



A Study On Internal Locus Of Control, Hope And Depression Among Obsessive-Compulsive Disorder Patients

¹Sadq Abbas Hussein Abdali, ² Prof. Shah Mohd.Khan

¹Research Scholar, ²Professor

¹Department of Psychology, Aligarh Muslim University, Aligarh, Uttar Pradesh, India

²Department of Psychology, Aligarh Muslim University, Aligarh, Uttar Pradesh, India

Abstract: There is an estimate around 25-50% people who suffer from OCD can develop depression over lifetime. Presence of depression along with OCD creates more challenging situation for OCD patients and as well as for mental health practitioners. Internal locus of control is the belief that we can manage what happens around us where as hope is a positive state of mind based on successful goal-directed motivation and planning to meet these goals. Internal locus of control and hope are important psychological aspects of a person so the aim of this piece of research is to study the association of internal locus of control and hope with depression of OCD patients.

In this research data was collected from 100 OCD patients from hospitals that includes 38 males and 62 females age ranging from 17-66 years living in Wasit Governorate (Iraq) and purposive sampling was used.

Internality a dimension of multidimensional health locus of control form C developed by Wallston, A. (1994) was used to measure Internal locus of control. It consists six items on seven point rating scale with Cronbach's Alpha .86. Hope was measured by four items taken from psychological capital scale developed by Naik and Khan (2018) on 5-point likert scale with Cronbach's Alpha .91. Depression was measured by using 21-item Beck's depression inventory with Cronbach's Alpha .71.

Results of the study indicated that the correlation between internal locus of control and depression was found to be -.565, correlation between hope and depression was -.692, and correlation between internal locus of control and hope was .505 all were significant at .01 level of significance. Internal locus of control and hope significantly predicted depression of OCD patients.

On the basis of results we can conclude that internal locus of control and hope negatively relate to depression of OCD patients and also negatively predicts depression.

Key words: Obsessive-compulsive disorder, Internal locus of control, Hope, Depression.

Introduction

Obsessive-compulsive disorder (OCD) is a well-known anxiety disorder, a psychological disorder marked with frequent thoughts leading to ritualistic behavior or repetitive behavior. Obsessive-compulsive disorder is defined by recurring intrusive thoughts, impulses, or obsessions that cause distress and anxiety and serve as the driving mechanism for the compulsions, the overall goal of which is to eliminate the obsessions.

The approximate lifetime prevalence of OCD is accounted for 2-3%. As mentioned in community research, it can present for longer periods of time within a person (Zheng et al., 2020). Depression is associated with mood alterations or mood disorders in which a person persistently feels sad, loss of grandiosity, interest, and others. In depression, a person suffers from a wide range of physical, emotional, and cognitive problems. Along with this, people with severe OCD cannot perform their daily work effectively. Depression can be thought of as interfering with a person's thought processes, emotional reactions, and day-to-day behaviors. Williams (1984). According to the International OCD Foundation, people with OCD can also suffer depression. The estimate is between 25-50 %. The onset of both disorders is the same, but in a few cases, OCD begins first and is followed by depression. These two psychological disorders can make the situation more challenging for the person and lower their daily performance. It is complicated to tackle this comorbid situation, so only a single treatment or therapy will not be effective. People with OCD are generally controlled by their repetitive thoughts that cause drive or tension to act in a certain way to reduce their drives; this leads to a decline in their internal locus of Control. Internal locus of Control is the ability or belief of a person to control his thoughts, emotions and action in various situations and control what will happen.

Rotter's (1966) Social Learning theory, which focuses on why an individual performs behavior and which behavior the individual performs in a specific situation, inspired the concept of locus of Control. "Rotter" posits that whether or not a person will behave in a particular way depends upon two cognitions; one is an expectancy of a specific reinforcement, and the other is reinforcement value. Thus, human behavior is determined by the individual's expectancy that particular behavior will achieve a specific goal or outcome and by the individual's positive evaluation of that outcome. Reinforcement, experienced by an individual, increases his expectancy that a particular behavior will be rewarded similarly in the future.

Expectancy is influenced either by prior experience of reinforcement in a particular situation or by the generalized expectancy of an individual. The individual develops two kinds of generalized expectancies, a) particular reinforcement is the result of his behavior, which denotes internal anticipation, and b) Other factors, such as chance, luck, or powerful others, contribute to reinforcement, which indicates external expectancies. Therefore, the likelihood of a particular behavior is affected by an individual's internal or external expectancies. These generalized internal and external expectancies came to be known as locus of control distinction (Rotter & Hochreich, 1975). People with internal expectancies believe that reinforcement occurs as the result of their

behavior and are more likely to remain active in their attempts to cope with crises events; for this, they need to be hopeful about positive results and meet the expectations

In Depression and OCD, people adopt a pessimistic attribution style, and the cognitive triad of Beck suggests that depressed people tend to have negative and hopeless thinking patterns about themselves, their future, and their experiences in the world (Beck, 1976). Hope refers to a positive approach to one's intellect based on the anticipation of optimistic results linked with actions and conditions of one's life course. Hopeful individuals perceive that they can accomplish one's own goals. Hope is an insightful process applied by individuals of different magnitudes to manage day-to-day life prospects (Snyder, Michael, & Cheavens, 1999). Individuals who are high on hope consider that they can create desired and achievable goals and build different efficient ways or pathways to accomplish them and maintain the needed drive, or agency, to follow these goals despite facing obstacles (Snyder, 2000).

Internal locus of Control and hope are essential aspects of a person that declines in depression, so there is a need to manage the depression by uplifting the individual's hope and internal locus of Control.

Objectives

1. To see the relationship between internal locus of Control and Depression among OCD patients.
2. To see the relationship between hope and Depression among OCD patients.
3. To see the relationship between internal locus of Control and hope among OCD patients.
4. To determine the extent to which internal locus of Control and hope significantly predicts Depression among OCD patients.

Hypotheses

H_{a1}: There would be a significant relationship between internal locus of Control and Depression among OCD patients.

H_{a2}: There would be a significant relationship between hope and Depression among OCD patients.

H_{a3}: Internal locus of Control will significantly relate to the hope of OCD patients.

H_{a4}: Internal locus of Control and hope will significantly predict Depression among OCD patients.

Methods

Participants

This study collected data from 100 OCD patients from Waist Governorate (Iraq) hospitals. The age ranges of patients were 17-66 years consisting of 38 males and 62 females. Purposive sampling was used in this present study, and the participation of patients was voluntary.

Inclusion criteria: Participants have OCD and suffer from depression but are not related to substance abuse. Living in Waist Governorate (Iraq) region only and given consent to participate in research.

Exclusion criteria: Patients with OCD but not suffering from depression, participants who did not willingly participate in the study.

Instruments

Multidimensional Health locus of control form C: It was developed by Wallston, A. (1994) and was used to assess the locus of Control. It consists of 18 items scored on 7 point scale and measures four dimensions of health locus of Control, one of its dimensions named internality, having six items used. Cronbach's Alpha of the scale is .86, and dimension internality was .76.

Hope is a dimension of the *Psychological Capital scale*, and items include 2,9,15, and 26. The researchers developed and standardized it (Naik & Khan, 2018). The scale is bilingual (English & Hindi) in nature. The scale consists of 26 items on 5-point Likert-type responses with values anchored as 0=Strongly Disagree, 1=Disagree, 2=Neutral, 3=Agree, 4=Strongly Agree. The responses of each item varied from 0-4. The scale score varied from 0 to 104, and it can be inferred that the higher the score higher the psychological capital and vice-versa. The present sample's reliability was determined using Cronbach's Alpha and was found as 0.91.

Beck Depression Inventory (BDI), developed by Aron Beck in 1961, was used to measure depression in this piece of research. BDI has a 21-items self-report rating inventory in nature and measures characteristic attitudes and symptoms of depression. The scale score ranges differently for different depression characteristics based on statements. Based on norms, the person's score places them in the depression category as given in the manual. The scores varied from 0 to 63. It can be inferred that the higher the score higher the depressive tendency. A person with a score of 17-20 is considered borderline clinically depressed. The overall internal consistency of BDI ranges from .73 to .92, with a mean of 0.86 (Beck, Steer, & Garbin, 1988). The Cronbach's alpha on the sample being studied in this study is .71. The scale is

Procedure

The researcher took permission from hospitals to collect the data and, in the presence of a psychiatrist, administered the questioners after building rapport and taking patient consent. The researcher maintained the confidentiality and safety of participants during the research. Data was collected and scored according to the manual and analyzed using SPSS version 27.

Results and Discussion

Table 1: *Showing the Mean and SD of variables under investigation within the study (N=100).*

Variables	Mean	SD
Internal Locus of Control	26.66	6.36
Hope	11.51	2.93
Depression	28.33	6.17

This table represents the Mean and SD of variables investigated under the study, the mean and of Internal locus of Control is 26.66 (SD=6.36), for Hope 11.51 (SD=2.93), and for Depression 28.33 (SD=6.17).

Table 2: *Represents the correlation between Internal locus of Control and Depression among OCD patients (N=100).*

Variables	Depression (r)	p-value
Internal locus of Control	-.565**	.01

**significant at .01 level of significance, r is the value of the correlation

In the above table, the Pearson product moment correlation was used to see the association between Internal locus of Control and Depression among OCD patients was found to be -.565 at .01 level of significance (2-tailed), indicating a significant moderate negative correlation between internal locus of Control and Depression. From the result, people with a higher level of internal locus of Control tend to face less depressogenic symptoms and major episodes of depression. Hence H_{a1} hypothesis supports this study.

Table 3: *Represents the Pearson product moment correlation between Hope and Depression among OCD patients (N=100).*

Variables	Depression (r)	p-value
Hope	-.692**	.01

**significant at .01 level of significance, r is the value of the correlation

In the above table, the relation between Hope and Depression was found to be $-.692$ at $.01$ level of significance (2-tailed), indicating a significantly strong negative correlation between hope and depressive symptoms among OCD patients. From the results, it could be said that keeping hope about self and the future helps in reducing and managing Depression among OCD patients. Hence H_{a2} hypothesis supports this study.

Table 4: *Represents the Pearson product moment correlation between the Internal locus of Control and Hope (N=100).*

Variable	Hope (r)	p-value
Internal locus of Control	$.505^{**}$	$.01$

** significant at $.01$ level of significance, r is value of correlation

This table represents the correlation between Internal locus of Control and Hope among OCD patients was found to be $.505$ at $.01$ level of significance (2-tailed), indicating a significant moderate positive correlation between internal locus of Control and hope. From the result, we can say that people with a higher internal locus of control tend to have higher hope for future and self than those with a lower internal locus of Control. Hence H_{a3} hypothesis supports this study.

Table 5: *Represents the simple linear multiple regression analysis for variables (internal locus of Control and hope) predicting Depression (N=100).*

Models	R	R ²	ΔR^2	F(2,97)	p- value
Depression ^b	$.736^a$	$.542$	$.532$	57.35	$.001^{**}$

a. Predictors: (constant), Internal locus of Control and Hope.

b. Dependent variable: Depression.

Table 6: *Represents the Unstandardized and standardized coefficients for the multiple regression model of table 3, with criterion Depression.*

Models	B	β	t	p-value
Internal locus of Control	-.281	-.290	3.64	.001*
Hope	-1.148	-.546	6.86	.001**

**significant at .01 level of significance, r is value of correlation

In tables 3 and 4, linear multiple regression analysis was applied with depression as the dependent variable to see the variance depicted by an internal locus of Control and hope taken as predictors among OCD patients. Internal locus of Control and Hope predicts 54.2% of the variance in Depression of OCD patients $F(2,97)=57.35$, $p=.001$, $R^2=.542$. It means internal locus of Control and hope significantly predict Depression in OCD. It can be observed from table 4 that the value of β increased when hope was added to the internal locus of Control. It indicates that OCD patients with significantly higher hope for life and a higher internal locus of Control face less depression and depressogenic symptoms. Hence H_{a4} hypothesis supports this study.

Conclusions

From the results following conclusions can be drawn:

1. OCD patients with higher level of internal locus of Control tends to experience less depressogenic symptoms and episodes of depression.
2. Having hope on self and future helps in reducing and managing depressiogenic symptoms among OCD patients.
3. Internal locus of Control and hope of OCD patients relate significantly to moderate level in positive direction.
4. Internal locus of Control and hope together have significant contribution in managing depression better among OCD patients.

ACKNOWLEDGMENT: NIL

References:

- Beck, A. T. (1976). Cognitive therapy and the emotional disorders. New York: New American Library.
- Beck, A. T. (1978). Depression inventory. Philadelphia: Center for cognitive therapy, 72.
- Bloch, M.H., Landeros-Weisenberger, A., Rosario, M.C, Pittenger, C., & Leckman, J.F. (2008). Meta-analysis of the symptom structure of obsessive-compulsive disorder. *The American Journal of Psychiatry*. 165 (12): 1532–42.
- Burger, J. M. (1984). Desire for Control, locus of Control, and proneness to depression. *Journal of personality*, 52(1), 71-89.

- Carver, C. S., & Scheier, M. F. (2002). The hopeful optimist. *Psychological Inquiry*, 13(4), 288-290.
- Costantini, I., Kwong, A. S., Smith, D., Lewcock, M., Lawlor, D. A., Moran, P., & Pearson, R. M. (2021). Locus of Control and negative cognitive styles in adolescence as risk factors for depression onset in young adulthood: Findings from a prospective birth cohort study. *Frontiers in psychology*, 12, 921.
- Crandall, A., Allsop, Y., & Hanson, C. L. (2018). The longitudinal association between cognitive control capacities, suicidality, and depression during late adolescence and young adulthood. *Journal of adolescence*, 65, 167-176.
- Khumalo, T., & Plattner, I. E. (2019). The relationship between locus of Control and Depression: A cross-sectional survey with university students in Botswana. *South African Journal of Psychiatry*, 25.
- Law, C., & Boisseau, C. L. (2019). Exposure and response prevention in the treatment of obsessive-compulsive disorder: Current perspectives. *Psychology research and behavior management*.
- Levenson, H. (1973). Reliability and Validity of the I, P, and C Scales-A Multidimensional View of Locus of Control.
- Motivala, S. J., Arellano, M., Greco, R. L., Aitken, D., Hutcheson, N., Tadayonnejad, R., & Feusner, J. D. (2018). Relationships between obsessive-compulsive disorder, depression, and functioning before and after exposure and response prevention therapy. *International journal of psychiatry in clinical practice*, 22(1), 40-46.
- Naik, R. A., & Khan, S. M. (2018). Psychological capital scale. New Delhi: Manas Psycho Home.
- Origlio, J., & Odar Stough, C. (2022). Locus of Control and pre-pandemic depressive symptoms relate to psychological adjustment of college students to the COVID-19 pandemic. *Journal of American College Health*, 1-8.