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Loneliness, a neglected psychological cost of poverty.

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Abstract— This paper documents the frequency of loneliness experience for mothers and children living in poor conditions. It describes the multitrait-multimethod strategy followed in a program in a major research sponsored by the National Autonomous University of Mexico from which are derived the data presented in this article. The results show that both women and children living in impoverished conditions experience lonely episodes significantly higher than those living in affluent conditions. It is noteworthy that mothers reported a lower frequency perception about lonely episodes in their children contrasting to the frequency with which they reported the loneliness experience. Results are discussed in light of possible conceptual, methodological and empirical implications related to the study of poverty and its psychological costs. (Abstract)

Keywords; Poverty, loneliness, multitrait-multimethod, mothers, children.

I. INTRODUCTION

Poverty, as a complex phenomenon has become almost in a "common place" where diverse disciplines, from the biological to the economic and administrative, propose options for its possible reduction or solution. In addition, loneliness is a phenomenon essentially psychological [1] whose complexity lies in the quality of the individual perception of affective sources that he or she has. From diversity, quality and intensity of affective bond perceived by an individual will depend on the frequency of loneliness experience. Despite the apparent relationship that would exist between poverty status and loneliness experience, the link between both phenomena has been little studied [2, 3]. Both poverty and loneliness refers important lacks there are few scientific studies that account for this possible link. While poverty as macroeconomic variable refers shortage of physical, social and economic resources [4] loneliness is related to a deficit between perceived emotional resources and affective needs met [5]. The presented research sought to answer the following question: What is the frequency of loneliness experience in mothers and children living in poor conditions?

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According to World Bank estimates, currently 1200 million people in world live in poverty and remains below 1, 25 dollars per day. This represents 200 million people less than reported until 2008; however, by 2012 it was estimated that the number of poor would rise about 44 million due to higher food prices [6].

The poverty map generated by international institutions as the UN indicates that the poorest regions of world are located in Africa and India while in North America the proportion of poor is lower. Specifically in Latin America-LA there are 180 million poor people, of which 59.8 % are homeless people living on less than one dollar a day [7]. By contrast, the richest man in the world lives in Mexico [8]. This and other social paradoxes allowed identify LA as the most unequal region in the world [7].

The concept of poverty is controversial both for its definition as for measurement. While in economic terms has been traditionally linked with the scarcity of resources to meet basic needs and achieve full social integration of individuals that suffer it. It is unclear what quality or neither quantity of the needs to reach nor the magnitude of the shortages that must be considered to identify a person as living in poverty. Thus, in Mexico the measurement of poverty has become a challenge for social sciences involved in the study of this problem. While in most developed countries the poverty level is established from per capita income, in Mexico have developed four methods to assess this problem (see Table 1).

Table 1. Methods to assess poverty in Mexico

	METHOD	DEFINITION
1.	Unsatisfied Basic Needs - UBN	Selecting a range of needs. It defines a minimum level of satisfiers for every need and identifies the population under each of these levels.
2.	Poverty Line -PL	It examines the potential of family consumption from current income. Poverty is conceptualized in relation to the definition of a standard of living.
3.	Integrated Poverty Measurement - IPM	Conceptualizes poverty as insufficient resources, by contrast to the mere satisfaction of specific needs. It evaluates the available resources to lead an "acceptable" lifestyle according to prevailing social standards.
4.	Measurement of Quality and Quantity of Life - MQQL	Quantifies the amount of life associated with the quality of education. It calculates the survival rate of live births in each population stratum. It considers the amount and quality of life as a basic measure of welfare, in relation to the minimum threshold, any deficit in the quality and quantity of life is an indicator of deprivation.

This variety of methods to measure poverty in Mexico facilitates discrepancies and confusion when trying to identify the proportion of population living in impoverishment. According with the National Council for Evaluation of Social Development Policy-CONEVAL [9], at the beginning of this decade, 52 million Mexicans living in asset poverty, while 28 million Mexicans suffering of food poverty, with damaging consequences particularly for children.

In the last two decades some important investigations [10, 11, 12, 13] have documented in the fields of social and medical sciences that there are implied psychological and public health costs related with poverty. It is clear that poverty not only evidence lacks but generates costs at different levels. Among the costs not yet sufficiently documented are those for mental health. According to the psychological literature [14] a key factor that explains some of the adverse consequences of development in poverty are living in chaotic environments [15]. Chaotic environments are understandable as those where

the individual is exposed to multiple physical and psychosocial stressors. The accumulation of adverse environments and confused social conditions, rather than mere exposure to a single stressor such as economic deprivation, is considered the key or defining aspect of children growing up in poverty. Many children can withstand the demands of one or maybe two stressors, even if they are traumatic or of longer duration. However, when children are confronted with a multitude of environmental and social demands, especially chronic and imperceptibles ones, the system physical as well as social and psychological are more likely of dysfunction [16].

While there are some similarities in the psychological response to poverty regardless of social context in which participants develop [17], there are cultural characteristics that favor the perpetuation of impoverished conditions. In this regard, Montero, Evans and Monroy [18] documented that mothers living in poverty were more conservative expectations on their children's academic performance and identified as trades rather than professions future for them. In contrast, mothers who were living in affluent projected future range and even graduate college for their children. As shown, the expectations of the mothers seem to facilitate the perpetuation of the conditions in which their children develop. The evidence suggests that expectations as well as the quality of the interactions that occur between mother and son could have some influence on both psychological and academic development of children.

While the impact of poverty imposes restrictions on child development, not least are the consequences of this problem on adult functioning. In this regard, Montero [19, 20] has documented the tendency of women living in poverty to experience more loneliness, depression and stress than those living in affluent conditions.

It is already known that poverty entails both social and physical costs, and now is feasible to assume there will be costs in terms of mental health conditions linked to impoverished and the most vulnerable individuals would be children. Therefore, this study sought to answer the following research question: What is the frequency of loneliness experience in mothers and children living in poor conditions?

I. METHOD.

A. Participants.

191 participants, of which 50% were mothers and the remaining percentage were children between 8 and 10 years old

B. Measurements.

Poverty.

To measure poverty levels, it was generated a composite index about six of the proposed variables combining two methods to measure poverty: NBI and LP (see table 1). With two or more deficits in the following indicators participants were classified as belonging to the poverty group.

The variables selected to obtain the poverty level were:

- (a) Housing infrastructure (piped water, electricity and drainage).
- (b) Housing quality (durability of the materials of walls and ceilings).
- (c) Amenities in the dwelling (basic appliances: refrigerator, stove, washing machine, from those available)
 - (d) Technological resources (Internet access and computer).
- (e) Educational attainment of household head (high education or less scored as a component of poverty).
- (i) Economic income based on the minimum amount of wages received at the family level, with 4 or less minimum wages per month, scored as an element of poverty.

Loneliness, validity and reliability.

To measure the frequency of loneliness, we used the Multidimensional Inventory of Loneliness-IMSOL [1] in adult version, with 38 items and the children's version with 8 items. Both versions were Liker scalars of five points (Never=0 to All the time= 4).

Construct validity of the IMSOL scale for adults, with 4 kinds of emotional deficits from equal numbers of affective sources: (1) self perception of wellbeing, (2) friends, (3) family and (4) coworkers. Internal consistency gathered through Cronbach method fluctuated from $\alpha = 0.80$ to 0.94

The children's version was gathered by selecting the eight highest load items from scale of IMSOL. In a previous study these items were applied to 455 children between 8 and 10 years. The internal consistency of this scale was $\alpha=0.85$

C. Procedure.

Two teams of graduate students conducted home interviews. The training consisted of handling specialized equipment to record environmental noise (sound level meter) and heart rate in children (digital sphygmomanometer). Also, they were trained to conduct structured interviews based on questionnaires. Note this study was derived from a research program funded by the National Autonomous University of Mexico [20]. Of the 23 variables that constitute the battery of instruments, direct and indirect considered in the research

program mentioned, this article only includes the relevant variables to answer the research question.

The participant dyads were directly recruited in public schools from Mexico City. The project manager interviewed the principal who gave permission to hold mothers to an informational meeting. Mothers who agreed to participate freely made them to sign a letter of voluntary consent and set an appointment to visit them in their homes.

Household interviews lasted 90 minutes in average; both mother and the focal child were interviewed in the same session. It should be noted that the measure of loneliness in mothers comprised two parts. On one hand they were asked how often they experienced loneliness and moreover they were questioned about how often perceived the focal child (between 8 and 10 years old) experienced loneliness. On the other hand, the child was asked directly how often he or she felt lonely. The questions to measure loneliness of mother were 38, while the questions made to children were 8, and mothers answered the same questions. Therefore, answers of mothers were contrasted against the delivered by their children.

D. Data analysis

The SPSS-15 program was used to analyze the data. We gathered descriptive statistics to know the socio demographic sample characteristics. The psychometric criteria from the questionnaires used also were obtained and the t test was applied to identify possible differences between the two groups considered (poor and no poor) by the loneliness frequency experienced by the mothers and their children. It is convenient to mention that we gathered others measurements direct (heart rate, noise) and indirect (attitudinal questionnaires) but those not were included in present paper.

II. RESULTS

To document possible differences and similarities in the response of mothers and children living in poverty and non-poverty situations regarding to physical stressors, socio-emotional and physiological, we conducted a research program consistent with a multitrait-multimethod methodology, obtaining direct measures (physical and physiological) in combination with indirect records (questionnaires and interviews).

Household interviews were conducted with 191 motherchild dyads. Among the variables considered are included: poverty level (six indicators), environmental noise, housing density, frequency of loneliness in both mothers and children, depression, perceived stress, self-control, stressful life events, heart rate in children and tolerance to frustration. The maternal education fluctuated from elementary school to postgraduate courses. While mothers in affluent conditions reached graduate school (4%), mothers in poverty reached only high school level (75%).

A. Poverty.

57% (n= 109) of the participants were located in the poverty group. This implies that at least showed two deficits when exploring the six poverty indicators. The remaining 43% (n=82) were located in non-poverty group.

B. Loneliness.

When comparing the answers given by mothers and their children, independently, to the loneliness questionnaire, significant differences were found in terms of poverty group to which they belonged (see table 3). The means show both women and children living in poverty reported significantly more often the loneliness experience.

Table 3. Loneliness experience frequency by poverty group

Scale	Group	N	Mean	SD	t	Sig.
Loneliness	No	82	.78	.58		
experience	poverty				3.81	.000
in children	Poverty	109	1.16	.75		.000
Perceived	No	82	.84	.61		
loneliness	poverty				1.20	.217
experience in children by their mothers	Poverty	109	.96	.68	1.20	.217
Loneliness	No	82	1.73	.39		
experience in mothers	poverty				4.45	.000
In mothers	Poverty	109	2.01	.45		

However, significant differences were not detected when mothers were asked about the loneliness experience that they perceived in their children. Mothers, both in poverty and in affluent conditions, underestimated loneliness experiences of their offspring.

Table 4. Loneliness factors per poverty group

Factor						
Lack of:	Group	N	Mean	SD	Т	Sig.
Self wellbeing	No poverty	82	1.04	.63	3.85	.000
	Poverty	109	1.42	.69		
Friends	No poverty	82	2.16	.63	1.05	.295
	Poverty	109	2.05	.69		
Couple	No poverty	82	2.23	.79	.72	.471
	Poverty	109	2.32	.94		
Work mates	No poverty	82	2.96	.86	3.2	.000
	Poverty	109	3.38	.91		

On the other hand, after analyze the deficient affective sources in women, significant differences were detected en two of four factor of loneliness (see table 4). Loneliness experience arose from lacks of emotional self-wellbeing and support from co-workers. The trends of means indicated that the group in poverty experienced loneliness more often.

III. DISCUSSION AND CONCLUSIONS

Based on the obtained results, the answer to the research question is that both mothers and their children aged between 8 and 10 years experience loneliness. This evidence is important in at least three levels:

At conceptual level, the loneliness experience can now be identified as one of psychological costs associated with poverty. To date the impact of impoverished conditions was associated with social dysfunction and physical deterioration as malnutrition and stunting growth. Results presented here are consistent with those documented by Evans [14] regarding the damage effects of poverty on mental health of children. Furthermore, the findings are consistent with the results of McLeod & Shanahan [11], and Evans & English [21] on the negative impact exerted by poverty status in the mental health of whose sufferer it. In addition, loneliness is a variable that is associated with physical conditions of impoverishment, economic and social development [18].

At methodological level, the strategy for data collection followed in the research program from which derived the present study corresponds to a transactional conception [22]. In this, the interaction between the individual and its surrounding represents the unit of analysis under study. In coherence, one of the contributions of this study was to document the responses both mother and the focal subject (the child, between

8 and 10 years old) to the same process (loneliness experience). While it would be desirable to increase the sample to increase the ecological validity of the results, it is worthwhile to try to transcend the measure bias to consider the response of the mother-child dyad to the same experience. Note this type of measure could be named as cross-validation and constitutes a robust option from which derives more precise observations. For example, the underestimation of the loneliness experience of the child would not be possible to detect if we didn't gather similar measures of loneliness experience in both mother and child. This finding not only demonstrates the difference in perceptions of mothers and children in relation to emotional states experienced by the last ones, but also suggests some degree of family dysfunction that would be worthwhile to investigate deeper.

Interestingly, while mothers identified their own loneliness experience, they minimize the loneliness experience of their children. On this regard, some questions emerge: How good mothers establish communication with their children? Is it so threatening the loneliness experience for mothers that rationalize the possible loneliness experience of their children perceiving fewer loneliness episodes instead of which actually occurred? How mothers teach their children to manage their emotions and feelings? Are mothers able to achieve same functional management of loneliness experiences? Does loneliness experience have the same quality in impoverished conditions than in the affluent? Indeed, these and other questions wait to be elucidated. While already have some preliminary findings regarding optimization of socioemotional resources of mothers in poverty [23].

Finally at the empirical level, the obtained results point to the need to develop community intervention programs that promote monitoring and management of emotions throughout the life cycle.

These findings suggest that loneliness experience represents one of the psychological costs of poverty. Going forward, the challenge is to find viable options to reduce or prevent its possible impact on the emotional development of those living in impoverished conditions.

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