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Ethnic differences in adolescent mental health trajectories and the influence of racism and context: the Determinants of Adolescent Social well-being and Health (DASH) study

Thomas E. Astell-Burt

University of Wollongong, thomasab@uow.edu.au

Maria J. Maynard

Leeds Beckett University

Erik Lenguerrand

University of Bristol

Seeromanie Harding

Kings College London

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Abstract

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Keywords

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inequalities in educational transitions related to the “first level digital divide”, meaning differences in access and amount of internet use. This implies looking at cohorts during a historical period when access to the internet was still very unequally distributed within the population of interest. In Germany this was the case during the late 1990s and early 2000s, the major diffusion phase of private internet access. For a first test of our hypotheses, we use retrospective data on educational careers supplemented by panel data on individual information behaviour. The different data sets are linked using multiple imputation methods.

A longitudinal examination of the inter-generational transmission of health inequality

Andrea Wilson et al, University of Western Ontario, Canada

One unanswered question in the sociological literature on health inequality is how to theoretically and empirically integrate life course processes of cumulative advantage with processes of inter-generational transmission of health risk. Previous research has primarily treated health inequality as a process that operates within, rather than across, generations. Using longitudinal data from the U.S. Panel Study of Income Dynamics covering several life stages and multiple family generations, we identify health trajectories of adult children and their parents and assess the extent of inter-generational continuity in health. Latent class analysis indicates that the health of both respondents and their fathers could be characterized by three trajectories: low risk of experiencing health problems throughout the survey period, increasing risk, and high risk. A strong association exists between respondents’ and parents’ health trajectories, an association that remained when controlling for respondents’ adult socio-demographic characteristics and resources. Results suggest the importance of the transmission of inequality across generations for understanding the cumulative relationship between resources and adult health. In ongoing research, we use data collected during childhood to investigate the effect of childhood environment on adult health trajectories and the extent to which adult resources alter the pathway between childhood environment and adult health.

Ethnic differences in adolescent mental health trajectories and the influence of racism and context: the Determinants of Adolescent Social well-being and Health (DASH) study

Thomas Astell-Burt et al, Medical Research Council, London, UK

Objective: Using longitudinal data, we investigate mental health trajectories through adolescence, and the interplay between racism and context.

Methods: Repeated measures of psychological well-being (Goodman’s Strength and Difficulties Questionnaire), racism and other potential confounding variables were obtained for 4744 adolescents aged 11-17, surveyed at two waves. Neighbourhood and school contextual measures included White-ethnic density and socio-economic position.

Results: Ethnic minority adolescents reported better mental health throughout adolescence relative to White-UK peers, particularly Nigerian/Ghanaian boys (coefficient (95% CI)): -2.27 (-2.97, -1.58) and Indian girls: -1.74 (-2.54, -0.94), adjusted for age, socio-economic position, racism and context. Mental health improved throughout adolescence for boys. The prevalence of racism increased between wave 1 (girls: 18%; boys: 19%) and wave 2 (girls: 29%; boys: 27%). The effects of racism were not ethnic specific, but associated with poorer mental health throughout adolescence among boys: 1.50 (1.21, 1.79) and girls: 1.88 (1.54, 2.22). Context was not associated with mental health either directly, or through effect-modification.

Conclusions: Poorer mental health patterns among some minority ethnic adults do not appear to emerge during adolescence. Racism was associated with poorer mental health for all ethnic

groups. Adolescence may be a critical period for preventing ethnic differences in adult mental health.

Gender differences in the effect of breast feeding on adult psychological well-being: Comparing two British cohort studies

Noriko Cable et al, University College London, UK

It is not known whether the positive effect of breast feeding on child physical health extends to adult psychological adjustment. We used the available cases from the National Child Development Study (NCDS, N=7,750, born in 1958) and the 1970 British Cohort Study (BCS70, N=6,492 born in 1970) to examine (1) how the effect of breast feeding on adult psychological well-being, as indicated by psychological health and self-efficacy, could work partly through the pathway of childhood psychological health, and (2) presence of a buffering effect of breast feeding in the face of psychosocial adversity at birth.

After accounting for the effect of psychosocial adversity at birth, breast feeding promoted psychosocial adjustment during childhood in girls in NCDS and BCS70, but not in boys. In adulthood, being breastfed at birth was associated with better psychological health and higher self efficacy in women in BCS70 only. Breast feeding did not significantly moderate the negative effects of psychosocial adversity at birth on child or adult outcomes in this study.

In sum, our findings suggest that the practice of breast feeding can be important for women's psychological well-being throughout the life course.