

HEALTH COMPLAINTS AND WELLBEING: TEMPORAL TREND AMONG ITALIAN ADOLESCENTS

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Highlights

In the last 10 years Italian adolescents, especially girls, have been shifting from **Complete Mental Health** to **Incomplete Mental Illness**.

Background

In the 20th century, the concept of health has evolved to include the notion of well-being: a state of complete physical, psychological and social well-being, and not just the absence of disease and infirmity [1]. In this perspective, mental health is central for its impact on public health: WHO projections indicate in fact in 2020 depression as the second cause of illness, emphasizing adolescence as a fundamental period in forming the features of adult mental health [2].

Based on Italian representative data, we explored trends of health complaints and life satisfaction among Italian adolescents from 2010 to 2018.

Methods

HBSC (Health Behaviour In School-Aged Children) is a WHO collaborating cross-national survey [3,4,5].

The target population is youth attending school, aged 11, 13 and 15 years. Data are collected through standardized and self-administered questionnaires with a set of questions on social background, health behaviours and outcomes.

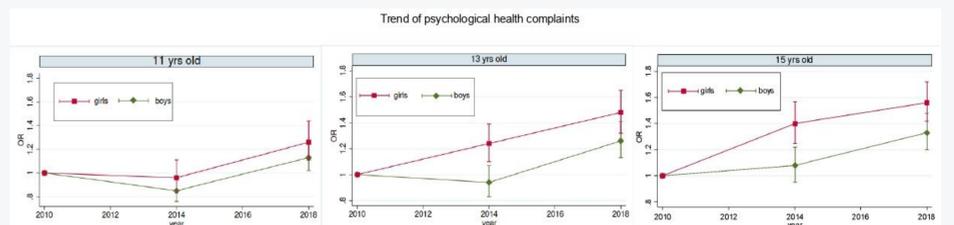
Wellbeing was evaluated exploring life satisfaction, a 1-10 cognitive scale, and psychological and somatic health complaints (≥ 2 symptoms more than once a week), a two factors dichotomized variable.

Wellbeing Italian trend was analyzed in the three consecutive waves 2010, 2014 and 2018 using HBSC data, collecting overall more than 165000 students. Multivariate logistic regression was performed to evaluate trend in wellbeing indicators over time adjusted for social determinants of health (socioeconomic status, geographic area, school, family and peer support).

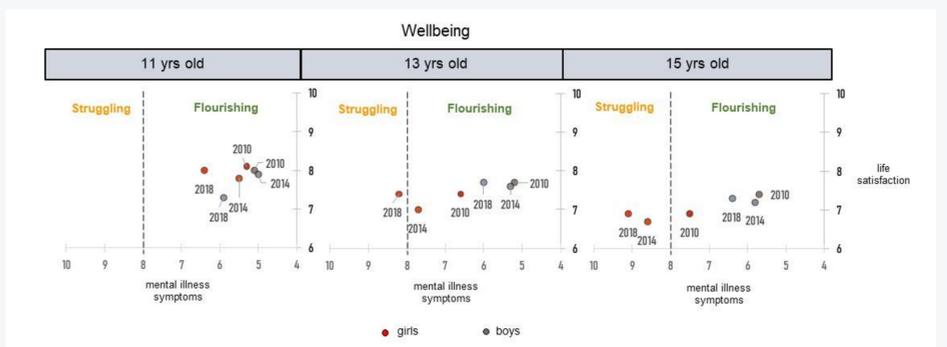
All analyses are design-adjusted to take account of the effect of the complex survey design (stratification, clustering and weighting) on the precision of the estimates presented.

Results

From 2010 to 2018, Health Complaints presented an increasing trend in all the sample, mainly for psychological symptoms. Girls seemed to be more affected than boys, stronger and earlier in life: in particular, from 40.8% to 54.1% of 15 yrs old females presented psychological symptoms, with a mean increase of 6% every 4 years (OR: 1.06, CI95%: 1.05-1.07).



While psychological health complaints have been increasing, life satisfaction was overall steady between 2010-2018. According to a theoretical Dual Factor conceptualisation of mental health [6,7], all gender and age groups have been moving from a **Flourishing** situation, of **Complete Mental Health** (i.e. high life satisfaction and low psychopathology) towards a **Struggling** condition, of **Incomplete Mental Illness** (i.e. high life satisfaction and high psychopathology). This trend was observed especially among 13 and 15 years old females.



Conclusions

In the period of time 2010-2018, despite steady life satisfaction, psychological health complaints have been increasing in all gender and age groups: in particular, 13 and 15 years old girls have been shifting from a **Flourishing (Complete Mental Health)** to a **Struggling (Incomplete Mental Illness)** condition.

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