







# Mental Health of Chinese Elderly and Cultural Specific Approaches

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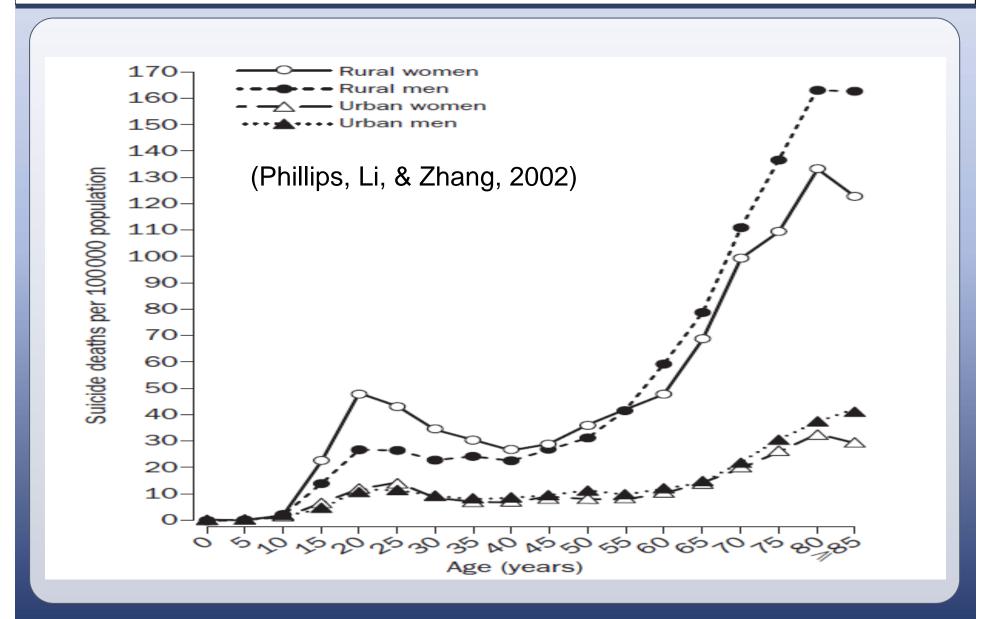
#### **Outline**

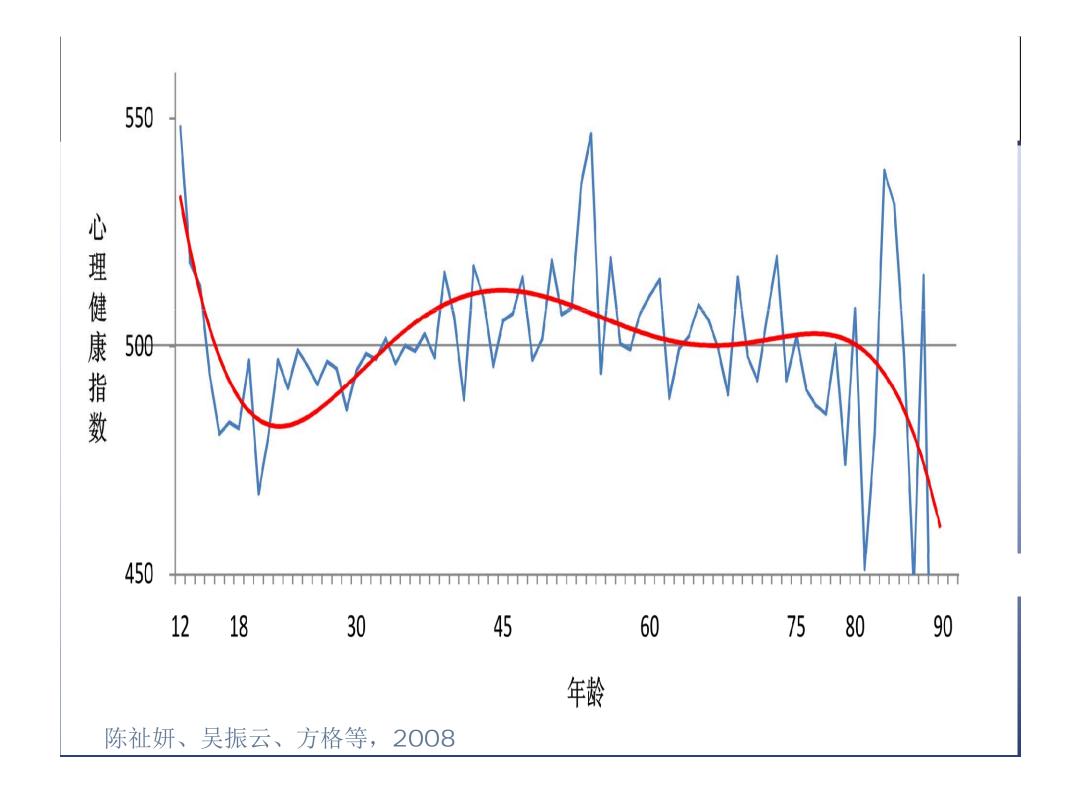


- Mental health of Chinese
  - Life span perspective
    - Suicide rate, Mental health
  - Longitudinal perspective
    - Munsh, GDS, CES-D
- Religion in serving a cultural society
- Conclusion



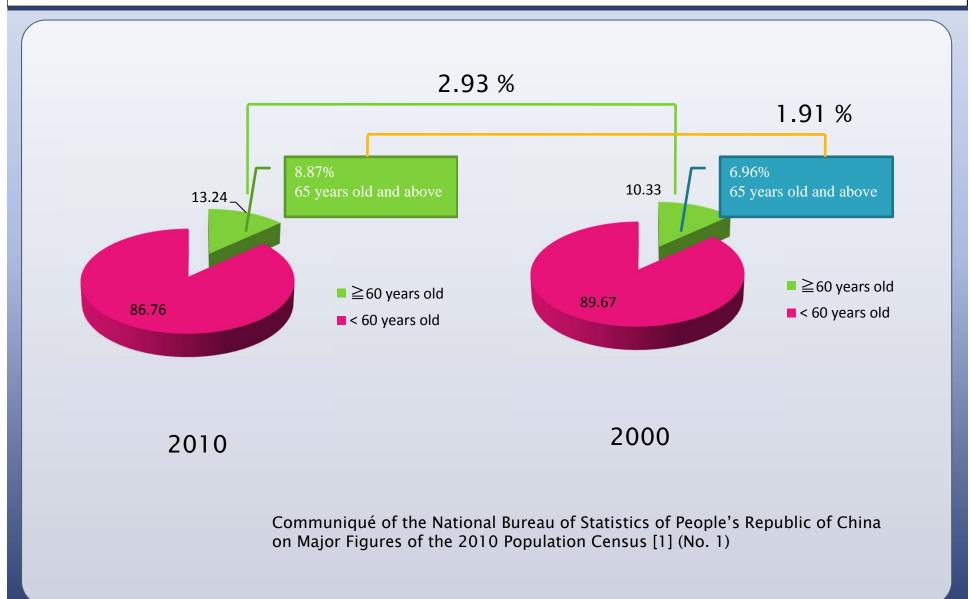
#### Rates of suicide in China (1995-99)





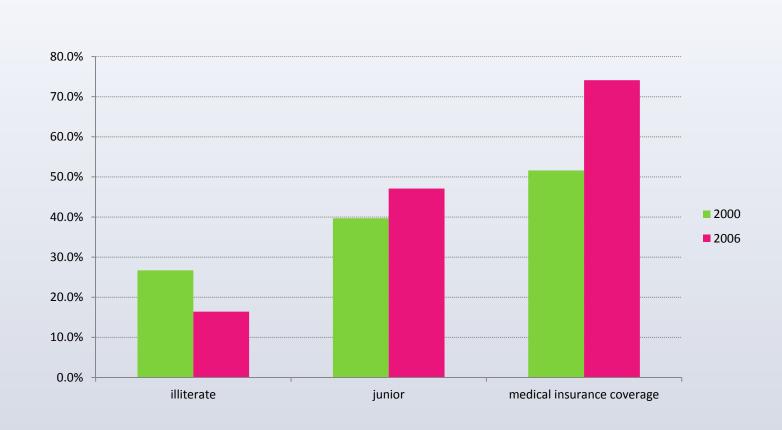
#### The distribution of aging adults in China





#### The social economic status of urban elderly in recent years





National follow-up investigation (2000-2006), China Research Center on Aging

#### **Cross-Temporal Meta-analysis**



- explore the nature of change within a set of variables over a period of time and the possible socioeconomic factors
- 1. select studies using the same measurements
- 2. studies conducted in the same year are merged
- 3. correlation between year and the pooled mean values
- (Twenge, 2000, 2001a, 2001b; Twenge & Campbell, 2001)

#### Number of references



	CES-D	GDS	MUNSH
1980-1997	-	-	5
1998	4	2	-
1999	1	2	1
2000	1	2	3
2001	1	1	_
2002	2	1	1
2003	2	2	2
2004	3	6	4
2005	2	6	2
2006	1	9	6
2007	2	7	4
2008	1	9	4
2009	-	4	2
2010	-	-	_
2011	-	-	-

<sup>&</sup>quot;-" no publication

#### Reference retrieval

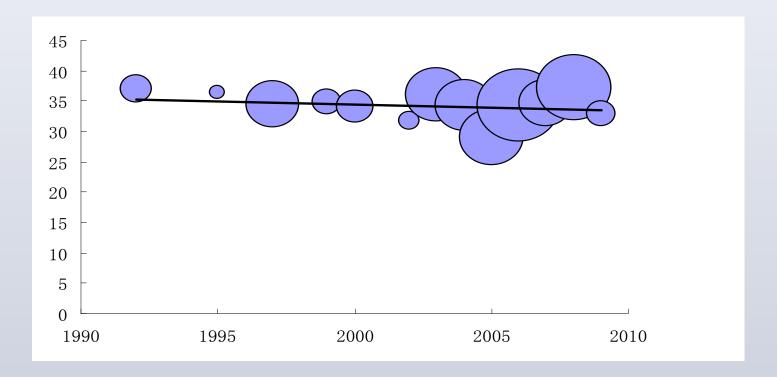


Scales	Data collection	References	Participants
MUNSH	1992–2009	35	17230
CES-D	1998-2008	20	21363
GDS	1998-2009	51	36625

#### **MUNSH**

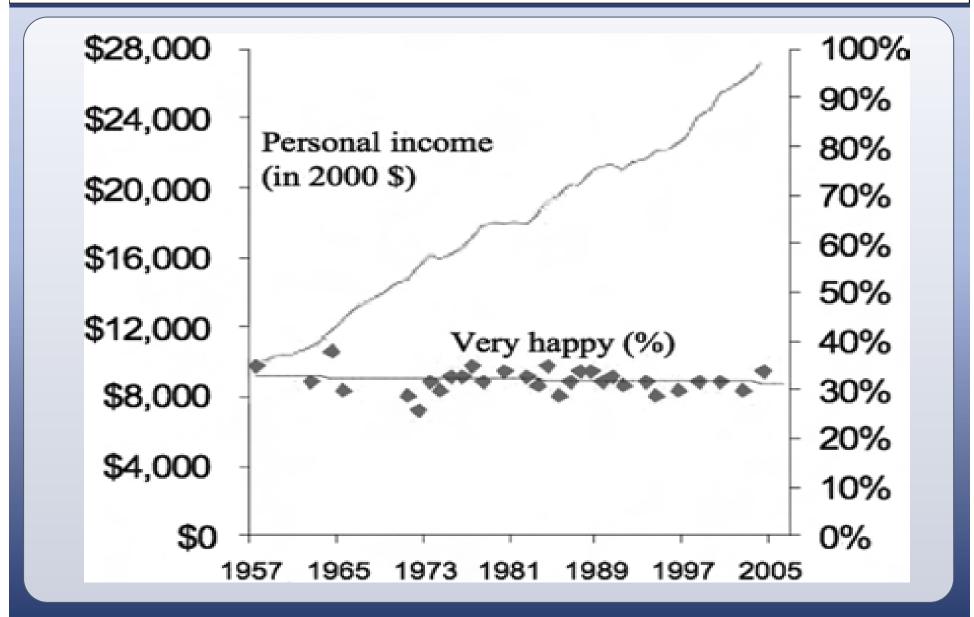


 No significant correlation between the year and mean weighted scores from studies in each year (r = -0.183, p>0.05)



## US Personal Income and Happiness, 1957–2005 (Nelson, 2009)

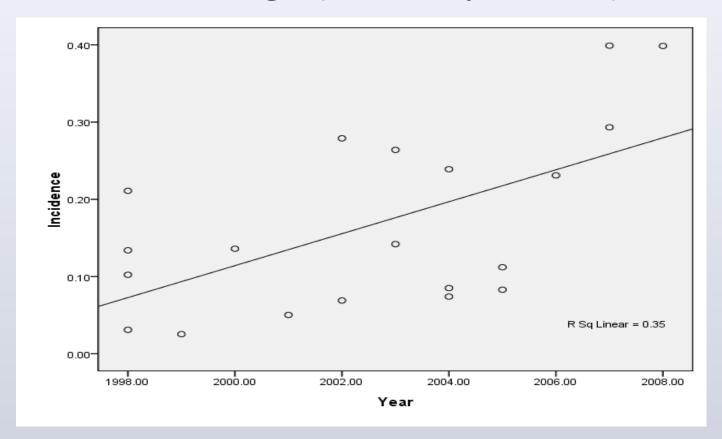




#### **CES-D**



• Prevalence change (r=0.59, p<0.001)



#### **GDS**



• Prevalence change (r=0.729, p=0.007)

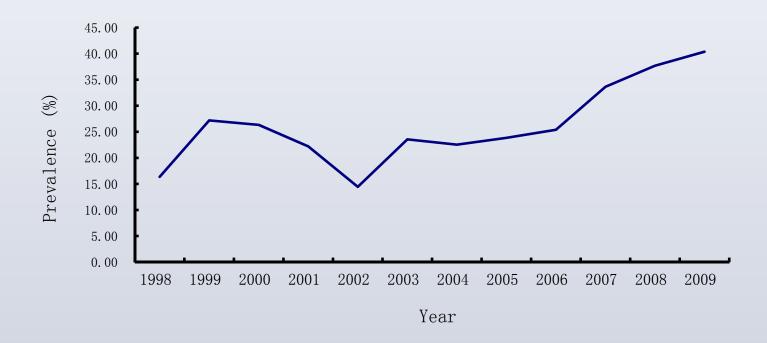
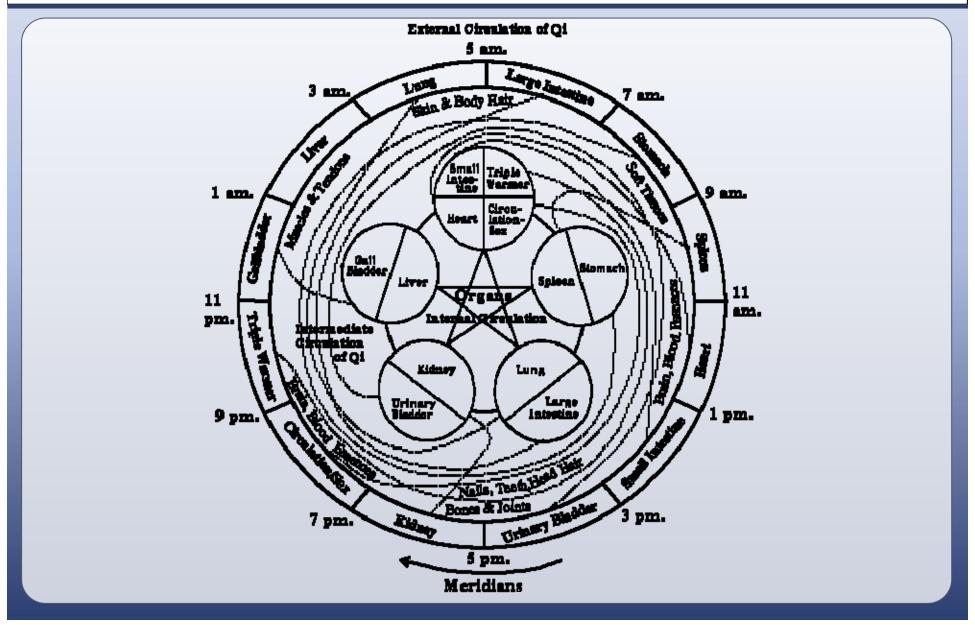


Table 3 Relationship between depression prevalence and urbanization indicators with data two years ago

Factor	variables	Depression prevalence
Population and	(1) number of hospitals and health centers' beds per 1000 population	0.818**
Economic	(2) number of practicing physicians per 1000 population	-0.212
	(3) GDP per capita	0.822**
	(4) urban percentage of total population	0.748**
	(6) number of ordinary primary and secondary school students per hundred thousand per capita	-0.672*
	(5) consumption level	0.789**
	(7) average number of persons per household	-0.793**
	(8) illiterate proportion of the population over 15 years old	-0.564
Industrial and living	(1) Secondary industry GDP	0.803**
environment	(2) Tertiary industry GDP	0.837**
	(3) number of urban basic retirement pension	0.846**
	(4) household garbage disposal capacity	0.586*
	(5) number of urban community service facilities	-0.142

### Body, mind, and nature





#### **Taoism -Dao**



- History
- Doctrii
- Social



#### Fengyi WANG (1864-1937) - Emotional Therapy



- Be gratitude
- Positive emotion (Yang)
- Open the door of Heaven
- Repent
- Negative emotion (Yin)
- Close the door of Hell



#### Tai Chi Chuan (TCC)





- All the studies, both of rapid deterioration of health and of successful active aging, can be summarized in a single "prescription": "Use it, or lose it." (Jenkins, 2003)
- Just participating physical exercises doesn't predict health, but engaging in a pleasant activity and carrying on does (Martha & Huang, 2012).

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#### Taichi-induced improvements (Wei et al, 2013)



Table 1. Participant characteristics.

	Age (years)	Gender	Education (years)	Practice Duration (years)	Practice Intensity (hours/week)	Intracranial Volume (ICV) (mm³)
тсс	52±6	7 M; 15 F	12±3	14±8	11±3	1165183±221749
Controls	54±6	8 M; 10F	12±3	_	_	1114497±170647

doi:10.1371/journal.pone.0061038.t001

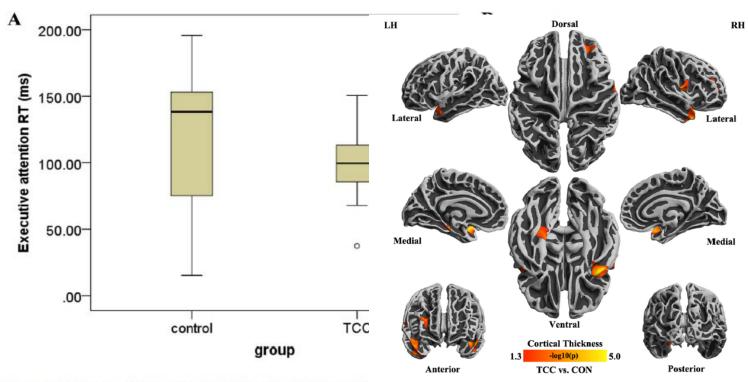


Figure 2. Group differences in behavioral task performed and control group; B) scatter plot of the association betw doi:10.1371/journal.pone.0061038.g002

Figure 3. Cortical regions thicker in TCC practitioners than in controls. Statistical map depicting between-group differences in thickness a each point on the cortical surface overlaid on the inflated average brain. All points meeting a p<0.05 (corrected) threshold are displayed to bette illustrate the anatomic extent of the areas and relative specificity of the findings. doi:10.1371/journal.pone.0061038.q003

#### Conclusion

SWB of elder Chinese are stable in past 15 years, In spite of the increasing negative affection and experience in the period.

Approaches based on Chinese Taoism philosophy

Could be of help.

