Studies identify predictors of depression and PTSD among African-Americans, Latinos

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Chronic disease and mental health issues disproportionately affect low-income African-Americans, Latinos and Hispanics, according to the Centers for Disease Control and Prevention. Two new studies by the UCLA Center for Culture, Trauma and Mental Health Disparities shed light on the causes and impacts of this disparity.

The first study, published online by the journal Psychological Trauma, analyzed certain types of negative experiences that may affect low-income African-Americans and Latinos. It found five specific environmental factors, which the researchers call "domains," that can predict adult depression, anxiety and post-traumatic stress disorder.

In the second study, published online by the journal *Psychological Assessment*, researchers used the same five domains to develop a new screening tool for use in clinical settings. The UCLA Life Adversities Screener, or LADS, is a brief questionnaire that can help providers offer more accurate treatment for stress and trauma.

The five domains identified in the first study are:

- Experiences of discrimination due to racial, ethnic, gender or sexual orientation
- A history of sexual abuse
- A history of violence in the family or from an intimate partner
- A history of violence in an individuals' community
- A chronic fear of being killed or seriously injured

The researchers said the effects of these experiences are cumulative and their impact accrues over a person's lifetime.

"The costs to society of these life experiences are substantial," said Hector Myers, a former UCLA psychology professor and first author of the Psychological Trauma study. (Myers is now a professor at Vanderbilt University.) "We know there is a poorer overall quality of life, a loss of productivity, greater social dependency, disability, health and mental health care costs, and early mortality as a result of repeated experiences of stress and trauma."

In the first study, researchers asked 500 low-income African American and Hispanic men and women to self-report various measures of stress and mental health, including experiences of discrimination, childhood violence, poverty and trauma. Using structural equation modeling—statistical methods designed to test a concept or theory—they found a correlation between the cumulative burden of these adversities and the likelihood the subjects would later experience psychological distress. They also found that the greater people's overall burden of these experiences over their lifetime, the greater the likelihood that they would experience more severe symptoms of depression, anxiety and PTSD.

"Unfortunately, much of the psychological distress stemming from chronic life stress and trauma remains undetected and untreated," said Gail Wyatt, a professor of psychiatry at the UCLA Semel Institute for Neuroscience and Human Behavior and a senior author of both studies.

"Only a small proportion of individuals with psychological distress are identified in health care settings, and a smaller fraction of those ever receive appropriate treatment, especially for the experiences of discrimination," said Wyatt, who also is director of UCLA's Center for Culture, Trauma and Mental Health Disparities. "We talk about being discriminated against, but people don't learn how to cope with it

effectively throughout their lives. If they don't manage it well enough, the consequences can be long-lasting and life-threatening."

The second study was led by first author Honghu Liu, a professor in the UCLA School of Dentistry. Working with the five domains, the researchers used regression modeling—a statistical process for estimating relationships among variables—to develop the LADS, a set of questions health care providers can use to screen patients for the effects of adversity and trauma.

"Given the utility and ease of use, LADS could be effective as a screening tool to identify ethnic and racial minority individuals in primary care settings who have a high trauma burden, and who need more extensive evaluation," said Liu, who is an expert in the design of research studies, data analysis and statistical modeling. "We feel it will capture experiences that could be missed with current screening approaches. This could optimize affordable care as it strives to improve prevention of mental health problems."

The Congressional Budget Office estimates that 16 million people have gained health insurance under the Patient Protection and Affordable Care Act. "The ACA provides a unique opportunity to identify those who have not been assessed for the adversities and trauma that can affect mental health needs. This research could provide the tools to make that assessment," Wyatt said.

"The next step is to offer individuals tools to more effectively cope with the adversities and trauma that they endure. One of the advantages of affordable primary care is that we will have the opportunity to offer skills for people who have not had mental health care for those experiences, one day soon. They will no longer have to manage on their own."

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