# LONELINESS AND SELF-EFFICACY AMONG INDIVIDUALS WITH CHRONIC CONDITIONS: THE MEDIATING ROLE OF DEPRESSION Dabrowski, B.S., McKibbin, C.L., Carrico, C.P., Carling, S.J., Goodwin, L., Schenck, S., Punke, E., Teply, A.L.

# BACKGROUND

- Chronic disease self-management programs (CDSMPs) empower individuals to take an active role in their health management.
- Self-efficacy is an important construct determining self-management behaviors.
- Low self-reported ratings of self-efficacy for managing chronic disease have been associated with high loneliness ratings; however, other variables that may be important regarding the relationship between loneliness and self-efficacy are less well known.
- Depressive symptoms are associated with both loneliness and management of chronic disease.

### PURPOSE

- Investigate how baseline loneliness predicts baseline depressive symptoms and self-efficacy in a CDSMP.
- Determine if baseline depressive symptoms mediate the relationship ulletbetween baseline loneliness and baseline self-efficacy.
- Assess whether baseline depressive symptoms mediate the effect of baseline loneliness on changes in self-efficacy from pre- to postintervention.

# **RESEARCH DESIGN**

### <u>Sample</u>

• Participants (n = 48; M = 63.0 years old, SD = 18.0) were predominately White (n = 47; 97.8%) and female (n = 37; 77%) who presented with at least one chronic condition and completed a CDSMP workshop.

### Procedure

- Data used in this study were from a larger battery of assessments designed to evaluate HealthyU, a chronic disease self-management program in Wyoming.
- Participants gave informed consent and completed demographic information.
- Baseline measures of loneliness, depressive symptoms, and self-efficacy were collected before starting the program. After the program ended, post-measures of the same outcomes were gathered.

# DATA ANALYSES

- Multiple regression analyses were used to examine the direct and mediating effects of baseline loneliness and depressive symptoms on baseline selfefficacy.
- Additionally, multiple regression analyses were used to assess the impact of baseline loneliness and depressive symptoms on changes in self-efficacy from pre- to post-intervention.
- Analyses were performed using SPSS, version 29.

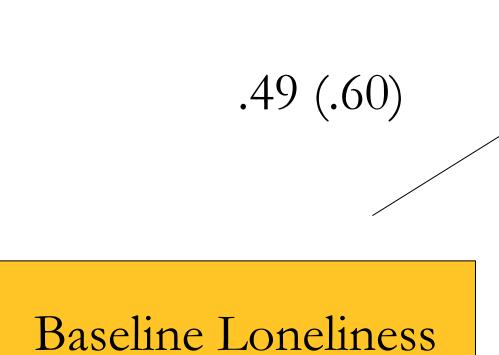
- .60, p < .001).
- $\bullet$ predicted baseline self-efficacy.
- controlling for depressive symptoms (See Figure 1).

**Figure 1.** Mediation Model of Baseline Loneliness, Depressive Symptoms, and Self-Efficacy (n = 48).

.49 (.60)

Baseline Loneliness





Note. Loneliness was assessed using a one-item measure from the AARP Loneliness and Social Connections Survey. Depressive symptoms were measured with the SMRC Personal Health Questionnaire Depression Scale. Self-efficacy was evaluated using the SMRC's 6-item Self-Efficacy for Managing Chronic Disease Scale.

- loneliness in the CDSMP.

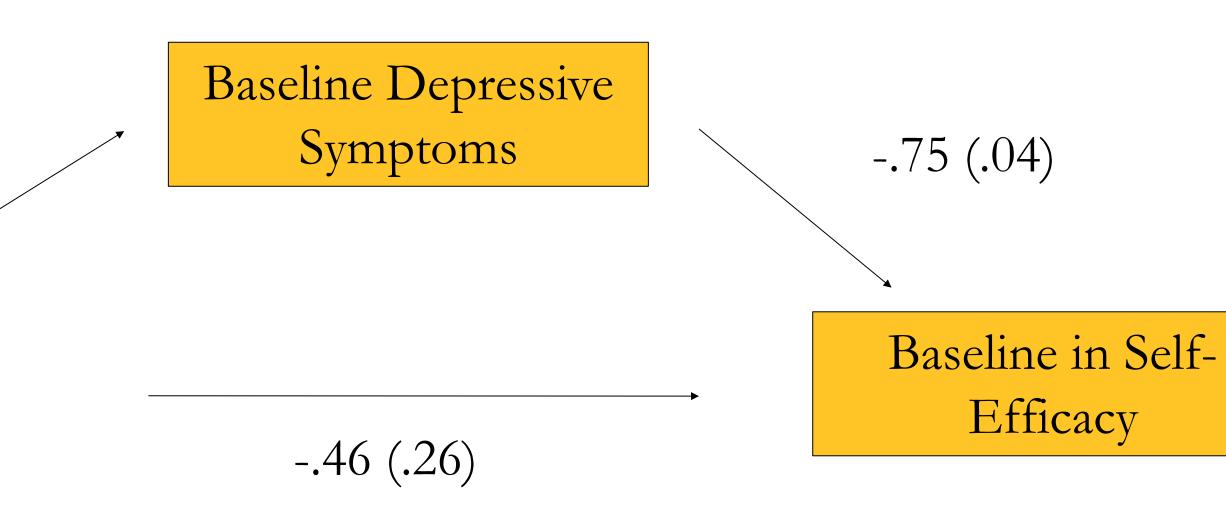
## RESULTS

Regression analyses revealed that baseline loneliness predicted baseline depressive symptoms ( $\beta = .49$ , SE =

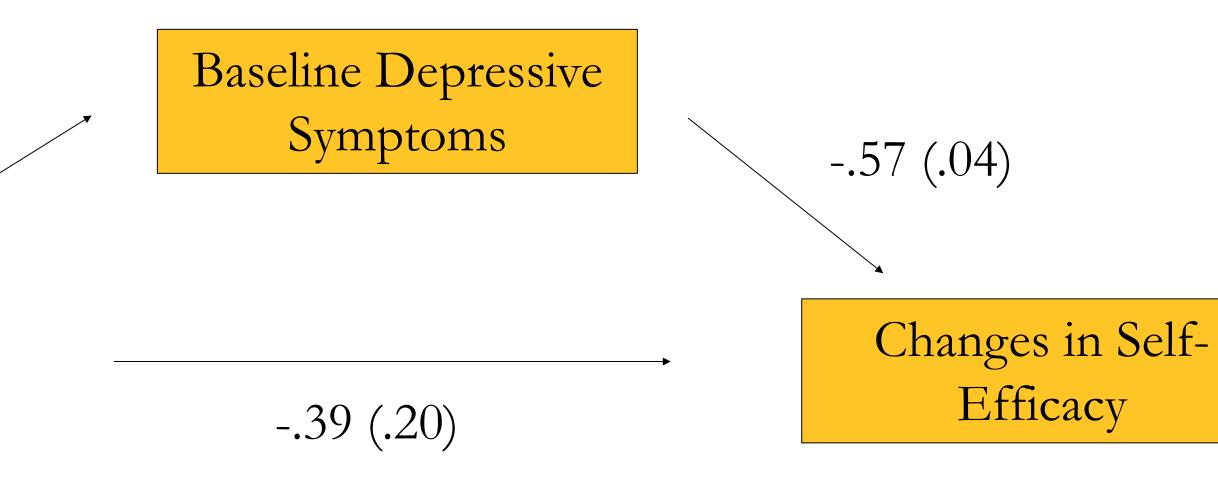
Both baseline loneliness ( $\beta = -.46$ , SE = .26, p < .001) and depressive symptoms ( $\beta = -.75$ , SE = .04, p < .001)

The relationship between loneliness and self-efficacy became non-significant ( $\beta = -.12$ , SE = .23, p = .27) after

Examination of loneliness and depression to change in self-efficacy pre- to post-intervention showed similar results (See Figure 2). The relationship between baseline loneliness and changes in self-efficacy became nonsignificant ( $\beta = -.14$ , SE = .21, p = .30) after controlling for baseline depressive symptoms.



**Figure 2.** Mediation Model of Baseline Loneliness, Baseline Depressive Symptoms, and Changes in Self-Efficacy (n = 48).



## CONCLUSIONS

Regression analyses reveal that baseline depressive symptoms play a role in the relationship between baseline loneliness and self-efficacy among participants in the CDSMP.

Although loneliness initially predicted depressive symptoms and self-efficacy, the relationship between loneliness and self-efficacy became non-significant once depressive symptoms were controlled for. Similarly, changes in self-efficacy pre- to post-intervention showed that the effect of baseline loneliness on changes in self-efficacy was not significant when accounting for baseline depressive symptoms. Findings suggest that addressing depressive symptoms may enhance self-efficacy for individuals experiencing



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