

Investigating the Symptom Profile of Depression and Validity of Psychological Assessments in the South Asian Population

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Introduction: Despite South Asians accounting for 1/3 of the global mental health burden, culturally relevant research on how immigration and South Asian culture interact with depressive symptoms is lacking.⁷

Objectives: This study aimed to explore differences in depression symptoms between native and immigrant South Asians in the U.S. and India, using the Beck Depression Inventory-II (BDI-II) and the Patient Health Questionnaire 9 (PHQ-9). It also assessed the reliability of BDI-II compared to PHQ-9, as BDI-II has not been proven to be culturally sensitive.^{6,8}

Methods: Participants aged 18-24, of South Asian descent who had experienced depression, were recruited via social media and word of mouth. Sample size was 150, although 18 were excluded due to incomplete demographic criteria. The questionnaire included demographic measures, the BDI-II, PHQ-9, Collective Self-Esteem Scale, and Perceived Discrimination Scale. Correlation analyses, survey logistics, and descriptive statistics were conducted using SAS software.

Results: Both first and second-generation South Asian immigrants reported similar frequencies of somatic and psychological depressive symptoms, contradicting past research which indicated predominantly somatic symptoms.³ Participants resonated strongly with work-related symptoms, such as concentration, fatigue, and self-critique, possibly due to the high emphasis on education in South Asian culture.² Low identification with suicidality was noted, with only 48% reporting suicidal thoughts, possibly due to cultural values emphasizing mutual obligation and shame.⁵ Depressive symptom frequencies reported across BDI-II and PHQ-9 were similar, suggesting both tools have comparable accuracy in predicting depressive symptoms in this population.

Conclusion: Resources should be focused on recognizing signs of depression in academic settings, and on educating community members on balancing cultural expectations and mental wellness. This study should be generalized only to South Asian immigrants from highly educated and high-income households, and should be repeated with a larger sample size in order to generalize.

Keywords: Culture, Depression

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