



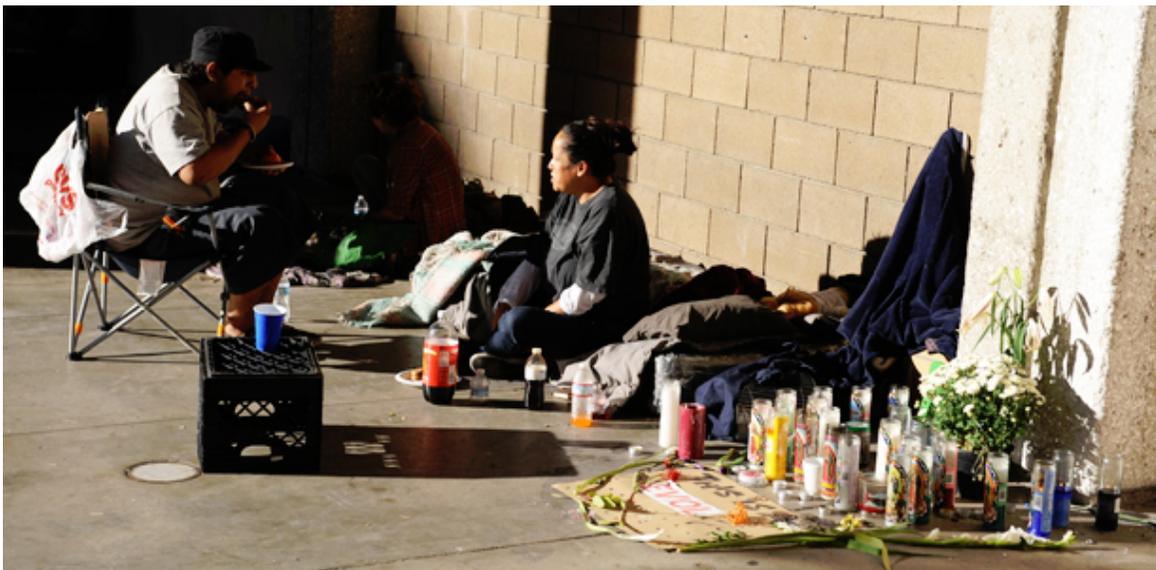
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Poverty and Mental Health: Can the 2-Way Connection Be Broken?

By Esther Entin

When people are mentally ill, they suffer social stigma, have higher health costs, and are at an increased risk of becoming poor.



People who live in poverty are at increased risk of mental illness compared to their economically stable peers. Their lives are stressful. They are both witness to and victims of more [violence and trauma](#) than those who are reasonably well off, and they are at high risk of poor general health and malnutrition. The converse is also true: When people are mentally ill, they are at increased risk of becoming and/or staying poor. They have higher health costs, difficulty getting and retaining jobs, are less productive at work, and suffer the social stigma and isolation of mental illness.

This two-way connection between [poverty](#) and mental illness has been the subject of many studies around the world.

A recent article published in *The Lancet* reviews different types of interventions undertaken in several low and middle-income places including Africa, India, Mexico, Thailand, China and others. The authors first looked at programs intended to improve individual or

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family economic status and monitored changes in measures of mental health including stress and depression in adults, childhood behavior problems, childhood cognitive development, and adolescent self-esteem.

MONEY CAN'T BUY MENTAL HEALTH...

In an effort to determine whether the individuals and families affected by mental illness would show improved mental health, if their financial burdens were decreased, they reviewed a variety of programs designed to provide economic relief. Programs that primarily aimed at alleviating poverty had varied outcomes but generally were not markedly successful in decreasing the mental health problems of the target populations: "Unconditional cash transfer programs had no significant mental health effect and micro credit intervention had negative consequences increasing stress levels among recipients."

...BUT IMPROVING MENTAL HEALTH IMPROVES ECONOMIC HEALTH

The researchers saw more improvement when they looked at the [impact of intervention programs](#) aimed at improving the mental health of people living in poverty. The interventions they reviewed varied from administration of psychiatric drugs, to community-based rehabilitation programs, to individual or group psychotherapy, to residential drug treatment, to family education. They also looked at the impact of mental health help on the rate and duration of employment and on family finances.

Here they found financial situations improved as their mental health improved. There was a "clear trend in which mental health interventions are associated with improved economic outcomes in low income and middle income countries." The studies also showed that all of the interventions improved the mental health status of the target population, and the researchers noted that as the economic status improved, the clinical symptoms continued to improve, which created a "virtuous cycle of increasing returns."

The authors argue that the availability of mental health services should not only be viewed as public health and human rights issues, but also should be viewed as critical for international economic development. They propose that, "the link between income and ill health is stronger for mental health than general health and ... worsening macroeconomic circumstances over coming years could exacerbate the already difficult relation between poverty and mental ill health."

The authors maintain that the cost of improving the mental health of populations in these countries will be well balanced by the improved economic status of the individuals and populations served. They maintain "the finding that mental health interventions can offer clear economic benefits at the microeconomic level of households strengthened the economic case for investment in mental health care" and that such interventions "have the potential to interrupt the cycle of poverty and mental ill health."

This [study](#) further supports the need for accessible, affordable, and appropriate mental health care for all populations.

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