

Stroke survival among seniors better in sociable neighborhoods

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The odds of surviving stroke appear to be much better for seniors living in neighborhoods where they interact more often with their neighbors and count on them for help, according to research published in *Stroke: Journal of the American Heart Association*.

"Social isolation is unhealthy on many levels, and there is a lot of literature showing that increased social support improves not just [stroke](#), but many other health outcomes in seniors," said Cari Jo Clark, Sc.D., lead author of the study and assistant professor of medicine at the University of Minnesota in Minneapolis. "What is unique about our research is that we have taken this to the neighborhood level instead of just looking at the individual."

Clark and colleagues at the University of Minnesota and Rush University in Chicago studied 5,789 seniors (60 percent women, 62 percent black, average age 75) living in three adjacent neighborhoods in Chicago. Researchers interviewed the participants about their neighborhood and their interactions with neighbors. Using the National Death Index and Medicare claim files, they identified 186 stroke deaths and 701 first strokes over 11 years of follow-up. In their analysis, they factored out potential contributing variables such as [socioeconomic status](#) and [cardiovascular risk factors](#) like [high blood pressure](#), smoking, physical inactivity, diabetes and obesity.

The researchers used questions measuring "cohesiveness." They asked how often (often, sometimes, rarely or never) the following occurred in

each neighborhood:

- Do you see neighbors and friends talking outside in the yard or on the street?
- Do you see neighbors taking care of each other, such as doing yard work or watching children?
- Do you see neighbors watching out for each other, such as calling if they see a problem?

They were also asked how many neighbors:

- Do you know by name?
- Do you have a friendly talk with at least once a week?
- Could you call on for assistance in doing something around your home or yard or "borrow a cup of sugar" or ask some other small favor?

For each single point increase in the neighborhood "cohesion" scoring system, survival increased 53 percent.

While stroke incidence didn't differ among neighborhoods, stroke survival was far better for seniors living in "cohesive" neighborhoods, regardless of their gender. However, the benefit was only observed among whites.

"I think this indicates that a positive neighborhood social environment is as important to senior health as stress or even crime, but it is a really

complex issue," Clark said. "Nonetheless, it underscores the positive aspects of close neighbors and neighborhoods, and should help bolster efforts to improve such cohesiveness."

One possible reason for improved survival is that seniors living in closer neighborhoods have others looking out for them who can get help sooner if they start experiencing stroke symptoms. They're also less mobile, and neighborhood conditions may be especially relevant. Recent longitudinal research has also found a significant protective relationship between social support and stroke mortality, but not stroke incidence.

Why seniors in African-American neighborhoods didn't fare as well is unclear and further research is needed, Clark said. "Obviously, a complex set of factors influences health in older adults and we need to be careful drawing conclusions from these data. Other research also has shown that the health protective effects of cohesive neighborhoods may be stronger in whites. We plan to conduct future studies to try to understand these findings."

Provided by American Heart Association

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