

Editorial

Depression and Aging: Role of Social Support

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Special Issue: [Depression and Aging: Role of Social Support](#)

OBM Geriatrics

2019, volume 3, issue 1

doi:10.21926/obm.geriatr.1901042

Received: March 25, 2019**Accepted:** March 26, 2019**Published:** March 28, 2019

Keywords

Depression; aging; social support

Depression is a serious mood disorder associated with persistent feelings of sadness, loss of interest and pleasure in daily activities [1]. In addition to feelings of hopelessness, and low self-worth, individuals suffering from depression may experience poor sleep patterns, fatigue, excessive catastrophizing, interference with their daily activities, and appetite loss [1].

These symptoms, which may occur independently, or in reaction to the persistent presence of other illnesses, and/or adverse life events and losses, including mobility losses, can all influence the extent of suffering and disability as well as life quality associated with aging. Fortunately, depression can be reasonably well-diagnosed by taking a careful history, and by applying one or more validated scales to examine if indeed the individual is depressed, and if so, how severe the condition is.

However, even though research shows severe forms of depression affect 2-5% of the United States population, and up to 20% may suffer from milder forms of the illness, especially after 70 years of age [2], or if they suffer from medical problems, and/or chronic disabling pain, measures



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are not commonly put in place to identify depression, nor to treat the prevailing depression expected to prevail in older people in a holistic or integrated way. In particular, those suffering from severe depression [3], as well as those with more minor depression are not always evaluated for the important role of social support in moderating or mediating or offsetting the presence of depression.

Indeed, while the onset of depression may be genetic in origin, vulnerability towards depression may be increased by stress, loneliness, and isolation, among other factors, such as pain and chronic disability [4, 5]. Since the treatments available for depression are not always efficacious, even if the condition is recognized, and unrelieved depression can be extremely injurious to the individual, efforts to prevent or ameliorate this condition among older adults are not only highly sought, but are of increasing importance in fostering successful aging. Alternately, in addition to a lower than desirable life quality, a failure to adequately attenuate depression among the elderly is strongly associated with a greater the risk of incurring a premature death, higher rates of inflammation, appetite changes, increased blood pressure, memory challenges, excess pain, a decreased desire for physical activities, weakness, trouble sleeping, anxiety, social withdrawal, and higher rates of osteoporosis, among other factors [2], including the overuse of existing health services.

Since depression is one of the most important predictors of health practitioner visits [5, 6], and can lead to suicide, as well as considerable physical, and social disability, minimizing, preventing or treating depression is strongly indicated among the older population. As well, given the fact that many elderly people live in poverty, and social adversity complicates the management and treatment of depression, through its impact on social network factors, interventions that can address depression as well as related social problems that exacerbate this are strongly indicated [6].

Social support, which is a term referring in part to the availability of help from others, if help is desired, as well as feelings or beliefs one is cared for, loved, esteemed and valued, a strong health determinant [7] is found to impact depression negatively and adversely, if this is unavailable or of poor quality. Key forms of social support, which are emotional, appraisal, informational and instrumental support [7], if mobilized appropriately are independently and collectively linked to being a stress buffer, can arguably influence overall wellbeing, and health outcomes positively and significantly. Alternately, the lack of adequate social support is linked to higher levels of depression than not, and may reflect a lack of psychological and material resources, as well as direct assistance and feedback by others, limitations in access to needed social services, counselling, psychotherapy, medications, cognitive behavioural therapy, and exercise opportunities.

Conversely, research points to the positive value of the application of one or more forms of social support in the context of either direct assistance, indirect assistance, tangible and intangible aspects of support in efforts to impact physical as well as mental health, as well as health behaviors positively and significantly.

Unsurprisingly, Nam et al. [8] identified social support as an important variable not only for older adults with chronic illness who lived alone, but for those with symptoms of depression, who may also suffer from suicidal ideation, a finding supported by Koizumi et al. [9]. Olagunju al. [10] argued that considering the burden of depression in the elderly and the influential roles of social support especially from family and significant others on depression; strengthening of informal

social support and formal social support for the elders is advocated. In addition, design of community based geriatric mental health with social services and articulation of public policy to address old age needs are implied both by this group and Nagoor et al. [11].

Geriatric depression is a mental and emotional disorder affecting many older adults, that results in trouble concentrating, hopelessness, feelings of worthlessness, reduced motivation, decreased drive and reward for pleasurable activities, too much or too little sleep, doom and suicidal thoughts. Depression in older adults can hence reduce quality and years of life, especially if social support and the provision or development of a supportive environment or atmosphere is unavailable or perceived to be negative. Conversely, although late life depression is associated with a significant burden of disease [6], including the perception of inadequate received social support [12], the careful design of formal and informal social supports may prove helpful in alleviating the depression burden [10].

In the belief that concerted efforts to examine the role of social support in the context of geriatric depression, functional disability [13-15], this special edition focuses on the role of social support in explaining the burden of depression and its relationship and its amelioration, a relatively underreported topic.

Articles of any genre concerning the importance of social support in preventing and treating geriatric depression and its correlates are specifically sought.

Author Contributions

The author did all the works.

Competing Interests

The author has declared that no competing interests exist.

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