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EMPIRICAL STUDIES IN PSYCHOLOGY

MAY 13– 16th, 2021
FACULTY OF PHILOSOPHY, UNIVERSITY OF BELGRADE

INSTITUTE OF PSYCHOLOGY
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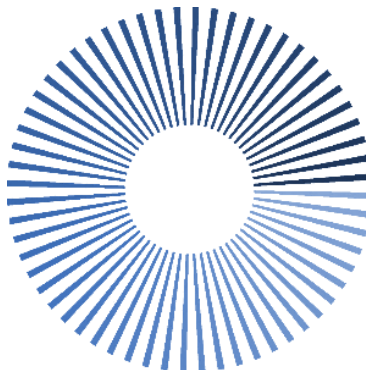FACULTY OF PHILOSOPHY, UNIVERSITY OF BELGRADE

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BELGRADE

Institute of Psychology, Faculty of Philosophy, University of Belgrade

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TUNING FORKS (E. Zimmermann, Leipzig – Berlin)
Instruments for generating tones of a given frequency. They are used in studies of auditory sensitivity for determining the differential, absolute and upper thresholds. Figure shows a set of three tuning forks generating the C-major chord, each fork generating the tones of 256 Hz (c¹), 320 Hz (e¹), and 384 Hz (g¹) respectively. The forks were tuned to the pitch of the originals from the German Physico-Technical Imperial Institute (Phys.-techn. Reichsanstalt).

Determinants of Self-Reported Depressive Affect in Serbia: Results from a Nationally Representative Sample

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Abstract

Although depression is ranked as the single largest contributor to global disability and the major contributor to suicide deaths, with a globally rising prevalence, analyses of determinants of depression in Serbia on a nationally representative samples are scarce. Our aim is to fill this gap. We used a merged Serbian sample within the European Quality of Life Survey (EQLS) from 2012 and 2016, consisted of 2058 respondents. In EQLS, depressive affect is measured by respondent's self-assessment of how much they felt downhearted and depressed during the previous two weeks. Answers are given on a six-point single-item scale. Our selected independent variables collectively explained about 38% of the variance in depressive affect. Perceived social exclusion is shown to be the most important determinant in our model. Subjective health, satisfaction with family life, and feeling worthwhile come next. Other significant determinants are attending religious services, being female, feeling free to decide how to live, being retired, and being widowed. Age, size of locality, having time to do the enjoyable things, being divorced, being unemployed, being unable to work due to illness or disability, satisfaction with standard of living, trust in people, and taking part in sports or physical exercise are shown to be not significant determinants.

Keywords: depressive affect, Serbia, European Quality of Life Survey

Introduction

Considerable social difficulties during recent decades (such as wars, economic recessions, internal and external migrations, deindustrialization and unemployment, and rising inequalities) have left a significant effect on the mental disabilities of the Serbian population, with depressive disorders among the first (Purebl et al., 2015). Although depression is ranked as the single most significant contributor to global disability and the major contributor to suicide deaths, with a globally rising prevalence (Institute of Health Metrics and Evaluation (2021), analysis of determinants of depression in Serbia on a nationally representative sample is non-existent. The exception is one analysis of socioeconomic determinants (Šantrić Milićević et al., 2016). In other countries, the examinations of such predictor structures on nationally representative samples are also neglected so far. Finally, previous studies have mainly investigated individual correlates of depression, neglecting its comprehensive predictor structure, or limited analysis to certain segments of the population. Our aim is to fill this gap.

Method

We used a merged Serbian sample within the European Quality of Life Survey (EQLS) from 2012 and 2016, consisting of 2058 respondents (51.9% of females, M_{age} = 48.37, SD_{age} = 17.58). In EQLS, depressive affect is measured by respondent's self-assessment of how much they felt downhearted and depressed during the previous two weeks. Answers are given on a six-point single-item scale (1 – all the time, 6 – at no time), which we reversed. Although this represents an important limitation, the EQLS database does not provide any other method for measuring depressive affect. We selected eighteen independent variables and a total sample of 1856 respondents (with no missing values for any of them).

Along sociodemographic variables, these are: satisfaction with standard of living and satisfaction with family life (1 – very dissatisfied, 10 – very satisfied), subjective health (1 – very good, 5 – very bad), (interpersonal) trust (1 – you can't be too careful, 10 – most people can be trusted), feeling worthwhile and feeling free (to decide how to live) (1 – strongly agree, 5 – strongly disagree), having time (to do the really enjoyable things) (1 – strongly disagree, 5 – strongly agree), religious (services attending, apart from weddings, funerals or christenings and (taking part in sports or physical) exercise (1 – every day or almost every day, 5 – never), size of locality (1 – the open countryside, 4 – a city or city suburb), and perceived social exclusion index (four items – I feel left out of society; life has become so complicated today that I almost can't find my way; I feel that the value of what I do is not recognized by others; some people look down on me because of my job situation or income) (1 – lowest, 5 – highest; Cronbach's Alpha = .809).

Results

Almost 3% of the population in Serbia report depressive affect all of the time, approximately 5% most of the time, one-tenth more than half of the time, 15% less than half of the time, and about one-third of each some of the time and at no time. To explore the most significant predictors, we carried out a multiple regression analysis using the enter method. Our results are shown in Table 1.

Table 1. Results of regression analysis with depressive affect as the dependent variable

	B	SE	β	t	p
(Constant)	1.498	.260	–	5.765	.000
Female	.200	.050	.077	3.969	.000
Age	.000	.002	.006	.193	.847
Satisfaction with standard of living	.005	.011	.009	.418	.676
Satisfaction with family life	-.121	.012	-.205	-9.847	.000
Subjective health	.268	.030	.233	9.053	.000
Trust	.009	.010	.017	.866	.386
Social exclusion	.414	.032	.289	12.898	.000
Feeling worthwhile	.129	.033	.087	3.949	.000
Feeling free	.090	.027	.073	3.379	.001
Having time	-.038	.022	-.033	-1.735	.083
Religious	-.116	.027	-.080	-4.250	.000
Exercise	-.022	.022	-.022	-.966	.334
Unemployed	.078	.066	.024	1.177	.239
Unable to work	-.556	.367	-.028	-1.516	.130
Retired	-.188	.083	-.065	-2.274	.023
Widowed	.267	.114	.046	2.329	.020
Divorced	-.210	.253	-.015	-.831	.406
Size of locality	-.060	.032	-.035	-1.855	.064

Our selected independent variables collectively explained about 38% of the variance in depressive affect, $F(18, 1837) = 63.012$, $p < .001$, $R^2 = .382$. Perceived social exclusion is shown to be the most important determinant in our model ($\beta = .289$, $t = 12.898$, $p < .001$). Subjective health ($\beta = -.233$, $t = -9.053$, $p < .001$), satisfaction with family life ($\beta = -.205$, $t = -9.847$, $p < .001$), and feeling worthwhile ($\beta = -.087$, $t = -3.949$, $p < .001$) come next. Other significant determinants are attending religious services ($\beta = -.080$, $t = -4.250$, $p < .001$), being female ($\beta = .077$, $t = 3.969$ $p < .001$), feeling free to decide how to live ($\beta = -.073$, $t = -3.379$, $p < 0.01$), being retired ($\beta = .065$, $t = 2.274$, $p < .05$), and being widowed ($\beta = .046$, $t = 2.349$, $p < .05$). Age, size of locality, having time to do the enjoyable things, being divorced, being unemployed, being unable to work due to illness or disability, satisfaction with standard of living, trust in people, and taking part in sports or physical exercise are shown to be not significant determinants.

Discussion

In this study, we examined the determinants of depression in Serbia using a nationally representative sample from the European Quality of Life Survey. Our results indicate that approximately 8% of the population feels downhearted and depressed all of the time or most of the time. Similarly, according the European Health Interview Survey report (Milić et al., 2019), 4.3% of the population in Serbia reported to be suffering from depression; also, chronic depression or anxiety was reported by 4.9% of the respondents in Serbia (Šantrić Milićević et al., 2016), and in both studies significantly more among females.

Further, perceived social exclusion, subjective health, satisfaction with family life, and feeling worthwhile are shown to be the most significant determinants of depressive affect. The crucial effects of these variables are also indicated many times in prior research (Schnettler et al. 2019; Hybels et al., 2012; Targosz et al., 2003; Colman et al., 2011).

Our results highlighted the importance of non-material domains of life on depressive affect. This finding is consistent with previous research, first, indicating a strong relationship between affective well-being and non-material domains of life indicators, and second, indicating a stronger affective well-being relation with non-material domains of life in comparison to material ones (Kahneman and Deaton, 2010). Such finding is also consistent with our results given that satisfaction with standard of living, and being unemployed and unable to work are non-significant determinants of depressive affect. Finally, these results are also consistent with the ones already found on a nationally representative Serbian sample: compared to material ones, non-material well-being indicators like social connections and subjective health are more related to affective well-being (Vladisavljević and Mentus, 2019).

Using a single-item scale to measure depressive affect within the EQLS presents a limitation of our study. Future studies would be interesting to examine the long-term trends of mental well-being in Serbia, and compare these trends with ones from the regional countries, which will be possible through its further participation in the EQLS.

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