## 台北地區單身老年榮民憂鬱症狀、孤寂感與社會支持之探

討

## The Exploration of Single Elder Veterans" Depression, Loneliness and Social Support in Taipei Area

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## 摘要

本研究目的爲瞭解單身老年榮民的憂鬱症狀、孤寂感與社會支持情形,探討個人屬性、憂鬱症狀、孤寂感與社會支持的相關性。本研究採面對面訪談方式,研究對象以居住於台北地區榮家的 65 歲以上單身老年榮民,共收案 398 人、個案的平均年齡爲 77 歲。

研究結果顯示:(1)以「老年憂鬱量表」(Geriatric Depression Scale; GDS)測量個案的憂鬱症狀平均得分為 11.6 (標準差=6.21)分達輕度憂鬱的程度;以「UCLA 孤寂感修正量表」(Revised University of California Los Angeles

Loneliness Scale; RULS-V3)測量個案孤寂感的平均得分為 45.8 (標準差=9.3)分,達中度孤寂的程度;以「個人資源問卷」(Personal Resouce Questionnaire; PRQ)測量個案社會支持的平均得分為 75.9 (標準差=19.2)分,屬中等程度的社會支持。(2)退役軍官、無宗教信仰、慢性疾病罹患總數較多者有較高的孤寂感;而退伍年數越久、住榮家越時間越長則孤寂感較低。(3)罹患慢性病數目越多的個案、感受到的社會支持越好;住榮家時間越久、感受到的社會支持越差。

(4)以邏輯式複迴歸模式(Multiple logistic regression model)分析單身老年榮民個人屬性、憂鬱症狀、孤寂感與社會支持之相關性及憂鬱症狀相關變項的預測情形,發現退伍年數每增加一年、憂鬱症狀爲退伍年數的 0.95 倍(OR=0.95、P < 0.001);罹患 3 種以上(包含 3 種)慢性病的個案出現憂鬱症狀是罹患 2 種以下(包含 2 種)慢性疾病榮民的 2.44 倍(OR=2.44、P < 0.001);而孤寂感每增加 1 分、憂鬱症狀是孤寂感的 1.15 倍(OR=1.15、P < 0.001)。

本研究結果可提供護理人員瞭解單身老年榮民病患的憂鬱症狀、孤寂感與社會支持的現況,建立相關的心理健康資料庫,以促進老人心理健康,並做爲教學及研究之參考。

## **Abstract**

The purpose of this study was to examine the single elder veterans' depression, loneliness, social support and its related factors. A total of 398 single elder veterans living in veterans home of Taipei area were purposive sampled and interviewed by the

researcher.

The average age of the subjects is 77 years old, the following results were achieved: (1) Using Geriatric Depression Scale (GDS) to assess depressive symptoms among subjects, the mean score was  $11.6(\,\mathrm{SD}{=}6.21;)$  using Revised University of California Los Angeles Loneliness Scale (RULS-V3) to assess loneliness among subjects, the mean score was  $45.8 \, (\mathrm{SD}{=}9.3;)$  using Personal Resource Questionnaire (PRQ) to assess social support among subjects, the mean score was  $75.9 \, (\mathrm{SD}{=}19.2.) \, (2) \, \mathrm{A}$  higher level of loneliness was significantly associated with retired military, without any religious preference and the number of chronic health problems; a lower level of loneliness was significantly associated with retired years, living in veterans home"s years. (3)A higher level of perceived social support was significantly associated with the number of chronic health problems; a lower level of perceived social support was significantly associated with living in veterans home"s years. (4) Multiple logistic regression analysis showed that only three factors were the predictors of depression: retired years (OR=0.95 \ p<0.001), the number of chronic health problems (OR=2.44 \ p<0.001) and loneliness (OR=1.15 \ p<0.001).

The results of this study provided information for understanding depressive symptoms, loneliness and social support of single elder veterans. The data could be used to establish the database for mental health to promote mental health of the single elder veterans. The findings could also provide the information for teaching materials and future studies investigations.