

Traumatic life events

by Susan Crompton

Everyone complains these days about being “stressed out.” Some people are impatient and frustrated with life’s inconveniences; others feel irritated and aggrieved by

the hassles of everyday living. But there are more severe causes of stress in life: a family member is gravely ill, a close friend dies, a couple separates. Even coping with happy occasions,

like marriage or the birth of a child, can be stressful.

Stress has a proven effect on people’s physical and mental health, which is why both psychologists and

CST What you should know about this study

This article is based on data drawn from the 1998 General Social Survey (GSS). In that year, the GSS interviewed over 10,000 Canadians aged 15 and over living in private households in the 10 provinces. Among the many questions asked was a sequence of questions about several key life experiences. This article examines data about five of these experiences, defined as traumatic life events. More than 9,900 respondents, representing over 22.1 million Canadians, answered these questions.¹ The data provide information only about the type of event experienced in the preceding 12 months but not the number of times that it occurred. For example, even if two family members had died, the respondent would be able to report only that she had experienced the death of a family member.

Traumatic life event: in the 12 months preceding the survey, the respondent had experienced one or more of the following five events: the death of a family member, the death of a close friend, the serious illness or injury of a family member or a friend, had themselves been seriously ill or injured, or someone had left or moved into their home (including the birth of a child or a new relationship).² For the sake of variety, “major crisis” and “severe shock” are used as synonyms.

The Holmes-Rahe scale

In 1967, Thomas Holmes and Richard Rahe published the “Social Readjustment Rating Scale” in the

Journal of Psychosomatic Research. The scale attempts to quantify the impact of 43 stressful events in terms of the extent to which a person would need to adjust their established lifestyle in order to adapt to the situation. Selected values from the scale are reprinted below (highest value is 100).

Stress event	Event value
Death of spouse	100
Divorce	73
Marital separation	65
Death of a close family relation (excludes spouse)	63
Illness or wounds (illness or injury)	53
Marriage	50
Dismissal (job loss)	47
Marriage reconciliation	45
Illness of a family member	44
Pregnancy	40
Addition of a new family member	39
Death of a close friend	37

Source: <http://www.mdmultimedia.com/Formatio/Socio/Holmes-e.htm> (accessed October 22, 2002).

1. 8% of respondents did not answer the questions at all and are excluded from the study.
2. Three questions in this sequence are not included in the analysis: change of job or starting a new job (affecting 14% of adults aged 15 and over); loss of job (6%); and sense of belonging to the community (57% felt very or somewhat strong ties).

medical researchers are concerned with stressors. When Thomas Holmes and Richard Rahe developed their now-famous “Social Readjustment Rating Scale” (published in the *Journal of Psychosomatic Research* in 1967), their purpose was to rate a life event in terms of the amount of effort it would take a person to adapt to the situation. Events receiving the highest weight are those involving loss: the death of a spouse is rated at 100 out of 100; divorce, separation and death of a family member ranged from the mid-60s to mid-70s. Further down the scale are events that are joyful but nevertheless disruptive of a person’s routine; getting married scores almost as high as suffering through a serious personal illness or injury, while adding a new member to the family is almost as difficult to adjust to as a family member’s long illness. In a controlled experiment lasting two months, Holmes and Rahe found that people who had accumulated stress scores of 300 points or higher in the six months preceding the experiment had a significantly higher rate of illness than those who scored lower.¹

In 1998, the General Social Survey (GSS) asked respondents if they had experienced any traumatic life events in the previous 12 months. This article finds out how many Canadians have to cope with difficult personal events like the serious illness or injury of a close friend, family member or themselves; the death of a family member or close friend; or someone leaving (or moving into) their home, including the birth of a child or new relationship.

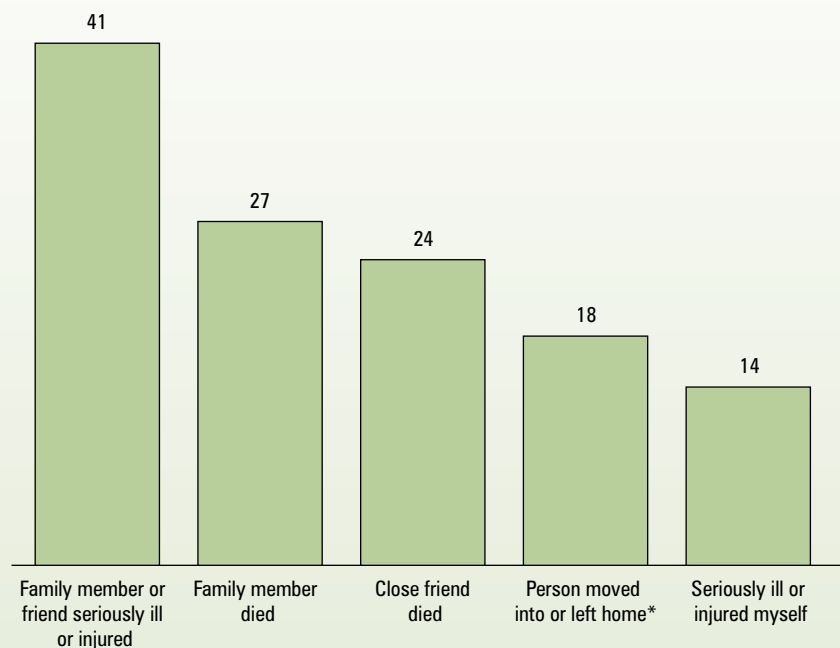
Traumatic life events affect two in three Canadians

According to the 1998 GSS, over two-thirds of Canadians aged 15 and over had experienced at least one traumatic life event in the 12 months preceding the survey. The most common event — reported by 41% of



Over four in 10 Canadians have had to deal with the serious illness of a friend or family member in the last 12 months

% of population aged 15 and over



* Includes birth of child, new relationship.

Source: Statistics Canada, General Social Survey, 1998.

adults — was the serious illness or injury of a close friend or family member. About one-quarter (27%) were affected by the death of a family member and 24% by the death of a close friend.

Not only do the majority of Canadians undergo such severe shocks in a year, but many have to cope with multiple crises. Almost one-quarter (23%) reported they had experienced two types of crises in the same year, and over one-sixth (16%) three or more. Perhaps because of their role as caregivers, women were more likely to have experienced several types of traumatic events: 17% had dealt with three or more, compared with 13% of men.

The greater number of types of events reported by women may also reflect women’s larger numbers in the

older population. Adults aged 55 years and over were significantly more likely than younger people to report having a traumatic life event (74% versus 65%). And although older men were just as likely as women aged 55 or over to report one or two types of events in the previous year (73% versus 74%), they were significantly less likely to report having three or more — 17% compared with 22% of women.

Multiple traumatic life events more common to those reporting illness or death

It is not surprising that the more types of crises a person had lived through,

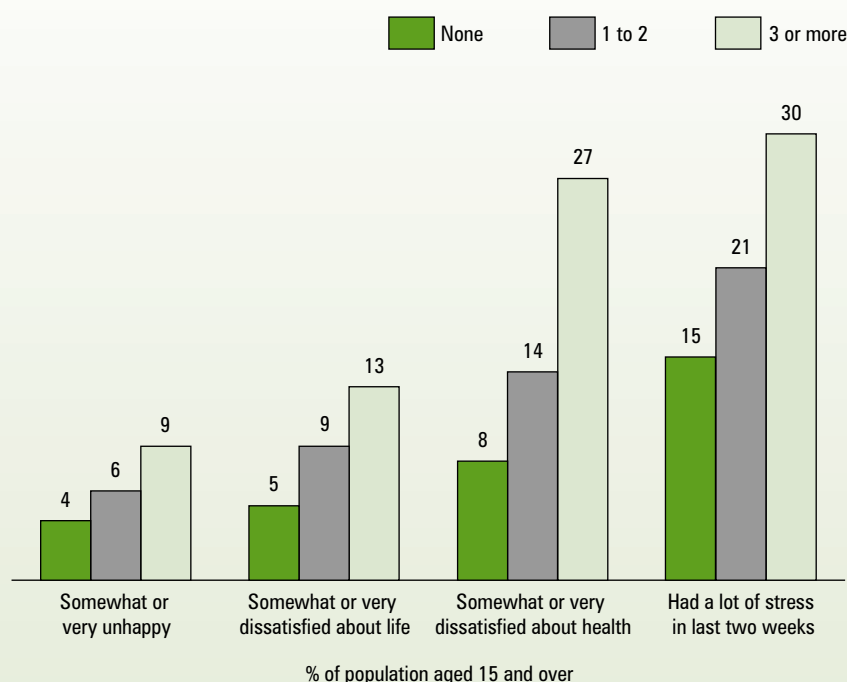
1. Source: <http://www.teachhealth.com> (accessed October 22, 2002).

Experienced traumatic life event (TLE) in past year

	Both sexes	Women	Men
	% of population aged 15 and over		
No TLE	33	31	34
One type of TLE	30	29	31
Two types of TLE	23	24	22
Three types of TLE	11	13	10
Four or five types of TLE	4	4	3

Source: Statistics Canada, General Social Survey, 1998.

Traumatic life events experienced in past year



Source: Statistics Canada, General Social Survey, 1998.

the older they tended to be. Canadians dealing with severe shocks involving illness or injury and death tended to be older — their average age ranged between 42 and 50 years old — and serious illnesses and deaths often occurred in the same year for

these people. For example, the great majority of adults who said that a family member or friend had been seriously ill had dealt with additional crises in the past year — 41% with two and 35% with three or more. In many cases, the other events included

a death: almost two-thirds of those who reported the serious illness or injury of a close relative or friend also said a family member had died that year.

On the other hand, half the people who said that someone had moved into (or left) their home were under 35, which is the prime family formation age. Compared to adults reporting the other types of major crises, they were most likely to have experienced only that one event in the previous 12 months.

Stress often reduces people’s enjoyment of life. Compared with others, people who reported three or more types of severe shocks were significantly more likely to be unhappy, dissatisfied about life in general and dissatisfied with their current state of health.² And they were much more likely than others to feel they had gone through the wringer very recently, with 30% saying they had experienced a lot of stress in the previous two weeks.

Stress can make you sick

The physical and mental effects of too much stress can include fatigue, depression, anxiety attacks, sleep disturbance, ulcers, bowel problems, thyroid gland problems, high blood pressure, abnormal heart beat, skin rashes, and decreased resistance to infections. The way in which too much stress can manifest itself depends mainly on a person’s physiological “weak link” (for example, their cardiovascular system, immune system,

2. When those who reported a serious personal illness or injury are excluded from the analysis, 20% of people who experienced three or more types of traumatic events say they are very or somewhat dissatisfied with the current state of their health. The corresponding percentages for those who reported no traumatic events (10%) and those who reported one or two (15%) are statistically significantly lower.

digestive system or brain), which tends to be an inherited characteristic.³ Of course, stress can also lead to problems if people deal with it in unhealthy ways, such as drinking, smoking, giving up exercise, or overeating.

One theory that may help to explain the fact that some people appear to handle stress better than others relates to “sense of coherence.” A sense of coherence is “the extent to which people feel that life is meaningful, manageable, and comprehensible.”⁴ Having a high sense of coherence may allow people to cope better with sudden unexpected or unpleasant events. Analysis of data from the National Population Health Survey shows that people with a high sense of coherence tend to be in better health than those with a lower sense. The study could not, however, establish which factor is the cause and which the effect. In other words, does being in better health produce a strong sense of coherence, or does a strong sense of coherence produce better health?⁵

Effects of day-to-day stress

Between the annoyances of daily living and the shock of a severe trauma are chronic stressful situations. Money issues — such as having a big mortgage or loan, or undergoing a change in financial position — are an important cause of ongoing stress. Other stressors include changing responsibilities at work, conflict with colleagues or supervisors, arguments with family members, and so on.

The 1998 GSS asked people who had had a lot or moderate amount of stress in the past two weeks (51% of Canadian adults) to identify the main cause of that stress: 44% replied that it was work, 18% named their family, 11% their finances, 9% school work, 6% their personal health and 4% stress in general. For some people, these worries can become quite debilitating, wearing down their strength and their health. In an Ipsos-Reid poll conducted for CTV and the *Globe and Mail* in 2002, two-thirds (67%) of respondents felt that they put too much pressure on themselves; 48% reported that their sleep patterns suffered, and 41% said their personal health was affected by stress.⁶

A recent Statistics Canada study examined the long-term health of adults who experienced high personal stress; that is, they were trying to take on too much at once, felt pressure to be like other people, felt that others expected too much of them, felt that their work around the home was not appreciated, felt that others were too critical. The results showed that highly stressed men and women had lower odds of enjoying “continuing good health” in subsequent years, compared with adults who had not been stressed out. They were also more likely to develop chronic conditions during the next four years.⁷

Summary

Over two-thirds of Canadians aged 15 and over have experienced at least one traumatic life event in the past

year. The most common type of event was the serious illness or injury of a close friend or family member, followed by the death of a family member or a close friend. Almost four in 10 adults coped with two or more crises during this period. People aged 55 or over were more likely than younger adults to report coping with three or more types of traumatic events. Women were also more likely than men to handle multiple shocks over the year, perhaps because of their role as caregivers and because they account for a larger proportion of the older population. Not surprisingly, people who had lived through at least three types of major life crises were significantly more likely than others to feel unhappy, dissatisfied with life, dissatisfied with their current state of health and highly stressed.



Susan Crompton is Editor-in-Chief of *Canadian Social Trends*.

3. <http://www.teachhealth.com> (accessed October 22, 2002).

4. Hood, S.C., M.P. Beaudet and G. Catlin. Spring 1996. “A healthy outlook.” *Health Reports* (Statistics Canada Catalogue no. 82-003) 7, 4: 25.

5. *ibid.* 21-32.

6. *Canadians and stress: A special report*. Ipsos-Reid: Public Release Date September 19, 2002. http://www.angusreid.com/media/dsp_displaypr_cdn.cfm?id_to_view=1620 (accessed September 23, 2002).

7. *Health Reports*. 1996.