depressions like dysthymia, or sub syndrome depression. Aim of the study: The present study was conducted to assess the effect of laughter therapy on depression in elderly residents of the selected old age home from Methods: Maharashtra. Α quasi experimental study with nonrandomized control group design was selected to assess the effect of laughter therapy on depression in elderly residents of the selected old age home. A total of 60 subjects were through non probability enrolled purposive sampling. A standardized geriatric depression scale was used to assess the study variables. Results: The result shows that there is a significant difference in the pretest (44.8) and post test score (9.9) mean score in the experimental group. The study also found significant a association with level of depression and duration of stav.

KEY WORDS

Laughter therapy, elderly depression, old age home.

INTRODUCTION

Aging is and itself is subtle, quiet process. It represents the accumulation of changes in human being over time, encompassing physical, psychological and social change and reaction time. Some people are able to handle such situation while others have difficulty to cope up, which leads to depression, anxiety, stress. Older adults are at an increased risk for experiencing depression. The most interesting fact is geriatric depression is often hard to detect and treat. The combination of biological and psychological intervention is more effective in reducing depression in elderly. Laughter therapy provides a good massage to all internal organs reduce stress hormone level, increases the circulation and relaxes the muscles.

PROBLEM STATEMENT

A quasi experimental study to assess the effect of laughter therapy on depression in elderly residents of selected old age home from Maharashtra.

OBJECTIVES

1. To assess the pre interventional level of depression among elderly residents in experimental group of the selected old age



- home from Maharashtra.
- 2. To assess the level of depression among elderly residents in control group of the selected old age home from the Maharashtra.
- 3. To compare the level of depression before and after laughter therapy in experimental group of selected old age home from Maharashtra.
- 4. To compare the post interventional level of depression in elderly residents from experimental group with control group of the selected old age home.
- 5. To associate the level of depression in elderly residents from experimental group with selected demographic variables.
- 6. To elicit the Opinion regarding laughter therapy from elderly residents of the selected old age home from Maharashtra.

MATERIALS AND METHODS

A quasi experimental study was conducted with the objective to assess the effect of laughter therapy on depression among elderly residents of the selected old age home from As the effect of the Maharashtra. independent variable of laughter therapy on the dependent variable of elderly depression was investigated in the present study. It was a quantitative quasi experimental non randomized control group design study. The study subject comprised of elderly population resides in the selected old age home. Sampling was non probability purposive sampling technique through which the elderly residents of the selected old age home, who were invited to participate the laughter therapy sessions. Based on the inclusion criteria 60 samples were selected, 30 in experimental group and 30 in control group. In this study, Experimental group received a 20 days of laughter therapy sessions one hour per day excluding Sunday and in the control group, no interventions were

conducted. The data of the present study was collected by using Yesavage self reporting geriatric depression scale and opinionnaire. Data were analyzed by independent *t*-test, frequency and percentage.

RESULT

Section I: Analysis demographic data This section deals with analysis of incidence of depression in elderly and the demographic characteristics of the subjects from the selected old age home. The data collected by using a structured questionnaire. The result presents the facts that out of 124 elderly residents, maximum subjects were identified to have depression according to Geriatric Depression Scale. Highest proportions of the elderly in the old age home were female (53.33%) between the age group of 60-70 (50%) having secondary education. Most of the subjects in the study were widow/widower (60%) and does not have any co morbidity of illness. 43.33% of the subject has been staving in the old age home since last one year. The relatives or significant others visits the subject at least once in a month.

Section II: Analysis of the level of depression before laughter therapy. Table: distribution of pre interventional level of depression score of subject.

N=60

	SR NO	DEPRESSION SCALE	EXPERIMENTAL GROUP n=30		CONTROL GROUP n=30	
			F	%	F	%
ſ	1	Mild	3	10%	12	40%
ĺ	2	Moderate	27	90%	18	60%

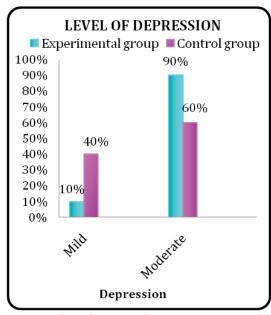


Figure: distribution of pre interventional level of depression score of subject This section deals with the pre interventional level of depression among elderly residents of the selected old age home from Maharashtra. The above table 1 and figure 1 shows that in experimental group, the maximum subjects 27 (90%) and in control group, the maximum subject 18(60 %) have moderate depression. Only three (10%) in experimental group and 12 (40%) in control group have mild depression.

Section III: Analysis of the level of depression before and after laughter therapy

Table: distribution of pre test and post test depression score of subject in experimental group n=30.

Scor e	Mea n	Sd	Mean differen ce	T- valu e	Significa nce
Pre Test	44.8	3.05 5	240	56.1	Significa nt
Post Test	9.9	1.26 8	34.9		

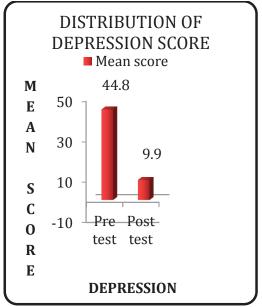


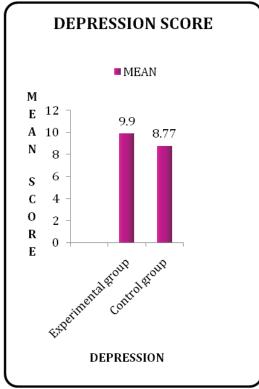
Figure: distribution of pre test and post test depression score of subject in experimental group

This section reveals the significant change in the pre test and post tests depression score in experimental group using t test. The mean score reveals that the pre test mean score 44.8 is significantly reduced to 9.9 in post test in the experimental group. There is no significant change in post test score of depression in control group. Thus it shows that laughter therapy is effective in reduction of depression in elderly residents of the selected old age home. Section IV: Comparison of the post interventional level of depression

Table 3: comparison of post test level of depression in experimental group with

control group N-00							
POST TEST SCORE	ME AN	S D	MEAN DIFFER ENCE	t- VAL UE	SIGNIFI CANCE		
Experi mental group	9.9	1. 81	36.3	58. 59	Significa nt		
Control group	8.7 7	1. 77		39	IIL		

By paired t test p<0.05



Findings reveals that the post test level of depression in experimental group mean score is 9.9 with control group mean score 8.77 using t test suggest that it is significant at the 0.05 level of significance, there for null hypothesis is rejected .It shows that laughter therapy is effective for reducing the depression among elderly residents of the selected old age home

Section V: Analysis of association of depression with demographic variables. In this section found that there is significant association with duration of stay in old age home and depression in elderly residents of the selected old age home. It states that there is a positive association between demographic variables and duration of stay in old age home.

Section VI: Analysis of response to opinionnaire regarding laughter therapy The data shows the response of the subjects to opinionnaire regarding laughter therapy. The maximum subjects 26 (86.67%) feels that laughter therapy was a favorable therapy to

reduce the level of depression where as4 (13.33%) feels that laughter therapy was a satisfactory therapy in reduction of level of depression.

DISCUSSION

As shown by the findings, laughter positively affected therapy depression in elderly which is almost consistent with the results of some studies. The findings of Jacob m. suggest that humor therapy workshop was associated with a positive effect upon mental health community-dwelling older people attending senior centers. On the other hand, a study was conducted by Kong to investigate the effects of a stress management program, based on meditation, on stress, anxiety, and depression of nursing students in Korea in 2006, results revealed a significant difference concerning the scores of stress and anxiety in the two groups after intervention, but the difference in depression scores after intervention in the two groups of study and control was not significant. The researcher believes that as the subjects in the present study are different from those of other studies: further research is needed to support the present study.

CONCLUSION

The findings showed that laughter therapy had a positive effect on depression among elderly residents of the selected old age home and improved the signs of physical, psychological as well as their social function. Therefore, laughter therapy can be used as one of the effective strategies on elderly population suffering with mild to

moderate depression in various settings as well as it can be used as an alternative therapy for various conditions.



REFERENCE

- 1. Bowen RL AC. aging process. geronatology [Internet]. 2004;50(5):265–90. Available from: https://www.ncbi.nlm.nih.gov/pub med/15331856
- 2. Dillin A, Gottschling DE NTGN. The good and the bad of being connected: the integrons of aging. hhs Publ [Internet]. PMC3927154. Available from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3927154
- 3. Kang YS1, Choi SY RE. The effectiveness of a stress coping program based on mindfulness meditation on the stress, anxiety, and depression experienced by nursing students in Korea. Nurse Educ Today [Internet]. 29(5):538–43. Available from: http://www.ncbi.nlm.nih.gov/pubm ed/19141364/
- 4. Shaw AL. Does Laughter Therapy Improve Symptoms of Depression among the Elderly Population? Philadelphia Coll Osteopath Med Digit. 2013;20(1):125.
- 5. Dr. Madan Kataria. benifits of laughter yoga. laughter yoga news letter [Internet]. first. 2015. Available from: http://laughteryoga.org/english/laughteryoga/details/80
- 6. National institute of aging. Aging: Depression Don't Let the Blues Hang Around. 2015; Available from: http://www.medicinenet.com/script/main/art.asp?articlekey=60505

