The Interplay among Family and Community Factors in Predicting the Depression of Chinese Adolescents: The Significant Role of Social Capital

Purpose: Depression is an increasingly prevalent problem among adolescents in mainland China (UNICEF, 2004). It is associated with adolescents' low self-esteem, poor academic performance, more deviant activities, and increased health risk behaviors (Hesketh & Ding, 2005). However, there is little knowledge about the social determinants of depression among Chinese adolescents. Applying social capital theoretical framework, this study aimed to investigate how social capital (i.e., resources inherent in social relationships that facilitate a social outcome) (Coleman, 1990) embedded in the family and the community, together with family human capital (i.e., parents' educational attainments) and family financial capital (i.e., household economic conditions), influenced the depression of Chinese adolescents. It was unique in that it incorporated family financial capital, family human capital, family social capital and community social capital into one conceptual framework, thus being able to 1) test the differential effects of these contextual factors on adolescents' depression; and 2) unravel the complex interplay among these contextual factors as they influence adolescents' depression simultaneously. Moreover, this study adopted an integrative biopsychosocial model in which the contextual factors were examined as certain biological and psychological variables were controlled for (i.e., gender, pubertal status, body mass index, body image, parental depression). By taking into account these potential artifacts in the model testing contextual effects, it was able to establish a stronger claim of the impacts of family and community factors on the adolescents' depression.

Method: This study used data from a NIH-founded panel study (P50CA84735-01), China Seven Cities Study (Johnson, 2004). The CSCS started in the year 2002 and to date has collected three

waves of data on health, mental health, and health-related behaviors with a nationally representative sample of over 12,000 adolescents. The current study used the combined dataset of three waves (N=5,164). Depression was measured by the validated Chinese-version CES-D (Radloff, 1977; Zhang, 2002); human capital and financial capital was assessed by parents' educational attainments and household economic conditions respectively; family social capital was measured by questions regarding parent-child interaction and parental monitoring, while community social capital was assessed by questions regarding neighborhood quality and neighborhood support. Structural equation modeling (via AMOS 5.0) was employed to test the direct and indirect effects of these family and community factors.

Results: Test of the hypothesized structural model provided a good fit to the data (Chi Square=1662.318, df=185, p<.001, CFI=.925, RMSEA=.039). The effects of family and community factors on the depression of Chinese adolescents remained significant after certain biological and psychological variables were controlled for. The analysis results identified five major findings: 1) higher family social capital was associated with lower adolescents' depression (Beta=-.087, p<.001); 2) higher community social capital was associated with lower adolescents' depression (Beta=-.089, p<.001); it also led to increased family social capital (Beta=.407, p<.001), which, in turn, predicted lower depression; 3) higher family human capital predicted lower adolescents' depression (Beta=-.086, p<.001) and also influenced depression indirectly through its effect on family social capital (Beta=.100, p<.001); 4) family financial capital had significant but positive effect on adolescents' depression (Beta=.076, p<.001), that is, the higher the family financial capital, the higher the adolescents' depression; higher family financial capital was also associated with lower family social capital, which predicted higher depression; and 5) the female gender was associated with higher depression both directly (Beta=.065, p<.001)

and indirectly through predicting lower family social capital (Beta=-.182, p<.001). In summary, all four contextual factors contributed to determining the depression of Chinese adolescents, and family social capital played a central role among these contextual factors as both a direct predictor and a mediator. Overall, a total of 22.7 percent of the variance in adolescents' depression was explained by this model.

Implications: Theoretically, this study would advance social capital theory by incorporating various dimensions of social capital into one framework and unraveling the mechanism by which social capital, human capital, and financial capital influence adolescent depression through multiplicative pathways. Practically, a better understanding of the effects of social capital on the depression of Chinese adolescents would guide the development of effective intervention and prevention programs to mitigate adolescents' depression through strengthening certain domains of their social contexts. It suggests utilizing social capital as an innovative approach in social service practice. As far as policy is concerned, results of this study would facilitate the formation of appropriate policies that advocate establishing or expanding the stock of social capital in the family and the community, thus promoting the healthier development of adolescents.