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DEPRESSION AMONG AFRICAN PATIENTS: THREE DIAGNOSTIC APPROACHES

By

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SUMMARY

DEPRESSION AMONG AFRICAN PATIENTS: THREE DIAGNOSTIC APPROACHES

By

Senathi Fisha

Promoter: Professor J. B. Schoeman

Department: Psychology

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The aim of this study was to determine the usefulness of the following instruments for the diagnosis of depression among Africans: The Beck Depression Inventory (2nd Edition) (BDI-II), the Minnesota Multiphasic Personality Inventory (Revised) (MMPI-2) and the Rorschach Inkblot Test (scored in terms of Exner's Comprehensive System). With regard to the MMPI-2, the focus was on the Depressed Suicidal Ideation Critical Item Scale, but the following Critical Item Scales were also examined: Acute Anxiety State, Somatic Symptoms and Family Conflict. With regard to the Rorschach, the Depression Index (DEPI) and the Suicide Constellation (S-CON) were examined. A Structured Questionnaire was used to obtain background information on the patients.

The sample consisted of 162 African patients between the ages of 18 and 50 years that were seen in a private practice in Pretoria, Gauteng. All the patients had an educational level of at least Grade 12. The patients were diagnosed according to DSM-IV criteria as suffering from Dysthymia, Major Depression or Adjustment Disorder with Depressed Mood.

The personal background information about the patients that was examined included: sources of and reasons for referral, presenting symptoms, views about the causes of depression, and experience of the self. Relevant statistical analyses were done to

investigate the reliability and validity of the measurement instruments and to determine if there were any gender or age biases in the results.

In contrast to the findings of earlier research that depressed African patients mainly present with physical complaints, the patients who participated in the study predominantly presented with emotional and cognitive symptoms similar to what is found in Western countries. Only a few patients referred to traditional African beliefs such as witchcraft, and most of them interpreted their illness in terms of interpersonal problems, especially in their relationships with other family members.

The BDI-II was found to be a reliable and valid instrument that could be used for the diagnosis of depression among African patients.

Of the 162 MMPI protocols, 46.3% were invalid. It was especially on the L, F, F(B) and Cs scales that large numbers of patients obtained scores higher than the cut-off scores. The reliabilities of the Critical Item Scales were acceptable, except for the Family Conflict scale, and these scales thus generally appear to be useful for diagnostic purposes in an African context. The mean score on the Depressed Suicidal Ideation Scale was, however, relatively low. The MMPI-2 rendered a large number of misdiagnoses of Schizophrenia and Personality Disorder and only a few of the patients obtained a diagnosis of a depressive disorder. Although the patients found the MMPI-2 too long and the language too complex, they generally experienced the test positively.

The DEPI and S-CON rendered a large number of false negatives which indicates that if these indeces are used for assessing depression, it should be done in conjunction with other diagnostic methods. The Rorschach nevertheless proved to be useful for identifying psychodynamic processes that could be used therapeutically.

A low and statistically non-significant positive correlation was found between the BDI-II and the DEPI. Both the BDI-II and the DEPI correlated positively with the Depressed

Suicidal Ideation scale. The S-CON did not correlate significantly with any of the other scales.

Keywords: Africa, MMPI-2, Rorschach, Depression Index (DEPI), Suicide Constellation (S-CON), Depression, Culture, Suicide, Diagnosis, Beck Depression Inventory.

OPSOMMING

DEPRESSIE ONDER SWART PASIëNTE: DRIE DIAGNOSTIESE BENADERINGS

Deur

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Die doel van die studie was om die bruikbaarheid van die volgende instruments vir die diagnose van depressie onder swart pasiënte, te bepaal: Die Beck Depressieskaal (2de Uitgawe) (BDI-II), the "Minnesota Multiphasic Personality Inventory" (Hersiene Uitgawe) (MMPI-2) en die Rorschach Inkkladtoets (ooreenkomstig Exner se Omvattende Merksisteem). Ten opsigte van die MMPI-2 was die klem op die Depressie en Selfmoordgedagtes Kritiese Itemskaal, maar die volgende Kritiese Itemskale is ook ondersoek: Akute Angstoetstand, Somatiese Simptome en Gesinskonflik. Ten opsigte van die Rorschach is die Depressie-indeks (DEPI) en die Selfmoordkonstellasie (S-KON) ondersoek. 'n Gestruktureerde Vraelys is ook gebruik om agtergrondgegewens oor die pasiënte te bekom.

Die steekproef het uit 162 swart pasiënte tussen die ouderdomme van 18 en 50 jaar bestaan. Hulle is in 'n privaatpraktyk in Pretoria, Gauteng, gesien, en het ten minste oor 'n Graad 12 kwalifikasie beskik. Die pasiënte was ooreenkomstig die kriteria van die DSM-IV gediagnoseer met hetsy Distemie, Major Depressie of Aanpassingsversteuring met Depressiewe Gemoed.

Die persoonlike agtergrondsinligting van die pasiënte wat ondersoek is, het die volgende ingesluit: bronne van en redes vir verwysing, presenterende simptome, sienings oor die

oorsake van depressie en die ervaring van die self. Toepaslike statistiese ontledings is gedoen om die betroubaarheid en geldigheid van die meetinstrumente te ondersoek en om te bepaal of daar sydigheid in terme van geslag en ouderdom in die resultate was.

In teenstelling met vroeëre navorsigsresultate dat depressiewe swart pasiënte meesal met somatiese simptome presenteer, het die pasiënte in hierdie studie oorwegend met dieselfde emosionele en kognitiewe simptome wat in Westerse lande gevind word, presenteer. Slegs enkele pasiënte het na tradisionele denkpatrone soos heksery vewys, en meeste van hulle het hul siekte in terme van interpersoonlike probleme (veral in gesinsverhoudings) interpreteerbv.

Daar is bevind dat die BDI-II 'n betroubare en geldige instrument is wat vir die diagnose van depressie onder swart pasiënte gebruik kan word.

Van die 162 MMPI protokolle, was 46.3% ongeldig. Dit was veral op die L, F, F(B) and Cs skale dat groot getalle pasiënte tellings behaal het wat hoër was as die afsnypunte. Die Kritiese Itemskale se betroubaarhede was aanvaarbaar, behalwe vir die Gesinskonflikskaal en dit impliseer dat hierdie skale oorhoofs bruikbaar is vir diagnostiese doeleindes in 'n Afrikakonteks. Die gemiddelde telling op die Depressie en Selfmoordgedagtesskaal was egter relatief laag. The MMPI-2 het 'n groot aantal foutiewe diagnoses van skisofrenie en persoonlikheidsversteuring opgelewer, en slegs enkele pasiënte is met 'n depressiewe versteuring gediagnoseer. Alhoewel die pasiënte die MMPI-2 as te lank en die taal van die toets as te kompleks beskryf het, het hulle die toets oor die algemeen positief beleef.

Die DEPI en S-KON het groot getalle vals-negatiewe gevalle opgelewer, en dit impliseer dat indien hierdie indekse gebruik sou word vir die assessering van depressie, dit met ander diagnostiese metodes gekombineer moet word. Die Rorschach is desnieteenstaande bruikbaar om psigodinamiese prosesse te identifiseer wat op terapeutiese vlak gebruik kan word.

Daar was 'n lae en statisties-onbeduidende korrelasie tussen die BDI-II en die DEPI. Beide die BDI-II en die DEPI het 'n positiewe korrelasie gehad met die Depressie en Selfmoordgedagtesskaal. Die S-KON het nie beduidend met enige van die ander skale gekorrelaeer nie.

Kernwoorde: Afrika, MMPI-2, Rorschach, Depressie-indeks (DEPI), Selfmoordkonstellasie (S-KON), Depressie, Kultuur, Selfmoord, Diagnose, Beck Depressieskaal.

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