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Prevalence of Depression among Older Arab Individuals in the Middle East: A Study of Egypt and Jordan

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Background: This quantitative study attempted to describe levels of health, mental health, and depression among older Arab people, age 60 and over, and examine the factors that best impact an individual's levels of depression.

Methods: A sample of 165 participants age 60 years old and over were recruited in both Jordan (n=65) and Egypt (n=100). All participants received and completed a self-administered survey measuring demographic and personal characteristics and these standardized measures: the Center for Epidemiologic Studies Depression Scale (Orme, Reis & Herz, 1986), IOWA Self-Assessment Inventory (Morris & Buckwalter, 1988), Multidimensional Health Locus of Control Scale (Wallston, Wallston, & DeVellis, 1978), and the Geriatric Scale of Recent Life Events (Kiyak, Liang, & Kahana, 1976). The survey was translated to Arabic and back-translated to English to ensure consistency.

Results: Participants in this study were majority female (62.4%), married (58.2%), and unemployed (81.8%). Their ages ranged between 60 and 90 years old (Mean=71, SD=7.59). Furthermore, about one-third had no formal education (34.5%), while the remaining could read and write (28.5%), had two years of college/associate's degree (28.5%), or an undergraduate degree (8.5%). The results also show that 84.2% of participants reported a score of 16 and above, thus indicating a high depressive symptoms based on the CESD (Mean=24.91, SD=9.54, Range=0-60).

Furthermore, the results of a factorial ANOVA show significant differences in levels of depression based on gender [$F(1, 161) = 4.18, p < .05$] and marital status [$F(1, 161) = 7.22, p < .01$]. Male and married participants reported significantly lower depression compared to females and unmarried participants, respectively. Finally, the results of a stepwise multiple regression analysis show that depression was a function of four predictors ($F=12.27, p < .001$). These include emotional balance ($\beta = -.28$), internal health locus of control ($\beta = .29$), gender ($\beta = -.17$), and negative life events ($\beta = .17$). Overall, these factors accounted for 24% of the variance in depression ($R = .49$).

Discussion: The results of this study are alarming. They show a significantly high percentage of older Arab individuals suffering from high depressive symptoms that require immediate follow-up and perhaps clinical intervention. These results also revealed four factors as significant predictors of depression among this population. These findings could assist clinicians and mental health professionals in planning effective mental health intervention strategies tailored toward older people. However, a larger systematic study in a broad representative sample of Middle Eastern Arab senior adults is needed to further validate these findings. Further implications will be discussed.

References

- Kim-Goh, M. (2006). Correlates of depression among the Soviet Jewish immigrant elderly, *Journal of Human Behavior in the Social Environment*, 13 (2), 35-47. https://doi.org/10.1300/J137v13n02_03
- Kiyak, A., Liang, J., & Kahana, E. (1976). A methodological inquiry into the schedule of recent life events. In D. J. Mangen & W. A. Peterson (Eds.) *Research instruments in social gerontology, 1: Clinical and social psychology*. Minneapolis, MN: University of Minnesota Press.
- Morris, W. W., & Buckwalter, K. C. (1988). Functional assessment of the elderly: The Iowa self-assessment inventory. In C. F. Waltz & O. L. Stricklan (Eds.), *Measurement of nursing outcomes, volume one, measuring client outcomes* (pp. 328-351).
- Orme, J. G., Reis, J., & Herz, E. J. (1986). Factorial and discriminant validity of the center for epidemiological studies depression (CESD) scale. *Journal of Clinical Psychology*, 42(1), 28-33. [https://doi.org/10.1002/1097-4679\(198601\)42:1<28::AID-JCLP2270420104>3.0.CO;2-T](https://doi.org/10.1002/1097-4679(198601)42:1<28::AID-JCLP2270420104>3.0.CO;2-T)

- Wallston, K. A., Wallston, B. S., & DeVellis, R. (1978). Development of the multidimensional health locus of control (MHLC) scales. *Health Education Monographs*, 6(2), 160-170. <https://doi.org/10.1177/109019817800600107>
- World Health Organization. (2010). Depression. Retrieved August 12, 2010, retrieved from http://www.who.int/mental_health/management/depression/definition/en/
- Zisook, S., & Downs, N.S. (1998). Diagnosis and treatment of depression in late life. *Journal of Clinical Psychiatry*, 59, Suppl 4, 80-91.