Area deprivation and generalized anxiety disorder in a British community cohort

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Generalized anxiety disorder (GAD) is one of the most common anxiety disorders, and has been associated with disability, impairment, and high health service use. The link between social and health inequalities has been well-established. Area deprivation has been associated with mortality and depression, however, its association with GAD is less clear. We aimed to examine whether area-level deprivation is associated with past-year GAD over and above individual-level circumstances in a British community cohort.

This was a population-based study capturing individual-level data on socio-demographics, medical histories, disability level and DSM-V psychiatric disorders using detailed health and lifestyle questionnaires. Quartiles of the Index of Multiple Deprivation were used to examine area-level deprivation. A total of 11,422 women and 8,878 men over the age of 40 were recruited between 1996 and 1999 through general practice age-sex registers in Norfolk, UK. To account for intra-cluster correlation, a population-average model using generalized estimating equations was constructed.

In total, 2.6% of women and 1.8% of men had past-year GAD. Women living in the most deprived quartile had a significantly higher risk of developing GAD than women living in the least deprived quartile (OR = 1.56, 95% CI: 1.12, 2.16), and this association persisted after adjusting for individual- and area-level covariates. No association was observed for men (OR = 1.01, 95% CI: 0.65, 1.59). The association with deprivation was strongest for women with more than 3 lifetime episodes of GAD or who experienced episode onset at age 30 or younger.

These novel findings are of particular importance to clinicians and public health authorities. Policy focusing on mental health should address area-level characteristics and target women living in deprived areas. Further, health professionals living in deprived areas require adequate training to appropriately screen for, diagnose, and treat GAD.

Key message

- Policy focusing on mental health should address area-level characteristics and target women living in deprived areas.