

Between inequality and mental health: the concept of vital poverty

The next congress of the Italian Society of Psychopathology, entitled “Connections, Cultures, Conflicts”, will be held in Rome from 21 to 24 February 2018 and will address various issues related to psychopathology, neuroscience, new clinical dimensions, integrated treatments. Moreover, a particular space will be reserved for the relationship between inequality, poverty and mental health.

A growing body of data are showing that the prevalence of mental health problems is greater in poorer areas ¹ and that these areas had lower average recovery rates ². Mental health and poverty interact in a vicious circle ³. There is an increased risk of mental illness among subjects who live in poor conditions and, simultaneously, an increased probability for those who are affected by a mental disorder to live in conditions of socio-economic disadvantage. Moreover, poverty has a greater impact on the degree of loneliness of adolescents or old age people ⁴.

Interestingly, there are evidences that low income and material deprivation may affect the cognitive and brain development of children, resulting in an inverse correlation between low socio-economic status (SES) and different cognitive domains, such as language skills, cognitive control, memory and attention ⁵. Much interestingly, an inverse relationship has been highlighted between cortical thickness and low SES ⁶.

The World Health Organization ⁷ has produced a document titled “Breaking the vicious cycle of mental ill health and poverty”, which sums up some fundamental issues:

1. Mental disorders are twice more common among poor people. Data suggest that depression is 1,5-2 times more common among people with low income;
2. Persons who experience hunger or are deeply in debt are at a greater risk of having common mental disorders;
3. The prevalence of mental disorders is greater among unemployed or persons with a lower level of education;
4. People living in poor conditions have an increased risk of developing schizophrenia, and, *viceversa*, people with schizophrenia face a four-fold greater risk of being unemployed, of being divorced or of having lower levels of education.

The definition of SES and poverty is not univocal and it's still object of debate ⁸. Beyond statistical definitions based on rigid criteria based on income and on the material quantification of the available personal resources (absolute poverty and relative poverty), there are new conceptions of poverty, based on less objective parameters, such as the cultural or emotional-values level.

In order to overcome the conceptual limits deriving from the mere economic definition of absolute or relative poverty, we have hypothesized a new concept, the vital poverty. With this expression we mean not only material deprivation, but a restriction of relational, emotional, value, moral and spiritual capacity. The vital poverty, although strongly conditioned by economic poverty, is a broader concept, which refers to an impoverishment of the qualities and general human resources of the individual, to a social involu-

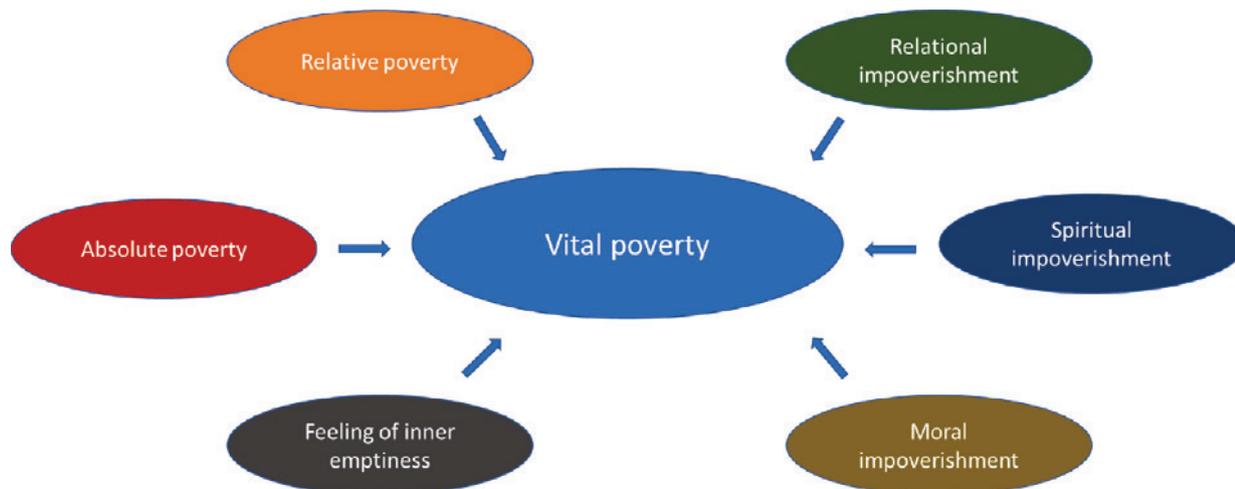


FIGURE 1. *The concept of vital poverty.*

tion. This condition is characterized by a feeling of inner emptiness, a lack of meaning in one's life (Fig. 1).

The vital poverty touches the field of psychopathology. Poverty of values, relational and affective as well as economic impoverishment imply a fallout on the next generations, a poor quality of the couple relationship, a disinvestment in education and in an consolidated system of values, all factors that may contribute to psychopathological vulnerability⁹.

References

- ¹ Patel V, Burns JK, Dhingra M, et al. *Income inequality and depression: a systematic review and meta-analysis of the association and a scoping review of mechanisms.* World Psychiatry 2018;17:76-89.
- ² Delgadillo J, Asaria M, Ali S, et al. *On poverty, politics and psychology: the socioeconomic gradient of mental healthcare utilisation and outcomes.* Br J Psychiatry 2016;209:429-30.
- ³ Marmot M. *The disease of poverty.* Sci Am 2016;314:23-4.
- ⁴ Siracusano A. *Loneliness: a new psychopathological dimension?* Journal of Psychopathology 2017;23:1-3.
- ⁵ Noble KG, McCandliss BD, Farah MJ. *Socioeconomic gradients predict individual differences in neurocognitive abilities.* Dev Sci 2007;10:464-80.
- ⁶ Noble KG. *A brain on poverty.* Sci Am 2017;316:44-9.
- ⁷ WHO. *Breaking the vicious cycle between mental ill-health & poverty* 2007. (http://www.who.int/mental_health/policy/development/1_Breakingviciouscycle_Infosheet.pdf).
- ⁸ Farah MJ. *The neuroscience of socioeconomic status: correlates, causes, and consequences.* Neuron 2017;96:56-71.
- ⁹ Siracusano A, Ribolsi M. *Inequality and mental health.* Il Pensiero Scientifico Editore 2018. In Press

Alberto Siracusano

Department of Systems Medicine, Chair of Psychiatry, Tor Vergata University of Rome, Rome, Italy; President of the Italian Society of Psychopathology