# POLICY CONVERSATIONS Social Support Programs Reduce Depression

## **Programs May Cut Depression Prevalence in Half**

Based on the peer-reviewed publication Axinn et al. 2022 in JAMA Psychiatry

The discovery that neighborhood social support programs reduce depression in their local communities is important for many reasons. First, depression is the most prevalent mental disorder, with debilitating consequences that disrupt work, education, and family. Second, because it is so

Researchers using the Chitwan Valley Family Study (CVFS) demonstrate that local social support programs reduce the rate of depression by nearly 50%.

Chitwan Valley Family Study

highly prevalent, there is almost never enough treatment available to take care of all who suffer from depression. Third, in poor settings, local people cannot afford either these disruptions or treatment. And fourth, policy makers always have difficult decisions to make: how to take scarce resources – funding – and invest it to get the greatest benefit.

Policies that invest in social support programs have significant benefits, cutting the prevalence of depression in half.

#### **Research Measures**

The CVFS longitudinal study of western **Chitwan in** Nepal has followed whole neighborhoods since 1995, tracking a representative sample of the population through six years of armed conflict and their recovery in the years afterward. A decade after the armed conflict ended, the CVFS used a specially designed survey to measure lifetime experience of major depressive disorder (MDD). This severe level of depression interferes with the ability to do daily tasks or conduct normal relationships. The CVFS measures were clinically validated and include the timing of onset. Those timing measures allow the researchers to know what factors reduce the onset of MDD afterward.

The CVFS also uses a specially designed Neighborhood History Calendar (NHC) to measure the timing of changes in local neighborhoods. This includes changes like opening or closing a school, a health clinic, and changes in access to bus service. The CVFS also measures all forms of new programs created to help the local people and how they work to provide help. During the armed conflict, the CVFS also measured violent events in and around the neighborhood.

By combining these two types of data, measures of neighborhood change and measures of mental health, researchers were able to show that a specific kind of social support program that was only in some of the CVFS neighborhoods was able to lower rates of depression in those same neighborhoods. The research – published in the *Journal of the American Medical Association* – uses the leading analytic methods to establish this relationship with high scientific rigor (see Axinn et al. 2022 for details). Similar people living in neighborhoods with a government introduced social support program became ill with major depressive disorder at only half the rate of people in neighborhoods without these programs.





## The Small Farmers Development Program (SFDP)

The Small Farmers Development Program (SFDP) was originally designed by the Food and Agriculture Organization (FAO) of the United Nations to improve the productivity of agriculture in poor rural settings. Different national governments used the SFDP in different ways. In Nepal, the government launched the SFDP

in some of the poorest agricultural neighborhoods of Chitwan Valley in the 1980s. The SFDP provided loans to poor farmers who joined SFDP groups and took group responsibility for repaying those loans. The loans provided money to invest in increasing production, ultimately designed to increase food and money for those in the neighborhood.

But the SFDP group structure also created a new relationship among those neighbors who participated. This new relationship strengthened their commitments to each other and their personal investment in each other's success. Previous research on groups experiencing high levels of traumatic experiences also indicates social support and social cohesion can reduce subsequent rates of depression (Choi et al. 2020). **The CVFS study is special in demonstrating that local neighborhood support groups created by government – the SFDP – can produce enough social support and cohesion to reduce depression among neighbors, even if they are not themselves members of the SFDP.** 



The Nepali government launched the SFDP in some of the poorest agricultural neighborhoods of Chitwan Valley in the 1980s, providing a model of group responsibility for the repayment of loans.

Previous research has also linked SFDP group membership to changes in health behaviors (Axinn 1992), but no previous research ever examined mental health or used such rigorous scientific methods to document the benefits of the SFDP. This important community benefit of the SFDP group structures indicates that neighborhood social support programs such as the SFDP can have significant mental health benefits among the poorest people. It is important to invest in preventive steps at the population scale to reduce demand for treatment. Social support programs can effectively reach the people who are least likely to be able to obtain treatment for such illnesses.





### References

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