For Older African Americans, Depression Diagnoses and Treatment Disparities Persist

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Each year, 6.6 percent of elderly Americans suffer a bout of major depression, a mental disorder that's bad for both emotional and physical health. But for black seniors, ethnicity may affect whether they'll be diagnosed with or treated for the illness, according to a Rutgers University study published in the American Journal of Public Health.

For the study, researchers reviewed data on 33,708 Medicare recipients from the U.S. Medicare Current Beneficiary Survey, 2001-2005. Scientists collected information on access to health care, usage and cost of health services, health status, and medical and prescription drug insurance coverage.

Findings showed diagnosis rates for depression were 4.2 percent for African Americans, 6.4 percent for non-Latino whites, 7.2 percent for Latinos and 3.8 percent for others. In addition, researchers also found that African Americans diagnosed with depression were less likely to receive treatment than people of other ethnicities.

The reason? Possibly economic inequities, with non-Latino whites being more likely to have private insurance to cover therapy beyond what Medicare pays for, suggested Ayse Akincigil, PhD, an assistant professor at Rutgers University's School of Social Work, and the study's lead author. "Differences in provider reimbursement may favor increased clinical detection of depression in white patient groups if higher payment rates result in longer visits," she added.

Akincigil also reported other differences between African-American patients and their white peers. Unlike whites, African Americans said they trusted their physicians less and had poorer communication with doctors. What's more, whites also used more antidepressants than African Americans. "We presume they have better access to doctors and pharmacies, and more money to spend on drugs," Akincigil said.

As a way to reduce these differences, study authors concluded that health providers needed to boost efforts to lower the barriers interfering with minority access to adequate mental health care.

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