Community Policy Brief

Differential Role of Social Connectedness in Geriatric Depression Among Southeast Asian Ethnic Groups

Taehoon Kim1,2, Ethan T. Nguyen, MPH1,3, Elaine J. Yuen, MBA, PhD4, Thoai Nguyen5, Rorng Sorn6, Giang T. Nguyen, MD, MPH, MSCE1,2,7,8
(1) Penn Asian Health Initiatives, Department of Family Medicine & Community Health, Perelman School of Medicine at the University of Pennsylvania; (2) Leonard Davis Institute of Health Economics, University of Pennsylvania; (3) Center for Translational Lung Biology, Perelman School of Medicine at the University of Pennsylvania; (4) Department of Religious Studies, Naropa University; (5) Southeast Asian Mutual Assistance Associations Coalition (SEAMAAC); (6) Cambodian Association of Greater Philadelphia; (7) Center for Public Health Initiatives, University of Pennsylvania; (8) Center for Clinical Epidemiology and Biostatistics, University of Pennsylvania

What Is the Purpose of this Study?

• In a sample of Vietnamese, Laotian, and Cambodian elders, this study sought to answer two questions: 1) Does social connectedness serve as a resilience factor against geriatric depression? 2) Are there differences between the Southeast Asian ethnic groups with regard to question #1?

What Is the Problem?

• Southeast Asian refugees in the United States are at an increased risk for geriatric depression owing to the effects of pre- and post-migration stressors and limited social support systems.
• There exists limited understanding in effective community-based interventions to buffer against geriatric depression for the Southeast Asian ethnic groups.
• There exists little to no evidence as to whether or not social connectedness affects geriatric depression among the Southeast Asian ethnic groups differentially.

What Are the Findings?

• Overall, Southeast Asian elders in this study seem to be at risk for depression and seem to have low social connectedness.
• Elders who were married and those who spoke English seemed to be protected from depression.
• When analyzing by ethnicity, differences were identified that would not have been noticed if Southeast Asians were analyzed as a single group.
• For Vietnamese, depression was less common if elders had more social connections, were younger, or were married.
• For Laotians, depression was less likely among elders who could speak English.
• For Cambodians, elders who were younger adults at the time of immigration had higher rates of depression than those who were older at immigration.

Who Should Care Most?

• The findings are important for community-based organizations and health care providers who serve Southeast Asian elders, as well as for public health and mental health researchers who focus on minority health and immigrant health.
Recommendations for Action

- Interventions against depression among Southeast Asian elders should take into account potential ethnicity-specific resiliency factors that were identified in this study.

- Researchers should perform disaggregated data collection and analyses for Asian ethnic groups to understand differential effects of potential risk factors, resilience factors, and interventions.