

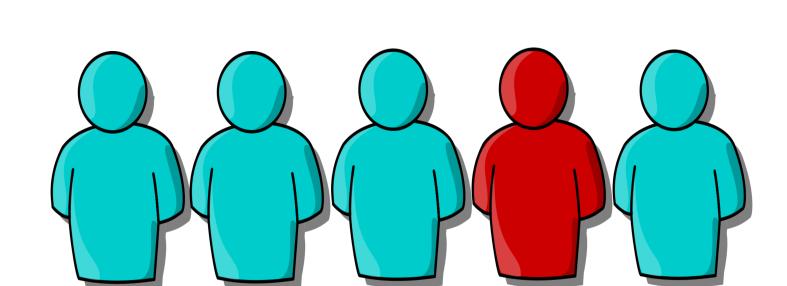
# Exploring the stigma of depression among older adults: results from a community survey

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### Background & Purpose

The National Alliance on Mental Illness estimates that depression affects more than 6.5 million of the 35 million Americans aged 65 and over<sup>1</sup>

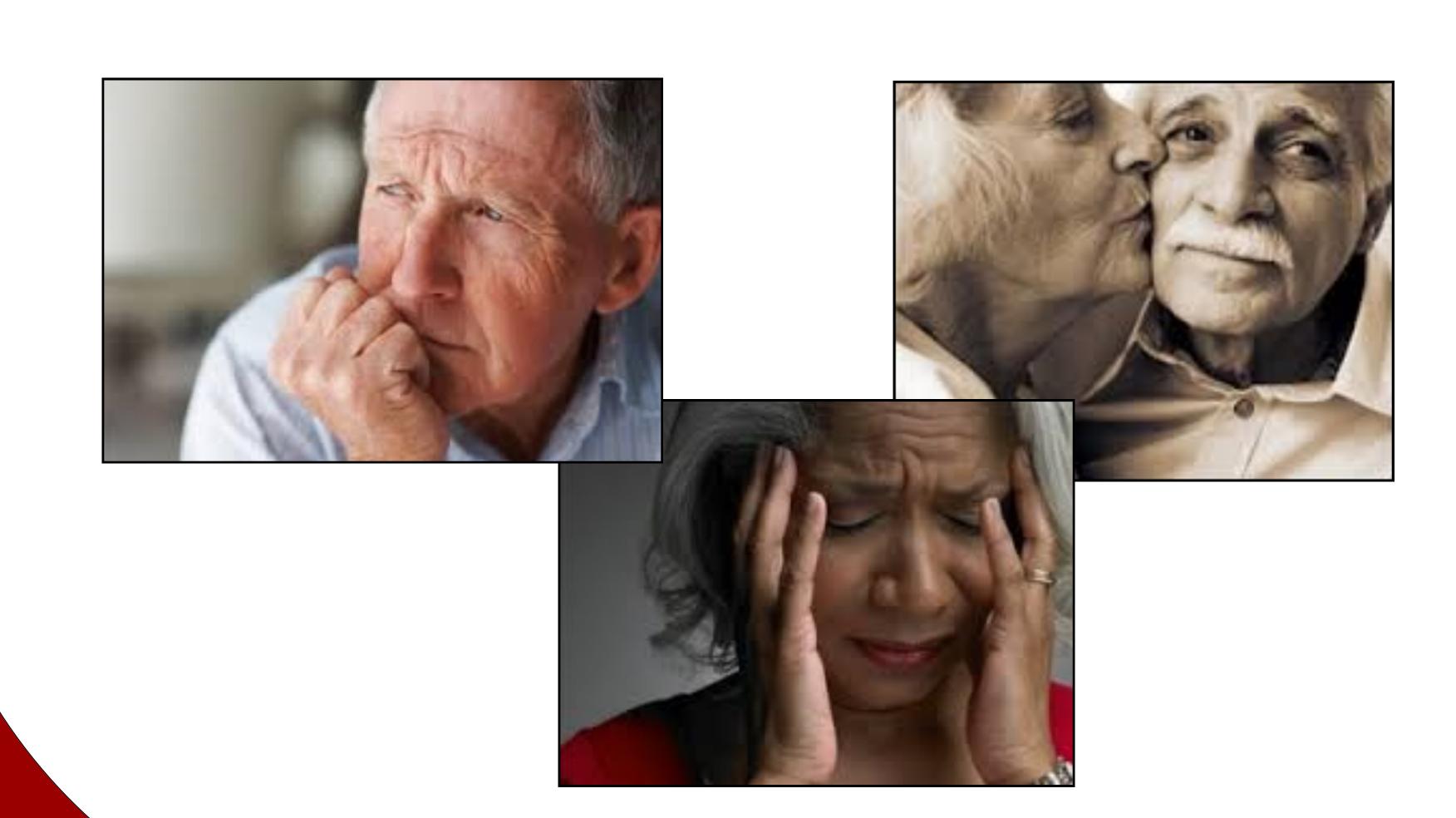


Approximately 1 in 5 adults older than 65 in the United States have experienced depression.

Depression in older adults is associated with increased disability and morbidity and yet often goes undiagnosed and untreated. This may be because of a misconception that depression is a normal response to the aging process or its symptoms can be mistaken as signs of other medical conditions such as dementia, stroke, or heart disease.

Stigma may also play an important role in how likely older adults are to seek mental health treatment and be diagnosed and treated for depression in comparison to their younger counterparts.

This study aimed to better understand depression among older adults to identify barriers to diagnosis and treatment.



#### Methodology

Community-dwelling adults age 50 and older (n= 109) were surveyed across six sites in a moderately sized metropolitan area.

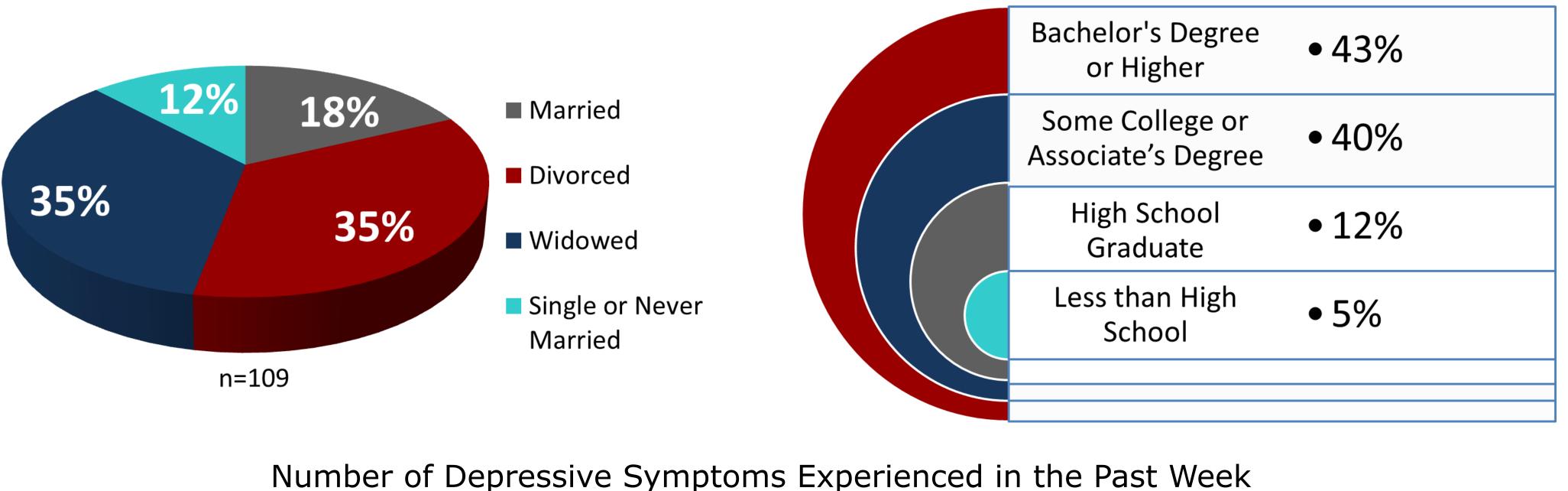
The survey contains items and scales measuring the following concepts:

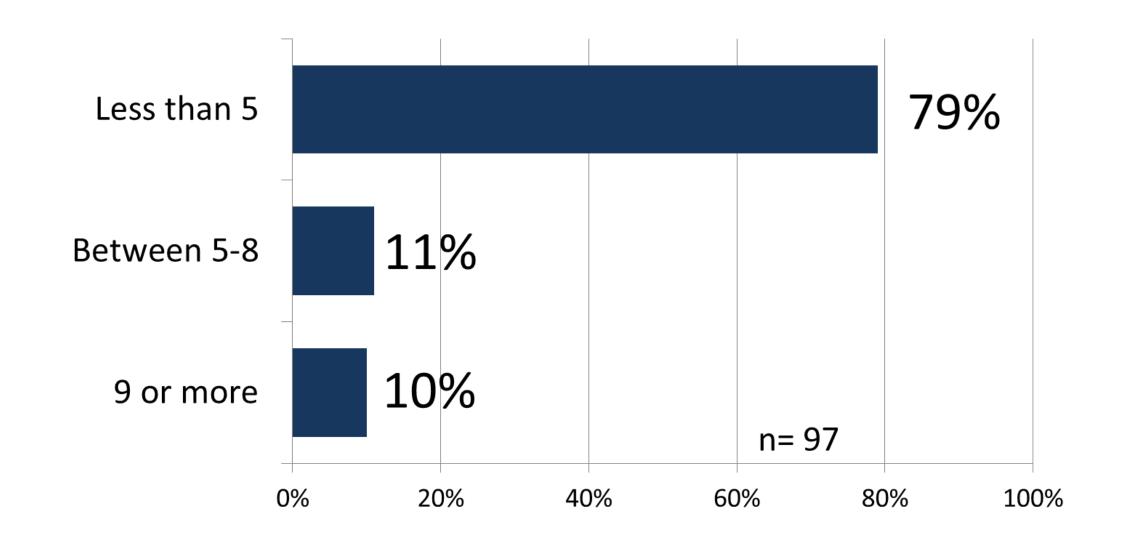
- ♦ Demographics
- ♦ The Geriatric Depression Scale (GDS) short-form<sup>2</sup>
- ♦ Stigma concerning depression questionnaire<sup>3,4</sup>
- ◆ Treatment seeking attitudes
- ♦ Personality measures<sup>5</sup>

Surveys were counter-balanced to prevent question ordering effects.

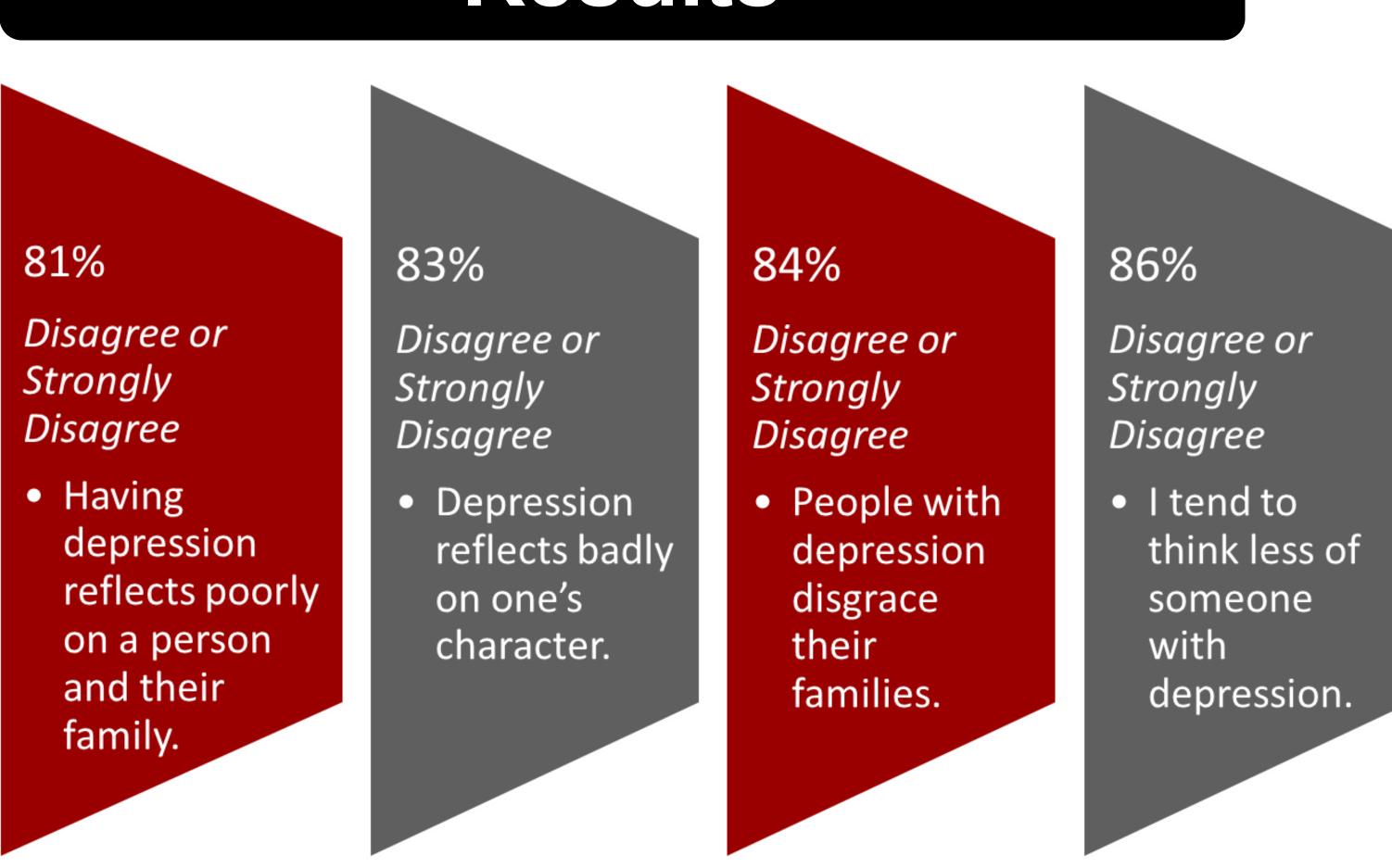
### Sample Characteristics

- 109 subjects
- ♦ Ages ranged from 50 to 95 with an average age of 74
- ♦ 70% were female
- ♦ 89% were Non-Hispanic whites





#### Results



These findings indicate that overall subjects did not endorse negative or stigma-inducing beliefs about depression.

#### **Treatment Seeking Attitudes**

Subjects indicated that if they were to experience depression they would be most likely to seek treatment (r=-.13), subjects with higher from: a doctor (54%) or mental health professional (50%) and least likely to take | treatment if they were to medications (54%).

While current depressive symptoms were not significantly related to stigma GDS scores were significantly less likely to endorse seeking become depressed (r=-.26, p=.01), controlling for age and sex.

#### **Conclusions & Future Directions**

It's encouraging that subjects did not openly endorse negative or stigma-inducing beliefs about depression. However, those experiencing some depressed mood, may be less willing to seek treatment if depressed, which suggests that attitudes toward treatment may differ depending on the older adult's emotional state. This indicates stigma may still play a role when the individual has depression and is making decisions about seeking treatment.

In addition to the survey data, 41 subjects also completed a semi-structured interview about their attitudes and beliefs regarding depression. We will review and analyze the data to expand upon our understanding of the survey responses. This will strengthen our interpretation of the relationships between depression, stigma, and treatment seeking behaviors.

<sup>1.</sup> Duckworth, K. (2009). Depression in Older Adults Fact Sheet. National Alliance on Mental Illness. pg. 1.

<sup>2.</sup> Sheikh, J. and Yesavage, J. (1986). Geriatric Depression Scale (GDS): Recent evidence and development of a shorter version. Clinical Gerontology. A Guide to Assessment and Intervention. 165-173. 3. Nieuwsma, J.A., Pepper, C.M., Maack, D.J., Birgenheir, D.G. (2011). Indigenous perspectives on depression in rural regions of India and the United States. Transcultural Psychiatry,

<sup>48(5): 539-568.</sup> 4. (Abdullah, T., Brown, T.L. (2011). Mental illness stigma and ethnocultural beliefs, values, and norms: an integrative review. Clinical Psychology Review, 31: 934-948. 5. John, O.P. and Srivastava, J. (1999). The Big Five trait taxonomy: History, measurement, and theoretical perspectives. Handbook of personality: Theory and Research 2,