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Finding a Treatment that Fits: A Grounded Theory Study of Women’s Compliance with Treatments for Depression Using a Community Sample from a Dietary Intervention Study

A thesis presented in partial fulfilment of the requirements for a degree of Master of Arts in Psychology at Massey University, Palmerston North, New Zealand.

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2003
Abstract

Compliance with healthcare regimens is becoming an increasingly important area of health research. Depression is thought to be increasing in prevalence world-wide, and so too is the share of the healthcare budget dedicated to treating depression. Research has shown that people tend to discontinue treatments for depression far earlier than recommended. However, very little research has explored why this might be so. Several theories of health behaviour have tried to account for compliance in terms of influential beliefs and attitudes, but generally these theories have not been explored in a mental health context. Additionally, research is only just beginning to consider compliance from a healthcare consumer’s perspective.

The Compliance Study reported in this thesis adopted a grounded theory methodology to explore compliance with women’s treatments for depression. A community sample of 37 depressed women, participating in a 12 week double-blind placebo controlled trial investigating the effects of fish oil as an adjunct to treatments for depression, provided both qualitative and quantitative data on their compliance experiences with treatments for depression generally, and with the supplement trial specifically.

The basic social process of compliance that emerged from the data involved a complex and dynamic interaction of mutually influential illness variables, significant relationships, meanings given to depression and its treatments, and cost-benefits analyses. In Finding a Treatment that Fits, women balance competing interests and try to ensure good enough compliance to meet their own goals for wellness. The results from the Compliance Study confirmed important prior findings with respect to compliance with depression treatments, but extended these by looking at underlying reasons for decisions to continue or discontinue treatments. The thesis also considers special issues relevant to the particular circumstances of compliance in the dietary intervention trial, including the impact of placebo effects and attitudes towards non-orthodox treatments. Implications for further research and clinical practice are discussed.
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