Buddhist Cognitive Behavioral Therapy to Address Depression Among Elderly Population: Multi-cultural Model of Buddhist Based Cognitive Behavioral Therapy to Address Depression Among Elderly Population

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Abstract : As per the suggestions of previously conducted research in Counseling Psychology, the necessity of forming culture-friendly approaches has been strongly emphasized by a number of scholars in the field. In response to that, Multicultural-model of Buddhist Based Cognitive Behavioral Therapy (MMBCBT) has been formed as a culture-friendly therapeutic approach to address psychological disturbances (depression) in late adulthood. Elderly population in the world is on the rise by leaps and bounds, and forming a culture-based therapeutic model which is blended with Buddhist teachings has been the major objective of the study. Buddhist teachings and cultural applications, which were mapped onto Cognitive Behavioral Therapy (CBT) in the West, ultimately resulted in MMBCBT. Therefore, MMBCBT is a blend of cultural therapeutic techniques and the essence of certain Buddhist teachings extracted from five crucial suttas, which include CBT principles. In the process of mapping, MeghiyaSutta, GirimānandaSutta, SallekhaSutta, DvedhāvitakkaSutta, and Vitakka- SaṇṭhānaSutta have been taken into consideration mainly because of their cognitive behavioral content. The practical components of Vitakka- Saṇṭhānasutta (Aññanimittapabbaṃ) and Sallekhasutta (SallekhaPariyāya and CittuppādaPariyāya) have been used in the model while mindfulness of breathing was also carried out with the participants. Basically, multi-cultural therapeutic approaches of MMBCBT aim at modifying behavior (behavioral modification), whereas the rest is centered to the cognitive restructuring process. Therefore, MMBCBT is endowed with Behavioral Therapy (BT) and Cognitive Therapy(CT). In order to find out the validation of MMBCBT as a newly formed approach, it was then followed by mixed research (quantitative and qualitative research) with a sample selected from the elderly population following the purposive sampling technique. 40 individuals were selected from three elderly homes as per the purposive sampling technique. Elderly people identified to be depressed via Geriatric Depression Scale underwent MMBCBT for two weeks continuously while action research was being conducted simultaneously. Additionally, a Focus Group interview was carried out to support the action research. As per the research findings, people who identified depressed prior to the exposure to MMBCBT were found to be showing positive changes after they were exposed to the model. "Paired Sample t test" showed that the Multicultural Model of Buddhist based Cognitive Behavioral Therapy reduced depression of elderly people (The mean value ($\bar{x}$) of the sample (level of depression) before the model was 10.7 whereas the mean value after the model was 7.5.). Most importantly, MMBCBT has been found to be effectively used with people from all walks of life despite religious diversities.
Keywords : buddhist psychotherapy, cognitive behavioral therapy in buddhism, counseling in cultural context, gerontology, and buddhism

Conference Title : ICCBS 2022 : International Conference on Contemporary Buddhist Studies
Conference Location : Dubai, United Arab Emirates
Conference Dates : May 05-06, 2022