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The Moderating Effect of Severe Economic Recession on the Psychological Distress: Relations with Risky Behaviors and Insurance Status

ABSTRACT

The proposed analysis identified the effect of the 2007-2009 economic recession on the level of psychological distress (PD) as modified by engaging in risky behaviors and insurance status. The objective was to determine if engaging in risky behaviors and insurance status had an impact upon the level of psychological distress experienced during a recession; the timeframe for the study is 2007 representing pre-recession to beginning of recession year, to 2009 representing the recession year, to 2012-2013 representing post-recession years. The study involved the use of a nationwide non-institutionalized adult population, the Mental Health and Stigma optional module found in the BRFSS (Behavioral Risk Factor Surveillance System) survey available in years 2007, 2009, 2012, and 2013. Because the datasets are cross-sectional, this research used the Integrative Data Analysis (IDA) framework. IDA allows for analysis of multiple independent data sets that are pooled into one. Here, pooling was conducted by matching demographic characteristics of participants (sex, race, age, income, and education level) across waves to provide a view of target variables at the population level. Our research found that income had a small effect on PD, pre-, during, and post-recession with no significant effect on the association between PD over time. Increased level of uninsured (percentage of individuals without insurance) had a significant positive effect on PD. Alcohol consumption had a small negative effect on PD with no disruption in the association between psychological distress over time. Smoking had a larger positive effect on PD with a decrease of percentage of individuals smoking from 2009 to 2012 which could have played a part in the disruption of the relationship
of PD between the years. In addition, we found that low psychological distress decreased smoking while moderate and severe psychological distress increased smoking. This is an important finding for smoking cessation researchers, policy makers, and medical personnel to review their policies and programs on smoking cessation.

Policymakers along with mental health providers and insurance companies should investigate the possibility of recognizing PD as a mental illness and include moderate to severe psychological distress as a coverage option.