3.1. The Need of the study

According to Mohammad et al. (2006) the current prevalence of depressive disorders in city population is about 2%, i.e., 1.8% people with major depressive disorders, and 0.2% with mild depression. Noorbala (2008) has used DSM-IV criteria of depressive disorders along with clinical interviews; and found out that the prevalence of depressive disorders is about 9.2%, i.e. 4.4% having major depressive disorder, 3.9% with minor depression, and 0.8% with dysthymic disorder. It is estimated that by 2020, depression will be the second leading cause of world disability (WHO, 2001); and by 2030, it is expected to be the largest contributor to disease burden on individuals, families, societies, and ultimately on nations (WHO, 2008). These striking, shocking and alarming figures show the public health importance of depression. Hence, research and intervention is extremely important to lessen this disability.

In view of the fact that the overwhelming majority of people who commit suicide are persons with mental illness, especially depression; hence, the need for screening and early detection of depression in primary health care services is unarguable (Patel et al., 2010; Araya et al., 2003a).

Major depression is currently a leading cause of disease burden in North America & other high-income countries; and it is the fourth leading cause of death-globally (WHO, 2001). It is predicted to be the second leading cause of disease
burden globally after HIV by the year 2030 (WHO, 2001). Delay or failure in seeking treatment after relapse by caretakers, and the failure of health professionals to provide treatment, are two barriers in reducing disability due to depression.

Depression seems to be often associated with unemployment and poverty. Unemployment is a global problem, and people in developing countries suffer more socio-economically. Sen (2000) has observed that unemployment has very serious repercussions on individual in particular and on family and society in general. Due to this, economy is adversely affected at all levels. Psychological health unemployed person remains in jeopardy. Empirical studies of unemployment have also suggested that this has very serious adverse effects on many aspects of life. The effect of prolonged joblessness can be specially damaging for the moral behaviour of the affected person. In view of the above observations of Sen (2000), it will not be unreasonable to think that the underprivileged and downtrodden section of Indian society, are more vulnerable to suffering from depressive illnesses. Because of this, their cognition (distorted thinking) and behaviour might be negative. Discrimination naturally lowers self-esteem. Lower self-esteem paves way for psychiatric problems, especially depressive illness (ICD-10, WHO-1992; Beck, Steer, Kovacs et al., 1985; Kaplan and Sadock, 1985; Bibring, 1953; Jacobson, 1953). Since these people are more or less socio-economically underprivileged, their psychological health goes into margin, and they are more vulnerable to depression. Cognitive Behaviour Therapy is a proven Psychotherapeutic modality in the treatment of depression (Beck, 1985; Segal, Gemar & Williams, 1999). CBT is aimed at lifting depression through cognitive and behavioural changes. Therefore, a study of treatment of depressive illness through CBT for unemployed and employed people would be of special significance. The
present study deals with this issue. The need, objective and hypothesis of the study are outlined here.

In view of the above, the researcher proposes to study the effectiveness of Cognitive Behaviour Therapy in the treatment of depression of employed and unemployed down-trodden persons.

3.2. Aims and objectives:

The youth is the backbone of any family, society, culture, and nation. The major concern for policy-makers is to see that the asset of youth is known and then to use their intellectual property in overall development of the nation. As depression affects youth in their productive years, this is harmful phenomenon in all respects viz., familialy, socially, economically, and psychologically. Any government is concerned about its outstanding place in the world. Mass-media (viz., newspapers, television channels, magazines, internet, blogs, twitter etc.) always informs about the position of youths in family, society, culture and ultimately in nation.

The research study on depression and use of Cognitive Behaviour Therapy is widely studied in western countries, especially by Aaron Beck and his colleagues and others in the field of psychiatry. Research studies on depression and use of CBT on rural and urban population have rarely been done in India, or probably unavailable. Further research on depression and use of CBT on downtrodden is extremely hard to find or such research is unavailable for the present. As such research in this area is sparse, naturally its benefits have not reached in communities.

The aim of the present study is to make available such psychotherapeutic research in India. This study is also aimed at improving the psychological health of people, so as to enable them to become productive in over all welfare of the
population at large. Hence the study is directed toward examining the role of CBT in the treatment of unemployed and employed people with depression. The chief objectives of the present study are outlined as under:

1. To assess and compare the levels of depression of participants undergoing experimental and control group conditions.
2. To assess and compare the levels of depression in unemployed and employed participants.
3. To inquire into the nature, extent and dynamics of the remedial effectiveness of Cognitive Behaviour Therapy in the treatment of depression of participants.
4. To inquire into the nature, extent, direction and dynamics of the remedial efficiency of Cognitive Behaviour Therapy in the treatment of depression of the participants of the experimental and the control group conditions on the follow-up measure.
5. To inquire into the nature, extent and endurance of the remedial efficiency of Cognitive Behaviour Therapy in the treatment of depression of unemployed and employed participants of the experimental group condition on the pre-test, the post-test and the follow-up measures.
6. To conduct a relative evaluation of the efficacy of the cognitive behavior therapy on the participants of the experimental group observed on the pre-test, the post-test and the follow-up measures.
7. To find out the intricacies of the interactive roles the condition, the employment status and the measure of the participants in acquisition of depression scores by the participants.
**Hypotheses:**

Apparently, unemployment is a source of stress for many people in our society. Unemployment has placed a burden on a sizeable segment of our population, bringing with it both financial hardships and self-devaluation. In fact, unemployment can be seen as debilitating psychologically as it is financially (Nelson, 1974). As an indication of the toll that unemployment exacts, periods of extensive unemployment are typically accompanied by increases in certain types of maladaptive behavior, such as depression, suicide and crime (Brenner, 1973). Hardest hit by economic and employment problems are those at the bottom of the social ladder e.g., Scheduled Castes and Scheduled Tribes who are already victims of discrimination for centuries, and further they are handicapped by poorer education, poorer nutrition, more broken or unstable families, overcrowding, inadequate housing, and feelings of helplessness and of rejection by the larger society. Unemployment is known as one of severe stressful factors for the individual in particular and family and society in general. It creates many socio-economic problems for concerned people. Unemployed persons feel inadequate and his self-esteem lowers. Due to stress of staying on productive economically, person becomes vulnerable to psychiatric problem. There are many studies e.g., Sen (2000); Holmes (1978), documenting association of depression and unemployment.

Depression is mostly the sum total of hopelessness, inadequacy, indecisiveness, lower self-esteem and/or lower self-confidence, discrimination and stressful life-events. In such a situation, person’s thinking gets distorted i.e., development of negative cognition. This psychological mechanism plays key role in depression. Beck (1976) and Beck et al. (1979) identified negative ‘cognitive tried’-
i.e., negative thoughts about the self, the world, and the future - in depressed persons. Meichenbaum (1977) also reported that negative view of stressors is related to depression. Both these scientists are of the view that if negative thoughts and behaviour are replaced by positive thinking and action, then depression is reduced or removed. This is the central theme of CBT. The studies of the effectiveness have produced mixed results. Some of the studies have shown positive results (Judith Beck, 2004; Dobson, 1989; Thase et al., 1994) which the others have negated the effect (Lynch et al., 2009).

The employed and unemployed are understood to differ in their economic level and the satisfaction generated by employment. It is hoped that the effect of CBT intervention would not be similar across groups and over time points of interventions. Lastly, such there is a dearth of research endeavors undertaking the scientific inquiries concerned with roles of employment status of people in the genesis, development and maintenance of depression with the objective to test remedial efficacy of the cognitive behavior therapy in Indian socio-cultural milieu. Taking into account the issues discussed in the detailed review of the literature, the following hypotheses were formulated for testing their worthiness and empirical accuracy with the help of the analyses of the data collected in the present study:

1. The participants comprising the experimental and the control groups would not differ significantly in their mean depression scores on the Pre-test measure.

2. The unemployed and employed participants would not differ significantly in the acquisition of their mean depression scores on the Pre-test measure.
3. The participants comprising experimental group would evoke lower mean depression scores as compared to their control group counterparts on the post-test measure.

4. The participants of the experimental group condition would significantly achieve higher mean depression score as to those who constitute the control group on the follow-up measure.

5. The unemployed and employed participants of the experimental group would significantly differ in their levels depression on the pre-test measure.

6. The unemployed and employed participants of the experimental group would significantly differ in their levels depression on the post-test measure.

7. The unemployed and employed participants of the experimental group would significantly differ in their levels depression on the follow-up measure.

8. The participants of the experimental group observed on the post-test and the follow-up measures would emit significantly higher mean depression scores as compared to the participants observed on the pre-test measure.

9. The condition, the employment status and the measure would have significant interaction effects on culmination of the depression scores of the participants.