COPING WITH CHRONIC STRESS BY UNHEALTHY BEHAVIORS: A RE-EVALUATION AMONG OLDER ADULTS BY RACE/ETHNICITY

EJ Rodríguez, PhD, MPH1; SE Gregorich, PhD1; J Livaudais-Toman, PhD1; EJ Pérez-Stable, MD2
1 Center for Aging in Diverse Communities, Division of General Internal Medicine, UCSF
2 National Institute on Minority Health and Health Disparities, National Institutes of Health

BACKGROUND
- Several potential mechanisms exist that explain the use of unhealthy behaviors to cope with stress
- Depression higher among Latinos, yet comparable between African Americans and Whites
- Past research has suggested that older African Americans engage in unhealthy behaviors to cope with stress and subsequently prevent depression

AIM & HYPOTHESES
- Aim: To assess the role of unhealthy behaviors in the relationship between chronic stress and depressive symptoms among African American, Latino, and White older aged adults
- Hypotheses: Engaging in ≥1 unhealthy behavior(s) (1) weakens the relationship between chronic stress and depressive symptoms for older African Americans and (2) strengthens this relationship for older Latinos

DATA SOURCE
- 2006-2008 Health and Retirement Study
- 6,479 adults >50 years old: 843 African Americans, 494 Latinos, and 5,142 Whites

EXPLANATORY MEASURE
- Chronic stress: (1) ever threatened/harassed, (2) ever had a life-threatening illness, (3) ever had an accidental injury, (4) moving to a worse residence/neighborhood in last 5 years, (5) losing a job involuntarily in last 5 years, (6) robbed/burglarized in last 5 years, (7) any other upsetting event in last 5 years, (8) helped a sick/limited/frail family member/friend regularly in last year, and (9) an injury/sudden crisis/health problem in last year

OUTCOME & COVARIATES
- Depressive symptoms in 2008: 8-item, short-form Center for Epidemiologic Studies Depression (CES-D) scale
  - ≥4 defined significant symptoms
- Covariates: age, gender, highest level of education, and depressive symptoms in 2006

SAMPLE CHARACTERISTICS
<table>
<thead>
<tr>
<th>Characteristics</th>
<th>African Amer.</th>
<th>Latino</th>
<th>White</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depressive symptoms*</td>
<td>(21)</td>
<td>(31)</td>
<td>(17)</td>
</tr>
<tr>
<td>Stress</td>
<td>1.44</td>
<td>1.42</td>
<td>1.40</td>
</tr>
<tr>
<td>Unhealthy Behaviors*</td>
<td>0.84</td>
<td>0.67</td>
<td>0.64</td>
</tr>
<tr>
<td>Smoking*</td>
<td>(24)</td>
<td>(12)</td>
<td>(14)</td>
</tr>
<tr>
<td>Drinking*</td>
<td>(13)</td>
<td>(14)</td>
<td>(22)</td>
</tr>
<tr>
<td>Obese*</td>
<td>(47)</td>
<td>(41)</td>
<td>(30)</td>
</tr>
</tbody>
</table>

Note: Amer. = American; * statistically significant

RESULTS
- MODELS WITHOUT INTERACTION TERMS
  - Adjusted for depressive symptoms in 2006 and all others
  - Increased risk of depressive symptoms for older White smokers and mildly obese older Latinos

- MODELS WITH INTERACTION TERMS
  - Unhealthy behavior index strengthened the relationship between chronic stress and depressive symptoms among older Latinos
  - No significant interactions between chronic stress and any individual unhealthy behavior

CONCLUSIONS
- Results do not support past findings of coping with stress using unhealthy behaviors to prevent depression
- In the presence of chronic stress, Latino older adults who engage in increasingly more unhealthy behaviors are at increased risk of significant depressive symptoms
- Limitations: Couldn’t assess clinical depression, chronic stress and unhealthy behaviors assessed at same time point, only two years between baseline and follow-up assessments, and studied only adults ≥50 years old
- Future work: assess allostatic load and change in unhealthy behaviors between time points, focus on Latinos

ACKNOWLEDGEMENTS
Clinical and Translational Science Institute (A119683), Resource Centers on Minority Aging Research (P30 AG15272), Cancer Education and Control Development Program (R25 CA113710), and National Latino Cancer Research Network (U01 CA86117, U54 CA153511)