

Low-crime, walkable neighborhoods promote mental health in older Latinos

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Older Latinos living in the U.S. who perceive their neighborhoods as safer and more walkable are less likely to develop severe depressive symptoms, and the effect may be long term, a new study suggests.

Researchers examined links between the onset of [depressive symptoms](#) in 570 older Latino adults and various characteristics of the Greater Los Angeles [neighborhoods](#) they lived in, including crime, the availability and quality of sidewalks, traffic safety and aesthetics.

Participants ranged in age from 60 to 90, and 351 of them screened positive for low levels of depression at the outset of the study. When participants were rescreened 12 and 24 months later, a total of 19 (5.4 percent) of those with depression showed elevated symptoms.

However, people who perceived their neighborhoods as low in criminal activity and more walkable were less likely to develop [severe depression](#), according to lead author Rosalba Hernandez, a professor of social work at the University of Illinois.

"Many times we look at individual-level factors or things within the individual's family that contribute to mental health, but here we're seeing it's beyond that - it's the neighborhood and other macro-systems that can impact psychological well-being," Hernandez said.

"If there are neighborhood factors that decrease depressive symptoms, how do we figure out what those factors are and make appropriate

investments, so we can have individuals who are psychologically well and environments that are flourishing?"

Older adults may be especially sensitive to neighborhood climate issues because their limited mobility and physical frailty exacerbates feelings of vulnerability to negative forces in their environments, Hernandez said.

The findings suggest that addressing safety concerns within local neighborhoods enhances the [psychological well-being](#) and quality of life of elderly residents. And providing interventions at the neighborhood and local government levels may be more cost-effective than individual-level therapies, Hernandez said.

"Latinos are going to be the largest ethnic minority very soon, and the aging population in the U.S. is growing as well," Hernandez said. "If we can potentially intervene before all these comorbidities and chronic illnesses converge, we can avert a potential health care crisis.

"We know that depression linked with any kind of chronic illness will just make more issues arise, so how can we target a group that is growing and has many challenges in terms of acculturation, language, socioeconomic status, and the stigmas associated with depressive symptoms?" Hernandez said.

Research has shown that older Latino adults in the U.S. are at greater risk of [depression](#), but cultural barriers prevent many of them from seeking [mental health care](#).

Moreover, they are more likely to live in neighborhoods with higher crime rates and unsafe parks, discouraging both outdoor recreation and walking to nearby social activities that promote [mental health](#). Many of the people in this demographic group also live in poverty and lack health insurance.

All of the people in the study, who lived in the Greater Los Angeles area, were participants in "¡Caminemos!", a two-year research trial that promoted exercise and taught participants that being sedentary was not a natural consequence of aging.

A paper about the study was published online recently by the *Journal of Aging and Health*.

More information: The paper, "The Cross-Sectional and Longitudinal Association Between Perceived Neighborhood Walkability Characteristics and Depressive Symptoms in Older Latinos: The '¡Caminemos!' Study" is available [online](#) from Sage Publications.

Provided by University of Illinois at Urbana-Champaign

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