Discrimination and risk of psychosis among ethnic minorities

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Background

• Ethnic minority status is consistently associated with greater risk of psychosis in global meta-analyses.

• Underlying mechanisms for this association are not known but a potential pathway is higher rates of perceived discrimination.

• Limited studies of whether discrimination is associated with greater risk of psychosis, and if discrimination partially explains the association between ethnic minority status and psychosis.

Objectives

• Determine the association between any major experience of discrimination and risk of psychosis.

• Determine the association between multiple unique types of major experiences of discrimination and risk of psychosis.

• Explore if major experiences of discrimination partially explain the association between ethnic minority status and psychosis.

Methods

Data Set: European Network of National Schizophrenia Networks Studying Gene-Environment Interactions (EU-GEI)

Sample: 1,130 cases of first-episode psychosis (36.7% ethnic minorities) and 1,498 controls (21.2% ethnic minorities) from Brazil, France, Italy, Netherlands, Spain, and United Kingdom

Measures:

• Minority Status: Individuals who self-reported any ethnicity other than the White ethnic majority

• Major Experience of Discrimination Scale: 12 items on being treated unfairly in employment, education, housing, medical care, public transport, and interactions with police and courts

• Psychosis: Individuals age 18-64 years contacting specialist mental health services for first time (ICD-10 codes F20-F33)

• Covariates: Age, sex, parent social class (4 categories), parent history of psychosis, cannabis use (never/past/current)

Data Analysis:

• Multilevel mixed effects logistic regression models with catchment site as the level-2 variable and sampling weights to account for the oversampling of ethnic minorities

Results

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<th>Description</th>
<th>Cases N</th>
<th>%</th>
<th>Controls N</th>
<th>%</th>
<th>Minority N</th>
<th>%</th>
<th>Majority N</th>
<th>%</th>
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<td>1007</td>
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</table>

Conclusions

• Over a third (35.4%) reported at least one major experience of discrimination, higher in cases (p<.001) and minorities (p<.001).

• Only 7.2% reported 3+ unique types of major discrimination, higher in cases (p<.001) and minorities (p<.001).

• No association with psychosis and any, one or two types of major discrimination (vs. no reported discrimination).

• Two-fold greater odds of psychosis for 3+ unique types of major discrimination (vs. no reported discrimination). In stratified analyses, this association holds for ethnic minorities (OR 2.23, p<.001) but not the ethnic majority (OR 1.53, p=.335).

• Exploratory causal mediation did not find that any major experience of discrimination or 3+ unique types of major discrimination helped explain the association between ethnic minority status and psychosis.

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