

# Assessment of Self-Esteem among Patients with Major Depressive Disorder in Sulaimani City

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## Abstract

**Background:** Major depressive disorder has been associated with greater morbidity and mortality. Many researchers have been sought complex association between depressions with self-esteem. The levels of severity of such factors can play role in the causes, recovery and predictor of depression.

**Objectives:** The main objective of this study is to assess the levels of self-esteem.

**Methods:** A quantitative descriptive design, conducted at psychiatric clinic in Ali Kamal medical consultation center in Sulaimani City. A non-probability, convenient sampling was recruited of 150 patients with major depressive disorder attending the psychiatric clinic. The data were collected from December, 21<sup>st</sup>, 2017 to April 1<sup>st</sup>, 2018 by the researcher of current study through the utilization of structured Face-to-Face interview guided by the questionnaire.

**Result:** The result shows that the patients with major depressive disorder experience low self-esteem.

**Conclusions:** The study conclude that high self-esteem value on its own the strongest significant factor may represents emotional source and possibly used to handle or cope with depressed mood by the patients.

**Keywords:** *Self-esteem, Depression*

## Introduction

Research findings indicated an association between self-esteem with major depressive disorder<sup>5</sup>. It can be the contributory factors to depression<sup>29</sup>. Depression has become one of the most common mental disorders with high prevalence throughout a lifetime<sup>4</sup>. It affects approximately 3.6% of the global population in 2013<sup>2</sup>. In the view of<sup>14</sup> self-esteem can both lead to and result from clinical depression. Self-esteem has been regarded as an essential component of mental health. It is the personal judgment of worthiness that expressed in attitude the person hold toward himself<sup>30</sup>. Higher self-esteem tends to report more positive affective states, grater wellness and more life satisfaction<sup>27</sup>. Low self-esteem has been frequent finding in depression and suicide behavior<sup>1</sup>. Recent empirical studies using longitudinal data and cross-lagged regression models have consistently supported the idea that self-esteem negatively predicts depression<sup>19</sup>.

When low self-esteem is formed it affects all aspects of an individual's life<sup>3</sup>. It contributes to the development of a poor or negative self-image<sup>29</sup> and its partial mediator of the relationship between hopelessness and depression<sup>27</sup>. Understanding self-esteem is important for interventions and prevention of depression<sup>1</sup>.

The contemporary models of depression emphasized the role of low self-esteem in the etiology of depressive disorder<sup>(9, 17)</sup>.<sup>24</sup> devised two models, the vulnerability and scar models in their metal-analysis longitudinal study, found a total of 53 studies published in the year, 1984, 2000, 2010. The study indicated that low self-esteem had role in causes of depression. In addition, other studies suggested that self-esteem fluctuation is a factor in the etiology and maintenance of depression. Low self-esteem is more prevalent among depressed people and can predict a depression onset<sup>14</sup>. However, a major problem exists in examining the relationship between self-esteem and depression, self-esteem may be part of definition of an illness and in no way a causal<sup>27</sup>. The findings by<sup>12</sup>, revealed that low self-esteem on

its own dose not predict future episodes. Nonetheless it may do so interaction with other factors such as stress, hopelessness.

Greif is the painful psychological and physiological response to loss. Although it is most commonly associated with death of loved one, grief occurs when there is any significant loss, including loss of self-esteem; identity, dignity or sense of worth <sup>6</sup>. Greif an accompanied by guilt about sustained loss of self-esteem and ambivalence about living is an indication that suicide risk increased and help is needed for such people. Low self-esteem primarily is common among major depression disorder <sup>2</sup>.

The current study designed to identify self-esteem among patients with major depressive disorder, identifying the level of severity of this factor is expected to have particular important for nursing interventions and prevention of major depressive disorder.

## Method

A quantitative-descriptive design was used to assess self-esteem levels among patients with major depressive

disorder. The study was carried out from December, 10<sup>th</sup>, 2017 to October, 1<sup>st</sup>, 2018. This study carried out at Psychiatric clinic in Ali Kamal medical Consultation Center which is affiliated to the Teaching Hospital in Sulaimani City. A non-probability, convenient sampling of 150 patients previously diagnosed with major depressive disorder were recruited from consecutively attended the psychiatric department during the period of data collection.

A questionnaire was developed to measure the variables underlying the present study, using the Rosenberg self-esteem scale. Validity of the questionnaire was determined through a panel of 20 experts and reliability was determined through the computation of Cronbach's Alpha. The result of reliability was (0.843) for the self-esteem scale. The data were collected from December 21<sup>st</sup>, 2017 to April 1<sup>st</sup> 2018. Statistical package for social science (SPSS) version 22 is used for data analysis.

## Results

**Table 1: Distribution the socio-demographic characteristics of the sample**

Sociodemographic	Characteristics	Frequency	Percentage
Age	18-27 year	31	%20.7
	28-37 year	51	%34.0
	38-47 year	40	%26.7
	48-57 year	21	%14.0
	58 Year or more	7	%4.6
	Mean ± 37.5 11.03		
Gender	Male	99	%66
	Female	51	%34
Marital status	Single	33	%22
	Married	87	%58
	Divorced	24	%16
	Widowed	6	%4
Educational level	Illiterate	36	%24
	Primary school	39	%26
	Intermediate school	24	%16
	Secondary school	21	%14
	Institute or university	30	%20
Occupation	Employed	51	%34
	Unemployed	99	%66
Total	150	%100	

Table (1) shows that the mean of age is  $(37.5 \pm 11.3)$ . Most of them male (66%) and married (58%). According to their educational level, the high percentage of the sample (26%) has primary school, and 24% of them illiterate, while 20% of them graduated from college or institute. Approximately two third (66%) of the study sample are not employed.

**Table 2 Distribution of the sample according to their psychiatric history characteristics**

Psychiatric history	Clinical characteristics	Frequency	Percentage
Duration of illness	1-5 years	87	%58
	6-10 years	36	%24
	11-15 years	12	%8
	16-20 years	6	%4
	21-25 years	9	%6
Number of hospitalization	Non	111	%74
	1 time	15	%10
	2 times	12	%8
	3 times	6	%4
	4 times and more	6	%4
Suicidal attempt	No	102	%68
	Yes	48	%32
Number of Suicidal attempt	No attempt	102	%68
	1 attempt	9	%6
	2 attempt	9	%6
	3 attempt	12	%8
	4 attempt and more	18	%12
Total		150	%100

Table (2) shows that the mean of duration of illness is (6.14) years,  $\pm 6.3$ . The majority of the study sample (74%) has no admission to mental hospital. The table shows that two third of the sample (68%) have no suicidal attempt while (32%) of them have suicidal attempt and (12%) of them attempted more than four attempts, then (8%) of them attempted three attempts, also the same percentage (6%) of them attempted one or two attempts.

**Table 3 the significant difference between calculated mean and theoretical mean in self-esteem measure, using -test**

Variable	Sample	Calculative mean	standard deviation	theoretical mean	value	Level of significance
Self-esteem	150	14.380	4.097	15	1.853	Nonsignificant

Table (3) appears that statistically non-significant difference was found between calculated mean ( 14.380) and theoretical mean ( $x=15$ ), ( $-test = 1.853, \pm 4.097$ ) at  $>0.05$  level in self-esteem scale.

**Table 4 Distribution of the sample according to the self-esteem levels**

Statistical Indicator	Level of self-esteem			Total
	Low level (0-14)	Medium level (15-24)	High level (25-30)	
Frequency	78	69	3	150
Percentage	%52	%46	%2	%100

Table (4) shows the distribution of the patients according to self-esteem scale index. The table indicates that the highest percentage (52%) of the total patients were low level of self-esteem and the mean score ranged from (0-14), and the lowest percentage (2%) of the total patients were high level of self-esteem and the mean score ranged from (25-30).

**Table 5 the significant difference of self-esteem in regard to patient's gender factor among sample**

Variable	Group	Number	Mean score	Standard Deviation	value	Level of significant
Self-esteem	Males	99	14.45	3.81	0.310	Nonsignificant
	Females	51	14.23	4.62		

The table (5) appears that there was statistically non-significant difference mean score of self-esteem, in compare to patients gender because p- value was greater than common alpha 0.05 for the study variable (- test = 0.310). The table reveals that gender factor is not impact factor affecting the self-esteem in major depressive disorder among study patients.

**Table 6 the significance differences of mean score of self-esteem in regard to suicide attempt factor among patients**

Variables	Suicide attempt	Number	Mean score	Standard Deviation	value	Level of significant
Self-esteem	No	102	15.47	3.90	5.142	0.001
	Yes	48	12.06	3.52		

Table (6) shows that there were statistically highly significant differences mean score of self-esteem (-test =5.142 at <0.001) in regard to patients attempted suicide. Table 7 reveals that the suicidal attempt is highly an impact factor affecting self-esteem in major depressive disorder.

### Discussion

The result shows that the mean and standard deviation of age were 37.511.3. This result is slightly

consistent with the result of <sup>30</sup> who found that one third of 150 depressive outpatients of convenient sampling their age ranged from 24-34 years old, in Pakistan. Also <sup>8</sup> found that more than one third of depressive outpatients age 28-37 years old in Sulaimani city. <sup>11</sup> confirmed the results of this study and mentioned that the average of age of onset for major depression has been consider the middle thirties. Although the most frequent age of onset for depression may range 25 to 44 years old age group, people in younger age group have an ever increasing risk

of developing depression<sup>29</sup>. Some data indicate that the onset of depression at an early adolescents age<sup>27</sup> or at age 55years or more<sup>1</sup>.

In this study the results revealed that the predominance gender were males (66%). This results are almost similar with the findings of<sup>1</sup> who found that males (57%) more than females (43%) of depressive outpatients in Kashmir/ India, also<sup>30</sup> found that the predominance males gender more than females among outpatients in Pakistan. On the other hand this results are inconsistent with<sup>27</sup> in Malaysia, <sup>18</sup> in Brazil, who found that the predominance gender were females among depressed patients. Literatures noted that gender roles continue to linger and contribute to high rates of depression among women<sup>(7, 10)</sup>. The findings of this study is that male-female ratio could be explained as females psychiatric patients were less frequently brought to psychiatric governmental clinics due to the feeling of shame and public stigma and self-stigma<sup>28</sup>. More than half (58%) of the sample, their marital status married, and (22%) single. This result goes with the results of<sup>15</sup> and <sup>16</sup> found that approximately more than half of study depressed patients were married. The finding of the present study may be explained by the late onset or recovery from acute onset among the sample of this study and fortunately such patients tend to have fewer difficulties in maintaining their daily life and exhibiting social roles and social integration<sup>28</sup>.

About half of the studied depressed patients were low educational level, and two thirds of them were unemployed. This result similar to the findings of<sup>22</sup> who founds that more than one third of depressed patient with low educational level, while they found that more than half of their sample were employed which are inconsistent to the results of this study.

The main characteristics of depressed patients show that their duration of illness was 1-5 years (58%). This results is consistent with findings of<sup>1</sup>, <sup>21</sup> and <sup>16</sup>. The finding of the present study predicts that the study patient's condition may have reached a chronic limit or in remission.<sup>25</sup> confirm the result of this study and stated that acute episodes of major depression last a limited amount of time.

Most of the study sample is not admitted to psychiatric hospital (74%) they treated in outpatient's psychiatric clinics. These results are in agreement of the findings of<sup>1</sup> in India, found that most study depressed

subjects were treated in homes. Today the emphasis in psychiatric care treatment is on outpatients or community-based interventions that address the treatment needs of psychiatric clients striving to maintain a position within the community.

The current study showed that one third of the depressed participants were attempted suicide and 18% of them have more than four attempts. The findings of<sup>20</sup>, <sup>15</sup> and <sup>13</sup> confirmed the results of this study and mentioned that depression is one of the factors confirm risk for suicide ideation, attempts and death.

The results showed that the depressed participants observed (calculated) mean score of self-esteem (14.580 4.676) were non-significantly difference with theoretical mean score (15 4.676) of Rosenberg self-esteem scale ( $p > 0.05$ ). The distribution of studied sample revealed 52% low self-esteem level, 46% moderate self-esteem only 2% with high self-esteem. This finding is similar to the finding by<sup>30</sup> study in Pakistan. Who found that the main logistic regression results indicate that depressed patients had lower self-esteem than non-depressed population Also,<sup>29</sup> study in Malaysia found that depressed mood and low self-esteem occur with disproportionately high prevalence among adults, And also in adolescents<sup>27</sup>.

Recently emerging studies suggest that low self-esteem contributes to the development of depression<sup>26</sup>. In contrary,<sup>14</sup> reported that there is a reciprocal relationship between self-esteem and depression, yet the causal direction of this association is not establish and noted that self-esteem can both lead to and result from clinical depression and suggested that the self-esteem fluctuation is a factor in a etiology and maintenance of depression.<sup>29</sup> determined that self-esteem emerged as the strongest predictor of depression, in contrast<sup>23</sup> revealed that low self-esteem and its own does not predict future depressive episodes, nonetheless, it may do so interaction with other factors.

This finding of the current study point out that low self-esteem is a state dependent on depressed mood and acts as a vulnerability factor for the development of major depression among study patients.

In this study, the findings showed that the gender is not significant factors effecting self-esteem levels ( $p > 0.05$ ). These findings are inconsistent with<sup>29</sup> found that self-esteem score significantly affected by gender. Suicidal attempts is highly significant factors effecting

patients self-esteem levels ( $p < 0.001$ ). This findings are consistent with the findings of previous studies<sup>15</sup> noted that lowest self-esteem increase the risk of suicide attempts in depressed patients.

### Conclusion

Most of patients were male, unemployed, living in urban areas, practicing religious activities and their mean of age 37.5 years and most of them were less admitting to hospital although the long duration of illness ranged from 1-25 years. The patients experience low self-esteem level. The self-esteem levels are affected by suicide attempts. Patient gender is not significant factor.

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**Conflict of Interest:** None to declare.

**Ethical Clearance:** All experimental protocols were approved under the College of Nursing/University of Sulaimani, Iraq and all experiments were carried out in accordance with approved guidelines.

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