

# Ties that bind: Social relationships and emotional well-being among middle aged and older African American adults

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## Social ties and health

- ▶ Social relationships associated with morbidity and mortality
- ▶ Few studies examine quality of relationships and health
- ▶ Most studies focus on social ties and health of older adults
- ▶ Need more studies with life-course perspective and with minorities

3

## Emotional Health & African Americans

### African Americans:

- ▶ Report more stress than Whites
- ▶ But less depression
- ▶ Less likely to have depression diagnosed
- ▶ Less likely to discuss depression with providers
- ▶ Report lower QOL and worse physical health
- ▶ Have more chronic illness

4

## Background – African American Social Networks

- ▶ Highly interdependent family structure
- ▶ Often multiple generations live together
- ▶ Less likely to be married
- ▶ Families provide social support but may expect a high degree of reciprocity
- ▶ Extended families may include non-kin and church family

5

## Other factors influencing emotional health of African Americans

- ▶ Caregiving
- ▶ Structural & environmental factors (e.g. discrimination; unemployment; neighborhood challenges)
- ▶ Other social engagement: volunteering, church

6

## Purpose of this study

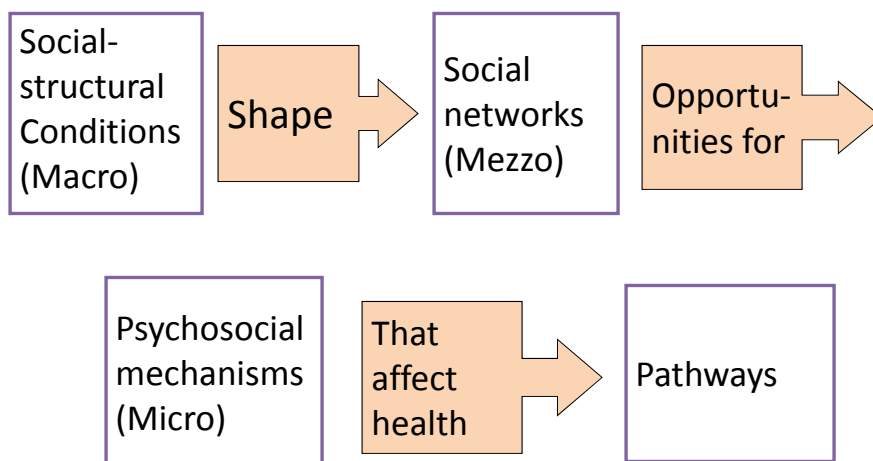
### To examine:

- ▶ Association between relationship type, frequency, and quality with self-rated emotional health
- ▶ Effects of social ties and discrimination with respect to emotional health

7

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### Conceptual Model of how social networks affect health, modified from Berkman et al., 2000



8

## Slide 8

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Most people will wince and whine if you show them an unreadable slide. We don't think it is adequate to say, "I know you can't read this but"...really makes a speaker look bad.

Besides, you don't have time for all the teensy details...you could just mention the most important of the ones that I deleted.

jladitka, 10/29/2010

## Methods

- ▶ Data: MIDUS II–Midlife Development in the US, 2005–2006
- ▶ Milwaukee African American sample (n=592)
- ▶ Sample stratified by SES using census tracts

9

## Methods: Measures

- ▶ Outcome, self-rated emotional health:
  - “good” to “excellent” (better SREH)
  - “poor” or “fair”
- ▶ Social support, level of:
  - family support
  - family strain
  - friend support
  - friend strain

10

## Control Variables

- ▶ Individual factors
  - Social demographic:
  - Age
  - Gender
  - Household income per person
  - Education
  - Health insurance
- ▶ Health Factors
  - Self-rated physical health
  - Current smoking

11

## Control Variables

- ▶ Structural factors
  - Types of daily and lifetime discrimination
  - Employment status
  - Neighborhood
- ▶ Social engagement factors
  - caregiving
  - volunteering

12

## Sample characteristics (n=569)

- ▶ Mean age 51.7 (SD 11.9, range 35–85)
- ▶ 62.6 % Female
- ▶ Mean daily types of discrimination events experienced was 2.2 (SD 2.6)
- ▶ 83.5% report good to excellent emotional health
- ▶ 65.6% report good to excellent physical health

13

### Social Ties Associated with Self-rated Emotional Health in African American Adults

|                             | Odds Ratio | 95% CI    | P-Value |
|-----------------------------|------------|-----------|---------|
| Spouse/partner (1=yes)      | 0.54       | 0.28-1.04 | 0.063   |
| Frequency of family contact | 1.13       | 0.48-2.64 | 0.780   |
| Family strain               | 0.92       | 0.62-1.37 | 0.691   |
| Family support              | 2.06       | 1.33-3.19 | 0.001   |
| Frequency of friend contact | 1.18       | 0.53-2.65 | 0.687   |
| Friend strain               | 1.00       | 0.67-1.51 | 0.986   |
| Friend support              | 1.39       | 0.95-2.06 | 0.094   |

14



| <b>Secondary Factors Associated with Better Self-Rated Emotional Health</b> |                   |                   |                  |
|---|-------------------|-------------------|------------------|
|   | <b>Odds Ratio</b> | <b>95% CI</b>     | <b>P-Value</b>   |
| <b>Daily discrimination events</b>  | <b>0.84</b>       | <b>0.74-0.95</b>  | <b>0.007</b>     |
| <b>No job/retired</b>   | <b>0.30</b>       | <b>0.13-0.71</b>  | <b>0.006</b>     |
| <b>Caregiving</b>   | <b>0.43</b>       | <b>0.21-0.89</b>  | <b>0.022</b>     |
| <b>Volunteering</b>   | <b>2.40</b>       | <b>1.15-5.02</b>  | <b>0.020</b>     |
| <b>Good self-rated physical health</b>                                      | <b>7.53</b>       | <b>4.04-14.05</b> | <b>&lt;.0001</b> |
| <b>Gender (1=woman)</b>   | <b>0.32</b>       | <b>0.15-0.66</b>  | <b>.002</b>      |

15

## **Discussion**

- ▶ Only emotional support from family was associated with better SREH
- ▶ Consistent with previous research, daily discrimination was negatively associated with emotional health
- ▶ Emotional support from family reduces negative effect of daily discrimination (buffering of stress)

16

## Strengths

- ▶ Relatively large sample of African Americans
- ▶ Validated measures
- ▶ Able to examine effects of family and friends separately
- ▶ Able to examine effects of support and strain separately

17

## Limitations

- ▶ Mostly female
- ▶ Unable to fully examine role of marital support (only 38% married/partnered)
- ▶ Limited to a northern urban environment
- ▶ Discrimination measures assessed types of events, not number of occurrences
- ▶ Cross-sectional design prevents conclusions about causality

18

## Conclusions

- ▶ Qualitative research is needed
- ▶ Asking about African American patients' emotional support may be useful
- ▶ Clergy and other professionals working with African American communities should communicate importance of social ties

19

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20

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21

## Questions?

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22