



ORIGINAL ARTICLE

Efficacy of Behavioral-Cognitive Psychotherapy on Decreasing the Severity of Depression in Old Women

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ABSTRACT

This study seeks to investigate the efficacy of behavioral-cognitive psychotherapy on decreasing the severity of depression in elderly women. The present research is semi-empirical, with pre-test, post-test and control group. The population is consisted of all the geriatric women who referred to Family Consultation Center (FCC) of Boushehr Province due to suffering from severe depression. In order to set up a group for experimentation, the number of 70 people having a record at FCC was selected; then by using GDS-15 inventory, 46 people were chosen randomly and finally they were assigned to subject and control group (split into two groups equally). A 10-session behavioral-cognitive psychotherapy was administrated for subject group, while the control group did not receive any intervention. A week having completed the therapeutic sessions, the depression post- test, GDS-15, was administered for both groups and the results were evaluated using covariance analysis. The analysis of findings based on t-test for each group showed that there is a significant difference between scores of both groups in depression post- test. The behavioral-cognitive psychotherapy is an efficient method for alleviating the severity of depression in elderly women. It gives much better outcomes than conventional methods and it is recommended to be practiced at geriatric centers.

Keyword: Behavioral-Cognitive Psychotherapy, Depression

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INTRODUCTION

Man intellectually, emotionally and behaviorally is a social being and this characteristic is along with him for lifetime. The research has shown that keeping up a health life pattern, even at the end years of life, may increase life expectancy, decreasing the diseases and its associated expenses as well. The women are those that it is important to draw attention on their mental health. Having a hope morale and liveliness may have a significant effect on their functions and activities and in this way it makes the next generation happiness and cheerful [1].

Elderly is defined as reciprocal avoidance of an aged person and people who reside in him or her setting and it lead her or him to keep away from social pressure. As a consequence, the numbers of people who have somehow a relation with the aged are gradually declined. Therefore the uncommitted theory is associated with aging with mutual uncommitted behavior between individual and community. The individual gradually refuses to involve in social life and the community give him or her less various privileges than before. According to statistics, it is accepted that the number of the aged people from 6% in 1995 reach to 19% in 2030 [2].

The elderly is a normal and changing process that causes particular behaviors in aged people. These behaviors may influence the attitude of family members toward its aged person and it made them to move her or him to old people's home. However, elderly is a relative matter and a one hundred year old person may be more playful than a sixty five year old one. The role and the position of the aged people differ from one community to another. However some issues are common among them such as facing with death as their age increases and suffering from chronic disease. Unfortunately, the last decade of life

is not always a golden moment and they may struggle with physical, socio-economic, social and psychological problems. In the epoch that what the psychoanalysis called it "losing" chapter they may lose many things such as desired job, close friends as well as financial independence [3].

The results obtained by epidemiology studies have reported the depression is the most common psychiatry disorder. The depression is an emotional condition which is characterized by deep sadness, dispensable feeling and innocent, avoidance, loss of interest and eagerness toward routine activities. Today the depression is one of the most common psychological disorders involved in human life. In Iran, the depression accounts for 35-45% of mental disorders which this figure is increasing progressively [4]. Many studies have pointed out that the rate of depression following age of 65 is accelerated. The depression of aging is overlapped with isolation of the depressed and avoidance of routine activities and social contacts [5].

The depression is one of the most common psychiatry disorders and of the factors of suicide in the aged people. It is not frequently diagnosed in the elderly people and has a significant impact on their quality of life, consequences of clinical disease, performance condition, using of health care service, morality and disability. Most of the aged people with depression often refer to health care centers because of physical condition [6]. The source of depression in elderly, as in younger individuals, is the biological, mental and social. The depression is a major problem in ageing and it arises as a result of a consequence of various factors related to the final stage of life such as chronic disease, lack of friends and relatives and inability in doing desired activities. As a result of sight, acoustical limitation and other physical changes as well as stress –induced by external factors such as limited financial resources, they feel that they do not have any control on their life. These issues eventually contribute to negative emotions like sadness, anxiety, low self-esteem, social isolation and discontent. And depression is the largest mental problem and is the serious consequence of such emotions [7].

Unfortunately, in spite of high prevalence of depression in elderly people, it is often fail to be noticed. It causes that this mental disease is not diagnosed timely and remains chronically untreated. It is a regrettable reality because the depression is a disorder that many effective treatments are now in place for it. It is worthwhile to note that decrease of mental capability and falling into grief feelings is not accounted for a normative ageing process and it must critically be considered as a disposition state [8].

On the other hand, since nearly two third of them plan to suicide and 10 to 15% of which end their life by this way; it highlights the importance of considering the depression as a critical mental disorder [9]. Elliott *et al.* (2000) in their study on the effect of group intervention in order to stop depression have found that it decreases the depression effectively. The cognitive- behavioral therapy has an impact on mental disorders especially depression and anxiety. In this treatment, by introducing logical thinking, the clients are trained on relaxation technique, assertiveness skills, problem-solving method and managing anger [10]. Dehghani *et al.* (2009) have showed in their study that cognitive- behavioral therapy has a significant impact on old women with depression and anxiety. Having applied the cognitive-behavioral therapy on old women, Goldstein *et al.* (2003)observed that it reduces the client's depression score significantly [11]. Evan (2007) In order to decrease the depression and anxiety symptoms of sub-threshold in elderly women compared the preventive cognitive- behavioral therapy with ordinary consultation and they found that the former is more effective than the letter [12]. Given the above matter, the present study seeks to explore the efficacy of behavioral-cognitive psychotherapy on decreasing the severity of depression in elderly women. On the basis of available research background, the major hypothesis of this study is that behavioral-cognitive psychotherapy has a significant effect on decrease of depression.

MATERIALS ANDMETHODS

Participant

This research is semi-empirical one that has been conducted by pre-test and post-test and control group. The population is consisted of all the old women who have referred to Family Consultation Center (FCC) of Boushehr Province due to suffering from severe depression. In order to create a group for testing, the number of 70 people having a record at FCC was selected; then by using GDS-15 inventory, 46 people were chosen randomly and finally they were assigned to subject and control group (split into two groups equally). Test was completely voluntary, and permission was obtained from the State Welfare Organization of Boushehr. The mean age was 60 years. They were assigned to each group if they would meet the following three criteria: A- Have not already received any psychotherapy since diagnosis of the depression, B- Having minimum education (passing fifth grade) and C- Able to attend to group-therapy sessions.

Measures

Research tools in this study was the Geriatric Depression Scale – short form (GDS-15), the Geriatric Depression Scale – short form (GDS-15) was used in order to determine the severity of depression. The GDS was constructed by Savych for depressed elderly exclusively. The 15- question short form was designed in 1986 which for diagnosing the depression in clients had characteristic and sensitivity 90% and 80% respectively [13]. Malakouti *et al.* (2006) have standardized this test in Iran. The Cronbach alpha (0.9), split (0.89) and test-retest (0.85) were obtained [14]. The cut-off point 8 with sensitivity 90% and characteristic 84% was obtained for this scale. This test has been used in different studies both in and out of Iran and has shown high validity.

RESULTS

The purpose of this study was to explore the efficacy of cognitive-behavioral psychotherapy on alleviating the depression in old women .The population is consisted of all the old women who have referred to Family Consultation Center (FCC) of Boushehr Province due to suffering from severe depression. In order to create a group for testing, the number of 70 people having a record at FCC was selected; then by using GDS-15 inventory, 46 people were chosen randomly and finally they were assigned to subject and control group (split into two groups equally). A 10-session behavioral-cognitive psychotherapy was administrated for subject group, while the control group did not receive any intervention.

In this section, after presenting the descriptive results relating to pre-test and post-test of both groups, they are compared. The test of control and subject groups was examined based on the results from GDS. As the results inserted in table 1 shows the difference of pre-test and post-test scores in the subject group is significant, indicating increment of mean score of post-test over pre-test, whereas the difference of pre-test and post-test in control group is small.

| Group | Pre test | | Post test | |
|---------------------|----------|--------------------|-----------|--------------------|
| | Mean | Standard Deviation | Mean | Standard Deviation |
| Experimental | 10/2826 | 1/40669 | 5/9130 | 0/73318 |
| Control | 10/00 | 1/16775 | 10/2826 | 1/40669 |

As it is seen in table 1, the mean and standard deviation in the pre-test stage for subject group are 10.2826, 1.40669 respectively while for control group they are 10.00, 1.16775 respectively. In the post-test stage the mean and standard deviation are 5.9130, 0.73318 for subject group and 10.2826, 1.40669 for control one respectively. It means that the depression mean of subject group in post-test compared to pre-test is decreased.

In present paper, the t test independent group method was used in order to test the research hypothesis and determine the significant difference between scores of both groups for depression variable. Meanwhile it was not possible to use covariance analysis because the regression gradient between pre-test and post-test scores within both groups was not the same.

| Group | DF | T | F | Sig |
|---------------------|----|------|-------|-------|
| Experimental | 44 | 7/97 | 247/2 | 0/000 |
| Control | | | | |

As the above table (2) indicates there is a significant difference between control and subject groups on depression scores. Therefore the research hypothesis is confirmed. In the other word, the cognitive – behavioral psychotherapy has been effective in decrease of depression in old women.

DISCUSSION AND CONCLUSION

The purpose of this study was to explore the efficacy of cognitive-behavioral psychotherapy on alleviating the depression in old women. For conducting this study and gathering data, 46 old women with depression were assigned to two groups randomly (23 women in subject group and 23 ones in control

group). The subject group received therapy intervention while the control group did not. The difference of GDS-15 scores pre- and post- intervention through cognitive-behavioral psychotherapy suggests that there is a significant difference between both groups. It means that the therapy intervention has effectively decreased the depression level in subjects. This finding is consistent with various investigations and also confirms the findings of [15], [16], and [17] who have demonstrated that this kind of therapy is effective in decrease of depression.

Rasquin and coworkers found that cognitive-behavioral psychotherapy contribute to improve the disposition and quality of life in individuals with depression [15]. Elliott *et al.* (2000) in their study on the effect of group intervention in order to stop depression have found that it decreases the depression effectively. The result of Komilisan's study shows that training of cognition therapy is effective in decrease of depression and after that the depression is reduced dramatically [15], Froggatt *et al.* (2006) have found in their study in England that after cognition therapy and 8 weeks later, the quality of life get better and chronically depressed people turn toward normal position [15].

The study of Wentis (1995) used the cognitive therapy for the depressed people and observed that after 1 hour-18 session therapy their depression lowered and had more adjustment [16]. In a research, the cognitive group consultation was significantly led to decreased depression in old women who reside in elderly home [17].

In explanation of these findings it may be said: in fact, it is vulnerability against depression recurrent due to frequent relation between depressed mood and self- objection negative patterns of depressed people that on its right lead to variation in cognitive and neural levels. On the basis of this assumption the people who were already depressed think more differently than those who had not ever experienced this condition. In turn, despite defective thinking patterns, it is possible, as a result of mild shock and reactivation of thinking patterns; he will again subject to depression. The cognitive -behavioral therapy helps the patient to identify negative thought and challenge them. In fact cognitive -behavioral therapy can be considered as a problem solving. The thought generating depression inhibits the individual from solving a problem. Thus dealing with negative thoughts is a means to attain the end [18]. The elderly who has a limited interaction and sometimes negative may say to himself or herself: "perhaps it is good I have no relation with other people because they think that I am old and illness". Such thoughts force them to avoid to make relation with the others and it causes that they reproduce negative thoughts strongly. The findings on this issue show that eliminate the negative thoughts and acquire cognitive skills may involve in prevention of its recurrence [19]. Because the study was conducted among elderly women, results generalize to this group is only. In addition, due to time constraints, perform the follow-up to evaluate the effectiveness of behavioral-cognitive psychotherapy over time was not possible. The results of this study, it is recommended that counselors and therapists use mental concepts of cognitive - behavioral therapy to help more elderly to consider.

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