

for those who thought that their problems were psychological. Similarly, Phillips and Murrell<sup>11</sup> studied the factors that influence mental health help-seeking among adults aged 55 and over, and found that the majority of those help seekers sought help for their mental health problems from a medical doctor rather than from other types of mental health professionals.

Ying's<sup>12</sup> study explored the explanatory models of major depression in a group of 40 recently immigrating Chinese-American women. It was found that respondents who held a psychological conceptualization of depression were likely not to seek professional services but rather relied upon themselves, family, or friends for assistance. In a study of help-seeking behavior and attitudes of Chinese Americans with psychological problems, Ying and Miller<sup>13</sup> suggested that help-seeking behavior was primarily mediated by the presence of need, whereas attitude reflected a more general propensity to seek care.

In Taiwan, relatively few studies have been conducted regarding help-seeking behavior for depressive symptoms among elderly community residents. Hence, it is important to learn more about the characteristics of help-seekers, their motivations, their help-seeking processes, and the kinds of help they seek. Accordingly, the present study was conducted to examine help-seeking patterns and associated belief regarding depressed mood among the elderly in Taiwan.

## MATERIALS AND METHODS

A community-based preliminary study, *Old Age in Taiwan: Health Promotion and Protection* (OATHPP) was conducted in 1994 using a modified *Older Americans Resources and Services (OARS) Multidimensional Functional Assessment Questionnaire*.<sup>14</sup> The subjects of the OATHPP study were community-dwelling elders in Kaohsiung City aged 65 or older. Kaohsiung is a metropolitan city in southern Taiwan and encompasses an area of 153.6 km<sup>2</sup> with a population of 1,405,349 at the end of 1993.<sup>15</sup> Kaohsiung is known as an industrial harbor city and became a municipality in 1979.

Due to resource limitations that precluded sampling the entire 1994 OATHPP cohort, the present study focused on 210 subjects drawn from the original sample of 1221 who completed the OARS question-

naire. Subjects in the OATHPP study whose total mental health scores on the original OARS questionnaire were greater than 4 were considered to be in the "poor" mental health group, i.e., below average psychological functioning of the person ( $N_1 = 227$ ), while those with scores less than or equal to 4 were considered to be in the "good" mental health group, i.e., above average psychological functioning of the person ( $N_2 = 942$ ). The selection of 4 as the cut-off point on the mental health scale was made so that roughly 80% of the respondents could be treated as "functional" and 20% as "dysfunctional", similar to the choice of a cut-off point for the CES-D scale.<sup>16</sup> A stratified random sampling strategy was employed to select subjects for the present study. Equal numbers of subjects ( $n_1 = n_2 = 105$ ) from both mental-health-status groups were recruited into the sample for the present study.

Data from the present study were collected using face-to-face interviews. Of the 282 subjects contacted, 210 completed the questionnaire (74.5% response rate). There was a wide distribution of ages among the sample, ranging from 66 to 93 years old with an average age of 73 years. Almost 1/3 were 75 years or older. The gender distribution of respondents for male versus female was 41% and 59%, respectively. Taiwanese subjects and married subjects comprised the majority of respondents. Of the 210 subjects, approximately 60% were married, 36% were widowed, and only 4% were either divorced, separated, or never married. The illiteracy rate among the subjects (43%) was relatively high by modern Taiwan standards, but thought to be representative of this age cohort.

The measurements of depressed mood and help-seeking behavior are described below.

### Single-item Indicator and Depressed Mood

According to Mahoney *et al.*,<sup>17</sup> the question "Do you often feel *sad or depressed*?" may provide a quick and valid alternative measurement for screening depression. In addition, Chochinov *et al.*<sup>18</sup> suggested that a single item, i.e., "Are you *depressed*?" can provide a reliable screen for depressed mood. Thus, a single item was used to measure subjects' prior experiences of depression: "During the past 6 months, how often did you feel *depressed*?" The choices on the 5-point ordinal scale were "never, seldom, sometimes, often, and very often".