A study of stressful life events in an urban setting

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INTRODUCTION

“Stress is not what happens to us. It is our response to what happens.”

The term stress was introduced by Canon to denote the stimuli like physical, emotional and chemical stimuli which when exceed certain amount of threshold, may lead to disturbance into the internal milieu of individuals. Some amount of stress is necessary for the functioning, motivation in life. However, if the stress increases, harmony of life may be disturbed.

Life events can be defined as any major change in person’s circumstances that affects interpersonal relationships, work related, leisure and recreational activities. Stressful life events and defective coping mechanisms may lead to various diseases like cardiovascular events, hypertension, metabolic syndrome, mood disorders. Correlation has also been found with some of the psychiatric disorders. With the advent of rapidly changing life style, various life events, requires a lot of adjustments at individual, family and social levels. Those events lead to conscious and subconscious effects in the life of an individual.

Positive association has been found between the number of stressful life events and incident metabolic syndrome. A significant association between the number of stressful life events at baseline and waist circumference at follow-up was observed. Number of life events more than 3 had increased odds of moderate alcohol craving and severe craving.

ABSTRACT

Background: Life events may be desirable, undesirable or ambiguous and will trigger highly individualistic reactions. These events, depending upon the nature of their occurrence, might propel an individual into working in a more productive way or they may negatively affect the person. Hence studying these life events, their interplay with human emotions is important.

Methods: This is a community based cross sectional study done in the urban field practice area of a tertiary care hospital. Participants were included in the study using systematic random sampling.

Results: Going on a pleasure trip or pilgrimage was the most commonly reported life event, followed by appearing for examination or interview. Financial problem was the most common undesirable life event as experienced by the participants.

Conclusions: Total number of life events and undesirable events are major contributors to psychological distress.

Keywords: Life events, Stress, Urban population
Higher number of stressful life events was also associated with prolonged QT interval.\textsuperscript{4}

Stressful life events are found to be associated with psoriasis and chronic urticaria.\textsuperscript{5}

This study was aimed at studying the occurrence of the life events among adult population of an urban community, who are not suffering from any apparent morbidity.

The urban population is more subjected to stress, owing to rapid globalisation, industrialisation, socioeconomic changes, & paradigm shift in cultural, social & familial dynamics of the society. However, studies regarding occurrence of life events in normal urban population are scarce. This study was aimed to understand the pattern of stressful life events in adults, most commonly occurring stressful life events in adults, which may help in predicting the vulnerable individuals and preventing further harmful impact.

**Aim**

- To study stressful life events in an urban community.

**Objectives**

- To identify and enlist the stressful life events experienced by the participants.
- To determine the association between various socio-demographic factors, occurrence of life events.

**METHODS**

**Study design**

A cross sectional observational study

**Study area**

Urban field practice area of a tertiary care hospital and a teaching medical institute.

**Study period**

September 2016 to December 2017.

**Inclusion criteria**

Residents aged 18-60 years who agreed to be the part of the study

**Exclusion criteria**

Exclusion criteria were any person with a history of known psychiatric illness; relatives, kith/kins who were living temporarily with the family.

**Sample size estimation**

Sample size is estimated using the formula $n=4pq/E^2$ which is 178.

**Sampling method**

**Systematic random sampling**

Study area consists of a 44 chawls each with 40 households. Lottery method was used for selecting houses from each chawl (44×40=1760, total number of houses. Sample size = 178 hence, 1760÷178 = 9.8 i.e. 10). Hence, every 10\textsuperscript{th} household from that number was selected for the interview, till sample size was reached.

**Study procedure**

A written informed consent was taken from the participants after assuring them about anonymity. Data was collected by face to face interview.

**Study tool**

**Presumptive stressful life events scale**

This scale has been developed by Gurmeet Singh et al.\textsuperscript{6} The scale is used for Indian population in order to study life events experienced by them.

Data was analysed using SPSS software version 22.

**RESULTS**

Mean age of participants was 33.7±10.8 years.

Apart from the events mentioned in the Table 2, trouble at workplace with colleagues, subordinates and seniors, illness of family members, change of residence, trouble with neighbours, change in social activities, and gain of new family members have been reported among the most commonly occurring events by the participants.

The events were further categorized into desirable, undesirable and ambiguous life events.

These ambiguous events cannot be clearly categorized into the desirable or the undesirable events and are subject to the individual reaction to them. As observed from the Table 4, change in working conditions or transfer was the most commonly reported ambiguous event (16.7%).

Average number of ambiguous events was 0.6±1.1.

Average number of undesirable life events was 1.4±1.5.

Age was significantly associated with number of life events. Apart from that, other factors like sex, marital
status, occupation, caste, religion, type of family and socioeconomic class had no significant association with number of events.

Table 1: Sociodemographic profile of participants.

| Age      | No of participants | Percentage (%) |
|----------|--------------------|----------------|
| 18-30    | 89                 | 50             |
| 31-40    | 44                 | 24.7           |
| 41-50    | 30                 | 16.9           |
| 51-60    | 15                 | 8.4            |

| Sex     | Percentage (%) |
|---------|----------------|
| Male    | 44.4           |
| Female  | 55.6           |

| Marital status | Percentage (%) |
|----------------|----------------|
| Married        | 54.5           |
| Unmarried      | 43.8           |
| Widowed        | 1.7            |

| Family type | Percentage (%) |
|-------------|----------------|
| Joint       | 14             |
| Nuclear     | 66.3           |
| 3 generation| 19.7           |

| Education | Percentage (%) |
|-----------|----------------|
| Illiterate| 1.1            |
| 1st-5th std| 5.6         |
| 6th-9th std| 18.5         |
| 10th-12th std| 24.2      |
| Graduate   | 40.4           |
| Post graduate | 10.1      |

| Family members | Percentage (%) |
|----------------|----------------|
| ≤5             | 78.1           |
| 6-10           | 20.8           |
| 11-15          | 1.1            |

| Socioeconomic status | Percentage (%) |
|----------------------|----------------|
| Upper lower class    | 2.2            |
| Lower middle class   | 41             |
| Upper middle class   | 27.5           |
| Upper class          | 29.2           |

Mean age of participants was 33.7±10.8 years.

Table 2: Five most commonly reported life events.

| Life events                                    | Frequency (%) |
|------------------------------------------------|---------------|
| Going on a pleasure trip or pilgrimage         | 157 (90.2)    |
| Appearing or an examination or interview       | 40 (23)       |
| Financial problems                             | 35 (20.1)     |
| Change in working conditions / transfer        | 29 (16.7)     |
| Self / family members unemployed               | 26 (14.9)     |

Table 3: List of desirable events.

| Life events                                      | Frequency (%) |
|------------------------------------------------|---------------|
| Going on a pleasure trip or pilgrimage           | 157 (90.2)    |
| Appearing or an examination or interview         | 40 (23)       |
| Change of residence                              | 19 (10.9)     |
| Getting married or engaged                       | 7 (4)         |
| Change or expansion of business                  | 4 (2.3)       |
| Gain of new family member                        | 15 (8.6)      |
| Marriage of daughter or dependent sister         | 12 (6.9)      |
| Outstanding personal achievement                 | 10 (5.7)      |

Table 4: List of ambiguous events.

| Life events                                      | Frequency (%) |
|------------------------------------------------|---------------|
| Change in working conditions or transfer         | 29 (16.7)     |
| Change of social activities                      | 16 (9.2)      |
| Change of eating habits                          | 15 (8.6)      |
| Change in sleeping habits                        | 15 (8.6)      |
| Unfulfilled commitments                          | 10 (5.7)      |
| Spouse begins or discontinues job                | 5 (2.9)       |
| Retirement                                       | 2 (1.1)       |
| Beginning or end of schooling                    | 2 (1.1)       |
| Prophecy of an astrologer or palmist             | 2 (1.1)       |

Table 5: List of undesirable life events.

| Life events                               | Frequency (%) |
|-------------------------------------------|---------------|
| Financial loss or problems                | 35 (19.6)     |
| Self or family member unemployed          | 26 (14.6)     |
| Family conflict                           | 24 (13.4)     |
| Chronic Illness of a family member        | 21 (11.8)     |
| Trouble at work                           | 20 (11.2)     |

Figure 1: Weighted score of participants on PSLES.
It was noted that 66.3% of participants belonged to nuclear families, 19.7% belonged to three generation family and 14% were living in a joint family. This finding reflects the changing family types, especially in urban areas where increasing number of people live in nuclear families and the number of joint families is on the decline. In the case control study done by Kumar et al on association of life events and somatoform disorder, 68% participants in cases group and 74% among controls belonged to nuclear family, 30% among cases and 24% of controls were from three generation family, and merely 2% participants, both in cases and control groups were from joint family.9

90.2% participants reported going on a pleasure trip or pilgrimage followed by 23% reported appearing for examination or interview. These findings can be attributed to the fact that study participants mostly belonged to 18-30 age group and are more likely to go for the trip and also appear for the examination or interviews. On the other hand, in a study done in mainland China, “normal” subjects who were sampled from 24 sites and “Problems with Interpersonal Relationship” was the most commonly encountered psychosocial stressor in Chinese daily life. About 34% of normal Chinese subjects were stressed by being misunderstood or berated; 17% of married persons experienced difficulties with child rearing; 15% of married women had troubles with mothers-in-law.10 In a study done by Singh et al, it was observed that average number of events occurring in lifetime was 10.34±5.4 and for one year, it was 1.9±2.6.6

Average number of desirable life events was 1.5±0.9. In a study done by Singh et al categorization of events was done and consisted of 10 desirable events.6 Average number of undesirable life events was 1.4±1.5 with financial problem being the most commonly undesirable reported event. In a study done by Mattoo et al among the alcohol and opioid dependent men, range of undesirable life events was observed between 0-4.4 In a study done by Sharma et al financial problems was the most commonly associated undesirable life event in the patients of depression.11 Average number of ambiguous events reported was 0.6±1.1. Here change in working condition or transfer was the most commonly reported event, followed by change in social habits 43.3%.

43.2% participants scored between 0-100 and the number of participants with high scores decreased with increasing scores. This finding might be attributed to the fact that general population is less likely to experience severe life events with higher weighted scores.

Gender of the participants had no significant effect on the number of occurrence of the events. Events were equally distributed in both males and females. This finding was consistent with the findings of study done by Singh et al where no significant difference was observed in the number of the stressful events experienced by the participants based on their gender.6

### DISCUSSION

In the above study 50% of the participants belonged to the age group of 18-30 while the participants belonging to age of 51-60 years were less, i.e. only 8.6%. The mean age of participants was 33.7±10.8 years. This finding was different from the study done by Singh et al where 33.5% participants were of age 45 years and above.6 In another study done by Mattoo et al average age of participants was 37.6±9.5 years.7

In the study, the number of female participants (55.6%) was more than the number of male participants (44.4%). This was different from study done by Singh et al number of male participants was 60% of the sample size and number of female participants was 40%.6

It can be noted that 54.5% of the participants were married, 43.8% unmarried and only 1.7% were widowed or widowers. This finding might be attributed to the age wise distribution of study participants where most of the subjects belonged to younger age. In a study done by Singh et al, it was observed that 70.5% of the participants were married, 21% unmarried, 4.5% were divorced and 4% were widowed.6 In a case control study done by Jena, 87.7% of participants were married 4.7% were single and 7.4% were widowed / separated.8

It was observed that 40.4% of participants were graduates while only 1.1% were illiterates. In a study done by Singh et al, it was observed that 30.5% of the participants had studied up to college, 21% each studied up to primary school and matriculation while 27.5% were illiterates.6 In a study done by Jena et al, 83.5% of the participants in the cases group had studied only up to standard 5th only, 15.5% up to standard 6th, 9th, 1.18% up to standard 12th. Among the controls, 59.3% had studied up to 5th standard, 20% up to 6th-9th standard, and 21.7% up to 10th-12th standard.8

### Table 6: Factors influencing number of the events.

| Sr. No | No of life events       | P value |
|--------|-------------------------|---------|
| 1      | Sex                     |         |
|        | Male ≤2                  | 35      | 44 |
|        | Female ≥2                | 41      | 58 |
| 0.69   |                         |         |
| 2      | Age                     |         |
|        | ≤40                      | 50      | 83 |
|        | ≥40                      | 26      | 19 |
| 0.01*  |                         |         |
| 3      | Occupation               |         |
|        | employed                 | 38      | 59 |
|        | unemployed               | 38      | 43 |
| 0.29   |                         |         |
| 4      | Marital status           |         |
|        | Married                  | 46      | 51 |
|        | Unmarried                | 29      | 49 |
| 0.37   | Widowed/widower          | 1       | 2 |

This finding might be attributed to the changing family types, especially in urban areas where increasing number of people live in nuclear families and the number of joint families is on the decline. In the case control study done by Kumar et al on association of life events and somatoform disorder, 68% participants in cases group and 74% among controls belonged to nuclear family, 30% among cases and 24% of controls were from three generation family, and merely 2% participants, both in cases and control groups were from joint family.9
It was observed that, participants below the age of 40 years reported more number of stressful life events. This might be because of the fact that participants below the age of 40 are more likely to experience stressful events related to work, finance and family conflict while those above that age, study participants are more likely to have stability in life and have lesser chances of experiencing workplace troubles. It might also be attributed to recall bias in participants with age above 40 years, while younger participants are more likely to remember and report events experienced by them. This finding differs from the findings by Singh et al where the number of events experienced by the participants was not associated with their age.6

CONCLUSION

Average number of desirable and undesirable life events was almost similar. Financial difficulty was the most commonly reported undesirable life event. Life events are not however solely responsible for psychological distress. Those events, if persistent for a long time will be root cause of further distress and illness. Hence identification of distressful events in normal population is necessary. Identifying vulnerable individuals who are facing more number of stressful life events, and psychological help should be given if an individual experiences difficulty to face a situation. Increase in awareness in the community about the stressful life events and their effect should be made a priority.

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