

Poverty and Sanity

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What is poverty?

- Lacking what is necessary to sustain optimal wellbeing
- Scarcity of life's basic human needs
 - Food
 - Shelter
 - Clean water
 - Social support
 - Economic resources
 - Education
 - Opportunity to grow and flourish.
- World bank- Absolute terms.
 - Extreme poverty less than US\$1.90 (23,370)per day.
 - Moderate poverty less than \$3.10 (38,130)a day.

Who is poor?

- Anyone that is:
 - Not able to meet basic needs (food, shelter, clean water, education, health care etc.
 - Anyone earning below the recommended minimum level of income necessary to meet basic needs

Absolute vs relative poverty

Absolute poverty

Condition where household income is insufficient to afford basic necessities of life. (food, shelter, clothing)

Criteria not changed by economic growth

Relative poverty

When households receive 50% less income than average median incomes.

Criteria will change with economic growth

Who is at risk of being poor?

- Rural dwellers
- Non-white
- Undereducated
- Women
- The young (children and adolescents)
- Lone parents
- Disabled
- Retired
- Unemployed/Underemployed
- Major illness

Some facts about poverty

- Children are mostly affected by poverty
- About 385 million children live in extreme poverty worldwide.
- On average, children born into the poorest 20 percent of households are almost twice as likely to die before age 5 as those born into the richest 20 percent.
- Each year, about 100 million are forced into poverty as a result of health-related expenses.
- About 800 million people still live in extreme poverty and suffer from hunger.

Some facts about poverty

- Children are more than twice as likely to live in extreme poverty than adults. In developing countries, an estimated 19.5 percent of children live on less than \$1.90 a day, compared to 9.2 percent of adults.
- At current trends, nine out of 10 of the world's children living in extreme poverty will live in sub-Saharan Africa in 2030.
- COVID-19- has reversed the gains of more than a decade
- Climate change- is still a major factor
- Conflict-insecurity

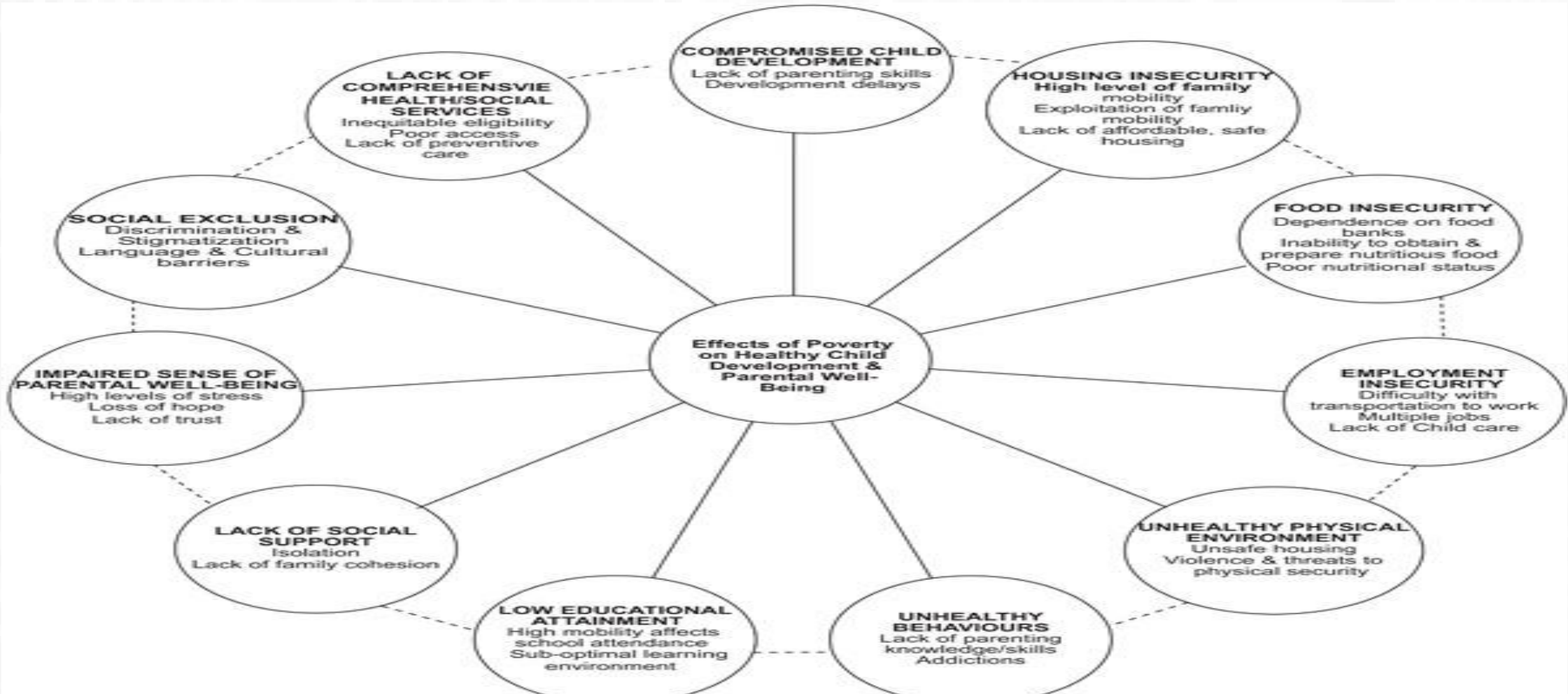
Causes of poverty

- Inequality and marginalization (gender, caste systems, unequal distribution of resources)
- Conflict
- Hunger, Malnutrition and stunting
- Poor healthcare system (maternal and child health)
- Little or no access to clean water sanitation and hygiene

Causes of poverty

- Climate change
- Lack of education
- Poor public works and infrastructure
- Lack of jobs/livelihood
- Lack of government support
- Lack of reserves

Effect of poverty on child development and parental wellbeing



Poverty as a risk factor for mental illness?

- Social causation hypothesis
 - “conditions of poverty, such as stress, increased negative life events, worse physical health, reduced access to health care and stigma are thought to precipitate or maintain mental ill-health”
- Social selection or “social drift” hypothesis
 - “people living with mental illness are thought to drift into, or remain in, conditions of poverty, as a result of increased health expenditure, reduced income and lost employment
- It has been hypothesized that the former theory may more readily apply to depression, whereas the latter may be more appropriate for schizophrenia
- ([Dohrenwend et al., 1992](#); [Saraceno et al., 2005](#)).

Poverty can worsen
mental health outcomes!

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Poverty related factors associated with negative mental health outcomes

- Unemployment (Weich & Lewis, 1998)
- Adverse neighbourhood characteristics (Truong & Ma, 2006)
- Low income, education, social class and socio-economic status (SES) (Lorant et al., 2003)
- Income inequality (Pickett, James, & Wilkinson, 2006)

Do we have any evidence?

- Income:
 - In both facility and community based studies, there is a positive association at bivariate level which drops at multivariate level ([Araya et al., 2003](#))
- Education:
 - Most studies show negative associations between educational level and common mental disorders ([Araya et al., 2003](#))
- Housing:
 - Lack of access to portable water, overcrowding, rented accommodation and squatting
 - *Cammack, P. (2004). What the World Bank means by poverty reduction, and why it matters. New Political Economy, 9(2), 189-211.*
 - *Braithwaite, J., & Mont, D. (2009). Disability and poverty: a survey of World Bank poverty assessments and implications. Alter, 3(3), 219-232.*

Evidence?

- Socio-economic status (SES):
 - Hospital based studies are quite equivocal- High SES have been found to be associated with increased risk of common mental disorders, some have found no associations while others have shown positive associations
 - Social class
 - Food insecurity
- Intervention studies show that:
 - In children and young people, conditional cash transfers may positively impact mental health, with no evidence of negative effects on mental health.

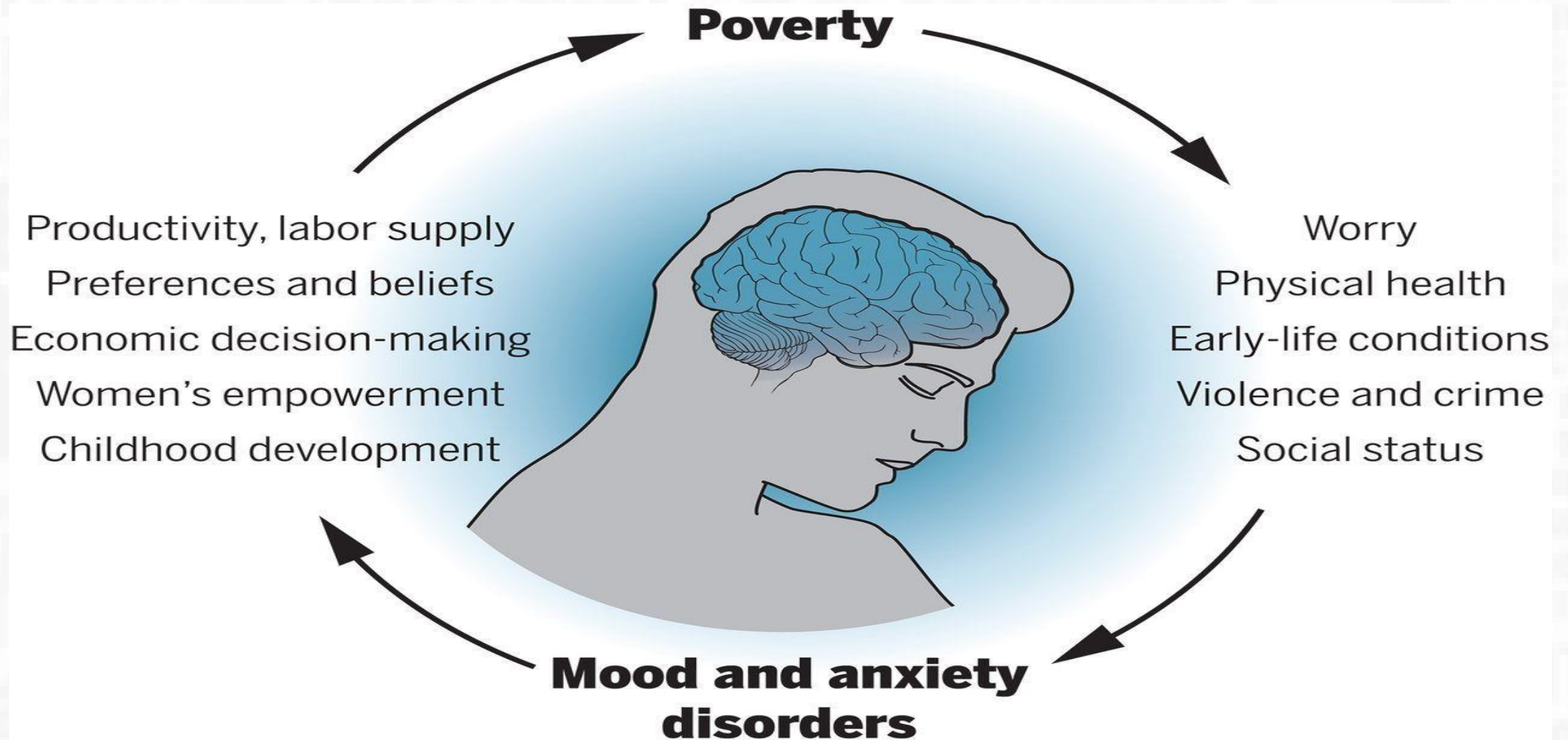
Summary of the relationship

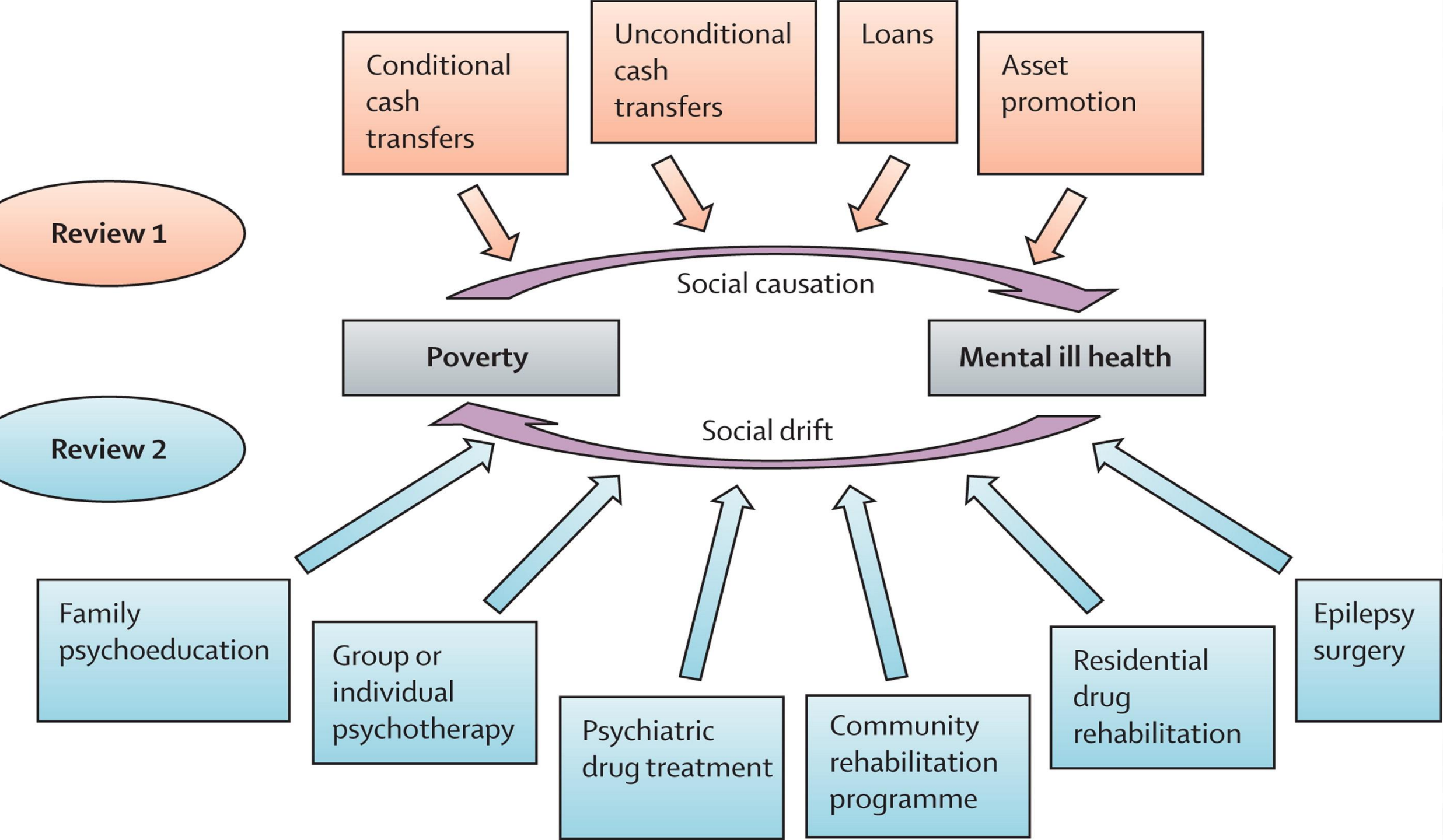
- The relationship between poverty and mental illness is not direct
 - being rich doesn't confer on you the absolute right to be mentally healthy while being poor doesn't mean that you will be mentally ill
- Mental illness is never caused by just one thing
 - Poverty can be one factor that interacts with genetics, adverse life events or substance abuse etc.
- Though, making money temporarily brings joy and feelings of satisfaction, the experience is short lived

The mental health benefits of a credit alert!

- Reverses anger, sadness, irritability
- Reduces worry and stress
- Calming
- Brings joy and elation

How do we mitigate the impact of poverty on mental health?





Relevant stakeholders

- Individual
- Family and significant others
- NGOs
- Government (health reforms and policies)

CAREMI Foundation

- The founder Prof Roger Makanjuola identified the financial limitations that negatively impacted treatment adherence and outcomes
- Began as an individual effort (Personal out of pocket spending)
- The foundation collaborates with individuals, government and other NGOs to provide medication and other support.
- The outcome has been quite favorable!

THANK YOU

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