Stress, Anxiety, Depression, and Violence: Findings from an Urban Community College and Implications for Practice

Annecy Baez, Ph.D. Associate Dean Interim Director Psychological Services <u>annecy.baez@bcc.cuny.edu</u>

Janet Heller, Ph.D., M.A., C.H.E.S. Department of Health, Physical Education & Wellness janet.heller@bcc.cuny.edu

Bronx Community College of The City University of New York | 2155 University Avenue, Bronx, New York 10453 | 718.289.5100



NECHA/NYSCHA, Annual Meeting, Burlington, Vermont November 7, 2013

Bronx Community College of the City University of New York





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Who are BCC students?

- <u>Population</u>: 11,500
- <u>Gender</u>: 58% women 42 % men
- <u>Ethnicity</u>: 61% Latino/Hispanic, 33% Black, non-Hispanic
- <u>Age</u>: 34% over 25 years old
- <u>Socioeconomic Status</u>: 45% household income < \$15,000
- <u>Marital Status</u>: 16% married or domestic partner
- <u>Parental Obligations</u>: 31% support children <18 years
- <u>Care Provider</u>: 60% provide care to other people 1 or more hrs/wk
- Work for pay: 45% work for pay 1 or more hrs/wk





ACHA Data Collection

- Spring 2012 semester
- Randomized class sections from MTH 05, ART 11 and MUS 11
- 58 classes surveyed (85 contacted, 68% response rate)
- 1062 students participated (1363 recruited, 78% response rate)
- Trained research assistants collected data from individual classes



BCC vs. National Reference Group Spring 2012

BCC

n= 1,081 Average age = 24.12Sex = 50.8% female 27.6% male Race/Ethnicity 52.5% Hispanic/Latino 19.7% black/African American 4.3% white

National

N= 90,666 Average age = 22.59Sex = 64.2% female 33.5% male Race/Ethnicity 8.4%% Hispanic/Latino 6.4% black/African American 72.6% white



Health Behaviors

- 36% of females reported using condom or other protective barrier within last 30 days during vaginal intercourse compared with 49% nationally.
- 9 times as likely to experience **unplanned pregnancy** compared to national reference group.
- 33% of females and 49% of males meet **national fitness guidelines**.
- 3 times as many students reported eating no servings of fruits and vegetables each day compared to national reference group.
- 50% of females and males consider themselves overweight.
- 63% have **tested for HIV** compared to 27% nationally.



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Trauma, Violence, Mental Health Symptoms and Stress



Trauma or Difficulties Within the last 12 months, college students reported experiencing:



Violence

Within the last 12 months, college students reported experiencing:





Mental Health

Students reported experiencing the following within the last 12 months:





Stress

Within the last 12 months how would you rate the overall level of stress experienced?





Fishing Expedition



Exploratory Analysis of Data:

- Chi-square calculations of associations between independent variables and dependent variables.
- Independent variables: gender, age, race, ethnicity, relationship status, enrollment status (full-time/part-time).
- <u>Dependent variables</u>: stress, mental health symptoms, violence.



Stress

(no stress, some stress, high stress)

Independent Variables	Stress – statistically significant associations		
Gender	Females higher (36% vs. 26% males)		
Age	No differences		
Race	Bi-racial/multiracial most likely to report high stress (59%)		
Ethnicity	No differences		
Relationship status	No differences		
Full-time/part-time student	No differences		



Mental Health Symptoms

- Hopeless
- Overwhelmed
- Exhausted
- Sad
- Depressed

- Anxiety
- Anger
- Injured self
- Considered suicide
- Attempted suicide



Mental Health Symptoms

Independent Variables	Statistically significant associations		
Gender	<u>Females</u> : hopeless, overwhelmed, exhausted, lonely, sad, depressed and anxiety		
Age	<u>Ages 18-20</u> : injured self, considered suicide <u>Ages 21-24</u> : hopeless, lonely, depressed, anxiety, anger, injured self, considered suicide		
Race	Bi-racial/mulitracial: considered suicide		
Ethnicity	No differences		
Relationship status	Not in a relationship: anger, considered suicide, depressed, lonely, sad		
Full-time/part-time student	No differences		



Violence Variables

In the last 12 months experienced:

- Physical fight
- Physically assaulted
- Verbally assaulted
- Sexually touched without consent
- Sexual penetration without consent

- Victim of stalking
- Emotionally abusive relationship
- Physically abusive relationship
- Sexually abusive relationship



Violence

Independent Variables	Statistically significant associations	
Gender	<u>Males</u> : physical fight, physically assaulted, verbally threatened <u>Females</u> : sexual penetration attempted without consent, victim of stalking, emotionally abusive relationship, physically abusive relationship, sexually abusive relationship	
Age	<u>Ages 21-24</u> : verbally threatened, victim of stalking, emotionally abusive relationship, physically abusive relationship	
Race	No differences	
Ethnicity	Non-Hispanic: physically assaulted	
Relationship status	No differences	
Full-time/part-time student	Part-time student: sexually touched without consent, sexual penetration attempted without consent, sexual penetration without consent	



Why do students report low levels of stress and other mental health indicators for anxiety and depression ?





Hypotheses

- 1. Stress and mental health symptoms may be <u>manifest</u> as physical health symptoms rather than perceived as a mental health problem.
- 2. The <u>perception</u> of stress and mental health may be different in BCC students due to culture.
- 3. Mental health symptoms may be <u>under-</u> <u>reported</u> due to cultural prohibitions.
- 4. There may be <u>protective effects or resilience</u> related to school or culture that serves to reduce levels of stress and mental health symptoms.



Violence, Stress, and Somatic Syndrome

- Studies have show a connection between women's health problems and DV in such conditions as Stress Related Somatic Syndrome characterized by pain, fatigue, mood disorder, cognitive dysfunction, and sleep disturbance.
- These syndromes include but are not limited to fibromyalgia, chronic fatigue syndrome, temporomandibular disorder, and irritable bowel syndrome.
- Exposure to the stressor of violence is likely to create a state of vulnerability for the stress-related somatic syndromes and also to contribute to symptom expression and severity.
- Understanding the relationship between violence, stress, and somatic syndromes will help in clarifying the consequences of violence exposure to long-term health and health-related quality of life.
- Crofford, L.J (2007) Violence, Stress, and Somatic Syndromes. <u>Trauma</u> <u>Violence Abuse. 2007 Jul;8(3):299-313.</u>
- Jordan, C.E (2007) The Health Implications Of Violence Against Women: Untangling the Complexities of Acute and Chronic Effects: A Two-Part Special Issue. <u>Trauma Violence Abuse. 2007 Jul;8(3):243</u>



Depression, Anxiety and Allergies

- The research into allergies and depression anxiety, clearly demonstrates another of the many physical causes of depression anxiety, and backs up the thesis that depression anxiety is a physical condition which affects the body, brain, mood and behavior.
- Besides allergies, other physical causes of depression anxiety include antibiotics, alcohol, junk food, and pollution.



Allergens

- Allergens enter your body and bloodstream triggering an inflammatory immune histamine response, which in turn releases cytokines that can enter the brain and cause inflammation, leading to depression and anxiety.
- Allergies indirectly cause depression and anxiety.
- Impact of allergy treatment on the association between allergies and mood and anxiety in a population sample.
- Goodwin RD, Galea S, Perzanowski M, Jacobi F.
- Source
- Department of Psychology, Queens College, City University of New York (CUNY), Flushing, NY, USA. rdg66@columbia.ed



Percentage of Respondents Who Reported Physical Health Symptom by Each Mental Health Symptom

(N = 1081)

	Allergies	Asthma	Back pain	Migraines
Hopeless	25.6%*	13.7%	21.2%**	14.9%***
Overwhelmed	26.6%***	13.3%	20.7%***	13.9%***
Exhausted	26.3%***	14.0%**	21.9%***	13.8%***
Lonely	25.0%*	13.4%	21.6%**	15.6%***
Sad	25.0%*	13.9%*	22.0%***	15.7%***
Depressed	25.5%*	12.2%	24.3%***	16.5%***
Anxiety	27.5%**	15.9%**	24.0%***	15.9%***
Anger	26.3%**	13.9%	22.1%**	14.7%**
Intentional injury	25.5%	23.9%*	31.1%*	19.6%*
Considered suicide	17.9%	10.4%	22.4%	15.6%
Attempted suicide	33.3%	20.8%	29.2%	17.4%

* p value < .05</p>

** p value < .01

***p value <.001



Implications & Recommendations

- Domestic Violence is a serious public health issue that occurs within the context of a family, or in other situations such as dating violence, sexual assault, and stalking.
- DV requires a comprehensive understanding and interventions.



Implications ...

- Increasing education and awareness
 - Identifying Warning signs in dating relationships that may lead to later violence.
 - Increase understanding of the health consequences of DV.
 - Address many of our students view about violence against women.
- Some students believe DV is mainly physical Not aware of emotional, mental, and other forms of abuse.
- Others believe the emotional abuse more serious than the physical abuse.

Implications...

- Encourage young adults to build relationship based on trust.
- Encourage them to avoid relationships that confuse "love" with power, control and jealousy.
- Increase awareness with educational posters.
- Provide resource brochure that list services available on and off camps with a "plan for quick escape".



Implications ...

- Screen for IPV
 - Titanium Schedule Data Base web based intake CCAPS measures college assessment of psychological symptoms –depression, hostility and sleep disturbance screen for IPV.
 - Decided Screen for IPV at every intake.
 - Searched for short IPV screening and we HITS (Hurts/Insults/Threatens/Screams.)
 - <u>http://www.orchd.com/violence/documents/HITS_eng.pdf</u>



Implications...

- Awareness and Education via creative methods
 Psycho-educational Workshops
 - Community Resources Majors Office
 - Multi-cultural Resources inviting to college
 - Drama Club skits on DV from a diverse perspective
 - Digital Story Telling and DV (Silence Speaks)
 - The Dream Table reaching all student and increasing awareness on many issue – DV was the issue this week.



Implications ...

- Stress Reduction, Self esteem and Emotion Regulation Via groups and workshops using DBT strategies, Mindfulness and Acceptance Based workshops
 - Mindfulness (to facilitate attention control, reduce judgments toward the self and others, and to build self-awareness and self-management skills);
 - Interpersonal effectiveness (to help reduce chaos and invalidation and build social support);
 - Emotion regulation (to reduce emotional vulnerability, reactivity, and misery, and to facilitate emotion modulation and self-management);
 - Distress tolerance (to interrupt negative emotion escalation and urges to engage in out-of-control behavior, and to "accept" things in life that are very undesirable but unchangeable).
- <u>http://www.newharbinger.com/news/dialectical-behavior-therapy-college-students</u>
- ACT for Depression Workshop



Mindfulness and Acceptance

MINDFULNESS & ACCEPTANCE FOR COUNSELING COLLEGE STUDENTS

Theory and Practical Applications for Intervention, Prevention & Outreach In Mindfulness and Acceptance for Counseling College Students, clinical researcher Jacqueline Pistorello explores how mindfulness and acceptance-based approaches such as acceptance and commitment therapy (ACT), dialectical behavioral therapy (DBT), mindfulness-based cognitive therapy (MBCT), and mindfulness-based stress reduction (MBSR) are being utilized in higher education settings around the world to treat student mental health problems like severe depression, substance abuse, and eating disorders, and/or to help students thrive-both in and out of the classroom.



References

- Crofford, L.J (2007) Violence, Stress, and Somatic Syndromes. *Trauma Violence Abuse*. 2007 Jul;8(3):299-313.
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