



Levels of Socio-Economic Status as a predictor of Mental Health

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Abstract

Present study was designed to investigate the impact of socio-economic status on mental health and also to search the relationship between socio-economic status and mental health. As a sample 100 respondents were classified considering their levels of socio-economic status into high and low category into two equal groups. Product moment correlation was used to search the relationship between levels of socio-economic status with mental health. Comparison between high and low socio-economic status respondent was made using 't' Test of significance. For measuring mental health, questionnaire developed by Dr. R. D. Helode was used, and for measuring socio-economic status, scale constructed by Ranbir Singh & Satih Kumar was used. Findings of the study revealed positive significant relationship between levels of socio-economic status and mental health. However, significant variation exist between high and low socio-economic status respondents on mental health, where high socio-economic status respondent found superior over low socio-economic status subjects.

Key words: Mental Health, Socio-economic status

Introduction

Mental health is an important part of public health. According to the Swedish national public health report between 20 and 40 percent of the general population suffer from poor mental health – everything from severe psychiatric disorders such as psychosis to milder mental health symptoms such as nervousness, anxiety or sleeping problems. Whereas the most severe psychiatric disorders have not increased in the population in Sweden during the last decades, there has been an increase in the prevalence of mental health symptoms since the beginning of the 1990s. Poor mental health has large economic and social consequences both for the individual and society. The costs to society for health care, sickness absence, disability pension and loss of production due to poor mental health were estimated to 50,000 million crowns in Sweden in 1997.

Results from previous studies show strong associations between mental health and e.g. social relations, income, working conditions and critical life events. In general, persons with low socio-economic status have poorer mental health than persons with high socio-economic status. Some lifestyle factors, such as physical activity, alcohol consumption and obesity have also been found to be related with mental health. In addition, domestic work has been found to be associated with mental well-being among women. There is a need for a better understanding of these associations in order to plan preventive activities and health care.

Socio-economic factors associated with mental health

Social relations are in many ways important for mental health. Social support is a protecting factor that acts a buffer in psychosocial crisis situations and strain. Poor social support and being belittled were strongly related

with mental health symptoms in the present study. Previous studies indicate that experiences of shame are associated with poor mental health for example among the unemployed.

Personal economy had also a strong association with mental health symptoms. Subjects with economic problems had a higher prevalence of anxiety/depression than subjects without economic problems. Previous studies have indicated that economic hardship both at present and under childhood is strongly associated with poor mental health. Poor mental health has large social and economic consequences both for the individual and society. In Sweden, the prevalence of mental health symptoms has increased since the beginning of the 1990s. There is a need for a better understanding of the area for planning preventive activities and health care.

Objectives

- To investigate the strength of association between levels of socio-economic status and mental health.
- To differentiate between high and low socio-economic status respondents on mental health.

Hypothesis

- A significant positive correlation will exist between levels of socio-economic status and mental health.
- Respondents belongs to low socio-economic status would show poor mental health as compared to high socio-economic status respondents.

Methodology

Sample

Sample of the study consisted of 100 respondents classified as 50 high and 50 low socio-economic strata, selected from various age group of Nagpur city, using purposive random sampling technique. No sex difference was considered.

Tools

- Mental Health Questionnaire developed by Dr. R. D. Helode was used to measure degree of mental health. The questionnaire is standardized having high reliability and validity.
- Socio-Economic Status Questionnaire constructed by Ranbir Singh & Satih Kumar was used to measure socio-economic status of respondents. The scale is highly reliable and valid to measure socio-economic status of age group 18 yrs and above.

Procedure of data collection

The respondents selected for study were called in a small group and tools selected for data collection were administered to them. After completion of task, obtained data were subjected for statistical analysis.

Variables

Socio-economic status was treated as independent variable, whereas mental health of respondents was treated as dependent variable

Research Design

To verify first hypothesis, Co-relational Design was used. For second hypothesis two independent group design was used.

Statistical Treatment

In the first stage, mean and standard deviation of data obtained dependent variable were computed. To investigate the relationship between socio-economic status and mental health, Pearson's Product Moment Correlation was computed. To differentiate between high and low socio-economic status on mental health measure, Student's 't' test for independent samples was computed.

Results and Discussion

In the present investigation, an attempt has been made to search the relationship of levels of socio-economic status with mental health, and to differentiate between high and low levels of socio-economic status on mental health.

To ensure, whether obtained score on dependent variable establish the normality of the sample skewness was computed. The obtained results are reported in table No. 1

Statistical properties of the dependent variable (N=100)

Mean	56.08
Median	58
Standard Deviation	9.29
Skewness	-0.7007

Verification of Hypothesis

To verify first hypothesis, the data was treated by correlation coefficient. The result obtained is given in the following table No. 2

Correlation between Levels of Socio-economic Status and Mental Health

Levels of socio-economic status	Correlation Coefficient
High socio-economic status	0.57
Low socio-economic status	0.38

Inspection of above table shows that, the correlation between levels of socio-economic status and mental health are significant and positive, though low. Significant positive correlation denotes that with increase the levels of socio-economic status degree mental health increases, likewise with decrease in level of socio-economic status scores on mental health decreases.

To verify second hypothesis, data was computed by mean, SD and t test of significance. The results obtained are presented in the following table No.3 showing mean, SD and t value on mental health scores of high and low socio-economic status respondents.

High socio-economic status	Low socio-economic status
Mean=57.78	Mean=54.38
S.D=8.61	S.D=9.92
t=2.01*	

Inspection of table shows that, mean of high socio-economic status respondents is 57.78 and S.D. is 8.61, whereas mean of low socio-economic status respondents is 54.38 and S.D. is 9.92. The co-responding 't' is 2.01 which for 98 df is significant at .05 levels. Since the mean score obtained by group of high socio-economic status respondents is larger than the group of low socio-economic status respondents, it suggests that on mental health high socio-economic status respondents are more superior.

Conclusions

- Significant relationship observed between the levels of socio-economic status and mental health.
- Significant variation exists between high and low socio-economic status on mental health, however high socio-economic status respondents found superior over low socio-economic status dependence.

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