

Research Paper**Efficiency of Cognitive-Existential Group Therapy on Life Expectancy and Depression of Elderly Residing in Nursing Homes*****Noshiravan Khezri Moghadam¹, Solmaz Vahidi², Marjan Ashormahani²**

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ABSTRACT**Objectives** Reduced life expectancy and depression are the most common psychological traits in the elderly, followed by several potential reactions. Therefore, the present study examined the efficiency of cognitive-existential group therapy on reducing depression and increasing the life expectancy in the elderly.**Methods & Materials** The present study exhibited a quasi-experimental design with random assignment is pre- and post-tests. The statistical population of this study included all elderly residents of the Kerman nursing homes. The simple random sampling method was employed on two private centers in Kerman Ali and Mehrazin to randomly select 30 individuals, who were randomly divided into experimental and control groups (n=15 each). The experimental or the cognitive-existential group was subjected to ten sessions (each 90 min). The control group did not receive any intervention. The data were analyzed and represented as mean, standard deviation, and covariance.**Results** The results showed that cognitive-existential group therapy significantly affected the life expectancy and depression in elderly living in nursing homes (P<0.01).**Conclusion** The cognitive-existential group therapy with a picture of self and emphasis on training time and awareness of death in elderly increased the life expectancy, reduced the depression, and improved the mental health of the elderly.**Key words:**

Cognitive-existential treatment, Life expectancy, Depression, Frail elderly

Extended Abstract**1. Objective****W**

ith elderly population increasing, focusing on their problems and issues is crucial [1]. Old age is a sensitive period of life and paying attention to the issues and needs of this stage is a

social necessity. Older individuals have limited social relationships and may occasionally behave negatively; such thoughts would evade them from establishing contacting with others, thereby further increasing the negative thought process about self [2]. It is normal that such withdrawal and reduced relationships push them towards depression. Based on the previous studies, the most common psychiatric disorder among the elderly is depression. Depression and loss of life ex-

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pectancy are the most common psychological states in the elderly, followed by several possible reactions [3]. Various group therapy approaches are suggested that suitably associate with the psychological issues of the elderly. One of these approaches is the psychology of the authenticity of existence. This is a cure that focuses on the interpersonal and transpersonal dimensions of humanity. Therefore, the present study aimed to investigate the efficiency of group therapy with a cognitive-existential approach to life expectancy and depression in elderly individuals living in nursing homes.

2. Methods and Materials

The present study was an applied and experimental design with pre-test and post-test as well as a control group and random assignation of the subjects. The statistical population of this study included all elderly residents of Kerman's nursing homes, utilizing the stratified random sampling method. Referring to the Welfare Office of Kerman, the list of nursing homes for the elderly was obtained, and two private centers of Amir-Al-Momenin and Mehrazin of Kerman were selected randomly. Then, among the elderly, 30 individuals, who secured a higher score than the cutting edge in the elderly depression questionnaire and a lower score than the cut-off in the life expectancy questionnaire were selected randomly by authorization from the Welfare Office of Kerman. These individuals were randomly divided into two groups: experimental and control group (n=15 each). From the Amir Al-Momenin Center, 6 people were assigned to the experimental group and 5 to the control group, whereas from the Mehrazin Center, 9 were assigned to the experimental group and 10 to the control group.

During the training period, in order to prevent the transfer effects were prevented by allowing only the members of each and control group to be able to be in contact with each other; this was effectuated by coordination with the authorities of the nursing homes. The elderly in the cognitive-existential experimental group

were trained in ten sessions (90 min each). During this period, the control group did not receive any intervention. Before and after testing, both groups completed the Miller's life expectancy questionnaire (1997), and the depression scale of the elderly (1998) was assessed. The data were analyzed using statistical methods related to frequency, percentage, mean, standard deviation, and multivariate covariance analysis.

3. Result

The cohort consisted of 30 individuals (18 women and 12 men) from the elderly living in two 24-h nursing homes (11 from the Amir Al-Momenin Center and 19 from the Mehrazin Centre) randomly divided into the experimental and control groups (n=15 each). Based on the demographic data, most of the subjects belonged to the 72–74 years age group (36.66%). In this study, about 83% of the elderly were married. Herein, most of the elderly had a low cycle and education (66.36) (Table 1). As seen in Table 1, the mean scores and standard deviation of the experimental group in post-test was changed dramatically as compared to that in the pre-test. In this study, Levin test was used for investigating the default homogeneity of variance, which was found to be 0.478, albeit without statistical significance ($P < 0.24$), which indicated the homogeneity of variances. To verify the normal distribution of data, Kolmogorov–Smirnov test was used, and significance was detected, which suggested the normal distribution of the pre-test variables. The results of covariance analysis of the experimental and control groups in the life expectancy variable showed a significant difference between the two groups with respect to death anxiety ($F = 23.98$ and $P < 0.01$). Therefore, it can be concluded that presenting an existential cognitive group therapy decreases the life expectancy in the elderly.

4. Conclusions

Based on the results of this study, the existential cognitive group therapy can be used to reduce depression

Table 1. Performance of experimental and control groups based on the mean and standard deviation of life expectancy and depression of the elderly in pre-test and post-test

Test		Pre-Test [†]		Post-Test	
Group	Index	Life Expectancy	Depression	Life Expectancy	Depression
Control	Mean(SD)	68.41(6.36)	21.74(3.48)	68.25(6.91)	20.89(3.23)
Experimental	Mean(SD)	67.65(6.27)	20.63(3.25)	76.79(6.85)	16.26(2.95)

and increase the life expectancy of the elderly residing in nursing homes, following improved mental health. Existential therapists clarify the value of life for their client with death reminders and making them aware of the situation. In this regard, they also attempt to clarify that the present time is the most valuable asset of any individual.

The treatment of the authenticity of existence-humanism is feasible superficially between the existence and the theory of humanism and it separates itself from other healthcare schools by emphasizing the concepts such as exposure and presence in the universe, happiness, choice, responsibility, freedom, and the value and meaning of life. Thus, it can be concluded that interventions and methods of meaning therapy for rehabilitation, reducing depression, and increasing the life expectancy of the elderly are tremendously useful. Therefore, gaining meaning and purpose, as well as, encountering concepts and basic issues in life, primarily by the elderly residents of nursing homes, would play a critical role in reducing depression and promoting life expectancy. One of the major findings of this study is the huge emphasis of the cognitive group on challenging the incorrect beliefs and meaning of life for the elderly, which refers to its practical value in promoting the social health of the elderly.

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Conflict of Interest

The authors declared no conflicts of interest.