

Epidemiology and Social Psychiatry 02 / Mental Health Policy

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Ethnic inequalities in multiple comorbidities among people with psychosis

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Introduction: Studies have shown ethnic inequalities in health, with a higher incidence of illnesses among people of some minoritised ethnic groups. Furthermore, it has been observed that people with severe mental illnesses have a higher risk for multimorbidity. However, no study has investigated ethnic disparities in comorbidity in people with a schizophrenia spectrum disorder.

Objectives: This study investigates potential ethnic disparities in physical health comorbidity in a cohort of people with psychosis.

Methods: Using a cross-sectional design, we identified service-users of the South London and Maudsley NHS Trust who were diagnosed with a schizophrenia spectrum disorder between 2007 and 2020. We assessed the prevalence of asthma, bronchitis, diabetes, hypertension, low blood pressure, overweight or obesity, and rheumatoid arthritis. Latent class analyses were used to investigate distinct profiles of comorbidity. Multinomial regression was then used to investigate ethnic disparities in these profiles. The regression model was adjusted for gender, age, neighbourhood deprivation, smoking and duration of care.

Results: On a sample of 23,418 service-users with psychosis, we identified two classes of comorbidity: low comorbidity and multiple comorbidities. Compared to the White British ethnicity, a higher risk for multiple comorbidities was observed for people with any Black background, Indian, Pakistani, Asian British, and mixed-race ethnicities. Furthermore, Black African women had a significantly higher risk for multiple comorbidities than their male counterparts.

Conclusions: Ethnic disparities are observed in multiple comorbidities among people with psychosis. Further research is needed to understand the impact of these disparities, especially in relation to mortality.

Disclosure: No significant relationships.

Keywords: multimorbidity; Psychosis; health inequalities; ethnicity

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Parallel latent trajectories of mental health and employment earnings among 16- to 20-year-olds entering the US labor force: A 20-year longitudinal study

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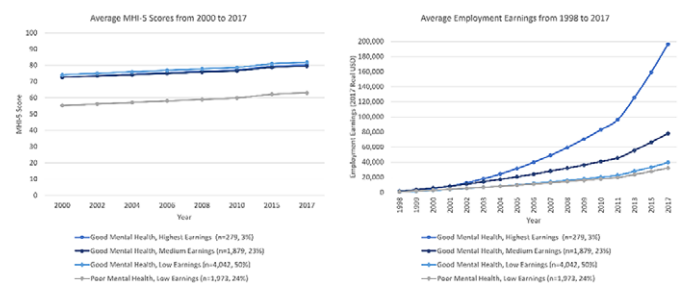
Introduction: Depression and anxiety-related mental health and employment earnings are complexly intertwined but have rarely been studied as parallel processes.

Objectives: Determine the number of latent parallel trajectories of mental health and employment earnings over two decades among a cohort of American youth entering the labor force, and estimate the association between baseline sociodemographic/health factors and latent trajectory class membership.

Methods: This study included 8,173 participants from the American National Longitudinal Survey of Youth 1997, who were 13–17 years old in 1997. The survey occurred annually until 2011 then biennially until 2017. Mental health was measured eight times using the Mental Health Inventory-5 between 2000–2017. Employment earnings were measured annually between 1998–2017, where participants were 33–37 years old. Latent parallel trajectories were estimated using latent growth modeling. The association between baseline predictors and trajectory membership was explored using multinomial logistic regression.

Results: Four latent trajectory classes were identified: good mental health, high earnings (3% of sample, average 2017 earnings ~\$196,000 USD); good mental health, medium earnings (23%, average 2017 earnings ~\$78,100); good mental health, low earnings (50%, average 2017 earnings ~\$39,500); and poor mental, low earnings (24%, average 2017 earnings ~\$32,000). Multinomial models revealed participants who were younger, female, Black, Hispanic, who had lower socioeconomic status, and had used marijuana at baseline had higher odds of belonging to the poor mental health, low earnings class.

Conclusions: Findings highlight the stagnated, parallel course of poor mental health and earnings, and the influence of gender, race, adolescent socioeconomic status, and health behaviors on these trajectories.



Disclosure: No significant relationships.

Keywords: MHI-5; latent parallel trajectory analysis; Depression; Anxiety; Psychological Distress; employment earnings