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Effectiveness of Group Cognitive Behavioral Therapy for Older Adults with Depression

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Introduction

People reaching late adulthood may encounter a lot of irreversible and unavoidable changes which increase their risk to develop depression, thus developing psychological intervention to combat depression is important not only in reducing suicidal risk and improving quality of life in older adults, it can also lessen the tension between the growing demands and limited psycho-geriatric service in Hong Kong. A group cognitive behavioral therapy program of elderly depression (GCBT-E) is developed to fit the geriatric population and local culture. The goals of GCBT-E are (1) to enhance elderly patients' awareness and understanding of emotional problems associated with life changes, (2) to equip them with skills to manage mood problems through cultivation of acceptance and non-judgmental attitudes, and (3) to promote the practice of mindfulness in daily life.

Objectives

1) to develop a localized group CBT to fit the geriatric population, 2) to evaluate the effectiveness of GCBT-E.

Methodology

A "Pre-test" vs. "Post-test" design was employed. Participants were 1) actively received psychiatric consultation in the Outpatient Psychiatric Unit in Kowloon Hospital; 2) aged over 65 with a diagnosis of depression; 3) able to read and write simple Chinese, and 4) without any hearing or vision problems; dementia, or physical immobility. Participants would enroll in the treatment program which consisted of five consecutive weekly sessions, each lasted for two hours. A follow-up session was arranged two months after the last session. Outcome measures were included: Geriatric Depression Scale (GDS), Life Satisfaction Scale (LSS), and Positive Emotion Scale (PES), an anonymous questionnaire on their level of satisfaction with GCBT-E.

Result

Between 2010 and 2012, twenty-six participants (21 females and 5 males) with a diagnosis of depression completed GCBT-E. Their mean age was 69 years old (SD=

8.5) and they underwent 8.4 (SD= 4.9) years of education on average. A series of paired-sample t-test were conducted. Results showed that from pre- to post-treatment, there was significant decrease in GDS scores (t(25) = 4.18, p = 0.00) and significant improvement in PES scores (t(25) = -2.03, p = 0.05). There was no significant difference in the LSS scores. Further analysis of post-treatment and two-month follow-up scores showed that there was no significant change in GDS scores (t(20) = 0.75, p = 0.46), PES scores (t(20) = -0.12, t(20) = 0.91), and LSS scores (t(20) = -0.81, t(20) = 0.43). Besides, information gathered from medical records revealed that none of the participant had a relapse of depression or increase in dosage of psychiatric medication during the two-month period. About 81% of participants were strongly satisfied with the treatment, while 13% were satisfied, and 6% were somewhat satisfied.