

On poverty and trauma: Associations between neighbourhood socioeconomic deprivation and post-traumatic stress disorder severity

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Introduction

- Those of low socio-economic status appear to have an increased risk of mental health problems (Kivimäki et al., 2020).
- Recessions lead to an increase in common mental disorders, substance use problems and suicidal behaviour (Frasquilho et al., 2015).
- Visser et al (2017) Systematic review concluded low income and financial difficulties predict development of PTSD in trauma patients.
- Recent meta-analysis (Wright et al., 2024): Unemployed participants had higher PTSD scores after receiving EMDR.
- Finegan et al (2020): Analysed local deprivation via individual postcode and outcome from IAPT: Sample of 44,805:
 - Neighbourhood income and crime rates linked with depression and anxiety symptoms.
 - Those living in low income areas need more sessions.
- No other research, about impact of poverty/deprivation on therapy outcomes for PTSD specifically.

Current study aims:

- Analyse existing data to see if deprivation impacts symptoms severity and therapy outcomes when receiving therapy (CBT or EMDR) for PTSD in NHS Talking Therapies Services.

Methods

- Retrospective analysis of data from larger study.
- Existing data from NHS Talking Therapies services.
- Those screened for PTSD and attended at least 1 session.
- Range of geographical areas.
- $n=2064$
- Impact of Event Scale (first and last)
- Neighborhood deprivation calculated using individual patient postcode (government Index of Multiple Deprivation)

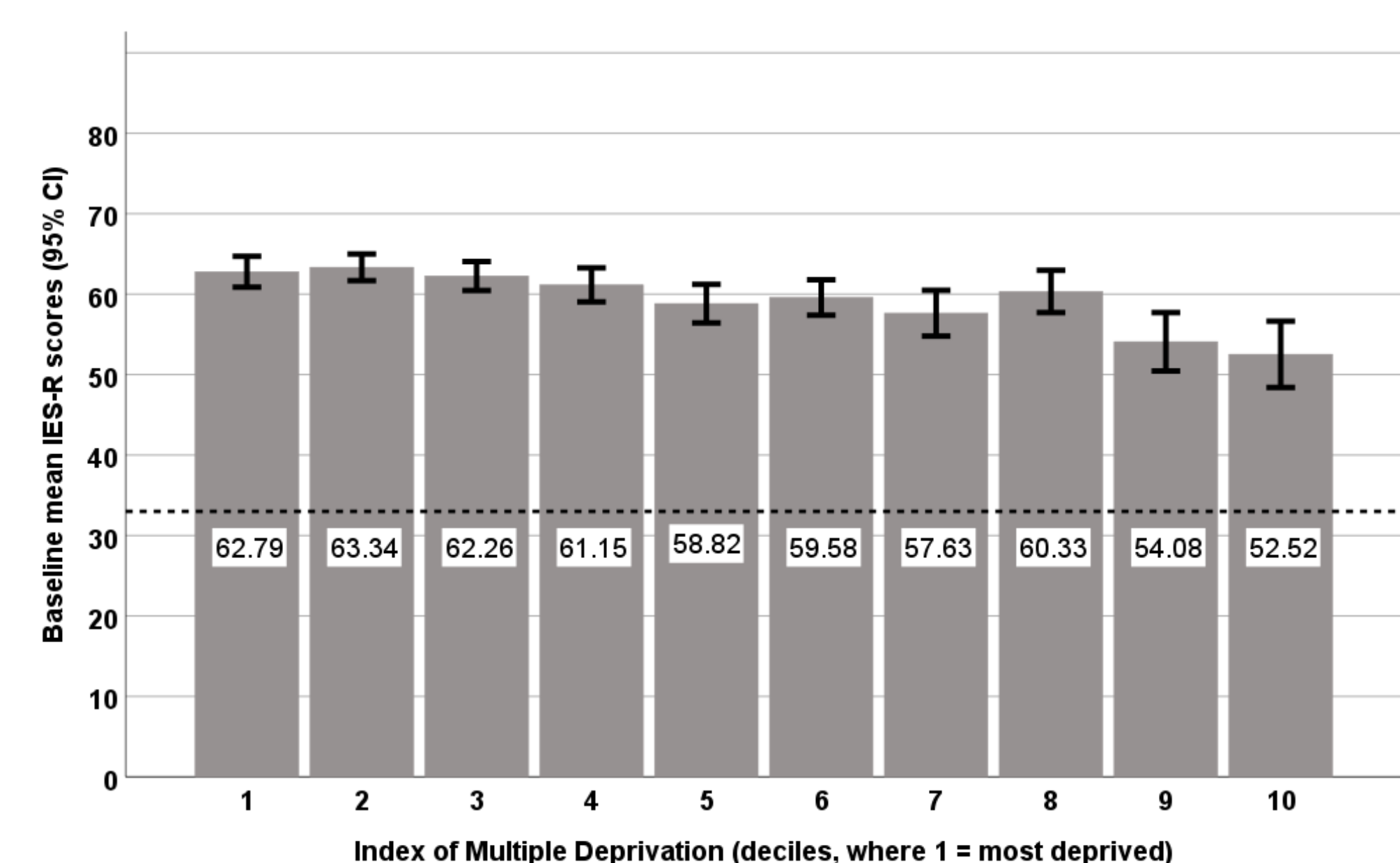


Results

- 3 times as many patients in most deprived quartile compared to least deprived.

Deprivation and baseline scores:

- Significant correlation between higher index of multiple deprivation and higher PTSD baseline scores: ($r = -0.16, p < .001$)



Results: Deprivation and changes over time:

- Multi level modelling controlling for baseline depression and baseline PTSD severity:
- Significant relationship ($B = -0.74, p < .001$) between being from a poorer neighbourhood and ending therapy with higher PTSD scores.
- Unemployment also associated with poorer treatment response ($B = 9.25, SE = 1.08, p < .001$).
- 15.6% difference in reliable recovery rates between most and least deprived groups ($d = .39$).

Conclusion

- Those seeking treatment for PTSD from NHS Talking Therapies more likely to live in deprived areas.
- More deprived = more severe symptoms at start of therapy.
- Experience less of a reduction in PTSD symptoms across course of therapy.
- Unemployment predicts poorer outcomes.

References

Poverty & Deprivation
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