



## COMPARISON OF PSYCHOLOGICAL WELL-BEING USING WHO WELL BEING INDEX AMONG MIDDLE AGED MALES AND FEMALES IN URBAN AREA

### Physiology

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### ABSTRACT

**Background:** Depression is common unidentified major health issue among middle aged population. There are very few studies on gender differences in depression. The 5-item World Health Organization Well-Being Index (WHO-5) is among the most widely used questionnaires assessing subjective psychological well-being. So the purpose of the study was to assess the level of depression and anxiety among middle age male and females using WHO-5 as a screening tool for depression.

**Methods:** The study was conducted for 6 months in an urban region in subjects aged between 35-60 years. WHO-5 well being index was used to assess depression. The difference between WHO-5 mean scores was determined among males and females.

**Results:** A total of 521 participants, of which 239 males and 282 females were included in the study. There was no significant difference between the age of males and females and more percentage of females were having poor well being index (26%)

**Conclusion:** The prevalence of poor well being reported in this study was 20.5%. Poor well being is widely prevalent among the middle-aged women in urban area and mental health services are required to tackle the issue.

### KEYWORDS

#### Introduction:

Anxiety and depressive disorders constitute a substantial proportion of the global burden of disease and are projected to form the second most common cause of disability by 2020. Depression has emerged as a major health concern among middle aged, with various epidemiological studies reporting a prevalence ranging from 12.7% to 70% among community-dwelling people.<sup>1,2,3</sup>

Thus, to address this issue of under-reporting of depression among middle aged population, an accurate diagnosis is absolutely essential. Moreover, screening of middle aged individuals for depression using validated tool will facilitate early detection of depression. In an attempt to assess subjective well-being of individuals, the World Health Organization (WHO) has developed the WHO-Five-Well-being Index (WHO-5). It is a brief, self-administered questionnaire, consisting of 5 questions evaluating mood, vitality and general interests. Few researchers demonstrated that WHO-5 has been successfully used to assess depression in the general population. This screening tool being simple and easy to administer, may be a potential alternative to the current gold standard for detection of depression among middle aged population. However, the amount of published literature intending to ascertain the utility of the WHO-5 as a screening tool for middle aged population showed that depression is common unidentified major health issue.<sup>4</sup> There are very few studies on gender differences in depression. Hence the purpose of the study was to assess the level of depression and anxiety among middle age males and females using WHO-5 as a screening tool for depression.

#### Methodology

Institutional ethics committee approval was obtained and the cross sectional study was conducted for 6 months in an urban region in subjects aged between 35-60 years. A total of 521 participants, of which 239 males and 282 females were included in the study. All the participants were administered WHO 5 well-being questionnaire. It was translated to local language.

WHO 5 well-being includes five items which is rated on a 6-point

Likert scale from 0 to 5. The theoretical raw score ranges from '0' to '25'. 'Zero' represents worst possible sense of well-being whereas '25' represents best possible sense of well-being. If the raw score is below 13 or if the patient has answered 0 to 1 to any of the five items; it indicates poor sense of well-being.<sup>5</sup> Those who reported a past history of psychiatric disorders, any organic disease associated with depression and serious cognitive, visual, hearing impairment were excluded from this study.

Data was analyzed statistically using mean, t test and percentage.

#### Result :

**Table-1: Comparison of age in Males and Female**

Parameter	Males (n=239)	Females (n=282)	P Value
Age (Yrs)	45.6 ±16.05	46.48±14.04	> 0.05

There is no statistically significant difference between the age of males and females.

**Table-2 : Comparison of WHO5 – Well-being Score in Males and Female**

Parameter	Males (n = 239) (%)	Females (n = 282) (%)
WHO score > 13	85	74
WHO score < 13	15	26

Above table showed that higher percentage of females were having poor well being index.

#### Discussion:

There is no statistically significant difference between the age of males and females. Higher percentage of females were having poor well being index. The findings of this study suggest that more number of females had poor well being as analyzed by the WHO-5. The prevalence of poor well being reported in this study was 20.5%. This was in agreement with studies conducted by Manjubhashini, et al.<sup>6</sup> and

Sandhya, et al<sup>7</sup> who reported a prevalence of 31.7% and 25.4% respectively. Poor wellbeing is indicative of depression. However, a studies conducted in urban area revealed that majority of the females were depressed.<sup>8-10</sup>

In the present study, the poor well being among middle-aged women was found to be very high (26%). In contrast to current findings, study by Dave and Parul on mental health and aging in women above 40 years at Vadodara showed that 4.62% had minimal depression, 11.29% had mild depression, and 18.18% had severe depression.<sup>11</sup> Anderson *et al.*, in a study conducted on 100 women aged 40–60 years attending a menopausal clinic in California, found emotional symptoms as the major reason for attending the clinic in 63% women.<sup>12</sup> Dasgupta and Ray in their study on postmenopausal women reported that nearly 87.3% of rural women were suffering from depression while it was 60% in case of urban women.<sup>13</sup> This variation in prevalence of depression in different populations could be attributed to a different ethnicity, demographic variation in the study population and different diagnostic criteria employed.<sup>14</sup> In one of our study by Pranita et al, it was found that psychological well-being of perimenopausal women was more affected as compared to postmenopausal women although the difference was not statistically significant.<sup>15</sup>

India being developing country most of the urban population belong to middle socioeconomic status. Mild to moderate type of depression was seen more in subjects with middle socioeconomic status in the study by Bansal et al. This may be due to the fact that women with higher economic status avail more and better resources and means to maintain lifestyle and participate in more healthy and leisurely activities which influence their well-being.<sup>16</sup>

Thus, WHO-5 can be regarded as a valid and internally consistent screening tool to assess well being in general population. Furthermore, this screening tool may be used routinely in the health centers and hospitals on all types of patients, as a part of comprehensive assessment.

#### Conclusion:

The prevalence of poor well being reported in this study was 20.5%. Poor wellbeing is widely prevalent among the middle-aged women in urban area and mental health services are required to tackle the issue.

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