COGNITIVE DISTORTIONS AND DEPRESSION AMONG OLDER ADULTS: MODERATING ROLE OF RESILIENCE

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ABSTRACT

Background: Depression is a disabling mental condition that reduces the quality of life regardless of age and circumstances. Late-life depression may be especially impairing due to its relationship with poor physical and mental health.

Objective: The aim of the present study is to examine the relationship between cognitive distortions, resilience and depression among older adults. As well, this study also aimed to examine the moderating role of resilience between cognitive distortions and depression.

Method: Purposive sampling strategy was used to recruited sample, and data was collected from (n=300) older adults. Cognitive distortions scale, Connor-Davidson resilience scale and Back depression inventory-II were used in this study.

Results: Results showed cognitive distortions and resilience has significant positive relationship with depression. Findings also revealed that cognitive distortions and resilience were significant predictors of depression. In addition, resilience plays a significant moderating role between cognitive distortions and depression.

Conclusion: This study concluded that the resilience could be an adaptive strategy to cope with stress and reduce depression in community-dwelling older adults.

Keywords: Cognitive Distortions, Resilience, Depression, Older Adults.

DISTORÇÕES COGNITIVAS E DEPRESSÃO ENTRE IDOSOS: PAPEL MODERADOR DA RESILIÊNCIA

RESUMO

Contexto: A depressão é uma condição mental incapacitante que reduz a qualidade de vida, independentemente da idade e das circunstâncias. A depressão da vida tardia pode ser especialmente prejudicada devido à sua relação com a má saúde física e mental.

Objetivo: O objetivo do presente estudo é examinar a relação entre distorções cognitivas, resiliência e depressão entre idosos. Além disso, este estudo também teve como objetivo examinar o papel moderador da resiliência entre distorções cognitivas e depressão.

Método: Foi utilizada uma estratégia de amostragem objetiva para recrutar a amostra, e foram coletados dados de (n=300) idosos. Neste estudo foram utilizadas a escala de distorções cognitivas, a escala de resiliência de Connor-Davidson e o inventário de depressão traseira II.

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Cognitive Distortions and Depression among Older Adults: Moderating Role of Resilience

Resultados: Resultados mostraram distorções cognitivas e resiliência tem relação positiva significativa com depressão. Os resultados também revelaram que as distorções cognitivas e a resiliência eram preditores significativos da depressão. Além disso, a resiliência desempenha um papel moderador significativo entre distorções cognitivas e depressão.

Conclusão: Este estudo concluiu que a resiliência pode ser uma estratégia adaptativa para lidar com o estresse e reduzir a depressão em idosos residentes na comunidade.

Palavras-chave: Distorsões Cognitivas, Resiliência, Depressão, Idosos.

INTRODUCTION

Depression is a widespread mental health disorder that affects around 300 million people globally (WHO, 2021). According to Vanoh et al. (2016), the prevalence of geriatric depressive disorders in Asian countries ranges from 12% to 34%. Among these countries, Sri Lanka, Indonesia, Japan, Vietnam, Malaysia, and India have the highest rates, with percentages of 27.8%, 33.8%, 30.3%, 17.2%, 12.7%, and 27.8%, respectively. The prevalence of moderate to severe depression in Lahore was 77%, according to a cross-sectional study by Kaleem et al. (2018). Unfortunately, depression in older adults is sometimes dismissed as a common result
of getting older, and approximately fifty percent of instances are not identified or diagnosed properly (Zenebe et al., 2021). According to the World Health Organization, individuals with depression have a 40% higher likelihood of dying prematurely compared to those who do not have the condition (WHO, 2017).

Although the exact cause of the condition is not well understood, it is believed that psychological, social, and biological factors all have a role in the development of depression. Depression can be caused by various causes, including insufficient social support, ineffective coping strategies, and difficulties in interpersonal relationships and communication, as suggested by psychosocial theory (Naci & Koletsi, 2021). There is a growing amount of research focused on studying cognitive distortion every year, namely in the fields of mental health and emotional illnesses such as stress, anxiety, and depression. Hence, in order to progress research into cohesive undertakings, it is vital to build a network of collaboration and possess a comprehensive comprehension of the topic matter. Studies have shown that cognitive distortion significantly contributes to the continuation of emotional issues.

Prior studies examining the effects of cognitive distortion on symptoms related to depression and other emotional disorders support this. Studies on the concept of cognitive distortion are now relevant and significant (Kube et al., 2019; Seager & Barry, 2019). Cognitive distortion has been observed to have broader effects beyond mental diseases, extending to psychosocial therapies such as wagering and decision-making (Abatecola et al., 2018; Levesque et al., 2018). Understanding the concept and functioning of cognitive distortion is likely to help with many personal problems. Currently, there is a lack of comprehensive global research that assesses scholarly articles in relation to cognitive distortion. Bolton et al. (2016) and Farber and Rosendahl (2020) propose that resilience can protect elderly adults from experiencing perceived stress and developing Late-Life Depression (LLD) when they face difficult circumstances.

However, there is a limited amount of research available on the relationship between resilience and LLD (Vila et al., 2016). Resilience is often described in academic literature as an individual quality or aptitude, although it is more commonly understood as a dynamic process (Kalisch et al., 2017). Defining and quantifying resilience, a complex notion, has been a challenging endeavour in recent decades (Chmitorz et al., 2018). The concept has been the subject of various definitions, but some encompass the ability to recover from difficult circumstances or obstacles, react positively to challenging situations, avoid physical illness or instability during periods of stress, and demonstrate outstanding performance despite adversity (Laird et al. 2019).
The study hypothesizes that cognitive distortions, which skew the beliefs of older adults regarding their current condition, future, and self, could potentially contribute to the development or advancement of depression. For example, an elderly individual who tends to catastrophize may interpret even little setbacks as disastrous events, leading to emotions of hopelessness and sadness. Resilience can counteract the adverse impacts of depression in older individuals through the processes of reframing negative ideas, managing stressors successfully, and maintaining a sense of life’s significance and purpose. People with resilience are more capable of facing and overcoming cognitive biases, reducing their susceptibility to sadness. To summarize, the acknowledgement of the complex interrelationships between depression, cognitive distortions, resilience, and aging emphasizes the necessity for comprehensive, asset-focused approaches in the support and treatment of mental well-being. Depression can be reduced by correcting cognitive distortions, strengthening resilience, and providing specialist assistance.

Despite advancements in the field of senior mental health treatment, there is still a lack of understanding regarding the complex relationship between depression, cognitive distortions, and resilience in older adults. Depression is a substantial threat to the general well-being of older individuals, and cognitive deficits heighten their vulnerability to viewing life events in a negative manner. Resilience, although recognized as a feature that provides protection, is not completely integrated into therapies for depression in this particular group. The existing evidence highlights the need for more research to understand the underlying mechanisms of these traits and develop tailored interventions that improve resilience while also reducing depression and cognitive distortions in older adults. The aim of this study is to investigate the relationship between depression, resilience, and cognitive distortions in older adults.

2 METHOD

2.1 SAMPLE

A sample of (n = 300) older adults from various old houses was selected. The purposive sampling strategy was used to recruit the sample. The range of participant ages is 60 years and above (M = 67.67; SD = 6.31). Only older adults from Pakistan were selected for the study.
2.2 INSTRUMENTS

With a demographic information sheet, the following three instruments were used to collect data for this study.

2.3 CONNOR-DAVIDSON RESILIENCE SCALE

The Connor-Davidson resilience scale was initially established by Connor and Davidson in 2003. The CD-RISC, or Connor-Davidson Resilience Scale, consists of 25 items. Each item is assessed on a 5-point scale ranging from 0 to 4. Stronger scores on the scale indicate stronger levels of resilience. The CD-RISC shows strong psychometric features and effectively differentiates individuals with higher and lower levels of resilience.

2.4 COGNITIVE DISTORTIONS SCALE

The Cognitive Distortion Scale (CDS) is a self-report instrument developed by Covin et al. in 2011. It consists of 20 items and uses a Likert scale format to measure 10 cognitive distortions. These distortions include mindreading, catastrophizing, all-or-nothing thinking, emotional reasoning, labelling, mental filtering, overgeneralization, personalization, should statements, and minimizing the positive. The scale uses a 7-point scale, with 1 representing "never" and 7 representing "all the time." The rating of each cognitive distortion is assessed in two domains: interpersonal (IP) and personal achievement (PA). The initial study found that the CDS was a one-factor scale with strong internal consistency, as shown by a Cronbach's $\alpha$ of 0.85.

2.5 BECK DEPRESSION INVENTORY-II

The measures used in the study consisted of the Beck Depression Inventory (Beck et al., 1979), a well-established 21-item self-report questionnaire that assesses depression symptoms. This instrument has been widely used and has demonstrated strong psychometric qualities. The participants completed this questionnaire during session 3 of the study (Beck et al., 1988).
2.6 PROCEDURE

Older adults participated in this study to provide data. Every participant was approached individually by older adults. In order to contact the study participants, formal authorization was obtained from the relevant authorities of these various organizations. They were given an explanation of the study's purposes. Assurances of anonymity, confidentiality, and informed consent were provided. For completing the questionnaires and the demographic information sheet, both written and verbal instructions were provided. Exclusively, data were collected from participants who volunteered for the study. Additionally, the researcher answered each participant's question. All respondents were ultimately recognized and thanked for their considerable contributions to the study's data collection.

3 RESULTS

All data was analysed using SPSS version 26 and AMOS-23. Pearson product moment correlation analysis was used to examine the relationship between cognitive distortions, resilience, and depression among older adults. Hierarchal regression analysis was used to examine the predictive role of cognitive distortions and resilience in depression among older adults. Moderation analysis was used to study the moderating role of resilience between cognitive distortions and depression among older adults.

Table 1

<table>
<thead>
<tr>
<th>Pearson Product Moment Correlation Analysis between Study Variables (N= 300)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Variables</td>
</tr>
<tr>
<td>-----------</td>
</tr>
<tr>
<td>1. Cognitive Distortions</td>
</tr>
<tr>
<td>2. Resilience</td>
</tr>
<tr>
<td>3. Depression</td>
</tr>
</tbody>
</table>

P < .05, p < .01
Note: M= Mean, SD= Standard Deviation

Findings showed cognitive distortions (r = 0.12, p =.03) have a significant positive relationship (p <.05) with depression among older adults. In addition, resilience (r = 0.61, p =.00) has a significant positive relationship (p <.05) with depression among older adults.
Table 2

Hierarchal Regression Analysis Predicting Depression (N=300)

<table>
<thead>
<tr>
<th>Predictors</th>
<th>ΔR²</th>
<th>β</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1</td>
<td>.01*</td>
<td>.12*</td>
</tr>
<tr>
<td>Cognitive Distortions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step 2</td>
<td>.38**</td>
<td>.61***</td>
</tr>
<tr>
<td>Resilience</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: *p < .05, **p < .01, ***p < .001.

Table 2 shows the prediction of study variables in the present study. Results showed that the first model was significant, explaining 1% of the variance in depression, with F (1, 298) = 4.72, p = .03, and R² = .01. The second model demonstrated significant prediction. F (2, 297) = 94.85, p = .00, R² = .39, which explained 39% of the variance in depression.

Table 3

Model of Moderation (N=300)

<table>
<thead>
<tr>
<th>Estimate</th>
<th>S.E.</th>
<th>C.R.</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cognitive Distortions</td>
<td>225.77</td>
<td>18.46</td>
<td>12.22</td>
</tr>
<tr>
<td>Resilience</td>
<td>112.14</td>
<td>9.17</td>
<td>12.22</td>
</tr>
<tr>
<td>Depression</td>
<td>61.00</td>
<td>4.98</td>
<td>12.22</td>
</tr>
</tbody>
</table>

Note: CD= Cognitive Distortions Scale, CDRS= Connor Davidson Resilience Scale

Table 4

Structural Fitness Model (N=300)

<table>
<thead>
<tr>
<th>Estimate</th>
<th>S.E.</th>
<th>C.R.</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDS &lt;- --&gt; CDRS</td>
<td>7.72</td>
<td>9.21</td>
<td>.78</td>
</tr>
</tbody>
</table>

Note: CD= Cognitive Distortions Scale, CDRS= Connor Davidson Resilience Scale

Table 4 showed that resilience play a significant p < .05 moderating role between cognitive distortion and depression. Though, it strengthens the relationship between cognitive distortion and depression.

Results from Table 4 showed that resilience has a significant p < .05 interaction with cognitive distortion. Though it strengthens the relationship between cognitive distortion and depression.
4 DISCUSSION

The researchers conducted a study on a large group of older people to investigate how resilience, which refers to the ability to bounce back from adversity, affects the relationship between depression and cognitive distortions. The findings of this study provide more support for the notion that resilience acts as a safeguard against depressive symptoms in older adults. However, it appeared that the strength of cognitive distortions could potentially influence this association. Previous studies (Vila et al., 2016; Silva-Sauer et al., 2020) have found a weak negative connection between cognitive distortions, depression, and resilience. Elderly adults with more resilience regard psychological anguish and daily stressful situations as less distressing compared to those with less resilience.

While most people have a high threshold for stressful situations, severe life events can overpower these mechanisms. Laird et al. (2019) study is the source of this information. Therapies aimed at enhancing resilience focus on cultivating certain skills or qualities, such as the ability to recover or bounce back from adversity. Resilience is crucial in helping people adjust to difficult situations and avoid experiencing depressive symptoms. Therefore, having efficient coping strategies can help an individual adapt to changing circumstances and successfully recover from challenging experiences in adulthood (Wilcox et al., 2003). To minimize the negative effects of stress and strengthen one's ability to cope, it is hypothesized that recognizing these dangers and the elements that support successful adaptation is essential for minimizing the onset of depressive symptoms.
Individual resilience is a psychological quality that can help lessen the distressing and dangerous effects of the COVID-19 pandemic, according to a recent study by Kimhi et al. (2020). On a shared continuum, major depression and adjustment disorder associated with depressive mood were both classified as depressive mood-related disorders within this cohort. This classification was based on the observation that a significant number of patients with medical conditions also exhibited adjustment disorders during their illness. The scores measuring "independent attitudes" in the case group showed a significant and positive correlation with their level of depression. The correlation between autonomous attitudes and depressive symptoms intensifies the cognitive distortions and dysfunctional attitudes that individuals with depression encounter. Dąbrowska-Bender et al. (2018) identified a link between depression and a diminished quality of life.

In contrast, a recent study uncovered that depression impeded both educational and occupational endeavours and had a negative effect on long-term goals, ultimately leading to a heightened sense of dependence (Schmidt-Busby et al., 2019). Zazzeroni et al. (2017) propose that the effectiveness of depression treatment may be hindered in its ability to affect the social roles of individuals with depression, leading to a decrease in their sense of independence and self-sufficiency. It is essential to be cognizant of specific limitations. Given the confirmatory cross-sectional approach used in this work, further research is needed to investigate the long-term effect and determine the time-related changes in the moderating influence.

In addition, this research neglects to take into account the possible social support that an individual may qualify for, instead viewing resilience as just a personal characteristic. Therefore, additional research is necessary to determine the impact of resources for interpersonal resilience on the relationship between cognitive distortions and depression. Furthermore, it's possible that people withheld some sensitive information from researchers. Additional research is necessary to address this gap by combining findings from different understandings of an individual's resilience that encompass resilience. Despite these limitations, the findings provide a basis for future studies aiming to develop models that examine the ability of resilience to protect against depression and cognitive distortions.

5 CONCLUSION

Resilience, which refers to the ability to recover from cognitive distortion, has a favourable effect on psychological well-being and holds a unique place in the field of behavioural study. The results indicate that older people with strong resilience display reduced...
symptoms of depression when faced with stressful circumstances. Resilience is most effective when cognitive distortions are believed to be more pronounced. The findings of this study offer additional evidence to support the idea that resilience can act as a preventive measure against depression, which is the leading cause of disability in this particular age demographic. Furthermore, they provide valuable information about the processes through which resilience functions in older individuals. Due to the accelerated aging of the population, it is crucial to create treatments that improve the ability of older adults to handle cognitive distortions and support their psychological well-being.

REFERENCES


