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The association between depressive symptoms and psychological wellbeing among adolescent girls and young women (AGYW) during COVID-19 in South Africa.

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Introduction

Adolescent girls and young women (AGYW) in sub-Saharan Africa experience a range of mental health challenges which are influenced by several social, economic, and psychological factors (Jörns-Presentati et al, 2021). Poor mental health threatens their wellbeing, and increases their risk of HIV acquisition which is influenced (or associated with risky behaviors) by a number of factors, including sexual and reproductive health (SRH) issues and increased risk behaviours for HIV.

Mental health plays a critical role in adolescents' decision-making and risky or protective behaviours which in turn, contribute to their overall health and wellbeing outcomes in their youth throughout adulthood (Agnafors et al 2020). There has been an increase in stress, anxiety and depression among adolescents and young people, as well as an increase in HIV, unintended pregnancies, contributing to slow declining of maternal and child morbidity and mortality rates in sub-Saharan Africa.

Quantifying the correlates of wellbeing could help develop targeted HIV-prevention interventions to improve their health and wellbeing. Poor psychological well-being is a strong predictor of increased risk of having depressive symptoms. However, the evidence of this relationship among AGYW is scarce.

Objectives

To estimate the association between depressive symptoms and psychological wellbeing among AGYW in South Africa.

Materials and Methods

This is a secondary data analysis of telephonic survey data collected from N=519 participants enrolled in the HERStory-2 survey between 1 December 2020 and 28 February 2021. The Centre for Epidemiologic Studies Depressive Symptoms Scale (CES-D-10) score count ≥ 12 was classified as having depressive symptoms. Psychological wellbeing was measured using the Mental Health Continuum Short Form (MHC-SF) scale. The data was explored using descriptive statistics and a robust Poisson regression model was fitted, adjusting for confounding variables

Results

Variable	Total N=515	Flourishing N=246	Moderately-Languishing Mentally Healthy N=269
age_year (mean, med, iqr)	20.04 4.03 2.53		
Age categorial			
15-19 year	264 (51.5%)	134 (54.7%)	130 (48.5%)
20-24 year	249 (48.5%)	111 (45.3%)	138 (51.5%)
HIV status			
HIVneg	463 (96.9%)	222 (96.5%)	241 (97.2%)
HIVpos	15 (3.1%)	8 (3.5%)	7 (2.8%)
Mother Alive			
No	106 (20.6%)	56 (22.8%)	50 (18.6%)
Yes	409 (79.4%)	190 (77.2%)	219 (81.4%)
Hunger			
Once	30 (5.9%)	9 (3.7%)	21 (7.9%)
Twice	25 (4.9%)	10 (4.1%)	15 (5.6%)
Three times	8 (1.6%)	2 (0.8%)	6 (2.3%)
More than	23 (4.5%)	6 (2.4%)	17 (6.4%)
Never	426 (83.2%)	219 (89.0%)	207 (77.8%)
Age quit school			
15-19yrs	268 (52.1%)	129 (52.4%)	139 (51.7%)
20-23yrs	47 (9.1%)	20 (8.1%)	27 (10.0%)
Highest grade attained			
matric	224 (43.7%)	110 (44.7%)	114 (42.4%)
non matric	290 (56.3%)	135 (55.3%)	155 (57.6%)
Violence at home			
Never	438 (85.1%)	213 (86.6%)	225 (83.6%)
Often/Sometimes	66 (12.8%)	28 (11.3%)	38 (14.4%)
Financial problem			
Never	154 (30.1%)	81 (32.9%)	73 (27.1%)
Often/Sometimes	349 (67.9%)	159 (64.7%)	190 (70.9%)

Variable	Category	freq(%)
Depression	No	359(69.71)
	Yes	156(30.29)
Mentalhealth	Flourishing	246(47.77)
	Moderate-Languishing	269(52.23)

Table 2: Log-Binomial and Poisson regression

	Log-Binomial		Robust Poisson	
	Risk ratio(95% CI)	p-value	Risk ratio(95% CI)	p-value
Mental health				
Depression	1.412(1.198-1.664)	<0.001	1.414(1.196-1.671)	<0.001
Age categorial				
20-24 years	1.146(0.970-1.353)	0.108	1.118(0.944-1.324)	0.196
Mother Dead				
Yes	1.208(0.972-1.502)	0.089	1.203(0.964-1.501)	0.102
Violence at home				
Often/Sometimes	1.042(0.836-1.299)	0.714	1.014(0.809-1.272)	0.902
Financial problem				
Often/Sometimes	1.029(0.848-1.250)	0.769	1.055(0.868-1.282)	0.589

Discussion

The results show that most of the AGYW are not mentally healthy. These result is the same as findings by Jörns-Presentati et al, 2021. Depression is associated with psychological wellbeing of AGYW. Our results showed no association between mental health and apriori factors. This could have been due to sample size of the study and the setup.

Key Words

Depression, Adolescent Girls and Young women, wellbeing, COVID-19

Conclusion

Depressive symptoms are associated with the overall psychological wellbeing/ mental health of AGYW. In this case apriori factors like violence and financial problems were not significant might be due to the sample size.

In order to improve the psychological wellbeing of AGYW, encourage them to share their feelings. Support them in all the needs. Create programmes which support them or intervention groups to help with depression

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