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Literature Review

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

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Introduction

Stress can be defined as a state of worry caused by a difficult situation (World Health Organization, 2023). Stress is a natural human response to difficult and mentally taxing situations. This natural response equips us to navigate life's issues and challenges. However, individual reactions to stress vary significantly, and these responses can influence overall well-being.

The World Health Organization (2023) notes that stress can also be beneficial, potentially enhancing our ability to manage daily tasks. However, prolonged exposure to stress can lead to problems with both physical and mental health. Headaches, anxiety, heart disease, and most importantly, depression are some of the problems that fall under this category.

Depression can be defined as a mental health disorder that is characterized by a low mood or a loss of pleasure or interest in activities over an extended length of time (World Health Organization, 2023). The World Health Organization (2023) notes that stress can also be beneficial, potentially enhancing our ability to manage daily tasks. Common risk factors of depression are adverse life experiences such as unemployment, bereavement, and traumatic events.

Globally, over 280 million people suffer from depression. Depression affects 3.8% of the population, including 5% of adults (4% male and 6% female) and 5.7% of individuals over the age of 60 (World Health Organization, 2023). Overall, depression is approximately 50% more common in women than in males. In the United States, depression increased from 2015 to 2020, causing the prevalence of depression to approach 20% among young adults and adolescents (Goodwin, 2022). Ultimately, stratifying the prevalence of depression by race showed that non-Hispanic white individuals had a consistently high depression rate from 2015 to 2020, and non-

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

Hispanic black individuals had a slight increase in their prevalence of depression by the end of 2020 (Goodwin, 2022).

Depression is a disorder that can lead to social stress and isolation. It is also the leading cause of mental health disorders, suicide, and self-harm. Depression lowers self-esteem within individuals and causes individuals to have poor relationships (Kupferberg, 2023). Depression also causes individuals to experience social impairments, which is said to be the most debilitating consequence of this disorder (Kupferberg & Hasler, 2023). Social Impairments can be categorized as deficits in affect recognition, eye contact, prosody interpretation, and the ability to infer the mental states of others.

There has been an increase in depression prevalence, greater persistence of mental illness, and limited treatment usage for minorities and specific ethnic groups (Yelton et al., 2022). Depression prevalence has steadily increased in the United States, especially after the COVID-19 pandemic. The percentage of non-Hispanic Black individuals who reported having depressive symptoms increased from 25.6% to a peak of 35.2% in early December 2020 before falling back to baseline levels between April 23, 2020, and January 10, 2022 (Yelton et al., 2022).

The rural South is a region in which systemic racism and oppression have resulted in elevated poverty rates for African Americans, and health disparities have been well-documented through extensive research (Burton, 2017). These factors have directly affected the health and well-being of African Americans. African Americans tend to endure severe and disabling depressive symptoms that are linked to several chronic diseases (Tobin, 2022). Compared to their counterparts who experienced less hardship and had better self-rated health, rural African Americans who reported more material hardship and lower self-rated physical health also reported higher levels of psychological distress and depressive symptoms (Weaver,

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

2018). Material hardship and low self-rated health are also considered risk factors for this population (Weaver, 2018).

Family stress and neighborhood conditions play a major role in the mental well-being of African Americans in the rural South. Family stress is a major contributing factor to depressive symptoms among African American youth. Adolescent depression symptoms are significantly influenced by stressors at the family level, especially for those in socioeconomically disadvantaged groups; they are more likely to have depressed symptoms due to economic hardship (Reck, 2020). Neighborhood conditions can be defined as the quality of the environment in which families live, regardless of family income. It considers issues including crime rates, unemployment, a lack of resources, the presence of positive role models, and adult supervision for children (Leventhal & Brooks-Gunn, 2001).

Other factors not previously mentioned that contribute to elevated rates of depression in the African American community are social determinants of health. Social Determinants of Health, also referred to as SDOH, are the factors in the environment where people are born, live, learn, work, play, worship, and age that affect a broad range of health, functioning, and quality-of-life outcomes and risk factors (Healthy People 2030, 2025). Social Determinants of health, such as low economic status, food insecurity, and inadequate access to resources, contribute to elevated rates of depression in the African American community. Of the SDOH, one major determinant is food insecurity. Food insecurity, which is a major contributor to elevated levels of stress that lead to depression, is defined as the lack of access to healthy food because of the inability to afford food, or the inability to obtain nutritious meals (Montgomery, 2015).

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

Methods

A comprehensive search was conducted using the UGA Libraries website and the Medline database on the National Library of Medicine website. The UGA Libraries is a database where students, teachers, staff, and the public can access a wealth of academic content available through GALILEO. This collection of online resources includes databases, electronic journals, and e-books. Medline, a key part of PubMed, is a literature database that the National Center for Biotechnology Information (NCBI) at NLM created and maintains.

Inclusion and exclusion criteria

For all searches, the following inclusion and exclusion criteria were applied: Studies selected for review needed to have been published in peer-reviewed academic journals within the last ten years (2015-2024). Filters that only included articles from the United States, online articles, and original research studies were included. Systematic reviews/literature reviews were excluded.

Words such as “Black” and “African American” were emphasized to ensure that I received articles that pertained to the target population. The word “Rural” was used in each search to ensure that the area of interest was specifically targeted and came up in relevant and current studies. I used the Boolean phrase “AND” to narrow my search terms and ensure that studies that matched the research criteria were included. For example, the words “African American” AND “Rural Areas” were included in every search to ensure that the target population was represented in each article.

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

Article Selection Process

A systematic process was used to identify relevant articles to include in this review. Once the final pool of results from a given search was reached, the first step in this process was examining the titles and abstracts of the articles for relevance. If the title and abstract did not contain information related to the risk of depression in the target population, then it was discarded. The next step in this process was reviewing the methods and results sections of the articles to ensure that they were free of methodological issues and that their findings were relevant to answering the research question. The final step in this process was a full-text review of the remaining articles, then picking the articles that were closely related to or corresponded to my research question.

Search Progression

Using the UGA Libraries Database, these search terms were plugged in Using the UGA Libraries website, articles were gathered using the following search terms: (African Americans or black Americans or blacks) AND (factors or causes or influences or reasons or determinants) AND (depression or depressive symptoms) AND (rural area), which produced XX articles. After filtering for peer-reviewed publications from the last 10 years with online availability, 193 articles remained. I chose 3 articles from this section.

Another search was made using the UGA Libraries Database. This search using search terms (African Americans or black Americans or blacks) AND (social determinants of health) AND (rural areas or rural communities) AND (depression or depressive disorder or depressive symptoms or major depressive disorder) yielded 67 results before the filters past 10 years and peer review was added. After these filters were included, 19 articles were produced, and three were selected.

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

Using the PubMed database search terms ((race-related stress) AND (African Americans)) AND (rural areas), (((Interpersonal Violence) AND (African American)) AND (rural area)) AND (depression), as well as (rural health) OR (rural/urban residency) AND (social determinants of health) AND (United States). Both searches included the filters: Timeline 2015-2025, and systematic reviews were excluded. The first searches yielded 6 results in total, and three articles were picked from the results given. From the last search terms, 79 articles were produced, and one article was chosen.

Results

Race-related Stress and family stress

Race-related stress occurs when a person witnesses or encounters racist situations that evoke societal and historical racism. For African American individuals, these interactions collect over time, are remembered, and are relived with each new racist and discriminatory incident. Racism can be personal; however, most of the time it's structural. Structural racism is the root cause of racial and ethnic health inequities (Efird, 2023).

Family stress is another major contributor to depressive symptoms in African American communities and is defined as any stressor that may concern multiple members of the family (Reck, 2020). This affects the emotional connection among family members, their attitude, well-being, and the preservation of the family relationship over a specified period. Family stress is also a significant factor that predicts caregiver-youth conflict and impacts African American adolescent mental health (Reck, 2020).

The Family Stress Theory, proposed by McCubbin and Patterson, explains how family stress relates to the physical, mental, and emotional health of African Americans (Chaney, 2020). This theory is particularly relevant in understanding the elevated rates of depression among African

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

Americans living in rural areas, as they often face a disproportionate number of stressors with fewer available resources to cope effectively. Researchers mention stress piling up where multiple, overlapping stressors such as poverty, underemployment, and health disparities accumulate, and push families toward psychological crisis (Chaney, 2020).

Lastly, family stress, which socioeconomic factors could influence, has been shown to significantly affect adolescent behavior and mental health, which in turn, predicts higher levels of depressive symptoms (Reck, 2020). Specifically, this connection underscores how structural inequalities and environmental stressors such as financial strain, caregiver stress, and limited access to supportive resources interact with family dynamics to influence adolescent mental health. In rural communities, where such socioeconomic challenges are often more pronounced, these effects may be even more significant, placing youth at a higher risk for depression and other mental health disorders (Reck, 2020).

Black adolescents experience neighborhood stressors like crowding, conflict, and loud environments that contribute to depression among African Americans in rural areas (Tobin, 2020). Moreover, limited access to mental health care, mistrust, fear of treatment, and a lack of access to health services create further challenges and contribute to depression within these communities (Haynes, 2017).

Furthermore, due to cultural expectations, African Americans may desire therapy but choose not to seek it because of stigma and concerns about misdiagnosis. Adolescents and young adults from rural Black communities who are deeply religious provide a clear example of these barriers to therapy. Their faith-centered parents may view their symptoms as simply a "phase" and discourage them from seeking treatment, believing it to be unnecessary (Hannon-Walker, 2020).

Socioeconomic Factors

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

Socioeconomic factors include poverty, lack of access to healthcare, educational disparities, and neighborhood conditions. Unmet needs and barriers, such as a lack of awareness and understanding about mental health conditions and available resources, and stigma around mental health, make it difficult for individuals to seek help. These are contributing risk factors for depression and having prolonged depressive symptoms.

COVID-19 significantly contributed to the increased rates of depression among Black or African American individuals due to many people losing their jobs, facing high levels of food insecurity, and having limited access to healthcare compared to other racial and ethnic groups (Adesogan, 2022). The coronavirus is also associated with elevated levels of stress and anxiety among college students across the country (Correia, 2022).

Researchers have found that poorer health strongly correlates with increased exposure to stressors related to COVID-19. Studies reported that individuals who experienced COVID-19-related stressors and health challenges during the pandemic often had a history of pre-pandemic stressors and limited resources (Adesogan, 2022). Similarly, it was observed that COVID-19 deaths occurred at disproportionately higher rates in Black rural communities, which, in turn, intensified poverty and comorbidity rates among families directly impacted by the virus (Millett et al., 2020).

Researchers conducted a study on the prevalence of physical, mental, and emotional health issues caused by stress-related factors in children aged 0 to 17 growing up in the rural South and found that initially, kids in rural areas seem to be less healthy than kids in urban areas, reporting higher rates of anxiety or ADHD (Kenney, 2020). However, after further analysis, the differences between rural and urban children disappeared once socioeconomic factors were considered. Due to rural families having 39.5% less median income than non-rural families, reasons for any

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

health differences seem to be directly related to low socioeconomic status (Kenney, 2020; Federal Housing Finance Agency, 2024).

The significant influence of family economic hardship on depressive factors among African American adolescents and children is underscored by the findings of Chen & Brody (Chen et al, 2015). The research reveals that depressive symptoms vary significantly with the level of financial strain within the household. African American children raised in rural environments characterized by high financial stress consistently exhibited elevated levels of depressive symptoms. This persistent elevation suggests that chronic economic hardship creates a sustained vulnerability to mental health challenges in this population. Studies show that African American children growing up in a household with high financial stress consistently showed high levels of depressive symptoms compared to those in a low hardship group that showed high levels of depressive symptoms but had symptoms that ultimately decreased over time (Chen et al, 2015). These findings highlight the differential impact of family economic hardship on the mental well-being of African American youth living in rural areas. Ultimately, chronic high socioeconomic factors appear to be a significant predictor of elevated depressive symptoms.

Social Determinants of Health

Food insecurity, defined by the USDA, is a family or individual having limited or uncertain availability of nutritionally adequate and safe foods or the ability to acquire acceptable foods in socially acceptable ways (Butler, 2024). Food insecurity is a major health determinant linked to mental health challenges, particularly in low-income communities, and in a sample of African Americans living in rural areas in the United States. Researchers have associated food insecurity with higher stress levels, depressive symptoms, and poorer diet quality, especially among women who are caregivers (Butler, 2024).

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

Food insecurity impacts health in three key ways: behaviorally, by contributing to poor diets, chronic stress, and disordered eating patterns that increase systemic inflammation. Women experiencing food insecurity often report elevated depressive symptoms and lower overall diet quality. These outcomes are largely driven by emotional eating behaviors that stem from ongoing stress and trauma (Butler, 2024). Lastly, residents living in rural areas in the south, known as black belt communities, had high levels of anxiety that directly correlated to various social determinants of health. These include food security, lack of access to transportation, low health literacy rates, and interpersonal safety (Lee, 2022).

For rural college students who already struggle with financial instability and limited availability of healthy food, COVID-19 increased food poverty. Black and African American college students felt more food insecure than their peers, and this effect has been elevated among rural populations because of a deficit in food choices (Correia, 2022). The epidemic taxed these resources even more, which raised student mental health concerns and increased stress.

Another important factor to consider is the lack of transportation or barriers to transportation, which can be a contributing factor to depression in African American communities. Lack of reliable transportation to take oneself or a family member to the hospital for a clinic appointment, as well as to carry out everyday living activities such as buying groceries and going to work, can be burdensome and have a detrimental effect on quality of life (Kalu et al., 2024). According to the study, respondents who reported transportation constraints were five times more likely to experience moderate to severe psychological discomfort and twice as likely to report mild psychological distress following the COVID-19 pandemic (Kalu et al., 2024).

Another social determinant of health is discrimination. Discrimination can lead to chronic stress, which can expose hormones to long periods of exposure and be detrimental to various

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

bodily systems (Marwaha, 2022). Discrimination is defined as the unfair treatment of people or a group of people. The association between discrimination and health may also be caused by stress related to feeling discriminated against, which hurts one's physical and mental well-being (Schouler-Ocak et al., 2022).

Lastly, social and community context play a large role in contributing to depression in rural communities. From a study done in a rural Appalachian community, residents and even healthcare providers in the study area naturalized depression as a direct consequence of the bleak economic and social conditions of the area (Song, 2018). Due to the lack of jobs, limited prospects for young people, and dead-end jobs with insufficient income, many individuals said this aided in their depressive symptoms because they work hard for “nothing” (Song, 2018). This study doesn’t explicitly focus on African American communities, but parallels can be drawn to the historically persistent socioeconomic disadvantages due to systemic racism, and the similar dynamics of economic hardship and limited opportunities contribute to higher rates of depression in these communities as well

Interpersonal Violence

Black Americans or African Americans experience a high rate of interpersonal violence in their lifetimes. Victims of Interpersonal violence are more likely to experience physical and mental health issues throughout their lives, such as depression, PTSD, bodily harm, STDs, heart disease, and early death (Littleton, 2025).

Due to unequal access to the social determinants of health, toxic health conditions, mental health problems, and substance abuse problems arise. Researchers have found links between elevated risk of interpersonal violence and low economic status (Littleton, 2025).

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

Due to trauma such as abuse and exposure to other adverse childhood experiences like neglect and household instability, depression rates are high in young African American women (Waller et al., 2022). Many times, these events result in cumulative emotional stress that shows up as mental health problems, especially depression. Trauma in early life may set off normal development, impede coping skills, and cause long-term impacts on emotional control. The stress of negotiating not only emotional trauma but also the institutional barriers associated with race, economic difficulty, and cultural expectations can compound these problems for young African American women living in rural areas (Waller et al., 2022).

Discussion

This literature review sheds light on the multiple factors contributing to the high prevalence of depression among African Americans in rural communities, particularly in the rural South. It identifies systemic racism, economic hardship, food insecurity, family stress, and lack of access to health care as major contributors to the mental health disparities within this population. These social, economic, and environmental factors compound each other, creating a cycle that perpetuates poor mental health outcomes. Importantly, race-related stress and discrimination further exacerbate the psychological burden, making depression more persistent and difficult to manage for African Americans living in rural areas. Additionally, the COVID-19 pandemic added a layer of stress, increasing food insecurity, job loss, and access to healthcare, which disproportionately affected African Americans and worsened mental health challenges.

Limitations

While the research highlights key factors contributing to depression in this community, several limitations need to be considered. First, the studies reviewed are largely based on cross-sectional data, which limits the ability to draw causal inferences about the relationship between

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

social determinants and depression. Longitudinal studies would provide a clearer understanding of how these factors interact over time to influence mental health outcomes. Second, many of the studies rely on self-reported data, which can introduce bias, particularly when participants may underreport mental health symptoms due to stigma or lack of awareness. Additionally, the focus on rural African American populations means that findings may not be fully generalizable to urban or suburban communities, where access to resources and experiences of stressors may differ significantly. Lastly, while the review addresses systemic factors such as poverty and lack of access to healthcare, it could have further explored the role of cultural beliefs and stigma surrounding mental health, which could influence help-seeking behavior and treatment outcomes.

Conclusion

This literature review investigated the numerous factors that contribute to the significantly high prevalence of depression among African Americans living in rural areas of the United States. The research points to a combination of social, economic, and environmental factors that sustain mental health inequities. Systemic racism and historical oppression, particularly in the rural South, contributed to cycles of poverty, restricted access to resources, plus elevated stress levels. These variables show material hardship, food insecurity, and familial stress, all of which increase the likelihood of experiencing depression symptoms. Furthermore, the research emphasizes how neighborhood circumstances and restricted access to healthcare, especially mental health services, intensify these difficulties.

Moving forward, it is critical to recognize the intersectionality of these issues and take a holistic approach to addressing them. Future research should focus on culturally sensitive,

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

community-based treatments that address social determinants of health. This involves fighting for policies that promote economic empowerment, increase access to nutritious food, and improve the quality of education and healthcare in rural African American communities. In addition, investigating the influence of various coping mechanisms and resilience variables in this population can help guide the development of tailored support systems. Finally, addressing systemic disparities and building community resilience are critical steps toward achieving mental health equity for rural African Americans and creating a culture in which mental well-being is accessible to everyone.

Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

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Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

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Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

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Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

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Factors that contribute to elevated rates of depression in African American populations living in rural areas in the United States

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