



CODEN [USA]: IAJPBB

ISSN: 2349-7750

**INDO AMERICAN JOURNAL OF
PHARMACEUTICAL SCIENCES**<http://doi.org/10.5281/zenodo.1245735>Available online at: <http://www.iajps.com>

Research Article

**COGNITIVE BEHAVIORAL THERAPY EFFICAY IN
REDUCING DEPRESSION IN PARENTS OF CEREBRAL
PALSY CHILDREN**¹Dr. Muhammad Awais Farooq, ²Dr. Abubakkar, ³Dr. Muhammad Awais Zafar¹Medical officer, RHC 229 RB Faisalabad²Medical Officer, Basic health Unit.Chak No.15/1R District Okara³Medical officer, Basic Health Unit Sial Bhakkar**Abstract:**

Objective: The aim of this study is to demonstrate cognitive behavioral therapy (CBT) effectiveness in reducing cerebral palsy (CP) depression in children.

Study design: Intervention study.

Place and Duration: The study was performed in Physical center and Rehabilitation center Mayo hospital Lahore for the period of one year from March 2016 to March 2017.

Methods: Mothers who were screened with depressive symptoms in the CBRT Depression Scale were selected. Twenty four mothers received treatment. For each mother. 6 structured CBT sessions were conducted. Post-intervention and pre operative assessment of the depressive symptom were made using the (BDI-II) Beck II Depression Inventory.

Findings: Averages of post-intervention and pre interventions were collate to know the efficacy of CBT for mothers who are depressed having CP children. The results show that depression symptoms are a significant improvement in post-intervention assessment; suggesting that the CBT has helped these mothers to low their depression.

Conclusion: CBT is helping CP children mothers with intermediate depressive symptoms to cut off effectively with depression.

Key words: Cerebral palsy, CBT, beck II depression inventory, maternal depression, stress management, relaxation techniques.

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Please cite this article in press Muhammad Awais Farooq *et al.*, *Cognitive Behavioral Therapy Efficay in Reducing Depression in Parents of Cerebral Palsy Children*, *Indo Am. J. P. Sci*, 2018; 05(05).

INTRODUCTION:

Most children have a healthy childhood and there is very little demand for collecting and caring. Approximately 7.7% reported obstacle during their period of growth. Beginning in early childhood cerebral palsy (CP) is the most common problem. These are disorders of development, movement and postural disorders that limit the activity attributed to brain damage which is non-progressive in the infant brain or developing fetal. Computer motor disturbances are accomplished by frequently changed sensations, communication, cognition, perception swallowing and behavior. Prevalence of neurological disorder affecting children is an estimated of about 2.0 to 2.5 / 1000. The training of a disabled child for parents and care takers is a challenging process. Routine tasks of feeding, bathing, traveling and communication are more emotionally and physically challenging for parents having children with disabilities. It is not easy for parents to raise a child with special needs. These parents should be stronger, more adaptable and optimistic. The research provides evidence that parents of children with special needs have gone through many psychosocial questions such as anxiety, depression, feelings of helplessness, frustration and aggressive behavior, and that community incompatibility contributes to family concerns.

As with disabled children, the mother is part of teamwork to improve the children health. They are confronted with many social and emotional problems. They are exposed to psychological distress in response to their children's injuries. For this reason, it is necessary to emphasize the parents' mental health problems, clearly symptoms in maternal depression in this population. Research has shown that children with disabilities are generally more likely to be depressed when compared to their normal mothers. Few things have been done to determine the causes of maternal depression and prevalence of neurological disorders most common of which is cerebral palsy. with family members co operation, especially mothers, to help manage the depression, indirectly helping the child with the SP improve their health.

Research shows that parents' level of education, financial status, strong marital relationship, problem solving skills and social support, level of adjustment and helping parents identify problems they face.

Cognitive-behavioral therapy (CBT) help to manage depression, as one of the main problems of children with disabilities in their mothers is depression. "It is a form of action-focused psychosocial therapy that assumes that maladaptive or misconceptual patterns lead to incompatible behaviors and" negative "emotions. Treatment focuses on change to change the individual's thoughts (cognitive patterns). behaviors and emotional state. "In a Lancet publication Rahman et al. (2001) report that BDT has been successfully used to treat depression in the rural areas mothers of Pakistan. In relation to the author's knowledge, the CIS for depressed mothers to manage depressive symptoms of children with disabilities the aim of this study is to determine the efficacy of BDT with mildly depressed mothers in polio-free children in order to facilitate the childhood rehabilitation process and to enable mothers to play a more effective role.

METHODOLOGY:

It is an intervention based study carried out at Physical center and Rehabilitation center Mayo hospital Lahore for the period of one year from March 2016 to March 2017. The subjects were appropriately selected after receiving written informed consent. The purpose of the work was to explain to them and their children how to help them in the rehabilitation process.

The results were evaluated with SPSS 16. The mean values of the depressive symptoms in BDT-II were taken to see the differences; <0.05 p-value was considered statistically significant at 95% confidence interval. (See Tables 1 and 2).

RESULTS:

The pre-intervention's mean value (pre-CBT) is high, ie, 21.5 (see Table 01), which is 25.5 after the intervention (after CBT), ie CBT helps mothers. Children with SP to cope with depressive symptoms. In addition, the results show a significant change in BDI_II from 22 items to 9 (see Table 02). While the average guilt value before the CBRT was 1.4, the mean value of the CBRT was 0.4, meaning that the CBT to help mothers to change the Reeducarles guilt, which is the real cause of their childhood block. self-critical thoughts before the intervention (before the CIS) and the mean value after the intervention (after the CIS) was 0.7, a measure of self-esteem and critical emotional improvement.

Table 1: Mean Value of BDI-II before CBT and after CBT

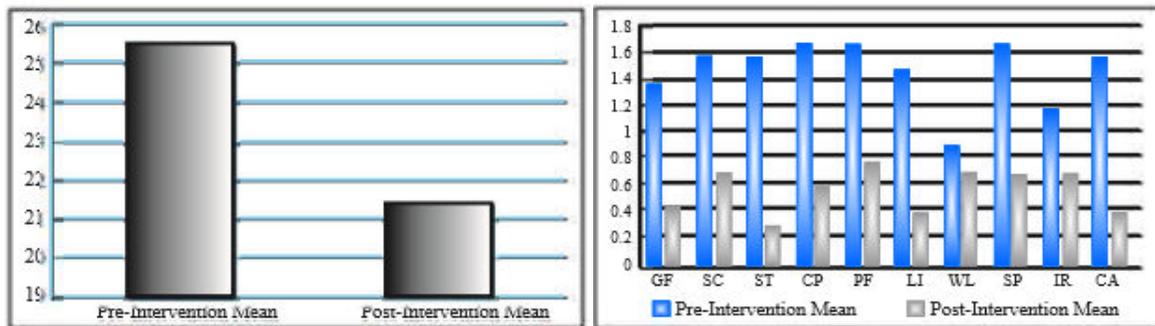
Sample Size N	Pre-Intervention Mean	Post-Intervention Mean
24	25.5	21.4

Table 2: Mean Value of Sub-Domain of BDI-II before CBT and after CBT

S.No	Sub-Domain	Pre-Intervention Mean	Post-intervention Mean
1	Guilt feelings (GF)	1.5	0.35
2	Self-cynicalness (SC)	1.5	0.3
3	Suicidal thoughts (ST)	1.5	0.3
4	Crying spells (CP)	1.7	0.6
5	Punishment feelings (PF)	1.7	0.8
6	Loss of interest (LI)	1.5	0.4
7	Changes in sleeping patterns (WL)	1.7	0.7
8	Irritability (IR)	1.7	0.7
9	Changes in appetite (CA)	1.6	0.4

Suicidal thoughts While the mean prevalence value was 1.7 and the mean value of intervention was 0.3, using suicidal posture techniques, and suggesting that the mind was leading to more condoms, suicidal thoughts decreased positive.

The mean values for crying magazines are 1.7 (before the intervention) and 0.6 (after the intervention), indicating that crying spells are decreasing by changing the cause of crying, reducing the adverse effects of crying causes.



While the average value of the CBRT sessions for the disappearance of the activities was 1.5, it has changed significantly to 0.4 after the CBRT sessions. This means that they are interested in the activities of these mothers after receiving the CIS daily. The average change in the sleep pattern before the CBRT sessions was 1.7 and it was 0.7 after the CBRT sessions. This shows a significant improvement indicating that the CBRT is helping the mother to get well.

DISCUSSION:

This study demonstrates the effect of depressive mothers cognitive behavioral therapy (CBT) in children with cerebral palsy (CP). Means a modified treatment where blood-based intervention is used to help KP children cope with depressive symptoms of their mothers. Findings indicate that depressive symptoms are significantly reduced since the average scores of the BDI-receiving mothers before the BDI-II treatment are high (25.5) and those of the treated mothers are particularly low (mean 21.4). items related to guilt feelings. Researchers have shown that maternal depression has a negative effect on children's health and therefore has the potential to benefit their children from the depressive symptoms of mothers.⁸ This is why the CIS can help. Mothers to improve their motherhood skills. Affects maternal

attitude towards motherhood for children with SP. First, these mothers help change their flawed cognition, such as worthlessness, guilt, and self-critical analysis. The latter is also achieved by teaching mother relaxation techniques that help mothers cope with stress by increasing maternal-child relationships, focusing on reducing maternal irritation, increasing attention to life and child rehabilitation. and improve your dream.

A Robert et al. (2003) reported that mothers receiving CBT were more satisfied with their motherhood and looked more positively at children and before and after childbirth.

In addition, during the sessions, CBT mothers were taught how to relax using relaxation techniques and modified cognition, so that after experiencing

pleasurable activities, they felt less nervousness and a better sense of well-being.

This study was an initial step to re-educate their mother of cerebral palsy and help them cope with their depressive symptoms, and it seems that additional efforts are needed to include this population and to keep it in custody. There were limitations to this study only when it was done with mothers of SP children; It should also be done with mothers of other physically / mentally disabled children and mothers of children with disabilities so that data that would help identify the normal stress / depression level among all mothers can be compared. The researcher will be able to distinguish between levels of stress among mothers of uninhibited children. It is also the first time in Pakistan that mental health problems of mothers of children with disabilities have been addressed and now have the power to facilitate their psychological well-being by facilitating their child's rehabilitation process. Reproduction and expansion are necessary to reaffirm the positive results of this study. In addition, follow-ups should be undertaken to assess the duration of exposure and protection of relapses and the long-term effects of rehabilitation processes on children.

CONCLUSION:

Cognitive-behavioral therapy (CBT) is a blood-based treatment for depressive symptoms; This study has shown that the CBT helps mothers of children with disabilities cope with depressive symptoms that help their children to take an effective place in the management of rehabilitation.

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