

Neighborhoods can have depressing effect on health, study

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Daniel Russell, a professor of human development and family studies; and Carolyn Cutrona, professor and chair of psychology, husband and wife, have been collecting data from the Family and Community Health Study -- an ongoing study of 800 African American families that started in 1997. Half of the study's sample lives in Iowa and the researchers have been tracking those families on a large map. Photo by Bob Elbert, ISU News Service

(PhysOrg.com) -- The nation's poverty rate climbed to 14.3 percent -- the highest level since 1994 -- according to the Census Bureau's annual report on the economic well-being of U.S. households. That means one in seven Americans now live in poverty, and that may have an especially depressing effect on people living in bad neighborhoods, according to two Iowa State University researchers.

Daniel Russell, an Iowa State professor of human development and

family studies; and Carolyn Cutrona, professor and chair of psychology, presented "Stressful Effects of Where You Live: Studying the Influence of Neighborhood Context Over Time," in August at the World Conference on Stress and Anxiety Research in Galway, Ireland. Their presentation summarized data taken from the Family and Community Health Study (FACHS), an ongoing ISU study of 800 African American families -- approximately half living in Iowa and half in Georgia -- that started in 1997.

Russell and Cutrona reported that negative neighborhood infrastructure can keep neighbors from forming [social ties](#). And it's the absence of those social ties that have a small but significant impact on an individual's mental health.

"If you're living in [neighborhoods](#) where there's a lot of crime, gang activities and so forth, you see weaker social ties," said Russell, a noted [loneliness](#) researcher. "One of the things we tried to assess was essentially community support -- to what extent people in that neighborhood turned to others for child care, other forms of assistance -- and whether they socialize and know each other. And it's clear that in these negative neighborhoods there's this inverse relationship in terms of their various problems and lack of strong ties."

The compounding effect of bad neighborhoods

In neighborhoods where social disorder -- or a lack of social ties -- was perceived to be high, the effects on the subjects' perceived personal risk were amplified. The effects of personal risk were muted in neighborhoods with low social disorder.

"The effects of things going wrong in your own life are magnified when you live in one of these negative neighborhoods," said Cutrona, who presented related research this month to staff members for Iowa Sen.

Tom Harkin. "So it affects all of us to have a sick family member, or lose our job, or to be robbed. But when that happens to someone in these neighborhoods, it increases the probability that the person will be diagnosed with a major depressive disorder over the next two years. Yet if the same event happened and you were in a more benign neighborhood, your chances of becoming clinically depressed were less."

Sixty-two percent of the study's participants subsequently moved to different neighborhoods between 1997 and 2005, with the rate of moving from specific neighborhoods ranging from 22 to 90 percent. "Neighborhood cohesion" was identified by subjects as the most desirable characteristic of their new neighborhoods. And people who lived in cohesive neighborhoods were much less likely to move away.

But the ISU researchers found that the lack of racism was the only factor that significantly improved depression among the African American subjects after they moved.

"If the new neighborhood was less racist overall -- not just their perception, but the perception of multiple people who lived in that neighborhood -- then the subjects' moods improved following that move," Cutrona said. "So it was not about moving to a wealthier neighborhood, or even a safer neighborhood, but moving to a less racist neighborhood that impacted depression levels."

Not only representing low income families

The researchers emphasize that the study's sample does not solely reflect perceptions of low income families. Only about 20 percent of the families surveyed were below the poverty line and the sample included a wide range of family incomes, including some families that earned more than \$200,000 per year.

"When we started the study, the average income of this study matched the average income of Iowans," Russell said.

But both Cutrona and Russell agree that it is the low-income subjects living in negative neighborhoods who are most vulnerable to prolonged depression.

"If you have to live in one of these neighborhoods, you may not have the resources for health insurance and good mental health care," Cutrona said. "And you may not have the support around you to say, 'This is depression and it's treatable.'"

Russell reports he and Cutrona have received funding from the National Institute of Mental Health to collaborate with researchers at the University of Iowa and the University of Georgia to study the role of genetic factors and neighborhood environments on depression in the FACHS sample.

Provided by Iowa State University

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