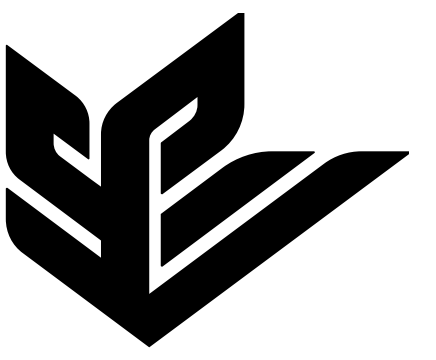


Is narrative family therapy efficacious in treating geriatric depression?



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ABSTRACT

Despite the prevalence of geriatric depression, mental health in this population is not well understood (Zenebe et al., 2021). Similarly, narrative family therapy is understudied (Suddeath et al., 2017, Lloyd-Williams et al., 2018). Narrative family therapy is well-suited for treating older adults because it facilitates social connections and assists with meaning-making (Biassoni et al., 2019; Chow & Fok, 2020; Gardner & Poole, 2009). This study aims to determine the efficacy of narrative family therapy in treating geriatric depression compared to individual narrative therapy. Mixed methods using pre- and post-intervention depression scale results and coding of open-ended questions would be utilized. Future research should continue to explore reasons behind geriatric depression as well as effective treatment methods.

INTRODUCTION

- ❑ The prevalence of depression amongst older adults is 32% globally with strong correlations to loneliness and social isolation (Zenebe et al., 2021).
- ❑ The global geriatric population is increasing, yet there is a comparative paucity of research on depression in the elderly (Zenebe et al., 2021).
- ❑ Narrative therapy, including narrative family therapy, is also understudied (Suddeath et al., 2017).
- ❑ Narrative therapy is efficacious for treating depression in individuals (Lloyd-Williams et al., 2018).
- ❑ Narrative therapy is well-suited for older adults because they enjoy storytelling, the social component of witnessing, and the developmental task of meaning-making (Biassoni et al., 2019; Chow & Fok, 2020; Gardner & Poole, 2009).
- ❑ A recent decade review of family therapy and depression only included one study that tested family-based depression interventions for adults (Wittenborn et al., 2021).
- ❑ Using narrative family therapy to treat geriatric depression should decrease these gaps in the literature and provide beneficial outcomes for elderly patients by incorporating family members and stories.

PRIMARY AIM AND HYPOTHESES

Research Question

- ❑ Does family therapy increase efficacy of narrative treatment of depression in older adults compared to individual treatment?

Hypothesis

- ❑ Narrative family therapy is more efficacious than individual narrative therapy in treating depression in older adults.

METHODS

Participants

- ❑ Older adults (aged 55+) with physician-diagnosed major depressive disorder (MDD), recruited from affiliated doctor's office referrals
- ❑ Sample size of 20 patients; 10 in narrative family therapy with their families and 10 in individual narrative therapy control group

Procedures

- ❑ Participants will be given the Geriatric Depression Scale (GDS) in both the control and treatment groups during the intake process.
- ❑ Both groups will participate in six sessions of their assigned narrative intervention.
- ❑ The GDS will be re-administered at the end of the final session for both treatment groups.
- ❑ Participants in the family therapy treatment group will be invited to answer and submit one open-ended question regarding their perception of the treatment process within one week of the sixth session.

MEASURES

- ❑ The Geriatric Depression Scale (GDS) contains 30 forced-choice "yes" or "no" questions, which can be utilized with adults with mild cognitive dysfunction. The questionnaire takes five to seven minutes to complete.
- ❑ A GDS score between 0-10 is considered normal; 11-20 indicates mild depression; moderate to severe depression is scored 21-30.
- ❑ The mean pre- and post-intervention GDS scores will be compared for each treatment group to see if there is a decrease.
- ❑ Responses to the open-ended question will be coded for thematic analysis.

RESULTS

- ❑ Linear regression will be used to compare the mean scores of the results of the GDS in the narrative control group and the narrative family therapy treatment group before treatment and at the end of session 6.
- ❑ Researchers will search for, review, define, and name themes based on the codes generated from the open-ended post-treatment questions. Themes will be divided into categories for discussion.

Discussion

Social Implications

- ❑ If, as hypothesized, narrative family therapy is more efficacious in treating geriatric depression, there are several potential social implications for this underserved population, including better understanding of mental health in older adults, stronger family relationships for the elderly, and prolonged physical health due to decreased isolation.

Clinical Implications

- ❑ This research hopes to help clinicians better serve the overlooked older adult population through narrative therapy, especially narrative family therapy. If successful, this study could introduce new contexts for clinicians to practice narrative family therapy efficaciously. This will yield support and direction for clinicians currently working with the elderly, with narrative therapy, or for clinicians who are interested in the necessity of including family members in therapeutic care.

Future Research

- ❑ This introductory study of a certain intervention, narrative family therapy, and depression in the geriatric population could be extended and expanded upon in future research. If results are positive, using narrative family therapy for other kinds of geriatric mental health concerns could be beneficial. More specificity on the number and relationship of family members included and their impact on the results could be tabulated. Otherwise, the efficacy of different family therapy interventions on elderly depression should be pursued.

Limitations

- ❑ Limitations to this research would likely be the sample size and socioeconomic/ ethnic demographics of the participants.