Impact of Socio-economic factors on Trauma Deepak Gupta ¹ & Dr. Ruby Kazmi ²

ABSTRACT

Clinical experience and previous studies indicate that low socio-economic positions are overrepresented in the population of trauma. Mental health and well being in India is undetermined by many social and economic factors that operate outside the mental health system. Stories described trauma experience in the process of accessing mental health services. The reason for these social changes in injuries risk is likely to be multi factorial. The article aims to examine the relationships between various socioeconomic factors in determining outcomes. The focal point of extant research is the impact of socio-economic factors on trauma. Both the individual and environmental sources of explanation are plausible to contribute. In our study we investigated the impact of socio-economic factors on trauma on the risk of becoming a trauma victim in the research which has been done in the previous studies. In this study the data has been collected from the national population register throughout the country for a given period of time. A statistical analysis software program was to apply on impact stratified injury severity score, age, race as well as social status on the outcome of clinical complication. Association between different variables and its impact of socio-economic factors on trauma were estimated by the conditional logistic regression. The trauma patients have been treated for psychiatric substance abuse and somatic diagnosis to a higher extent then control. In the conditional logistic regression analysis a low level of education and income as well as their socio cultural background were all independent risk factor for trauma. Recent treatment for substance abuse significantly increased the risk factor for the availability of trauma. Basically, low income, poor education facilities, substance abuse etc are the independent risk factors for trauma. Active substance abuse strongly influences the risk of trauma and has the time dependent pattern. The insight can facilitate the implementation injury prevention strategies tailored to the particular risk groups. This supports that socioeconomic disparity may exist within long term outcomes.

Keywords: socio-economic factor, trauma

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INTRODUCTION

Mental health and well being in India is undetermined by many social and economic factors that operate outside the mental health system. Stories described trauma experience in the process of accessing mental health services. The reason for these social changes in injuries risk is likely to be multi factorial. This article aims to examine the relationships between various socioeconomic factors in determining outcomes. The focal point of extant research is the impact of socioeconomic factors on trauma. Both the individual and environmental sources of explanation are plausible to contribute. In our study we investigated the impact of socio-economic factors on trauma on the risk of becoming a trauma victim in the research which has been done in the previous studies. In this study the data has been collected from the national population register throughout the country for a given period of time. Exposure to trauma is directly related to socioeconomic status (SES) in a dose response manner such that lower income is associated with increased traumatic exposure. This increased risk cuts across multiples types of trauma exposure from residential fires and motor vehicle accidents to natural disasters and firearm-related injury and death. Further, poverty is related to increased risk for exposure to multiple types of traumatic events and repeated exposure to traumatic events, leading to an overall increased cumulative burden of trauma. Poverty is associated with a disproportionate risk of living in geographic regions (e.g., flood prone) and types of residences (e.g., vulnerable home construction) that make individuals more prone to be exposed to and suffer the impact of natural disasters. This increased risk may become more exacerbated in the future. Analyses of the impact of global warming suggest that, worldwide, impoverished populations will be the most impacted by natural hazards associated with climate change by the year 2030 (Santiago et al., 2013).

Behavioral and Physical Health Impact of Trauma on Economically Disadvantaged Individuals Economic Disadvantage:

•Because economic disadvantage is associated with increased risk for experiencing trauma, repeated trauma and trauma beginning in early life, it is associated with increased risk for developing posttraumatic stress disorder (PTSD) and other trauma related psychological problems including depression and anxiety.

- Specifying the association of economic disadvantage and trauma related psychological symptoms is particularly difficult given the interconnectedness of economic disadvantage and other social factors. However, many studies do find an association between economic disadvantage and PTSD/other trauma related psychological symptoms.
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- Because economic disadvantage is associated with increased risk for experiencing trauma, repeated trauma and trauma beginning in early life, it is associated with increased risk for developing posttraumatic stress disorder (PTSD) and other trauma related psychological problems including depression and anxiety.
- Specifying the association of economic disadvantage and trauma related psychological symptoms is particularly difficult given the interconnectedness of economic disadvantage and other social factors. However, many studies do find an association between economic disadvantage and PTSD/other trauma related psychological symptoms
- Lack of access to resources not only increases risk for developing psychological problems in the wake of trauma exposure, but it may also translate to a longer or more severe course of symptoms.

New Developments in Research on the Impact of Trauma on Economically Disadvantaged Individuals:

• Children who grow up in economically disadvantaged families and communities are at increased risk for what is referred to as a "toxic stress response."

This occurs when, over the course of childhood mental and physical development, a child experiences frequent, repeated, ongoing and severe adversity, in the absence of adequate family and community support to mitigate these stressors. In response to these chronic stressors there is increased risk for a maladaptive activation of the child's stress response system, which negatively disrupts developmental processes, including the development of brain architecture and hormonal response systems. The child's biological, cognitive, and psychological

development is impacted such that it increases the risk for delayed development and lifelong risk for emotional and physical health problems.

- Economically disadvantaged individuals families and communities often have limited access to such treatment. Even when treatment is available there are often social and structural barriers to engaging in treatment, which can lead to underutilization of available mental health care.
- Research points to a bi-directional relationship between trauma exposure and economic disadvantage. In economically disadvantaged populations the relative lack of needed recovery resources and increased risk for psychological and physical health symptoms following trauma leads to increased likelihood that individuals with lower levels of income and other economic resources may experience increased levels of worsening poverty following trauma. They may become homeless, lose employment or have medical bills that they are unable to pay. This, in turn, can further risk for additional trauma exposure.
- The largest limitation of the extant research is related to the interconnectedness of economic disadvantage, trauma exposure and trauma related health and mental health problems. As a result in most research, it is difficult to examine the differential and interactive impact of multiple relevant variables.

Clinical Considerations for Practitioners Treating Traumatized Economically Disadvantaged Individuals:

- Economically disadvantaged adults, children and families may be more likely to be seen in primary care clinics, emergency rooms and community social service agencies than to seek mental health treatment. Implementing screening for traumatic experiences in these settings will increase identification of need for and referral to trauma informed care.
- Assessment and treatment for PTSD and other trauma related psychological problems should include a focus on economic circumstances of the individuals and families being treated as well as other experiences of social marginalization.
- Clinical providers, agencies and programs providing mental health treatment to economically disadvantaged populations need to assess not only for trauma but also for trauma related psychological problems. Although progress has been made, individuals with PTSD and other

trauma related psychological problems are often misdiagnosed. For example, traumatized economically disadvantaged children who have problems in school are often identified as oppositional/defiant or unwilling to learn rather than as suffering from the impacts of traumatic experiences and toxic stress.

- Because of the logistical barriers faced by economically disadvantaged individuals who seek treatment, engagement in mental health services may be improved by providing needed resources such as transportation, childcare, care outside of typical business hours and providers who speak the primary language of those needing care.
- Treatment considerations for economically disadvantaged individuals may need to include a focus on barriers to engagement in treatment (e.g., transportation, time availability, childcare needs). It is important carefully assess the sources of low engagement in treatment including missing scheduled appointments. Such assessment may reveal that a car is shared among family members with competing needs or that work schedules are frequently changed with little notice.

Information for Families and Friends of Traumatized Economically Disadvantaged Individuals:

- Listen. Allow people to talk about their experiences. Tell them that you are available to talk with them and that you want to support them but don't pressure them talk or provide specific details or information about their experiences.
- If they do want to talk about their traumas, let them direct and guide the discussion. Even when exposed to the same or similar types of traumas, people have different experiences and may want to talk about different aspects of their experiences
- Validate. Don't try to minimize experiences or make judgments about their reaction to traumatic experiences. In economically disadvantaged populations, people feel that they should not "complain" about their traumas because they are aware of others who have had similar or "worse" experiences.
- Encourage them to engage with supportive people and communities but do not pressure them. People may not respond to initial encouragement to seek support or engage with others.

However, they may eventually be ready to engage with steady non-pressuring, non-judgmental encouragement.

• Educate yourself about trauma and its impact. This is website for the U.S. Department of Veterans Affairs' National Center for PTSD which provides educational information.

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