Trends in life satisfaction in European and North-American adolescents from 2002 to 2010 in over 30 countries

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Background: Life satisfaction (LS) is an indicator which is widely used for assessing the perception of a child's feeling about his life. Methods: LS is assessed in Health Behaviour in School-aged Children via the Cantril ladder with 10 steps indicating the worst and best possible life. This range of values (0–10) was dichotomized into 'low' (0–5) vs. 'high' (6–10). Countries, age groups and genders were compared based on the odds ratio (OR) of declaring a higher LS in 2010 with respect to 2002. Results: Analyzing the difference between 2002 and 2010, six countries from Western Europe show decreasing LS: Austria, Canada, Switzerland, Denmark, Finland and Greenland. In contrast, a group of Eastern European Countries, that is, Estonia, Croatia, Lithuania, Latvia, Russia and Ukraine, show a significant increase in LS. Data on gender and age differences confirm the lower rating of LS in girls and a decreasing rating with age. Conclusion: The LS scale appears to be a tool capable of discriminating the level of wellbeing of adolescent population among countries.
Results

Observed trends for LS are presented and further discussed in terms of the relative change between one period and the other within countries, and of the observed differences among countries; absolute values were not taken into consideration, as the focus of the article is on comparing trends within countries and among them.

Analyzing the overall difference between 2002 and 2010, LS decreased for a group of six relatively affluent Western countries (Austria, Canada, Switzerland, Denmark, Finland and Greenland) and two belonging to the former Eastern European Countries (Hungary and Macedonia). In contrast, increasing LS was observed in a group of Eastern European Countries, that is, Estonia, Croatia, Lithuania, Latvia, Russia and Ukraine, and in four Western European countries (Spain, Norway, Portugal and Belgium).

Analyzing the two periods separately (2002–2006 and 2006–2010) revealed that for Greenland and Hungary the decreasing trend was mainly determined by the first period, while for the other decreasing countries the significant reduction occurred between 2006 and 2010. There was only a steady decrease in reported LS across all three time points in Macedonia (ORs: 0.798 and 0.867, respectively) and Switzerland (ORs: 0.924 and 0.916, respectively).

As for the ‘high satisfaction countries’ belonging to the Western European cluster, the exception occurred among Spanish adolescents, with a drop in ORs from 1.446 in the first period to 0.837 in the second.

In the Czech Republic, which has been classified as seeing no change overall, the opposite has occurred, with a decrease between 2002 and 2006 (OR = 0.864), followed by an increase between 2006 and 2010 (OR = 1.298).

In terms of gender differences, females have, with a few exceptions (Latvia, Macedonia and Ukraine), a general and significant tendency to a lower level of LS in all countries.

LS also decreases with increasing age, even if this pattern has many exceptions in the surveyed countries. The sharp decrease occurs in most countries at 15 years, with the only exception of Canada and Czech Republic, where the rating of LS remains unchanged across age. At 13 years, the decrease in rating is less marked, and 6 countries (Canada, Czech Republic, Hungary, Italy, Latvia and Ukraine) do not show significant differences with respect to their fellow mates of 11 years.

Discussion

The strength of this study lies on the quantity and quality of data, collected in comparable ways and with similar protocols in all involved countries, allowing, for the first time, to have a cross-national view of a decennial trend in LS of youth in Europe and North America.
The main limitation results from the fact that the comparison between countries is based on relative changes, not on absolute levels. A country with a sharp decline from a high value may still end up having higher LS than a country which starts with a low value and shows a sharp increase. For the aim of the study, this might not be a crucial drawback, as the focus is pointed on the analysis of changing trends within a country, and on the different trends observed in different sets of countries behaving in a similar way, with a view of the possible relation with on-going macro socio-economic conditions.

Trends in LS across Europe and North America show a quite scattered picture. In fact, increasing, decreasing and stable situations are split in a similar way (12 countries with increasing values of LS, 7 with decreasing values and 12 with stable ones).

It is interesting to note a ‘Northern European’ cluster of countries characterized by decreasing LS between 2002 and 2010, and an ‘East European’ cluster with increasing LS. Spain seems to be the only country with a decrease in LS that appears to follow the general economic crisis.

Some similarities with the trend in self-rated health can be pointed out as, for example, the similar trend in Hungary and Greenland (worst rating in the period 2002–2006), the marked trend of the Czech Republic towards increasing values in the period 2006–2010 and that of Spain and Denmark in the opposite direction in the same time interval.

Data on gender and age differences confirm what has already been evidenced in the recent literature, namely that girls report a lower LS than boys do and that LS decreases with increasing age. In addition, the trend towards decreasing satisfaction with increasing age is consistent across all countries and across age.

The crucial transition towards lower LS seems to take place between 13 and 15 years, as if the onset of adolescence were the crucial event, rather than the physiological change taking place, especially in girls, usually at an earlier age.

As for the geographical cluster, no clear pattern seems to emerge. A more detailed analysis of their characteristics, including socio-economic data and cultural features at the national level, would be necessary to gain a deeper insight into the variability of this phenomenon.

In conclusion, the LS scale appears to be a tool that is not only capable of discriminating the level of wellbeing among countries, but also of catching the qualities of emotional well-being that are different from those captured by measuring self-rated health. Using these two indicators together is therefore likely to be of value for public health practitioners for the overall assessment of the health of the adolescent population.

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Conflicts of interest: None declared.

Key points

- This is the first cross-national study of a decennial trend in Life Satisfaction (LS) of youth in Europe and North America.
- A ‘Northern European’ cluster of countries characterized by decreasing LS between 2002 and 2010, and an ‘East European’ cluster with increasing LS can be noted.
- Girls report a lower LS than boys and all adolescents show decreasing LS with increasing age, across all countries and across age.
- The LS index is likely to be of value for public health practitioners for the overall assessment of the health of the adolescent population.

References