

ORIGINAL ARTICLE

Offspring and the frequency of intergenerational contacts influence depression among elderly

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ABSTRACT

Aim of the study

To evaluate the impact of intergenerational contact frequency and number of offspring on the prevalence of depression.

Material- Methods

The impact of intergenerational contact frequency and number of offspring on the prevalence of depression was tested among 159 healthy subjects (62 men and 97 women) ageing between 60 and 94 years. Depressive disorder was tested by mean of the geriatric depression scale, data regarding reproductive history and intergenerational contact frequency were collected by structured interviews. 12.1% of the male and 12.2% of female probands suffered from mild depression.

Results

Intergenerational contact frequency and the number of offspring were significantly related with depression. Depressive persons had more children and grandchildren and the depression score was negatively associated with the number of offspring. Furthermore the frequency of intergenerational contacts was significantly associated with the diagnosis of depression and the depression score. Non depressive subjects had significantly more intergenerational contacts per month than their depressive counterparts.

Conclusions

These results plead for a significant influence of offspring on the quality of life during old age and are positive for a direct connection with depression.

Key words: aged, depression, intergenerational relation, psychology, adjustment disorders

INTRODUCTION

Longer life expectancy coupled with a dramatic decline in the birth rates has resulted in rapidly ageing populations in most parts of the world. This is especially true in Europe, where this trend is projected to continue for the next decades. The phenomenon of

population ageing has predominantly been investigated with a view to demographic and socioeconomic variables. This kind of research has been motivated by a sense that existing public health policies must be changed in order to cope successfully with the projected ageing of the global population.¹ Population ageing however is not only a social or economic challenge; it represents also a biomedical and psychosocial problem.^{2,3,4} Besides, well documented somatic-morphologic impairments such as osteoporosis,^{5,6} sarcopenia, degenerative arthritis, metabolic symptoms or tooth loss, cause age induced psychosocial problems, as loneliness and consequent depression, which contribute to the well described reduction of well being and poor health among old aged people. Although major depression among elderly is less common in younger ages,⁷⁻¹⁰ depression is the most prevalent mental disorder among the elderly.^{11,12} The high prevalence of depression during old age has been recognized as an important public health concern around the world.^{13,14}

Depressive illness can manifest as mild or severe depression characterized by a collection of symptoms ranging from atypical manifestations like fatigue, to a fully diagnosable condition with a greatly increased risk for suicide.¹⁵ Although depression is not only the commonest but also the most reversible mental health problem in old age,¹⁶ it is projected that depressive illness during old age will be the second leading cause of disability world wide in 2020.¹⁷ Therefore depression during old age is sometimes mentioned as a natural aspect of ageing in humans.¹⁸⁻²¹ Depressive symptoms among elderly are associated with somatic impairment as well as with various socioeconomic factors, such as gender, educational level, income and marital status.²²⁻²⁹

One special problem which may lead to depressive disorders is loneliness and a lack of social contacts. International research has consistently shown that lack of social support is associated with increased morbidity and mortality during old age, while companionship, social activity and social support are essential for maintaining mental health and general well being in old age.³⁰⁻³³ A controversial factor is parenthood. Some studies plead for significant effects of parenthood or childlessness on subjective well being and health among elderly, while in contrast other studies found no differences in mental health and subjective well being between parents and childless persons during old age.³⁴⁻³⁹ This may be due to the fact that a comparison between childless elderly and parents of the same age group gives no information about interge-

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