



International Journal of Advanced Psychiatric Nursing

E-ISSN: 2664-1356
P-ISSN: 2664-1348
www.psychiatricjournal.net
IJAPN 2024; 6(1): 50-53
Received: 02-01-2024
Accepted: 13-02-2024

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Effectiveness of rational emotive behaviour therapy on stress and impulsivity among suicide attempters

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DOI: <https://doi.org/10.33545/26641348.2024.v6.i1a.148>

Abstract

The present study, “effectiveness of Rational Emotive Behaviour Therapy on stress and impulsivity among suicide attempters”, was conducted among thirty-one suicide attempters who were attending Suicide Prevention Clinic in Psychiatric Department of tertiary care hospital, Kottayam. The study was interventional in nature and purposive sampling technique was used. The theoretical frame work of the study was based on Roy’s Adaptation model. The research design used for the study was the pre-experimental one group pretest-post-test design. A structured questionnaire prepared by the investigator was used for collecting socio-personal data. The Perceived Stress Scale (PSS) was used to assess stress and the Barratt Impulsiveness Scale (BIS) was used to assess impulsivity among suicide attempters. Data were collected using above tools from thirty-one suicide attempters who met the inclusion criteria for the study. The data were tabulated and analyzed by using descriptive and inferential statistics. The study revealed that Rational Emotive Behaviour Therapy was much effective ($p<0.05$) in reducing stress and impulsivity among suicide attempters. Finding of the study have implication in nursing practice, education, administration and research.

Keywords: Suicide attempters, stress, impulsivity, rational emotive behaviour therapy

1. Introduction

The purpose of the study aims to find out the effect of Rational Emotive Behaviour Therapy on reducing impulsivity and stress among suicide attempters which will help them to enhance their overall coping abilities.

In this study samples refers to male and female suicide attempters between the age group of 18 to 35 years, who made deliberate act of self-harm, aimed at self-destruction irrespective of his or her intention to die with no fatal outcome, having stress score of 14 to 26 on Perceived Stress Scale and impulsiveness score of 95-105 on Barratt Impulsiveness Scale and attending suicide prevention clinic (SPC) at Department of Psychiatry, Government Medical College Hospital, Kottayam.

Researcher screened 63 persons with attempted suicide by administering Perceived Stress Scale (low to moderate stress) and Barratt Impulsiveness Scale (mild to moderate), and selected 31 subjects who met inclusion criteria for the study. The pretest was done in samples on the first day and post-test was done on 28th day after pretest. Rational Emotive Behaviour Therapy was given as four sessions in four consecutive weeks. The posttest was done on the 28th day of pretest.

Life is a precious, promising, challenging and adventurous opportunity. It is a game to be played, a beautiful dream to be realized, a duty to be completed and a sorrow to overcome^[1]. A sound mind in a sound body has been recognized as health ideal since many centuries. People feel that something is wrong with them when they are unable to cope with stressors of everyday life. Suicide is probably the most personal act anyone can perform. Peoples are easily fatigued with these stressors and become depressed and extremely frightened about something and instead of facing it they wish to end their life by themselves^[2]. Suicide is a global public health problem. It is a leading cause of mortality among young individuals. Every year almost one million people die from suicide with a global mortality rate of 16 per 1,00,000 population. On an average, one person dies by suicide every 20 seconds somewhere in the world and 1.8% of worldwide deaths are suicides^[3]. The majority of suicides (85%) in the world occur in low-and middle-income countries. Non-fatal suicide attempts occur mostly in young persons and are up to 10-40 times more frequent than suicides.

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Almost 15% of persons with a history of previous suicide attempt are at a high risk of dying by suicide [4]. Over 1,53,000 deaths due to suicides were recorded in India in 2020. The suicide rate increased from 7.9 to 10.3 per 1,00,000, with higher suicide rates in southern and eastern states of India [5].

Stress or related factors can lead to job loss, breakup of marriages or relationships, or failure to form such relationships, psychosocial adversity can combine to increase stress on the person at last the person will attempt for suicide [6].

Individual differences in impulsivity had a good deal of the risk taking that is observed during adolescence and some of the most hazardous forms of this behavior are linked to impulsivity traits that are evident early in development [7].

Patients are taught to identify problems and stressful life events that precede suicide attempts, as well as the ability to generate solutions that will impede suicidal gestures [8].

2. Materials and Methods

The present study was conducted among 31 suicide attempters attending Suicide Prevention Clinic, Psychiatric Department of tertiary care Hospital, Kerala to find out the effectiveness of Rational Emotive Behaviour Therapy on stress and impulsivity. Pre-experimental one group pretest-post-test design was used. Samples were selected by non-probability purposive sampling on the basis of inclusion and exclusion criteria and the data were collected using sociopersonal data sheet, Perceived Stress Scale for assessing stress and Barratt Impulsiveness Scale for assessing impulsivity among suicide attempters. Data collection process was started after obtaining formal permission from Principal, Medical College Hospital, IEC (Institutional Ethics Committee) and SRC (Scientific Review Committee), approval from KUHS, and permission from Head of Department of Psychiatry and Principal, Government College of Nursing, Kottayam. The pretest was done on the first day. Rational Emotive Behaviour Therapy was given as four sessions in four consecutive weeks. The posttest was done on the 28th day of pretest.

The socio personal data were analyzed using frequency distribution and percentage.

Effectiveness of REBT on stress and impulsivity were analyzed by using Wilcoxon signed rank test.

3. Results and Discussion

Kindly make conclusion in 100 words

Among 31 clients in the study group 45.2% belonged to 21-25 years. Most of the suicide attempters were females (67.7%). Among the sample 48.4% of suicide attempters were educated up to higher secondary and 29% were graduates and above. Regarding occupation 29% of suicide attempters are either un-employed or had private job. Considering economic status, 67.7% of suicide attempters belonged to BPL category and resides in rural areas and 87.1% of suicide attempters belonged to nuclear family. Regarding marital status 41.9% were married and living together. Regarding number of suicide attempts 38.7% of suicide attempters attempted suicide for 1 or 2 times and 3.2% attempted 4 or 5 times.

Figure 1 shows that among suicide attempters 51.6% had low stress and 48.4% had moderate stress.

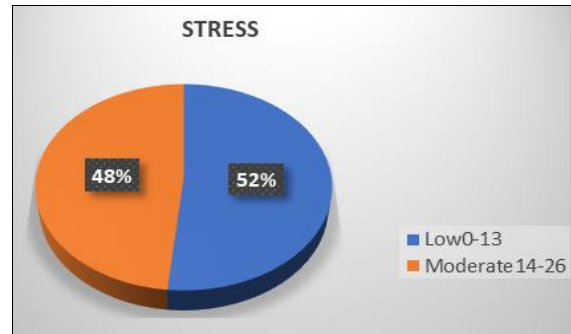


Fig 1: Frequency distribution and percentage of suicide attempters based on stress

Figure 2 shows that impulsivity among suicide attempters was 71% (moderate impulsivity) and 29% (mild impulsivity) respectively.

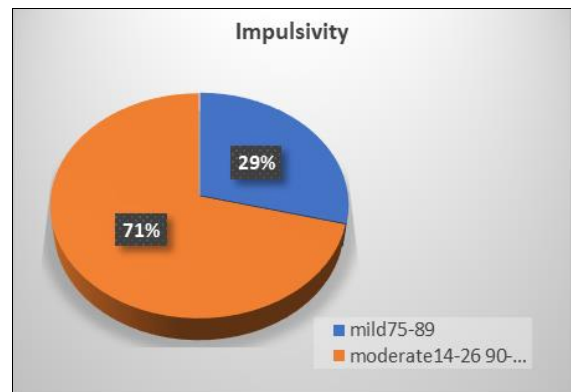


Fig 2: Frequency distribution and percentage of suicide attempters based on impulsivity

Effectiveness of Rational Emotive Behaviour Therapy on stress and impulsivity among suicide attempters was computed by Wilcoxon signed rank test

H₀₁: There is no significant difference in the stress among suicide attempters before and after Rational Emotive Behaviour Therapy.

H₀₂: There is no significant difference in the scores of impulsivity among suicide attempters before and after Rational Emotive Behaviour Therapy.

Table 1: Median, IQR and Z value of pretest, posttest scores of stress among suicide attempters (n=31)

Stress				
Group	Median	IQR	Z	p Value
Pretest	13	13	4.869	.001
Posttest	5	5		

Table 1 shows that obtained Z value 4.869 is statistically significant at 0.001 level, median and IQR score of pretest and posttest of stress were 13 and 5 respectively.

Hence the null hypothesis is rejected. It is inferred that Rational Emotive Behaviour Therapy was effective in reducing stress among suicide attempters.

Table 2: Median, IQR and Z value of pretest, posttest scores of impulsivity among suicide attempters (n=31)

Group	Impulsivity		Z	p Value
	Median	IQR		
Pretest	99	13	4.864	.001
Posttest	62	14		

Table 2 shows that obtained Z value 4.864 is statistically significant at 0.001 level, median score of pretest and posttest of impulsivity were 99 and 62 respectively, and IQR of pretest and posttest of impulsivity were 13 and 14 respectively. Hence the null hypothesis is rejected. It is inferred that Rational Emotive Behaviour Therapy is effective in reducing impulsivity among suicide attempters.

4. Discussion

The sample characteristics of the study showed that 45.2% of suicide attempters is belonged to the age group of 21-25 years, and 26-30 years respectively. This was consistent with a study conducted in India, which showed that 40% of all suicides occur in people between 15 and 29 years of age. This finding highlights the importance of suicide prevention strategies as a greater number of lives lost in the most productive period of the lifetime.

In the present study most of the suicide attempters were females (67.7%). Globally, attempted suicide is common among women and completed suicide is common in men. The cross-sectional study conducted in Europe, to explore gender differences in suicide intent in a cross-national study of suicide attempts showed that 40.6% of the sample were males and 59.4% females.

The present study results shows that majority of the persons had low to moderate stress and the study also depicts that 71% of persons with attempted suicide had moderate impulsivity.

5. Conclusion

The study delved into the demographics and psychological profiles of suicide attempters, revealing significant insights. Among the findings, a notable portion of attempters were young adults, predominantly females, with a substantial portion from economically disadvantaged backgrounds. Rational Emotive Behaviour Therapy (REBT) proved effective in reducing both stress and impulsivity among participants. These results underscore the urgency of targeted suicide prevention efforts, particularly among vulnerable demographics such as young women. Understanding the interplay between demographics, psychological factors, and therapeutic interventions is crucial for developing effective suicide prevention strategies tailored to diverse populations.

6. Acknowledgment

The investigator is extremely thankful to Dr. Usha. V. K, Principal, Govt. College of Nursing, Kottayam, for her valuable suggestions, excellent guidance and inspiring criticism for the successful completion of this dissertation. The researcher owes her deepest gratitude and indebtedness towards

Dr. Mercy Jacob, Assistant Professor, Govt. College of Nursing, Kottayam, for her excellent guidance, constant motivation, inspiration and unwavering support for the successful completion of this dissertation. It is with heartfelt gratitude that the investigator extends her sincere

indebtedness for her effort in giving guidance, corrections and continuous support throughout the course of investigation.

The investigator expresses her respectful gratitude to Mr. Jomon K George, Clinical Psychologist, Govt. Medical College Hospital, Kottayam, for his valuable suggestions and excellent guidance.

The investigator takes this opportunity to express her immense gratitude to Dr. Omana M P, Associate Professor and the Course coordinator, Mrs. Mariamma P Alexander, Assistant Professor and Specialty coordinator, Govt. College of Nursing, Kottayam for their immense support, timely help, valuable suggestions and excellent guidance to ensure the quality of this piece of work.

The investigator is indebted to her beloved parents, husband, children, siblings and loved ones for their unconditional love, prayers, tremendous support, companionship and constant encouragement in her every step and for their inspiring words which energized her to finish this endeavor successfully. She is immensely grateful to all her loving friends for being so kind and helpful toward her study.

7. Conflict of Interest

Not available

8. Financial Support

Not available

9. References

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How to Cite This Article

Hafeefa B, Jacob M, George JK. Effectiveness of rational emotive behaviour therapy on stress and impulsivity among suicide attempters. International Journal of Advanced Psychiatric Nursing. 2024;6(1):50-53.

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