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A comparison study of the effectiveness of group counseling with schema therapy and logo therapy and a eclectic of the two mentioned approaches on increasing the happiness of elderly people inhabited in tabriz nursing homes

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#### Abstract

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## A COMPARISON STUDY OF THE EFFECTIVENESS OF GROUP COUNSELING WITH SCHEMA THERAPY AND LOGO THERAPY AND A ECLECTIC OF THE TWO MENTIONED APPROACHES ON INCREASING THE HAPPINESS OF ELDERLY PEOPLE INHABITED IN TABRIZ NURSING HOMES

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### ABSTRACT

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### INTRODUCTION

Aging as a periods of human life is a kind of maturity biological, physical and mental perfection which usually begins around retirement age (60 to 65 years old) according to the rules in different countries (Moeen, 2000). It is associated with the profound transformations in three dimensions of physiological, psychological and sociological of the human being (Mirabzadeh Ardekani, 1999). Recently, due to the better nutrition and health care, the life expectancy has become longer. Thus, the number of elderly people is increasing day by day (Kianpoor Ghahfarokhy and Zandian, 2010). Today, about two-thirds of all the old people are living in the developing countries and by 2025 this figure will reach 75% (Kianpour Ghahfarokhi, Houman, Izadi Mazidi and Ahmadi, 2011). This indiscriminate increase in the elderly population is associated with industrialization and inattention

to this age group become one of the biggest concerns of the mental health professionals nowadays. Ageing makes a healthy adult to a weak person with a decline in different physiological capacities and increases susceptibility for many diseases and death (Young & Cochrane, 2005). Most important psychiatric diseases in the elderly people are: (1) depression disorders, (2) cognitive impairment, (3) fear, (4) drug, (5) suicide (Haveman-Nies and de Groot, 2003). Among these cases, depression is one of the most common mental health problems for the elderly over 60 years old (Glaesmer, Riedel-Heller, Braehler, Spangenberg and Luppá, 2011), approximately 12 to 16 percent of old people experience it (Zisook, Dunn and Sable, 2002). The elder people who live alone often spend much of their time thinking about their children who are far away from them and/or regretting his or her deceased spouse and this isolation may easily lead to the depression (Mishara, 1996). This regression

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can be accelerated with the move to a nursing home, that in this case an elderly person with the separation from their families and friends should be consistent with a new attribute with the title of "person who in a nursing home could stay alive" (Berk, 2013). Researchers have concluded that the people who are living in a nursing home (*sanitarium-dwelling elderly*) in comparison with those who live in their own house (*community-dwelling elderly*) are more affected by the major depression. According to estimation, 3 percent of the old people who live in their own homes are suffering from major depression, while 15 to 25 percent of the old people who live in nursing homes are suffering from mild depression (Sadock and Sadock, 2007). This is because usually the elderly people living in nursing homes are associated with hopelessness and lack of meaning in life (Brody and Semel, 2006).

Also in these places depression can occur due to chronic illnesses and observing the high morbidity and mortality rates of other residents (Poor Ebrahim, Etemadi, Shafiabadi and Sarrami, 2007). After the advent of the positive-oriented psychology movement, theorists and researchers instead of just paying attention to the negative experiences or perceptions such as anxiety and depression, began to examine such structures as self-control, spirituality, happiness, optimism and hope (Snyder and McCullough, 2000). Diener (2002) believes that happiness is a kind of evaluation which one has from his own life and situations, including such issues as life satisfaction, positive mood and emotion, lack of anxiety and depression and its related to different aspects appear as recognition and emotions. Schwarz and Strack (1991) believe that the happy people are biased towards optimism and happiness in the process of the data; i.e. they process and interpret the information in a way that will lead to their happiness. In this regard, Sharifi and Panahali (2011) in a research entitled "Comparison of Happiness of the Elderly Living at Home with ones Living in Nursing Homes" aimed to review the welfare-positive structures in the elderly and concluded that the rate of happiness in the elderly people inhabited at their own home is significantly higher than the elderly people who inhabited in the nursing homes (Sharifi and Panahali, 2011). The results of the majority of research in this field show a strong association between happiness and life satisfaction with mental health (Pernegar, 2004). Therefore, it is observed that the trend of researchers' attention towards the human pain and suffering is changing towards the attention to happiness and satisfaction in life. This notion has led different researchers to conduct researches concerning the effective factors and methods to increase it while defining happiness (Diener, 2002). Thus, it seems that instead of paying attention to the old people suffering from depression, with increasing the happiness an effective step can be taken to improve their mental health and life satisfaction. Therefore, the medications, consulting and psychotherapy are useful in getting rid of the elderly people from conflicts and stress individually and in a group (Navabinejad, 2007).

Concentration on the psychotherapy of old people dates back to 1920s. Although, the efforts regarding psychotherapy was not much, yet, it has been studied and discussed for decades. The study results were positive and satisfactory (Zarith and Knight, 2004). One of the therapeutic interventions that can be effective in the elderly is Schema Therapy developed by Young (1990 and 1999); Schema Therapy focuses on self-

destructive patterns of thinking, the feeling and behavior that are rooted in childhood and are repeated throughout a person's life. In the lexicon frame of the Schema Therapy, these patterns are called early maladaptive schemas (Scott, Young, 2006). Early maladaptive schemas are the oldest cognitive components and they sometimes form even before the time a child learns a language, and they often apply their influence on data processing systems below the threshold of consciousness (Young, Klosko and Weishaar, 2003). Non-satisfaction, and failure to fulfill basic needs (need for security and compliance, identity, spontaneity and fun and restraint) in the person's childhood lead to the formation of disrupted schemas; Young has introduced 18 early maladaptive schemas and maladaptive coping mechanisms which automatically and unconsciously lead to the continuation of each other and consequently lead to interference with a person's ability to satisfy their fundamental needs. In this treatment model, cognitive, experiential, interpersonal and behavioral approaches are used for changing early maladaptive schemas (Scott, Young, 2006). Schema Therapy depending on the patient's problem may be conducted as short-term, medium term, long-term in the form of individual and group identity (Young *et al.*, 2003).

Another efficient therapeutic treatment method is Logotherapy that can help the old people to develop a conceptual structure in order to bring about a challenge to find meaning in their lives; this method emphasizes on four important issues that are rooted in human existence which include: death, freedom, loneliness and meaninglessness (Corey, 1995). This method will help people find meaning in life. The meaning of life is to give the living a positive response despite everything that we are facing with (Frankl, 1963). According to Frankl, existence of the meaning and purpose in life is the basis for mental health and a way to overcome anxiety and depression and an antidote for ones harmful thoughts (Prochaska and Norcross, 1999). Logotherapy Frankels can be used in certain cases in nursing homes (Seeber, 2000) and it helps the old people in the form of a group to find meaning in their lives and to become compatible with the grief, unhappiness, chronic illness, and as a final point death (Navabinejad, 2007) and increase their happiness. Moreover, given that any theory is necessarily limited and one-dimensional and no theory can express and predict all of the personal and interpersonal behavior patterns and processes, on the other hand, the insights of theories and different approaches can be combined and merged in a systematic manner so as to provide a more comprehensive and useful approach for the treatment (Carlson, Sperry and Lewis, 2005).

Therefore, the researcher intends to use a combination of methods (Schema Therapy and Logotherapy) that is to combine and synchronize application of theory and techniques of Schema Therapy and Logotherapy within a group therapy increase happiness levels of the elderly people in nursing homes. To this end, some techniques of the Schema therapy theory which are mostly based on the concepts and methods of classical cognitive - behavioral techniques and some techniques of the Logotherapy theory which are mostly based on the existence concepts and techniques are utilized together in combination form in order to increase the happiness of the elderly people. Regarding the above discussion and given that the population of the world



and Iran moves toward aging and the results of various studies suggest that depression in the elderly is increasing and little treatment interventions have dealt with this problem which result in reduction of hopelessness and depression in the elderly people while increase their happiness, accordingly this research is aimed to compare the effectiveness rate of group counseling of the Schema Therapy and Logotherapy approaches and a fusion of these two approaches on the happiness sense of the elderly people, and to measure the efficiency of each of them in this field. It is hoped that the results of this research provide a solution to the problems of the old adults.

the study. Then, among the qualified persons eligible to enter the study 40 subjects (20 female and 20 male) were randomly selected as a sample size and were randomly placed in four groups of 10 subjects (5 men and 5 women) in the form of three experimental groups with the Schema Therapy, Logotherapy and consolidated approaches and a control group.

### Measuring tools

Oxford Happiness Inventory (OHI) was used to measure the happiness of the elderly. This questionnaire was developed in 1989 by Michael Argyle and Hills at Oxford University; in

### Summary Schema Therapy sessions, group counseling and therapeutic methods, mixed method

Meetings	Group Schema Therapy	Group Logotherapy	Group combination method
First session	Understanding and establishing good relationships and communication of rules and goals of the group	Understanding and establishing good relationships and communication of rules and goals of the group	Understanding and establishing good relationships and communication of rules and goals of the group
Second session	Understanding the concept of schemas and maladaptive schemas, identification of five key requirements	Basic familiarity with Logotherapy and reviewing the basic concepts in factors on the happiness of the elderly people	Importance of happiness and reviewing the affecting factors on the happiness of the elderly people
Third session	Training of dysfunctional coping styles of the elderly people and identifying early maladaptive schemas	Importance of happiness and understanding the concept of schemas and maladaptive schemas	Understanding the concept of schemas and maladaptive schemas, identification of five key requirements
Fourth session	Importance of happiness and its affective factors and how to increase happiness by changing dysfunctional schemas	Ways to finding meaning of life and its effect on increasing happiness	Learning about dysfunctional coping styles of the elderly people and identifying early maladaptive schemas and connecting the current life problems with them
Fifth Session	Cognitive techniques implementation (schema validation test, empathic encountering and ...)	Freedom to decide and choosing right, choosing the attitude against the environment	Importance of the meaning and purpose in life and the ways to finding meaning and freedom to decide and choosing attitude
Sixth Session	Implementing cognitive techniques (establishing a dialogue between the healthy aspect, the game of the Devil's advocate and ...)	Mental health from the perspective of Logotherapy and the features of a perfect human being, ways to achieve mental health	Cognitive techniques implementation derived from Logotherapy and Schema Therapy (establishing a dialogue between the healthy aspect and schema aspect, playing the game of Devil's advocate and thought stopping, attitude modification, and recalling ...)
Seventh Session	Implementation of experimental techniques (imaginary dialogue, open to parents writing letters, etc.)	Changing attitudes to life using Logotherapy techniques (thought stopping, attitude modification, and recalling ...)	Implementation of experimental techniques derived from Schema Therapy and Logotherapy techniques (imaginary dialogue, open to parents while working with images, illustrations traumatic events and linking the past to the present and writing letters and Logodrama image)
Eighth Session	Breaking a pattern of behavior by specifying a list of behaviors that must change, and identifying priority actions for breaking the pattern and most problematic behavior	Finding meaning in life of each of the group members by using techniques of Logotherapy and Socratic dialogue and ...)	Implementation of behavioral techniques (enhancing motivation to change behavior, practicing healthy behaviors and illustration of Logotherapy behaviors and illustration roles, overcoming barriers to behavior change and ...)
Ninth Session	Implementation of behavioral techniques (enhancing motivation to change behavior, practicing healthy behaviors and illustration change and ...)	Increase members' awareness of fundamental concepts of Logotherapy (the meaning of suffering and love, freedom, features of a perfect human being responsibility, choice ...)	Working on understanding the basic concepts about life (meaning of suffering, love, freedom, responsibility, etc.) and the concept of mental health and the roles, overcoming barriers to behavior change and ...)
Tenth Session	training alternating the positive schemas, summarization and conclusion of the skills and closing the sessions	Summarization and conclusion of skills, thanks, goodbye and end of therapy sessions	Summarization and conclusion of skills, thanks, goodbye and end of therapy sessions

## MATERIALS AND METHODS

The design of this research was the quasi-experimental of pretest-posttest type with the control group. The procedure was that among the elderly nursing homes and centers in Tabriz (*Malol Khooban, Ana and Mehr*), the elderly aged 65 years old and beyond with no psychiatric disorders (*amnesia, dementia and Alzheimer*) who were willing to cooperate and physically able to participate in the study had completed the Oxford Happiness Inventory and then 109 individuals who happiness rate was 43 and less were selected according the entrance standards. The entry criteria included having more than 65 years old, being literate and an experience of at least one year of residence in the center and willing to participate in

developing the questionnaire Argyle after consultations with Dr. Aaron T. Beck, decided to reverse the sentences of the Beck Depression Inventory (BDI) a 21-question multiple-choice self-report inventory, and therefore 21 statements were made. Then, 11 more statements were added to it so as to include other aspects of the happiness as well. At last, the final list form was reduced to 29 items, and at the present it is widely used in the UK (quotes by Car, 2004). This test contains 29 multiple (0 to 3) questions which are marked from 0 to 3; and the total sum of the scores ranged from 0 to 87. The subjects were asked to read each question thoroughly and choose the sentence that best describes their feeling during the recent days (Alipour and Agahheris, 2007). The



reliability coefficient was calculated using Cronbach's alpha reliability of the instruments made by the researcher has shown that 87/0 and Argyle et al (1989) obtained the coefficient of alpha of 0.90 and Francis (1998) obtained the Cronbach alpha of 0.92 for that (quotes by Alipour and Nourbala, 1999). Furthermore, Keshavarz (2005, quotes by Sharifi and Panahali, 2011) has obtained 0.82 as the reliability coefficient of the questionnaire using Cronbach alpha. In another study which has been conducted by Alipour and Nourbala (1999) in a sample consisting of 101 students from Tehran universities the internal consistency coefficient for men and women has been obtained 0.94 and 0.90 respectively. In another study, Alipour and Agahheris (2007) have acquired the coefficient of the Cronbach alpha for the OHI index equal to 0.91 and have studied the validity of the questionnaire content by 10 experts (psychologists and psychiatrists) which have been approved by them. Based on the performed factor analysis conducted in the research of Goudarzi and Hemayat Talab (2007) and Alipour and Agahheris (2007) 5 factors were extracted for this questionnaire: life satisfaction, efficiency, mental health, positive manners and self-esteem.

Table 1 depicts that with consideration of the results obtained ( $p = 0.013 < 0.05$ ,  $df = 1$ ,  $F = 7.599$ ) when the pretest effect is excluded from the group-related posttest results, the difference between groups in the level of confidence of 95 percent is significant. Therefore, the null hypothesis of the study is rejected and the contrary assumption is accepted. The contrary assumption acceptance means that the effectiveness rate of group counseling with two Schema Therapy and combined approaches (Schema Therapy and Logotherapy) on increasing the happiness of the elderly people who are living in the nursing homes of Tabriz is different. Table 2 depicts that with consideration of the results obtained ( $p = 0.007 < 0.01$ ,  $df = 1$ ,  $F = 9.554$ ) when the pretest effect is excluded from the group-related posttest results, the difference between groups in the level of confidence of 99 percent is significant. Therefore, the null hypothesis of the study is rejected and the contrary assumption is accepted. The contrary assumption acceptance means that the effectiveness rate of group counseling with two Logotherapy and combined approaches (Schema Therapy and Logotherapy) on increasing the happiness of the elderly people who are living in the nursing

**Table 1** Results of one-way analysis of covariance to examine the effect of different levels of Schema Therapy intervention with group combination method on increasing happiness after adjusting the pretest

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	Partial Eta Squared
Pretest	95.502	1	95.502	1.180	0.293	0.065
Main effect of groups	615.222	1	615.222	7.599	0.013	0.309
Error	1376.298	17	80.959			

**Implementation methods and summary of proceedings:**

After sampling and random assignment in experimental and control groups, all participants completed the Oxford Happiness Inventory at pretest stage, then the groups which were determined as experimental groups received: group Schema Therapy (10 sessions, weekly one 2-hour session), group Logotherapy (10 sessions, weekly one 2-hour session) and combination group therapy (10 sessions, weekly one 2-hour session) whereas the control group did not receive any medical intervention during this time. Here is a brief description of the goals of interventions during ten sessions applied for the test groups:

consideration to the results obtained ( $p = 0.742 < 0.05$ ,  $df = 1$ ,  $F = 0.112$ ) the significance level of F is greater than the error level of 0.05 and with respect to the fact that the pretest effect was excluded from the group-related posttest results, the difference between groups in the level of confidence of 95 percent is not significant. Thus, the null hypothesis of the study is approved and the contrary assumption is rejected. Accepting the null hypothesis means that the effectiveness rate of group counseling sessions with two Schema Therapy and Logotherapy approaches in increasing the happiness of the elderly people who are living in the nursing homes of Tabriz is not different.

**Table 2** Results of one-way analysis of covariance to assess the effect of different levels of Logotherapy intervention with group combination method on increased happiness after adjusting for pretest

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	Partial Eta Squared
Pretest	0.738	1	0.738	.008	0.930	.000
Main effect of groups	898.487	1	898.487	9.554	0.007	0.360
Error	1598.662	17	94.039			

**RESULTS**

First, Kolmogorov-Smirnov test (K-S test) and identical slope of regression analysis were performed and the results showed that the assumptions necessary for the analysis of covariance analysis were observed and this test can be used for research hypotheses analysis.

The study results of the first hypothesis showed that the effectiveness rate of group counseling with two Schema Therapy and combined approaches (Schema Therapy and Logotherapy) in increasing the happiness of the elderly people inhabiting in the nursing homes in Tabriz was different ( $p < 0.05$ ).

**Table 3** Results of one-way analysis of covariance to examine the effect of different levels of Schema Therapy with group Logotherapy intervention on increasing happiness after adjusting for pretest

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	Partial Eta Squared
Pretest	9.562	1	9.562	0.100	0.755	0.006
Main effect of groups	10.668	1	10.668	.112	0.742	0.007
Error	1619.838	17	95.285			



Comparative analysis of the findings of this research with other research findings that have maximum similarities with the present study suggests that the results of this research matched with the study findings of Yousefi *et al.*, 2011, while they are not consistent with the research results of Poor Ebrahim *et al.*, 2007, Roth and Fonagy quotes by Harper, 2004 and Yousefi, 2010. The results of the second hypothesis of the research indicated that the effectiveness rate of the group counseling with two Logotherapy and combined approaches (Schema Therapy and Logotherapy) in increasing happiness of the elderly people in nursing homes of Tabriz was different ( $p < 0.01$ ). The comparative examination of the findings of the research with the findings of other researches that have maximum similarities with the present study showed that the study results were consistent with the research findings (Yousefi *et al.*, 2011) and were inconsistent with the results of the researches conducted by Poor Ebrahim *et al.*, 2007; Roth and Fonagy quotes by Harper, 2004 and Yousefi, 2010. In order to explain the confirmation of the first and second hypothesis of the research based on the higher effectiveness of the group consultancy with the combined method (Schema Therapy and Logotherapy) in relation to Schema Therapy and Logotherapy approaches in increasing happiness in the elderly people dwelling in the nursing home it can be argued that a good theory is a theory that offers the regular and consistent view about the discussed phenomena by specifying the relationship of variables and explains the phenomena at possible maximum, and provides the effective strategies.

Logically therefore, when we use a theory to solve a psychological problem than when we use two or more theories, we will have fewer available strategies. In combining the theories together, the creativeness of the consultant for composition of concepts and techniques of various theories is very important. High flexibility in the use of two or more theories helps the consultant to use the principles and techniques of two or more theories simultaneously so as to reach better results. Nowadays, the trend towards the eclectic approach in counseling theories has increased. In these approaches the types of techniques of different theories are combined and appraise the problem using the techniques of two or more theories (Sharf, 2007; Snyder and Schneider, 2002). According to Snyder and Schneider (2002) eclectically using the principles and techniques of variety of ideas will lead to their more effectiveness and it is because by using several theories we receive more power to explain, predict and control. Maybe based on this fact that the simultaneous combination and application of theories and techniques of two Schema Therapy and Logotherapy approaches with the group method resulted in better effectiveness in increasing happiness in the elderly people inhabited in nursing homes. The review results of the third hypothesis of the research shows that the effectiveness rate of group counseling with two Schema Therapy and Logotherapy approaches in increase the happiness in the elderly people living in the nursing homes of Tabriz was different ( $p < 0.05$ ). The comparative examination of the findings of the research with other research findings that have the maximum similarities with the present study showed that the results of this research were consistent with the findings of the research conducted by Pour Ebrahim *et al.*, 2007; Roth and Fonagy quotes by Harper, 2004 and Yousefi,

2010 while inconsistent with the results of the research conducted by Yousefi *et al.* (2011). In order to explain the rejection of the third hypotheses regarding the lack of difference in the effectiveness rate of the group counseling with two Schema Therapy and Logotherapy approaches in increasing the happiness of the elderly people living in the nursing homes in Tabriz, it can be argued that any approach presents its own explanations of the human behavior and its strategies, and yet offers a lot of technical overlap between these two therapeutic models, but when we think of the superiority issue of them over each other, perhaps it is impossible to distinguish because each theory of psychotherapy has advantages and disadvantages so accordingly the lack of difference in the effectiveness rate of group counseling between the two approaches of Schema Therapy and Logotherapy on increasing happiness in the elderly people directs us to the viewpoint of Knight (2004) who suggests that no psychotherapy is superior to other psychotherapies.

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