

Social support may lower American Indians' risk of cardiovascular disease, death

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Improving social support and connectedness could not only lower depression symptoms but also help reduce cardiovascular disease and death in older American Indians, according to a new analysis.

Led by scientists at Washington State University, the study used longitudinal data to explore the link between various psychological factors—such as stress, anger, cynicism, depression symptoms, quality of life and social support—and risk of cardiovascular events and death. The researchers found higher rates of heart disease and death in participants who reported depression symptoms, poor quality of life and social isolation. However, social support appears to mitigate that risk at least partially by lowering cynicism and anger, which the researchers identified as being linked to depression.

"Social support changes the association between depression and mortality in older American Indians, who face much higher mortality rates from [cardiovascular disease](#) as well as higher rates of depression symptoms than the [general population](#)," said lead author Astrid Suchy-Dicey, a researcher with the WSU Institute for Research and Education to Advance Community Health (IREACH) and an assistant professor in the WSU Elson S. Floyd College of Medicine.

As part of their analysis, which was published in the journal *Social Psychiatry and Psychiatric Epidemiology*, the researchers estimated the degree to which social support can change the effects of depression. They found that [social isolation](#) and social criticism added to the effect of depression on mortality, accounting for 15% and 11% of the effect, respectively. On the other hand, instrumental social support—the kind of practical support that may take the form of a ride to a medical appointment or help grocery shopping—reversed the effect of depression, contributing to about 9% of the total effect on mortality.

"Our findings suggest that programs that provide social support and promote companionship should be explored to see if they could potentially lower American Indians' risk of [depression](#) and cardiovascular disease and lead to an extended lifespan," Suchy-Dicey said. "This may be especially important for individuals living in rural or

[remote areas](#) who have a greater dependency on fewer people for their social connections."

She said their findings may also be applicable to other populations that live in rural areas or face similar socioeconomic pressures, such as other minority groups or indigenous people living in [rural areas](#) in other countries.

The study was based on data from 2,786 middle-aged American Indians who participated in the Strong Heart Family Study, an expansion of the long-running Strong Heart Study that looked at cardiovascular disease risk in Native people living in the Southwest and the Northern and Southern Great Plains. Participants included in the analysis enrolled between 2001 and 2003 and were followed through 2017.

The researchers are in the process of conducting a follow-up study in 3,000 older American Indians to get a more detailed look at [social support](#) and other factors that may protect against risks of cardiovascular disease and mortality, such as cultural identity, alignment and participation. Their next step would be to design and test an intervention that improves [social support](#) to see if it could help reduce cardiovascular disease-related health disparities in older American Indians.

In addition to Suchy-Dicey and her WSU colleagues, the research team for this study also included investigators from the Strong Heart Study, the University of Colorado Denver and the University of New Mexico.

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More information: Suchy-Dicey, A. et al. Psychological and social

support associations with mortality and cardiovascular disease in middle-aged American Indians: the Strong Heart Study, *Soc Psychiatry Psychiatr Epidemiol* (2022). doi.org/10.1007/s00127-022-02237-7

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