



UCL-Penn Global COVID Study

Lessons from COVID-19: Reflections, Resilience and Recovery

How Do We Trust (Again)? Paranoia & Mental Health

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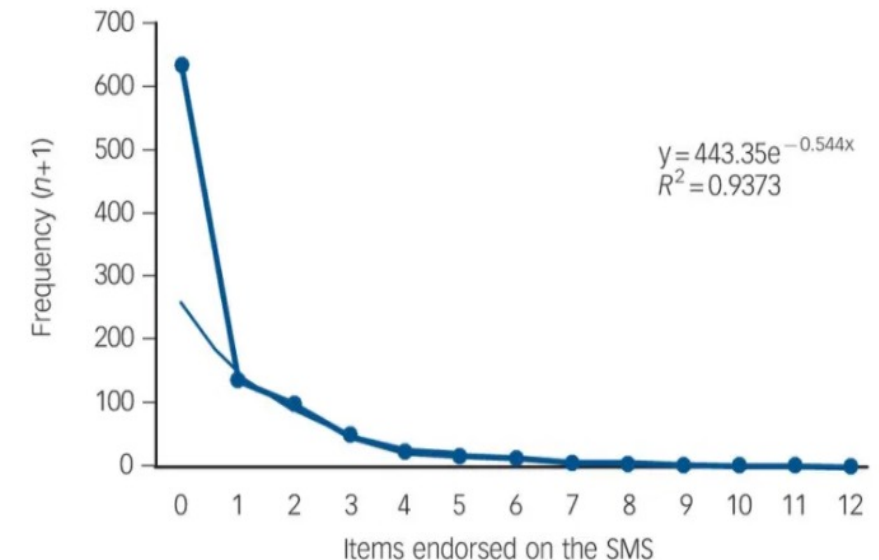
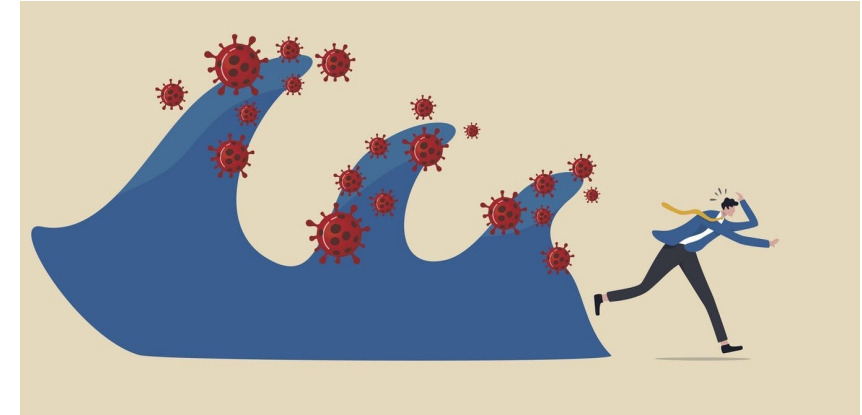
Why are we interested in trust?

- Trust is the **bedrock** of a successful relationship.
- During the global pandemic (and even before), **trust** has been continually challenged at various levels (e.g., individual, institutional, societal, global)
- **Paranoia, excess social mistrust, "is the unfounded fixed belief that others are out to cause intentional harm"** (Freeman & Garety, 2000)



Rationale of the study

- The coronavirus as an 'invisible' killer may erode our trust in others.
- Paranoia impairs functioning and are implicated with poorer **mental health** and **physical health** (e.g., high blood pressure, heart problems, social withdrawal).
- Paranoia and mistrust lie on a **continuum** of severity and is a **key symptom** of schizophrenia.



Rationale of the study

Schizotypal personality (22-items)

1. Cognitive-perceptual anomalies
 2. Interpersonal deficits
 3. Disorganised thoughts
- Peculiar, eccentric or unusual thinking and perceptions;
 - Suspicious or paranoid thoughts;
 - Magical thinking, superstitious, belief in special powers;
 - Blunted affect, odd mannerisms;





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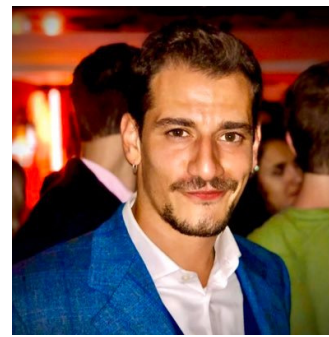
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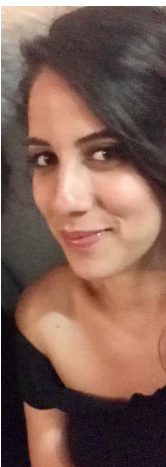
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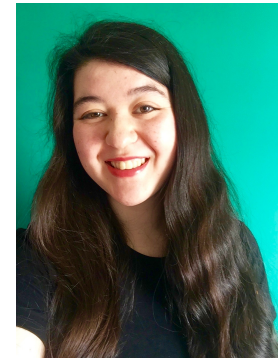
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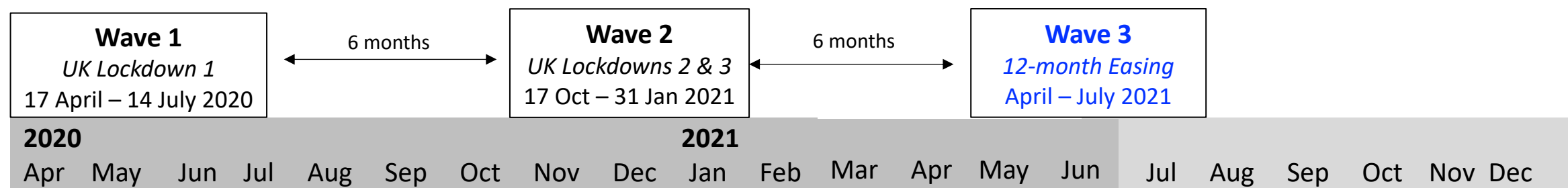
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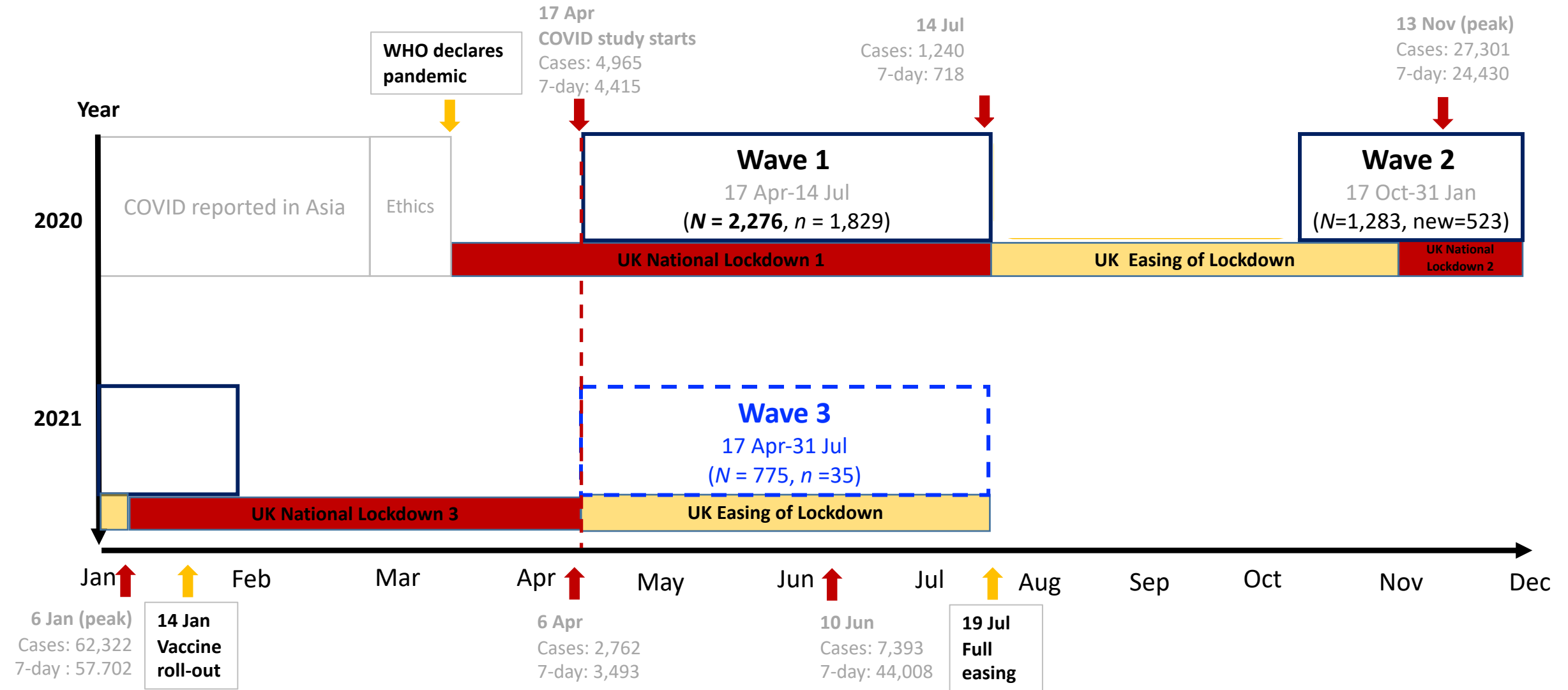
Three 30-minute online surveys in 8 languages.

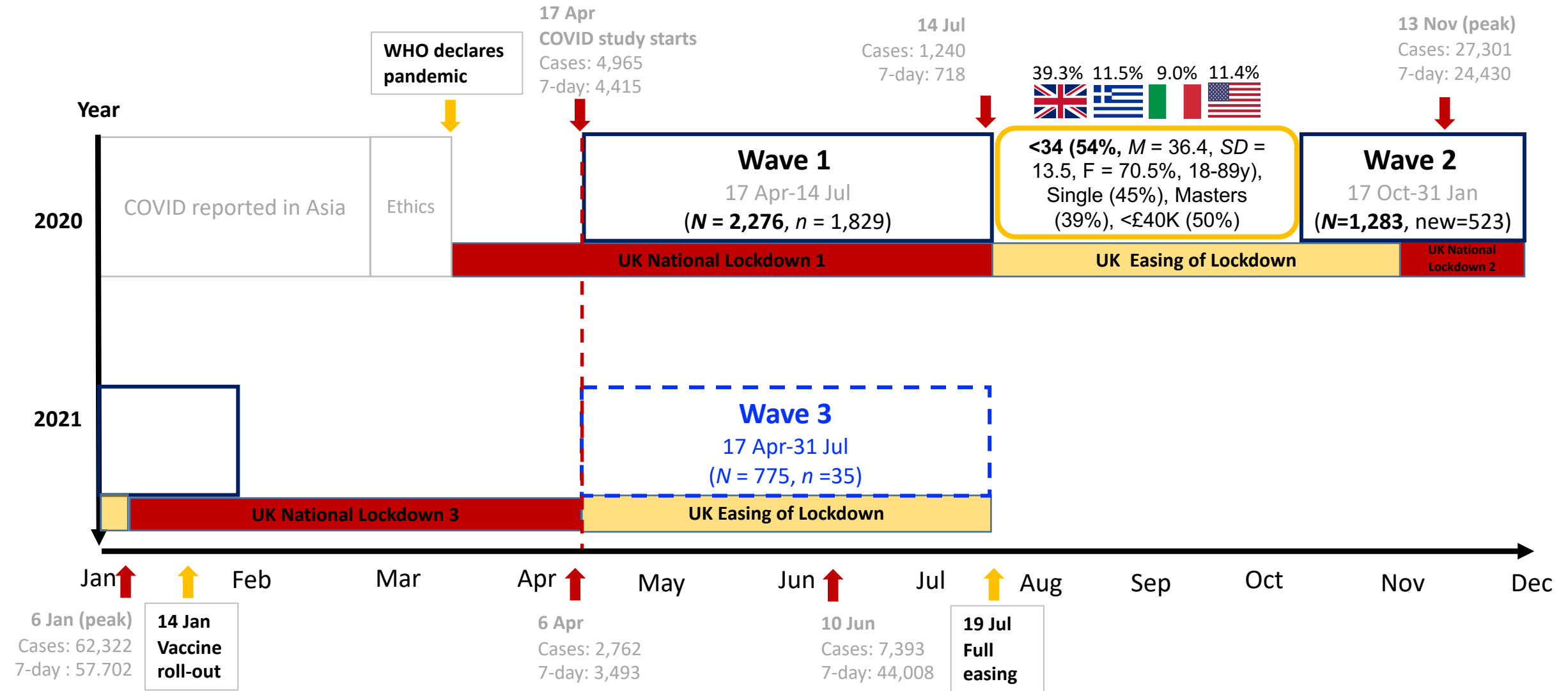
Timeline

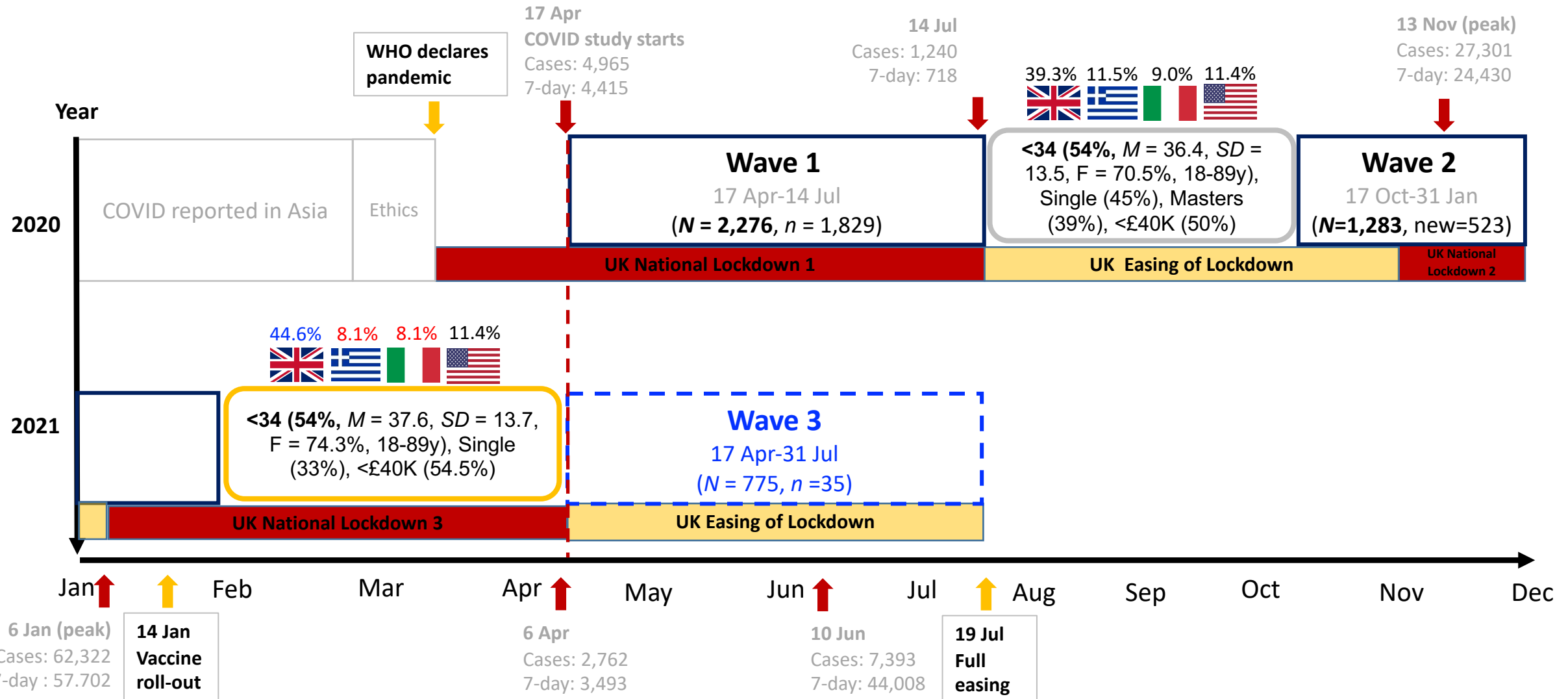


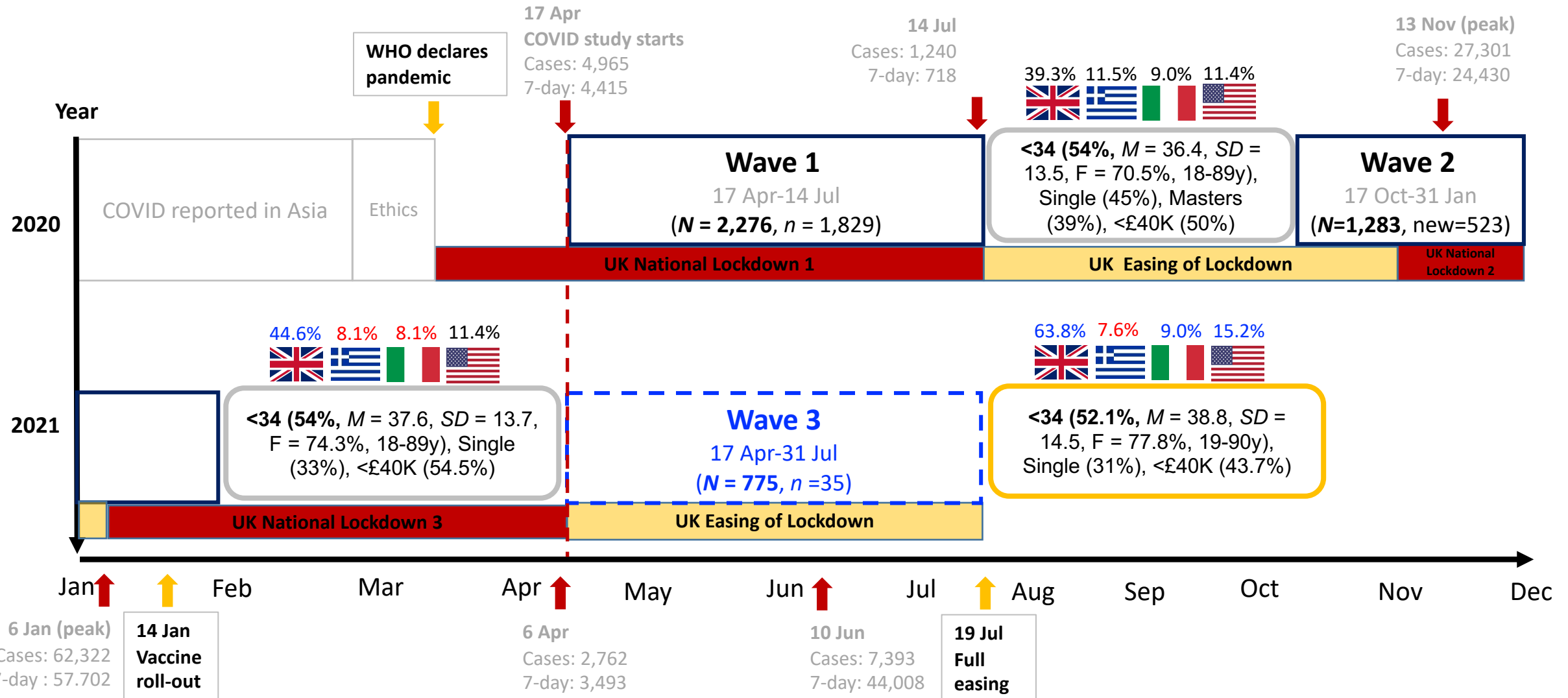
Asked about...

- ✓ Background, occupation, living/green space access, home environment
- ✓ Mental health: Anxiety, depression, aggression, sleep, stress
- ✓ Pre-/post-COVID: Exercise, alcohol consumption, substance use
- ✓ Relational conflict, trust/paranoia, empathy, parenting, loneliness, stress









What did we find?

Questions

Q1 Is social mistrust and/or schizotypy related to poorer mental health?

Q2 Are the relationships between variables the same across:

- Gender?
- Age (<35 vs 35y+)?
- Countries (UK vs Others)?
- Income (low vs. medium vs high)?
- UK Lockdowns?

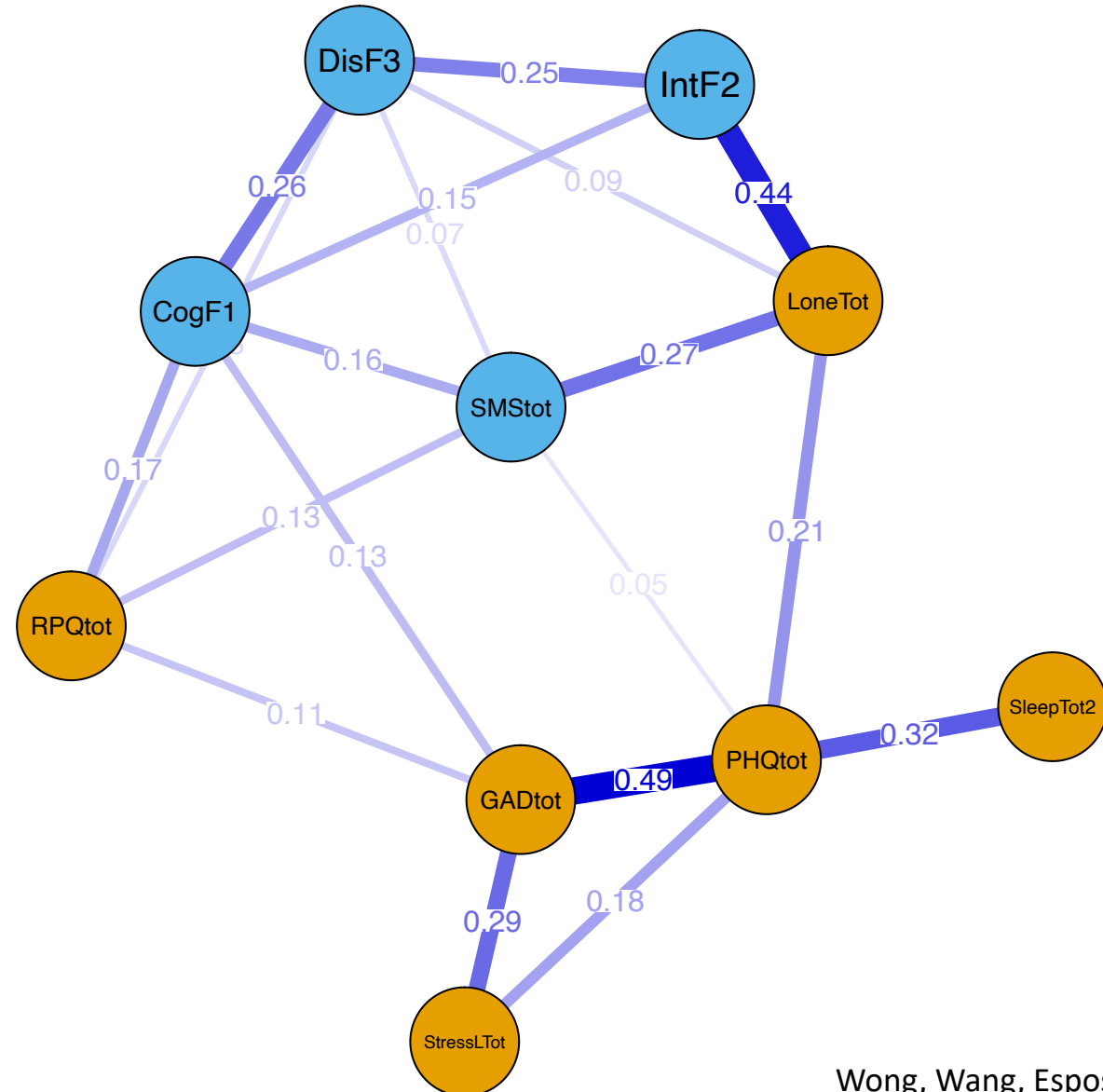
Q3 Is this network structure the same for **high and low paranoid/schizotypal individuals**?



Q1 Is social mistrust and/or schizotypy related to poorer mental health?

The answer is Yes.

- Schizotypy/Paranoia**
 - SMStot: Social Mistrust
 - CogF1: SPQ_cognitive perceptual
 - IntF2: SPQ_interpersonal
 - DisF3: SPQ_disorganized
- Mental Health**
 - RPQtot: Aggression
 - PHQtot: Depression
 - GADtot: Anxiety
 - LoneTot: Loneliness
 - StressLTot: Stress from COVID
 - SleepTot2: Sleep Quality



Q2 Are the relationships between variables the same across...

Q2. Gender?

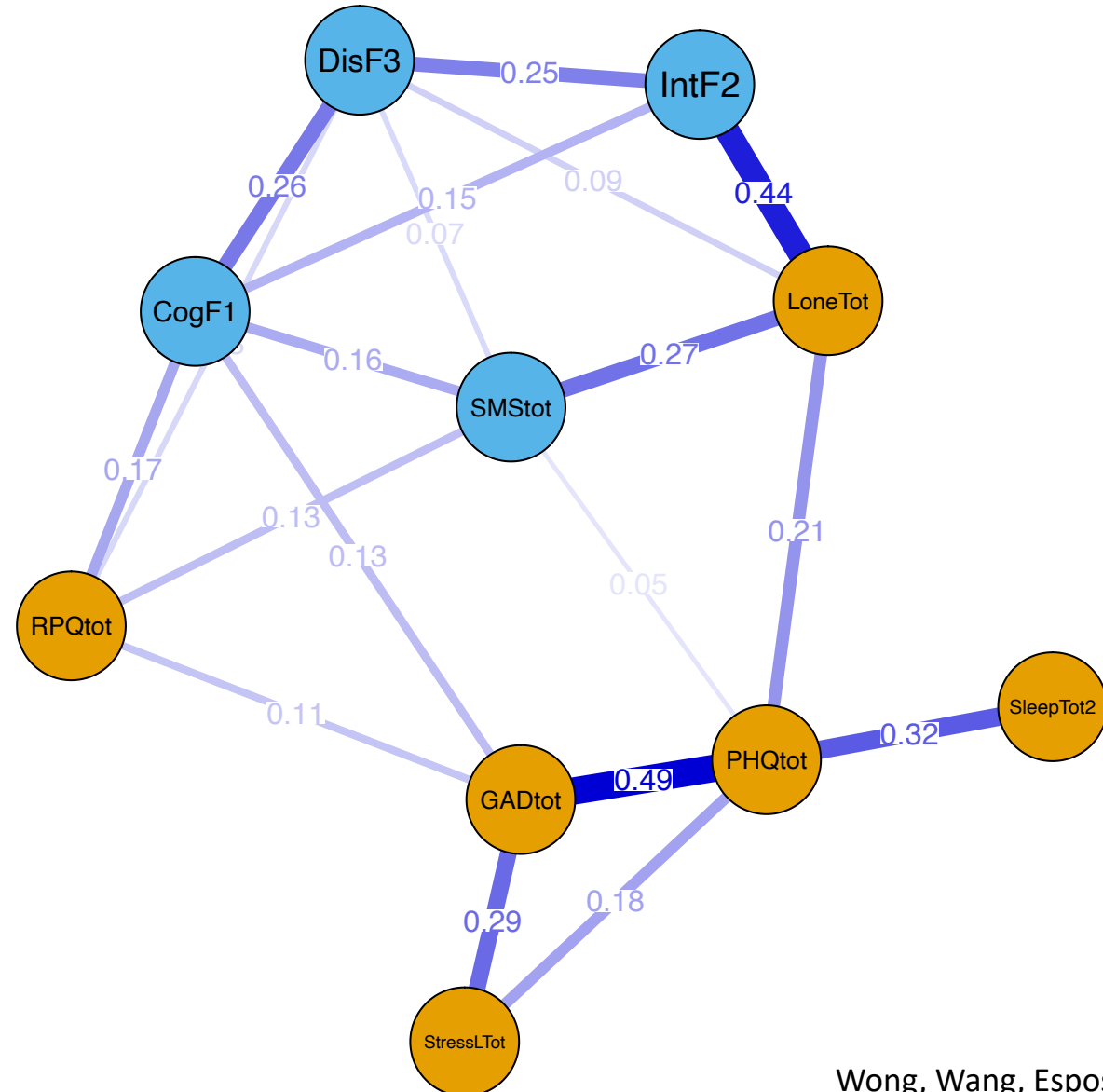
Age (<35 vs 35y+)?

Countries (UK vs Others)?

Income (low vs. medium vs high)?

UK Lockdowns?

Q3. High/Low trust?



Q2 Are the relationships between variables the same across...

Q2. Gender? **n.s.**

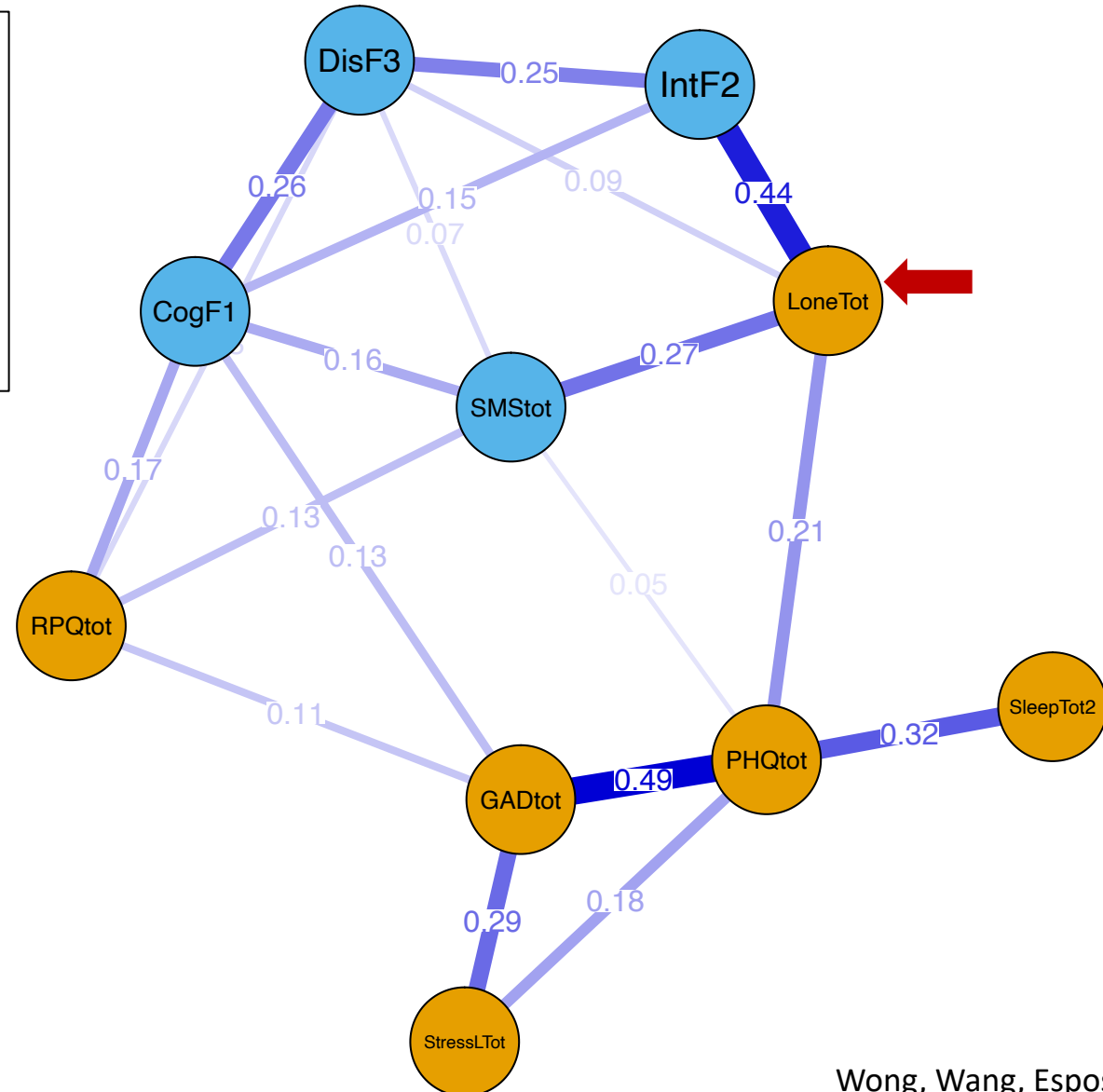
Age (<35 vs 35y+)? **n.s.**

Countries (UK vs Others)? **n.s.**

Income (low vs. medium vs high)? **n.s.**

UK Lockdowns?

Q3. High/Low trust?



Q2 Are the relationships between variables the same across...

Q2. Gender? *n.s.*

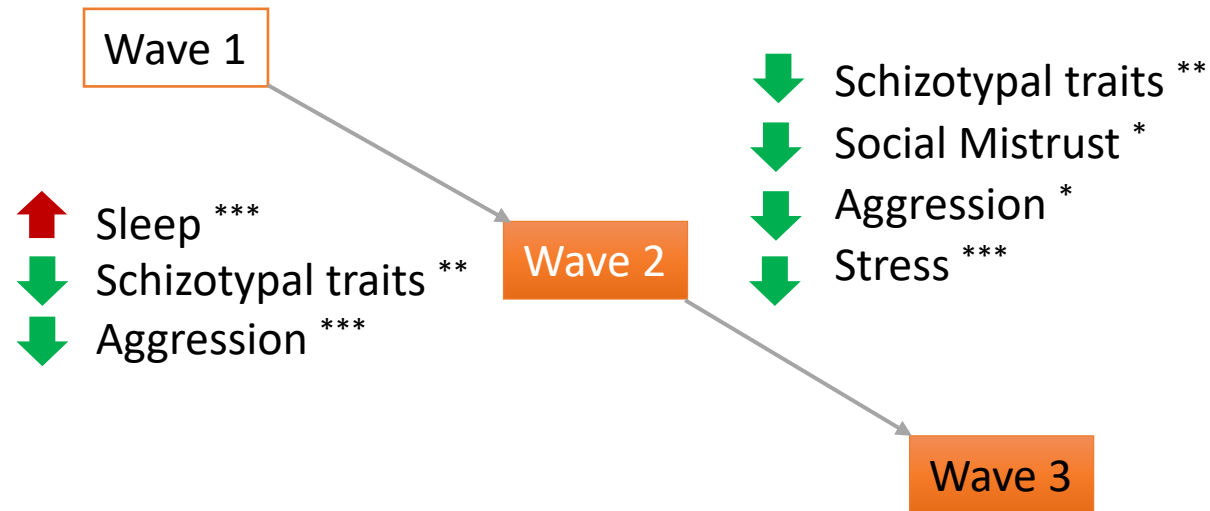
Age (<35 vs 35y+)? *n.s.*

Countries (UK vs Others)? *n.s.*

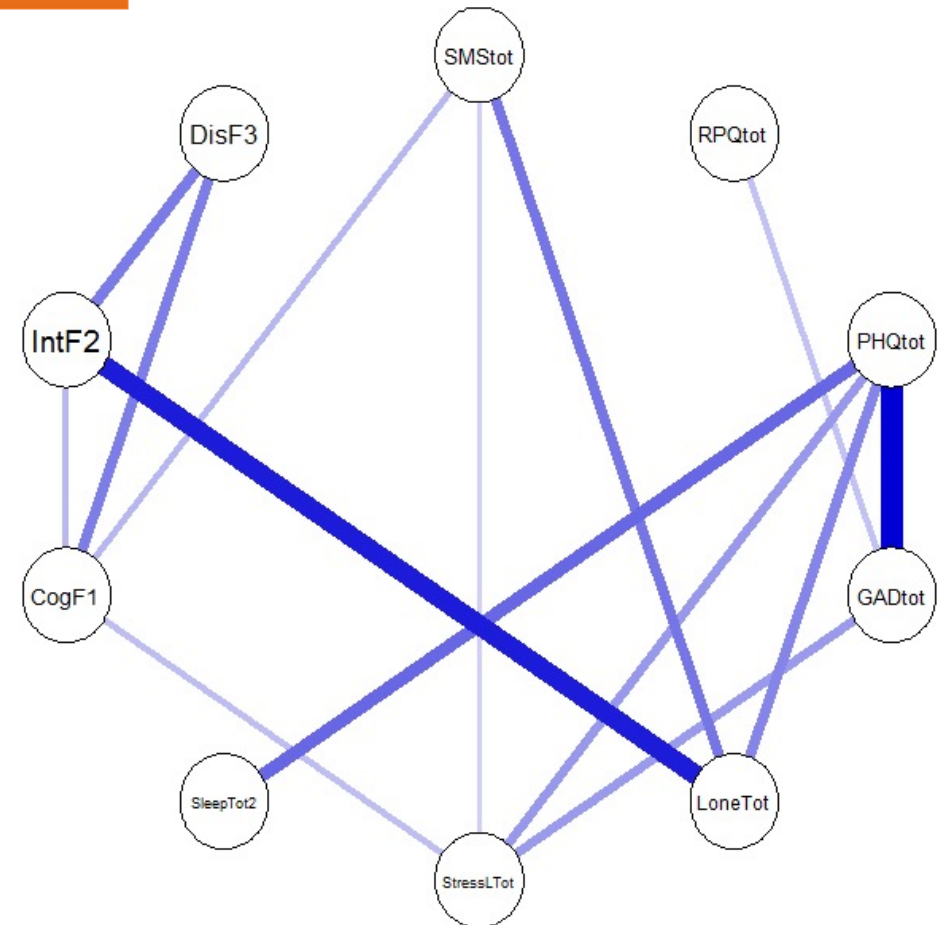
Income (low vs. medium vs high)? *n.s.*

UK Lockdowns (Wave 1,2,3)? *n.s.*

Q3. High/Low trust?



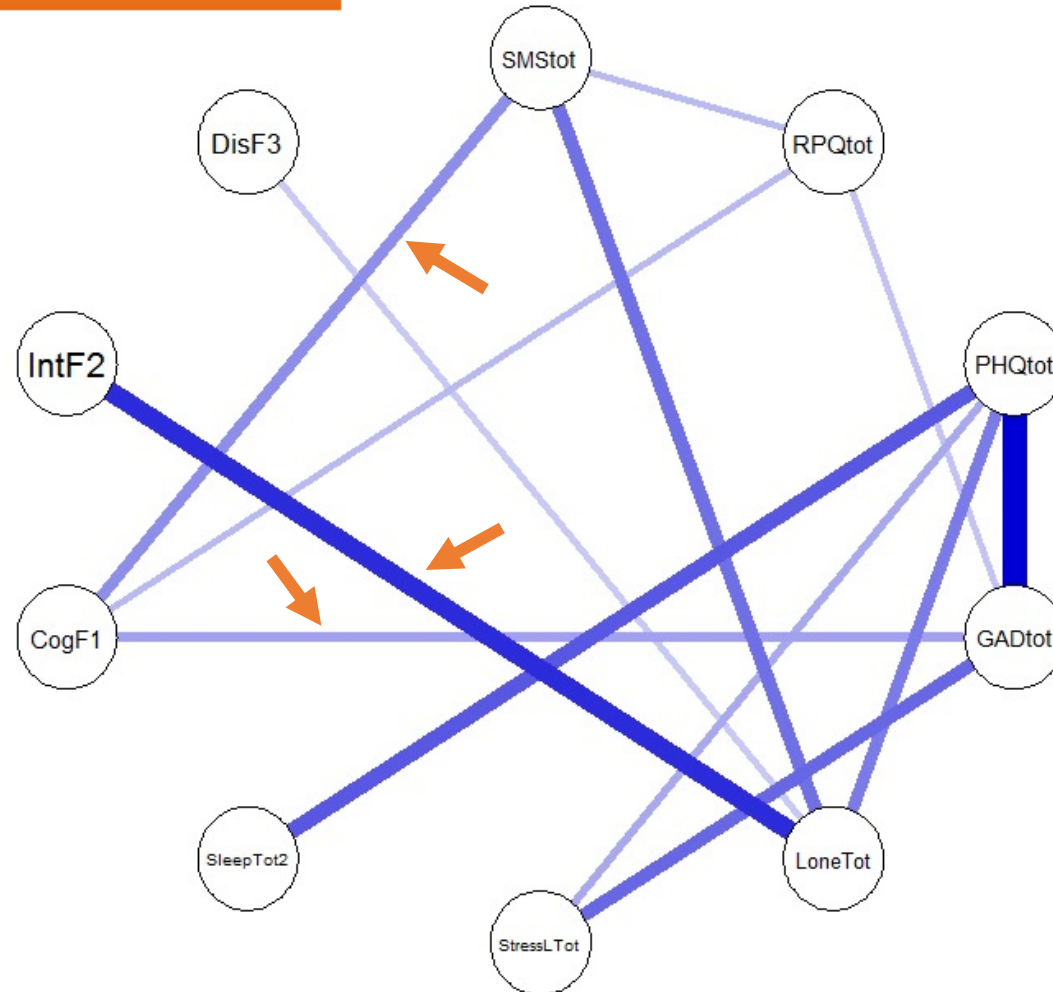
Wave 3



Q3 Is this network structure the same for **high and low schizotypal** individuals?

The answer is NO

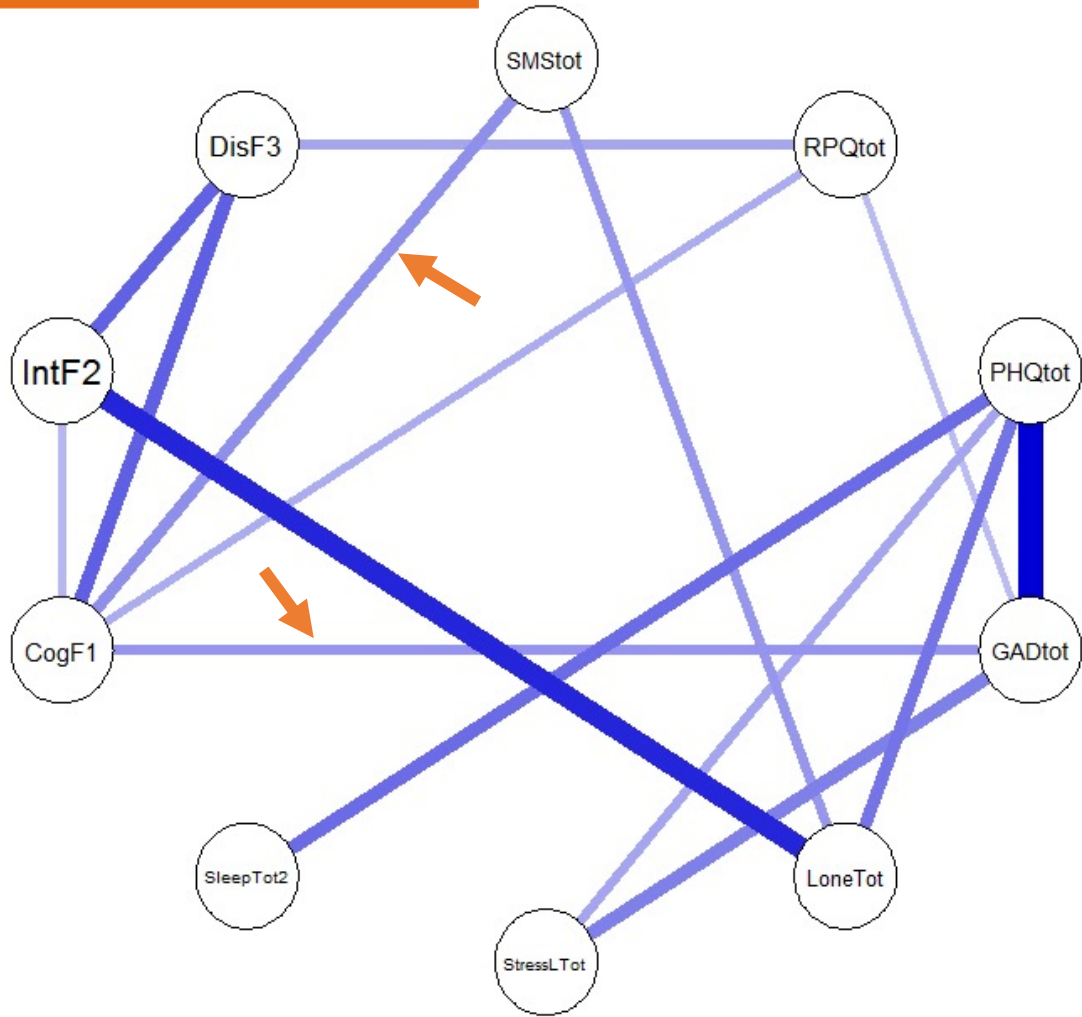
High Schizotypy



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Wong, Wang, Esposito, & Raine (*in prep*)

High Social Mistrust



In summary...

Q1. Higher mistrust/schizotypy = poorer MH

Q2. Gender? *n.s.*

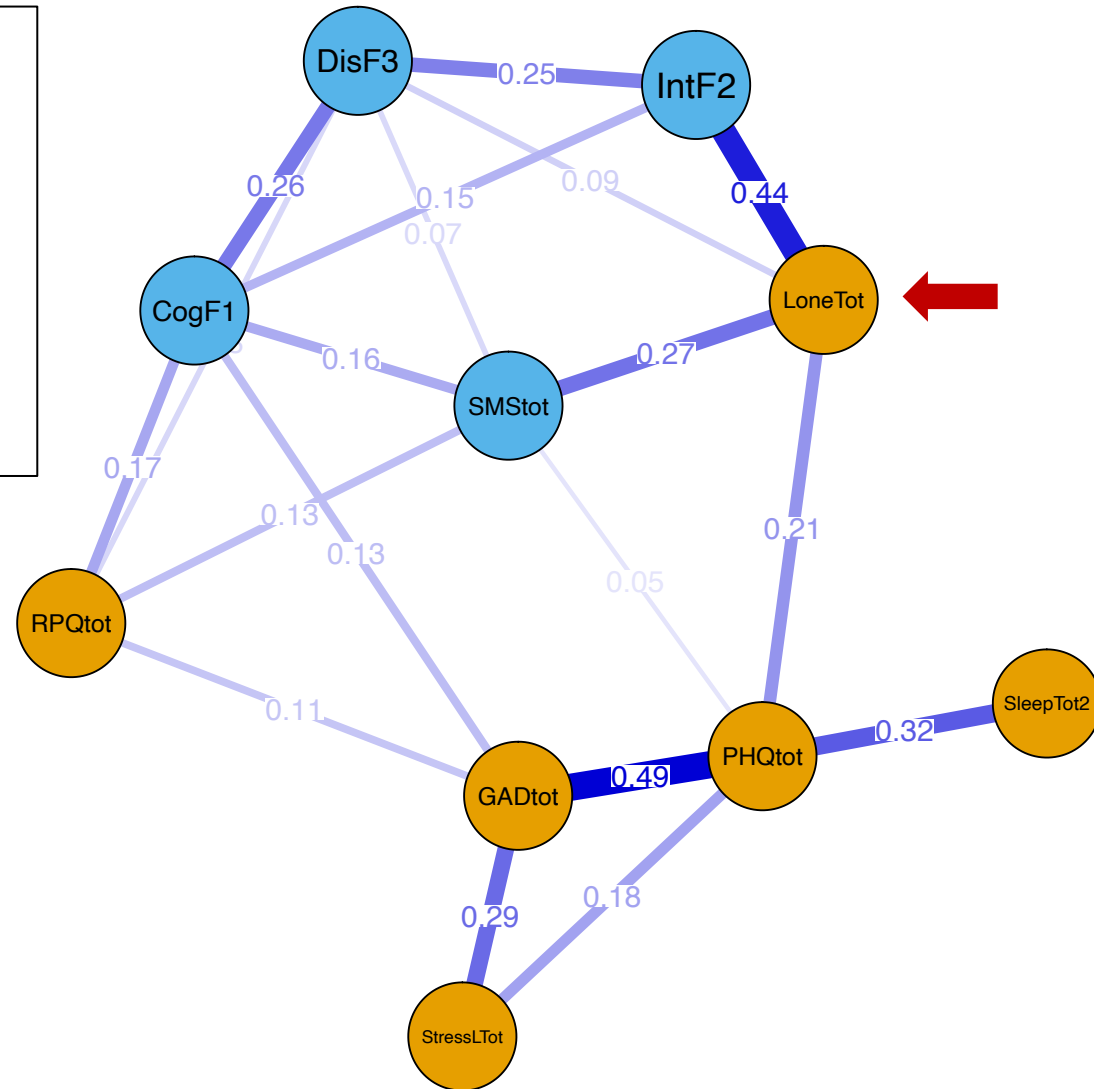
Age (<35 vs 35y+)? *n.s.*

Countries (UK vs Others)? *n.s.*

Income (low vs. medium vs high)? *n.s.*

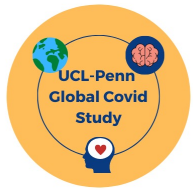
UK Lockdowns? *n.s.*

Q3. High/Low trust? **Different**



Summary

- **Network analysis** provides a **map** of how variables are related, which variable is most influential, but cannot identify network-specific differences for groups.
- **Loneliness** was an 'influential' variable connecting schizotypy/mistrust to poorer mental health → **interventions** that **reduce loneliness** may improve both social trust and mental health.
 - ✓ Other UK studies have found **5% to 7.2%** increase from wave 1 to wave 2 (ONS, April 2021); though not of the same participants. Similarly, **5%** reported by Manchester Uni study of 3 countries.
- **Mistrustful and schizotypal individuals** reported **higher levels of anxiety, aggression, loneliness, and depression** compared with their more trusting/schizotypal peers.



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