

Original Research Article

The effectiveness of reality therapy concepts on self-esteem of the elderly people in the mental health center of Aramesh in Parsabad

Abstract

Aim: This research was conducted to study the effectiveness of reality therapy concepts on self-esteem of the elderly.

Materials and methods: The research was semi-experimental and its design was pretest-posttest with a control group. The statistical population consisted of the elderly men of the mental health center of Aramesh in Parsabad. Using the inclusion and exclusion criteria, 50 elderly men were evaluated, and among them 30 persons were identified to enter into this study, and they were randomly assigned into two groups: experimental and control group. Self-esteem scale was performed to both experimental and control groups. To collect data, Rosenberg self-esteem questionnaire was used. Reality therapy training sessions for two intervention groups were held twice a week during eight sessions, and there was follow-up for a month. Data were analyzed using variance analysis with repeated measures.

Findings: The results showed that the difference between self-esteem mean scores of two groups is significant, and reality therapy was to increase self-esteem of the elderly significantly ($p < 0.05$). Also, comparison between mean scores of pretest and posttest in both groups showed increasing self-esteem scores in posttest period was a significant difference.

Conclusion: The results of this research revealed that reality therapy is useful in increasing the self-esteem of the elderly. The implementation of such group sessions are recommended in the residences and retirement centers of the elderly.

Key words: reality therapy, self-esteem, ageing

Introduction

Ageing is part of the biological process that consists of all living organisms including human, and it is part of life that occurs after middle-age (Delavar, 1999). Probably, middle-age is the most important anthropological phenomenon of the late twentieth century and early twenty-first century. The elderly has the fastest growing population among different age groups, and about two-thirds of the world's elderly population live in developing countries such as Iran (Karami, et al. 2013). Also, in Iran some official statistics show that the elderly make up more than seven percent of the population (Hajiloo and Jafari, 2014). Increase in the elderly population due to birth decline, health condition improvement, life expectancy increase, makes the necessity of paying attention to the problems of this group ever-increasing and highlights the attention to different issues of the elderly. The importance of paying attention to the number of elderly in Iran lies in the fact that the Iranian elderly confront with physical and mental health related problems (Najafi, et al. 2013). Available research evidence shows that a significant percentage of the elderly suffer from problems related to physical and mental health. One of the important variable that affects ageing population and their mental health level is self-esteem of this vulnerable group (Hojjati, et al. 2011).

People who feel good about themselves, leave behind their conflicts easily, and stand up against negative pressures, and they can enjoy life well. Self-esteem is the major determinants to form behavior and emotional patterns and to indicate individual's attitude to himself/herself and outside world (Emami, 2007). Self-worth sense affects all aspects of people's lives, and also affects their attitude to their abilities. Some studies indicate that people who have high self-esteem having features such as mental maturity, stability, realism, comfort, high ability to tolerate frustration and failure, while people with low self-esteem do not have such characteristics. In addition, self-esteem has high influence on these people's recognition about their abilities (Sardarabadi, 2006). So, low self-esteem causes many psychological problems including depression, anxiety, apathy, and solitude (Shahbazzadegan, et al. 2009).

One of the most common mental problems of the elderly is feeling helplessness that leads to decrease toleration of unwanted stimuli, reducing performance in environmental conditions, depression, increasing stress level, maladaptive coping responses, low self-esteem and even death (Mattson & Mc conell ES, 1988).

Thus, according to the importance of self-esteem and its key role in mental health and that the number of the performed interventions in this area has been limited; it is necessary to use efficient and favorable treatment to increase self-esteem such that several theories have been looking for ways to increase or foster self-esteem. According to the presented ideas and conducted studies in recent decades, several therapeutic approaches have also noticed to self-esteem and to strategies for increasing it. Reality therapy is a collection of techniques, methods, and tools that help people to move from dysfunctional behaviors, destructive choices to constructive choices, and most importantly to move from unhappy and displeasing lifestyle to a pleased one (Glasser, 2010). Also, the basis of reality therapy has been consisted of the self-assessment process because the atmosphere of the meetings can help members to obtain an accurate assessment of their behavior (Corey, 2012). In this method of treatment the emphasize is on confronting reality, accepting responsibility, recognizing basic needs, moral judgements about right or wrong behavior, focusing on here and now, internal control and thus achieving success identity which is directly related to self-esteem and self-confidence (Caterin, 2008). Kim (2009) in a research carried out on hospitalized schizophrenic patients in one of the mental hospitals in South Korea concluded that reality therapy is to make positive changes in the components of internal control, self-esteem, and coping with stress. In this theory, it is believed that we do everything is behavior and almost all of our behaviors are selected. Glasser considers that behavior includes four components of performance, thinking, feeling and physiology, that we have direct control over two components of performance and thinking and indirect control over feeling and physiology. The main emphasis of choice theory is on the two components of performance and thinking. Glasser believes that in every communication of every kind and nature, a person can change himself and that means internal control. Therefore, to achieve success we should leave the external trait (control) and instead we pay attention to behavior according to the choice theory training. One of the other components of reality therapy is responsible. Glasser believes that responsibility is the very choice and states that everyone can have a sense of responsibility, but no one can say honestly when choosing, does not have any responsibility to what s/he selected. If we do not accept responsibility for what we do to satisfy our needs, we become a dangerous creature.

Several studies show the effectiveness of reality therapy on a variety of components, problems and psychological disorders; such as adult depression (Bhargava, 2013), flexibility of women (Sadat Bary, et al. 2013); increasing happiness (Esmaeilifar, Sheikhi & Jafarpour, 2013; Mollagholamali Hakkak, 2013; Khazan, et al. 2015); happiness and mental health (Khaleghi Abasabad, 2009); general health (Ahadi, Yousefi Louyeh, Salehi & Ahmadi, 2009); life expectancy and anxiety (Pash & Amin); self-esteem (Moradi Shahrababak, Ghanbari Hashem Abadi & Agha Mohammadian Sherbaf, 2010), and other relevant studies. Reality therapy is based on the choice theory. Furthermore, studies by Khazan, et al. 2014, and Moradi, et al. 2010, indicate that concepts of reality therapy training has been effective on increasing self-esteem of the elderly. Also, studies of Haniman (1990), Chance, N.A., et al. (1990) and Black (1994) on drug addicts and prisoners show that regarding participants' perception and self-esteem, there has been a significant difference between pretest and posttest scores after receiving reality therapy. Also, various studies show that concepts of reality therapy training, reduces anxiety and causes increase in people's responsibility and self-esteem (Javanbakht, et al. 2012). And also, Majdian (2007) has referred to the relationship between self-esteem and source of internal control in his research, and he concluded that people whose source of control is internal have higher self-esteem.

According to what was discussed, interventions were carried out with reality therapy approach has been effective on a variety of components, psychological problems and disorders as a group and individually. This study also seeks to answer this question: can concepts of reality therapy training lead to increased self-esteem of the elderly?

Research method

The present study was a quasi-experimental research with a pre-test and post-test design and a control group. First, the researcher obtained letter of introduction, visited "Aramesh mental health center management in Parsabad County", and explained the research purposes, then according to the entrance criterion for participants, the researcher asked the management to introduce 50 elderly men of the center to him.

Entrance criteria to the research include: 1. 60 age and above; 2. Reading and writing literacy for completing questionnaire; 3. Verbal relation ability; lack of using psychotropic drugs; 5. Written content for participating in the research; 6. Mental vigilance and freedom from psychological problems (based on medical file and doctor examination on center); exclusion criteria from the research also include: 1. Simultaneous participation in another psychotherapy; 2. Absence more than two sessions.

Using random sampling, 30 subjects were selected as a sample of the present study. In order to have parallel subjects in both control and experimental group, random assigning were used in both groups and one group was randomly selected for intervention (Gravetter F, Forzano LA, 2011). Before starting therapy sessions, Rosenberg Self-Esteem Scale questionnaire were given to the participants of both groups so that if possible, to be completed and answered by the researcher's aid.

Rosenberg questionnaire was used to measure dependent variable. Rosenberg criteria is a standard criteria that includes 10 items or statements by which real feeling of subjects about each of statements is determined by four scales of completely agree, agree, disagree, and completely

disagree each represented by scores of 1 to 4. Total score is obtained by the sum of scores given for 10 items. Scores of 10 and 40 show the least and the most self-esteem respectively (Shahbazzadegan, Farmanfar, Ghanbari, Atrkaroushen, Adib, 1387). Rosenberg Self-Esteem Scale is a reliable questionnaire. Shahbazzadegan et al reported reliability of 0.85 for this questionnaire among elderly population of old people's retirement (Shahbazzadegan et al, 1387). Hojjati et al. reported cronbach alpha of 0.78 for this questionnaire (Hojjati, et al 1391). The questionnaires were completed anonymously, through coding and verbal interview with selected elders.

Procedure

In the discussed design, subjects were randomly selected and were assigned into two group in the same way. Before implementing dependent variable (x), selected subjects in both groups were assessed using Rosenberg Self-Esteem Scale (pre-test). The role of pre-test is to control variance (equality of variance) as a result it determines whether the created change derives from implementation of experimental variable or it is due to other factors. Then experimental group received treatment of dependent variable (training concepts of reality therapy) after finishing training, subjects' self-esteem was measured using the same instrument. Finally, after finishing reality training, post-test was administered after one month. Then results were analyzed using variance analysis of statistics test with repeated measures.

Table 1. Intervention program of reality therapy concepts with separation of sessions

Sessions	Details of sessions
First session	Members acquaintance with each other and regulations of training period and statement of purposes of sessions, overall familiarity with self-esteem learning and selection theory, necessity of members communication with each other in an effective way.
Second session	They talked about self-esteem and principles of reality therapy such as external control psychology and also fundamental component that is introduction of basic needs and its influence on self-esteem; then chaplet technique was used to introduce five basic needs (love and belonging permanence, power, freedom and entertainment) and its relevant components and training how to separate basic needs to create balance to meet them. We used five chaplets with different color which relate to a specific need.
Third session	Explanations offered on how self-esteem can be obtained and also perception of self-esteem concept and its components and influential factors on them are explained and a task was given to the members of group to think about their own problems and they were asked to say what problems have bring about their low self-esteem and the use of bladder technique to help visitors to concentrate on feelings as a part of behavior generality and attempt to control them.
Fourth session	Using mirror technique to encourage visitors to create pleasing emotional states, paying attention to physiological dimension of behavior and offering explanations about living at the present moment and believing that every mistake that has happened in the past is

	not related to the present
Fifth session	Training generality of behavior and balance (equilibrium) concept in four components of behavior (performing, thinking, feeling, physiology) to subjects using broken chair technique.
Sixth session	Through reviewing previous discussions of wallet technique to train qualitative world concept and how to control needs through identification of pictures related to qualitative world (personal album) and suggesting explanations about the fact that in this community we are not forced to do something that we don't like according to others' wish.
Seventh session	Backpack technique was used to encourage subjects in selecting responsible behaviors out of behavior store and to have pleasing feelings. Explanations on responsibility together with some examples have suggested and relation of this concept with self-esteem was discussed.
Eighth session	Along with representing explanations about effective relationship and its relation to self-esteem, we briefly summarized all sessions and we addressed training on creating relationship between self-esteem and existing concepts in selection theory in which participants' ideas were included too. Then designs for keeping intervention sessions purposes have been suggested and finally we addressed obtaining feedback from participants about intervention design.

Findings

Table 2: Independent sample t-test to compare both groups in terms of participants' age

	Group	M	SD	t-statistic	df	Error rate Sig
Age	Intervention	67.00	6.61	1.17	28	0.25
	Control	69.80	6.43			

In table 2 according to obtained t-value ($t=1.17$) and confidence level of 0.25, there is no significance difference in the age of intervention and control group.

Table 3: Independent sample t-test compare pre-test scores of two groups

	Group	M	SD	t-statistic	df	Error rate Sig
Pre-test Score	Intervention	75.26	12.26	0.95	17.56	0.35
	control	72.06	4.41			

As shown by table 3, mean difference of pre-test in intervention and control group was 3.2 and their standard deviation difference was 7.85, error rate value in .5 sig. level was .35 indicating significant difference exists between two groups.

153 **Table 4: mean and standard deviation in three times measures among intervention and**
 154 **control group**

Group	N	SD	M
Pre-test	15	12.26765	72.0667
Control	15	4.41534	75.2667
	30	9.20395	73.6667
Experiment	15	11.22158	67.9333
	15	5.72547	97.7333
Total	30	17.50090	82.8333
Fallow up	15	11.81927	68.5333
Control	15	7.99881	108.1333
Experiment	30	22.44738	88.3333
Total			

155 Results of three times measures indicate that there was significant increase in posttest measure of
 156 experimental group and they had relative stability during one month follow-up measurement.
 157 Experimental group revealed higher increase in post-test measurement (m=82.8) and in follow-
 158 up measure they had higher score as well (total mean=88.3).

159 **Table 5: results of variance analysis with repeated measures**

Source	Sum squares	Df	Sum squares	F score	Significance Level	Size effect
Group	13176.900	1	13176.900			
Error	5500.489	28	196.446	67.067	.000	.706

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 161 As it is observed in table 5, the null hypothesis is rejected and contrary hypothesis is accepted.
 162 On the other hand, reality therapy has significant influence on the elderly' self-esteem in
 163 experimental group rather than control group ($f=.67$ and $sig=/.001$). Represented results in table
 164 5 also illustrates that in follow-up step reality therapy has significantly increased the elderly
 165 self-esteem of intervention group in posttest and follow-up test.

Conclusion

The aim of this study was to examine the effectiveness of concepts of reality therapy training on self-esteem of the elderly. The results of this study show that training concepts of reality therapy is effective on the elderly.

The findings of this study are aligned with the results of studies of Harris, Peterson, Chang and Collins (1995), Hedman (2000), Kadena (2007), Glasser (2008), Kim (2009), Deb (2009), Moradi Shahrababak, et al. (2010) and Khazan, et al. (2014). On the other hand, Moradi Shahrababak, Ghanbari Hashemabadi and Agha Mohammadian Sherbaf (2010) showed that reality therapy is effective on increasing self-esteem of students in a group way. As it has been revealed in different studies, in explaining the mentioned findings can be noted that self-esteem is highly correlated with components such as responsibility and internal control. If people think about themselves positively and realistically, they can experience feeling worthy. One of the reasons that caused scores of experimental group increase after 8 sessions is that during these sessions based on reality therapy approach clients were trained to identify their basic needs and meet them properly because satisfying basic needs in a proper way leads to increase in self-esteem. Also, in this approach there is emphasis on strengthening internal control source. That is, people can attribute success to their own and believe that thinking, behavior and feeling they experience are under their control. And if they came to the conclusion that their behaviors do not satisfy their needs, they choose other behavior and accept responsibility of the consequence of their choice. Thus, regarding what was mentioned and based on previous studies, the effectiveness of the concepts of reality therapy on increasing self-esteem of the elderly can be achieved. Also, there is a consistency between results of this study and mentioned researches, and the world of quality that is the image people have of themselves is influential on their self-esteem. If people have a positive image of themselves and their images of themselves are positive in the world of quality, their self-esteem will be higher. Peteson, Chang and Coulinse J (1995) conducted a research on satisfying students' needs and found that satisfying basic needs of experimental group increased after counseling sessions of reality therapy and training choice theory (Sardarabadi, 2006). And finally, Lopes and Kerr's research (2006) has shown that group training can have significant impact on developing and increasing the sense of optimism, happiness and hope of the elderly. The results of this study show that the elderly participating in group sessions compared to when they had not participated in the sessions, they feel more happiness. So, one of the reasons that has caused increase scores of experimental group after the intervention sessions is that during these sessions based on the theory of reality therapy an attempt was made clients change their negative world of quality about themselves to a positive one. Also, the clients are trained to meet their basic needs properly, because meeting basic needs in a proper way results in increased self-esteem.

Glasser's idea is a desirable and useful idea on how to avoid the controlled orientation and help people to find positive choices and options (Barness R, Parish TS, 2006). Also, Glasser believes that sense of responsibility and control and appropriate satisfying needs, especially the need for love and belonging that are met properly in the group lead to improvement in mental health (Barness R, Parish TS, 2006). «Langer» and «Robin» state that control and responsibility and the feeling that we can do our works ourselves lead to improve in mental health in the elderly. Regarding the mentioned cases, it seems that training concepts of reality therapy could increase sense of control and responsibility in the elderly and to the extent it is effective on appropriate

211 satisfying their needs; therefore, it seems logical that this method can be used to promote self-
212 esteem and mental health of the elderly.

213 **Final result**

214 Iran population is going towards ageing. Considering the importance of ageing and its
215 psychological issues and according to the results of the present study and the effect of the
216 concepts of reality therapy on the elderly, a series of skills and its teachable abilities can be used
217 to help solving psychological problems and increasing self-esteem in the elderly. Therefore, it is
218 suggested that in future research, the effectiveness of this type of training to be evaluated and
219 measured on the other mental components of the elderly.

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