Depression is a common psychological disorder amongst older adults associated with serious secondary effects to health and social well-being. Depression is theorized to result from a lack of positive reinforcement from the environment. Behavioral activation has been found to be an efficacious treatment for depression in older adults. However access and utilization of this treatment is limited due to high cost, availability of treatment providers, and perceptions of mental health care. Computerized treatments have recently been developed to address some of these issues. The purpose of this dissertation project was to evaluate the acceptability and effects of a computerized values-based behavioral activation treatment for depression in older adults. This study included a treatment phase with two depressed older adults and assessed symptoms of depression, activation, and quality of life. In addition, this study included an exploratory phase with 21 older adults from a general population that included qualitative and quantitative measures geared towards assessing their awareness of depression symptoms, their mental health seeking process, their attitudes and perceptions of computerized treatment, and their experienced usability of this computerized treatment.
This computerized values-based behavioral activation treatment produced statistically significant increases in values-based activation for both treatment participants. The computerized treatment also produced statistically significant reduction in depressive symptoms for one participant, while the reduction in the second participant’s depressive symptoms was approaching significance. One participant reported an increase in overall quality of life. In the exploratory phase participants reported some awareness of depression symptoms, but difficulty knowing when to seek treatment and from whom. Participants reported an overall positive experience of using the program, high usability, and a high degree of perceived credibility and expectations for improvement. These findings suggest that first, future research is warranted to test the effects of this program with older adults using more rigorous methods. Additionally, future research needs to focus on improving dissemination of available computerized treatments. Moreover, treatments should consider more effective methods of treating older adults by using integrative care models, stepped care models, and adapting treatments by taking the needs and preferences of older adults into consideration when developing computerized treatments.