

Evaluation of Depression in the Elderly of a Rural Mid- Western Community





Purpose

- To identify senior citizens in a rural farming community who exhibit depressive characteristics and compare this with other confounding variables such as health problems, income, education and gender.



Methods: Surveys

- Surveys were distributed to six churches, Pecatonica Pharmacy, and Freeport Health Associates Clinic in Pecatonica
- “Scripts” were developed for the clergy, pharmacists, and receptionists involved in handing out the surveys. This was to insure that the same information was given at all the sites.



Methods: Surveys (cont.)

- The surveys were completed anonymously by individuals 65 years of age and older.
- The surveys were tracked with identification numbers as to what site the surveys were completed.
- The surveys asked information regarding demographics, health status and medical conditions.



Methods: Surveys (cont.)

- Also included in the survey was the Durham GRECC scale to evaluate depression, which involves 11 yes/no questions.
- Other information collected from the survey include medical topics which were then discussed a newspaper column, and ideas as to what other activities or information individuals felt were needed in Peconica

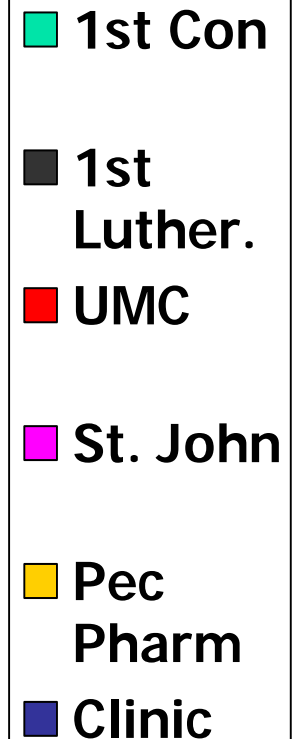
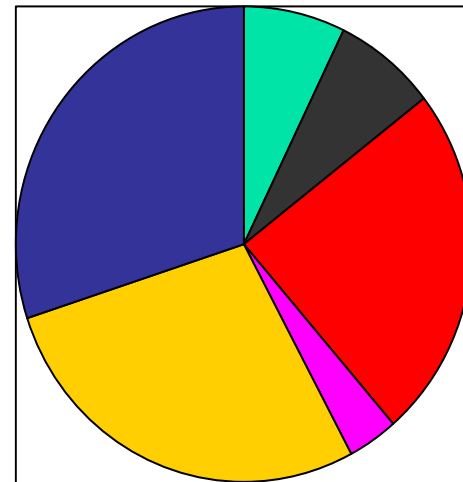


Results

- The SPSS data program was used to compile and manipulate the data collected from the surveys returned.

Completed Surveys by Site

- Completion rate: 41.5%
(N=83 of 200)
 - First Congregational 7.2%
 - First Lutheran 7.2%
 - United Methodist 24.1%
 - Saint John's Lutheran 3.6%
 - Pecatonica Pharmacy 27.7%
 - Pecatonica Health Clinic 30.1%

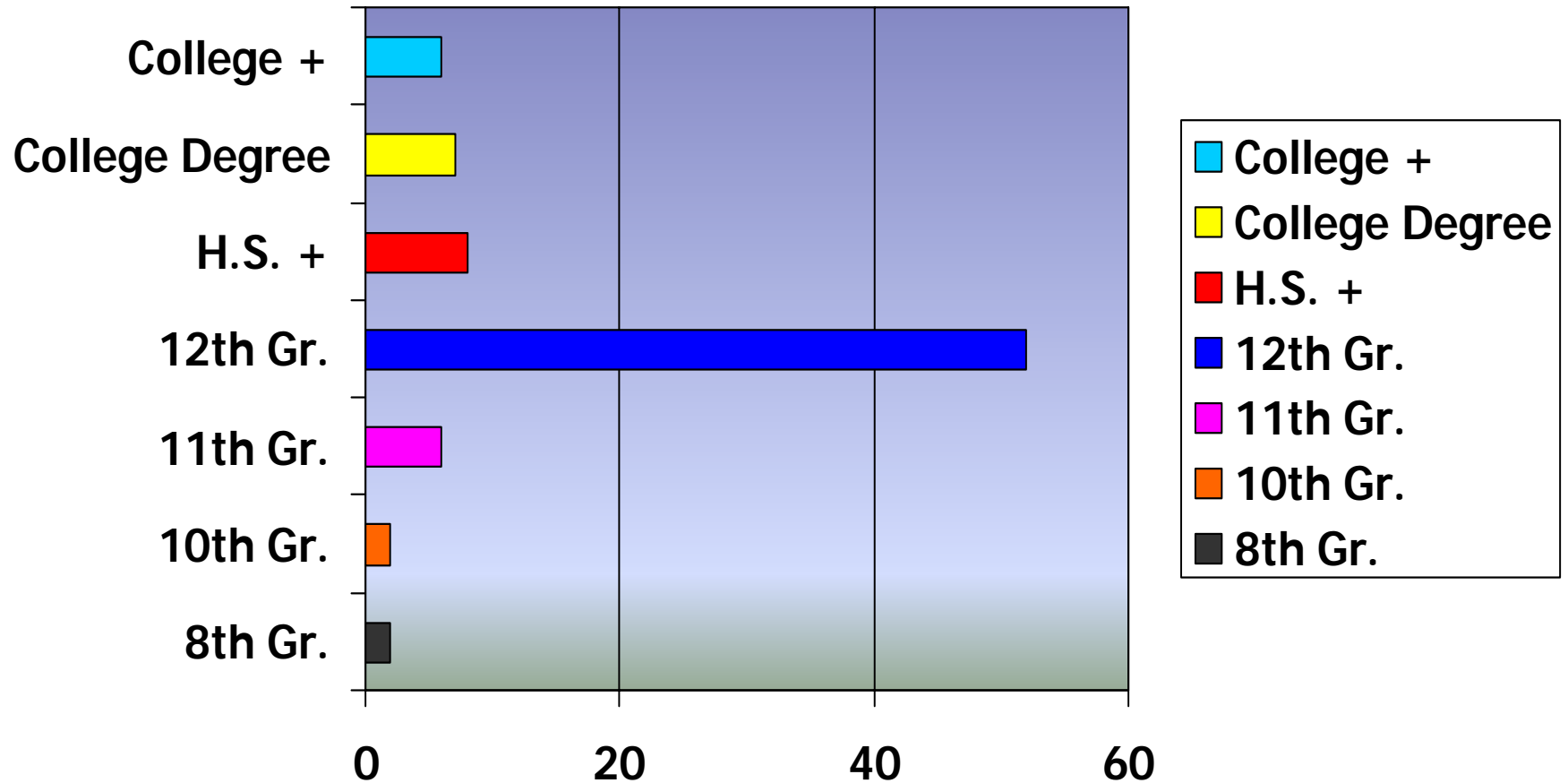




Demographics

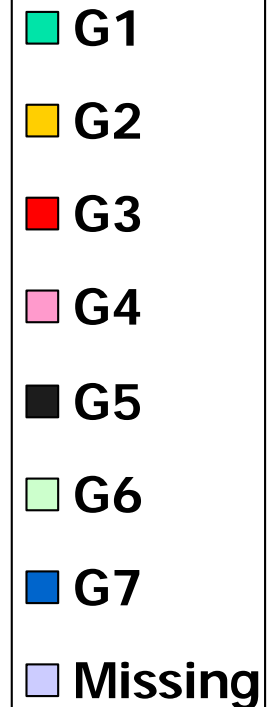
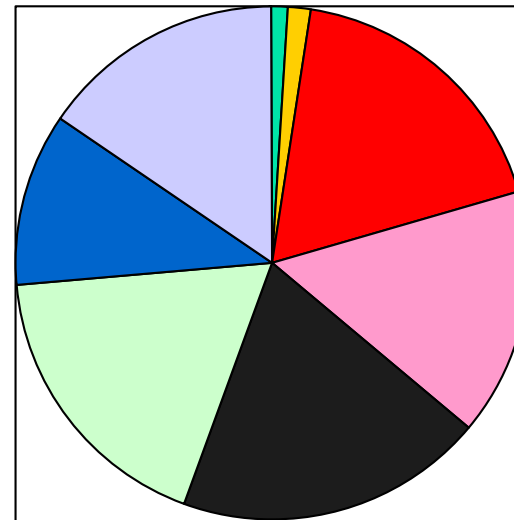
- Average age: 73 years, with the youngest being 41 and the oldest 99 years of age
- 80% of respondents were female
- 98.8% of respondents were Caucasian and 1.2% Hispanic
- 48.2% were married
 - 4.8% were remarried
 - 4.8% were divorced/separated
 - 42.2% were widowed

Education Level



Income

- G1: \$2,500 - 4,999 - 1.2%
- G2: \$5,000 - 9,999 - 1.2%
- G3: \$10,000 - 19,999 - 18.1
- G4: \$20,000 - 29,999 - 15.7%
- G5: \$30,000 - 39,999 - 19.3%
- G6: \$40,000 – 49,999 – 18.1%
- G7: \$50,000 or more – 10.8%
- Missing 15.7%





Depression

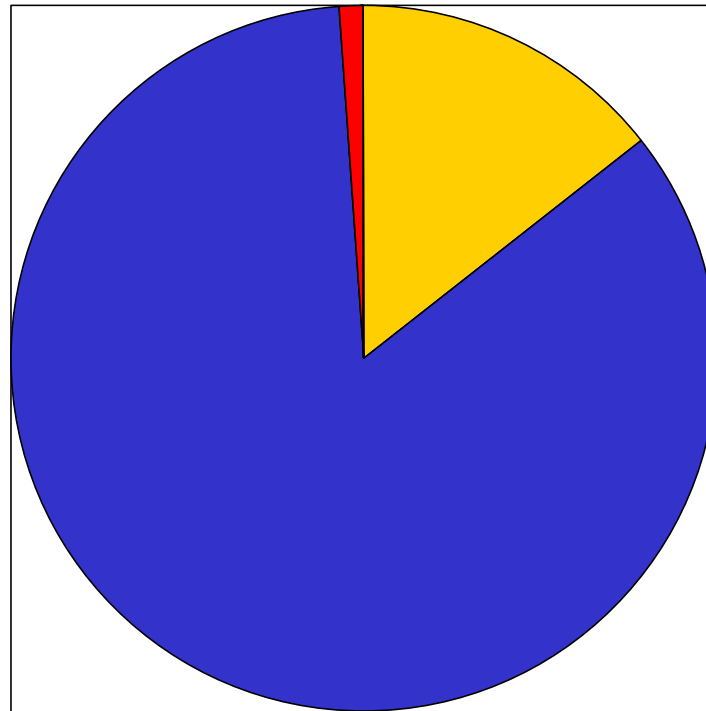
- The responses to the eleven questions in the Durham GRECC scale:
 - 19.3% of respondents were bored
 - 33.7% were restless
 - 84.3% were in good spirits
 - 18.1% had difficulty with memory
 - 9.6% had problems with concentration
 - 15.7% avoided social gatherings
 - 15.7% felt “blue”
 - 89.2% felt “happy”
 - 12.0% felt helpless
 - 2.4% felt ashamed or worthless
 - 1.2% wished they were dead



Depression (cont.)

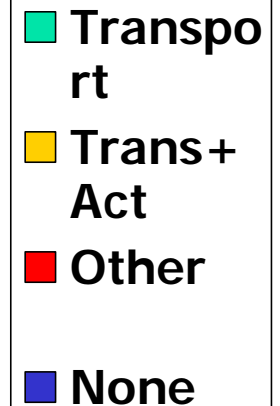
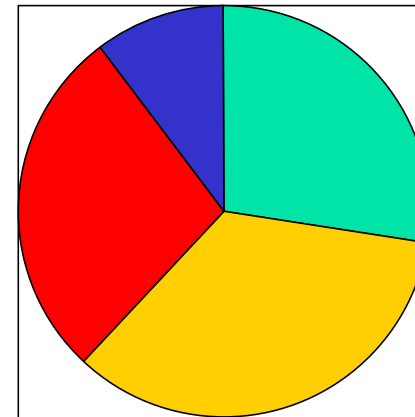
- In order for an individual to be considered clinically depressed, they would have had to answer positively to 4 or more of 11 questions.
- 15.7% of the respondents are potentially clinically depressed (12 of 82 individuals answered 4 or more questions positively)

Depression (cont.)



Suggestions for other activities

- Only 35%, or 29 individuals responded to this question
- The response of “other” included suggestions such as book clubs, card clubs, group outings





Topics to Learn More About

- Alzheimer's Disease, Chronic Obstructive Pulmonary Disease, Congestive Heart Failure, Depression, and Diabetes were among the top responses



Conclusion

- In comparing those individuals who were potentially depressed to other variables such as income, education, number of illnesses, and support members, I was unable to find any positive correlations between any of the variables and an individual's depression score.
 - This was surprising to me in that most studies show a correlation between income, education, # of pre-existing illnesses and depression.
 - Also, other studies show an increased rate of depression in the elderly, especially the rural elderly, and I was unable to find a similar correlation in my study.
 - However, the small sample size of my study must also be taken into consideration. And that the surveys were distributed at the local pharmacy, clinic and churches, and if someone is truly depressed they are less likely to frequent such locations.