

# A Pilot Study Testing Intrinsic Strength Factors as Predictors of Depression in the Houston Hispanic Population with Cardiovascular Disease

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## Introduction

### Purpose

- To determine if there is a relationship between self-reported levels of resilience, mastery and depression in Hispanic patients with cardiovascular disease.
- To study depression screening tools specific to the Hispanic population with cardiovascular disease.

### Conceptual Framework

Leininger's Theory of Culture Care Diversity and Universality

## Methods

### Design

Non-experimental survey design; pilot study; convenience sample (n = 63)

### Instruments

- The Resilience Scale (Wagnild, 2009)
- Mastery Scale (Pearlin & Schooler, 1978)
- Patient Health Questionnaire-9 (Spitzer, Williams, Kroenke, 1999)

Instrument	Format	Scoring	Reliability
Resilience Scale <sup>1</sup>	26-items, Likert scale	Score >145 mod high to high Score 125-145 mod low to moderate Score ≤ 120 low resilience	alpha coefficient .91 English .90 Spanish
Mastery Scale <sup>2</sup>	7-item, Likert scale	19= highest mastery 37= lowest	alpha coefficient .82 English .77 Spanish
Patient Health Questionnaire-9 <sup>3</sup>	9-item, Likert scale	Score from 10-14 minor depression Score 15-19 major depression, mod severe Score ≥ 20 major depression, severe	Sensitivity .88 Specificity .88

## Results

- Odds ratios suggest that the incidence of major depression was almost 8 times greater with a Spanish-language Mastery Scale score < 34, compared to a score > 34 (p=0.009).
- Similar analysis suggests that the incidence of major depression was 12 times greater with an English-language Resilience Scale score of < 142, compared to a score > 142 (p=0.027).
- The Spanish-language Mastery Scale and English-language Resilience Scale were inversely correlated to levels of reported major depression in the Hispanic population of various backgrounds.

### Odds of major depression using Spanish MS Tool with cut point

	Exposed	Unexposed	Total	Proportion Exposed
Cases	5	3	8	0.6250
Controls	6	28	34	0.1765
Total	11	31	42	0.2619
Point estimate		[95% Conf. Interval]		
Odds ratio (exact)	7.777778		1.087599	60.79722
Attr. frac. ex. (exact)	.8714286		.0805438	.9835519
Attr. frac. pop	.5446429			
chi2 (1) =		6.74	Pr>chi2 = 0.0094	

### Odds of major depression using English RS Tool with cut point

	Exposed	Unexposed	Total	Proportion Exposed
Cases	4	1	5	0.8000
Controls	4	12	16	0.2500
Total	8	13	21	0.3810
Point estimate		[95% Conf. Interval]		
Odds ratio (exact)	12		.7545605	638.5168
Attr. frac. ex. (exact)	.9166667		-.3252747	.9984339
Attr. frac. pop	.7333333			
chi2 (1) =		4.89	Pr>chi2 = 0.0271	

## Conclusion

- The Spanish-language Mastery Scale was a good predictor of depression in Spanish-speaking Hispanics, but the English-language Mastery Scale did not predict levels of depression in English-speaking Hispanics.
- Conversely, the Spanish-language Resilience Scale was not a good predictor of depression in Spanish-speaking Hispanics, but the English-language Resilience Scale was effective in the English-speaking group.
- Results continue to validate use of the English Resilience Scale but there may be difficulty translating it into another language due to varying dialects, nuances and word connotations within the multiple Hispanic cultures from different countries.

## Research Implications

- Use a larger sample size of Mexican-Americans to determine if the Spanish Resilience Scale and English Mastery Scale predicts depression in the population in participants who have lived most of their life in the United States vs. those who have lived most of their life in Mexico.
- Replicate the study using a different instrument to measure depression, since the PHQ-9 was actually designed to measure depression severity to determine treatment effectiveness in a primary care population.

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