A Framework for Understanding Mental Health among Older African American Women

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Overview of presentation

• What we know and how we know it
• Mental health disparities
• Methodological limitations
• Approach to examining mental health among older African American women
How do we know what we know?

• Dearth in knowledge about mental disorders among older African Americans, in general and among women, specifically
• What we know is primarily based small samples, and comparisons non-Hispanic whites and African American men
• Conflicting findings due to methodological issues
Ford, Bullard, Taylor et al., 2007

Lifetime and 12-Month Mental Health Disorders among African Americans 55 Years and Older (N = 775)

- Any lifetime mood disorder
- Any lifetime anxiety disorder
- Any lifetime substance disorder
- Any lifetime disorder
- Any 12-month disorder

Women | Men
Barry, Thorpe, Penninx et al., 2014. Race-related Differences in Depression Onset and Recovery in Older Persons Over Time: The Health, Aging, and Body Composition Study
Mental health disparities among African American older adults

- Compared to whites, older African Americans:
  - are less likely to be diagnosed
  - have increased rates of depressive symptoms over time
  - have a higher rate of recurrent and chronic MDD
  - have more fluctuations in depression course
  - are less likely to receive effective care and management of their illness
  - have more severe symptoms and disability
Limitations of current research

• Methodological approach
  • Samples
  • Measures
  • comparative approach

• Lack of studies focused on understanding mental disorders and subsequent treatment needs lead to a gap in epidemiologic and clinical knowledge for older African American women
How do we take what we already know to improve our approach to examining mental health among African American women?
Approach to examining mental health among older African American women

- Expand existing findings
- Examine heterogeneity
  - Item endorsement
  - Trajectories
  - Risk profiles
Expand existing findings

• “Higher levels of physical activity are prospectively associated with lower levels of obesity in white adolescent girls but not in black adolescent girls. Obesity prevention interventions may need to be adapted to account for the finding that black girls are less sensitive to the effects of physical activity.”
Lincoln, K. D. (2017). Social Stress, Obesity and Depression among Women: Clarifying the Role of Physical Activity. *Ethnicity and Health*

- Elucidate the association between physical activity, obesity, and depression among racial/ethnically diverse women by examining social stressors associated with both conditions.
- Examine the extent to which physical activity moderates the effect of social stress (material hardship, chronic stress, racial discrimination) on depression and obesity risk.
Predicted Probabilities of Obesity by Chronic Stress and Physical Activity Among African American Women in the National Survey of American Life
Predicted Probabilities of Depressive Symptoms by Chronic Stress and Physical Activity Among African American Women in the National Survey of American Life

![Graph showing CES-D by Physical Activity Level](graph.png)

**Graph Title:** CES-D by Physical Activity Level

**Legend:**
- N=2032 African American Women, NSAL, at ±1 SD Chronic Stress

**Graph Description:**
- The graph illustrates the predicted probabilities of depressive symptoms (CES-D) by physical activity level among African American women.
- The x-axis represents physical activity level, with low activity on the left and high activity on the right.
- The y-axis represents CES-D scores.
- The graph is divided into two sections: low stress and high stress.
- The low stress group shows a higher CES-D score for both low and high activity levels, indicating higher depressive symptoms.
- The high stress group shows a lower CES-D score for both low and high activity levels, indicating lower depressive symptoms.

**Statistical Insights:**
- The trend suggests that higher physical activity levels are associated with lower CES-D scores, especially among participants with high stress.
- This implies that physical activity may be a protective factor against depressive symptoms, particularly among those experiencing chronic stress.

**Relevance:**
- Understanding these relationships is crucial for developing effective interventions to manage depressive symptoms in African American women, especially those under chronic stress.
- Public health strategies could focus on encouraging physical activity among high-stress groups to mitigate depressive symptoms.
Significance

• Short telomere length (TL) and/or greater rates of telomere shortening predict:
  • depression
  • cancer
  • cardiovascular disease
  • stroke
  • early mortality
Expand existing findings

• Most studies of biological aging indicate that African Americans are aging faster than whites.

• Few studies examine protective or resilience factors.

- Are social relationships with extended family members associated with TL?
- Does the relationship differ for African Americans vs. Whites?
Social support * negative interaction

Telomere Length

Social Support

Low Negative Interaction

High Negative Interaction

Not at all  A little  Some  A lot

Not at all  A little  Some  A lot
Race * negative interaction

![Graph showing the relationship between negative interaction and telomere length for African American and White individuals. The graph displays a downward trend for both groups as the level of negative interaction increases. Red line represents African American, and yellow line represents White.](image-url)
Heterogeneity in symptom endorsement
Heterogeneity in symptom trajectories
Intersecting levels of analysis
Biopsychosocial risk types

- Chronic health problems
- Salivary TL
- Adverse childhood experiences
- Family support
- Negative family interactions
- Everyday discrimination

Item Response Probability

Social Risk Type (25%)
Biological Risk Type (40.3%)
High Risk Type (34.7%)

48% women
Ave age: 69
lowest income
66% married

60% women
Ave age: 66
highest SES
71% married

57% women
Ave age: 71
lowest education
61% married
Biopsychosocial risk typology

• Provide information about different patterns of risk and resilience factors
• Increase our understanding about how accelerated aging is associated with chronic disease risk and mental disorders by taking into account heterogeneity in individual characteristics (e.g., race, gender, age), stress exposure, resilience factors and TL.
Conceptual framework for the study of mental health among older African American women

Demographic factors
- Race, SES, Age, Relationship status

Risk factors
- Early life adversity and psychosocial stress
- Social Ties
- Health Behaviors

Resilience factors

Physical health conditions
- Accelerated aging

Biopsychosocial Risk Typologies

Mental Health