

Social support and mental health among adolescents in Kenya, Indonesia, and Vietnam: A latent class analysis using the National Adolescent Mental Health Surveys

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Background:

The presence of social support can positively influence adolescent mental health. However, there is a dearth of country-level evidence for the association between social support and adolescent disorders. Further, existing studies vary greatly in how they account for the interrelated sources of social support. This research identified the patterns of adolescents' social support and its association with mental disorders, suicidal ideation, and self-harm in Kenya, Indonesia, and Vietnam.

Methods:

This study utilised data from the National Adolescent Mental Health Surveys (NAMHS), nationally representative surveys of adolescents aged 10-17 years and their primary caregiver in Kenya, Indonesia, and Vietnam. Patterns of social support among adolescents in each country were assessed using a latent class analysis. The association between the identified social support classes and any mental disorder, suicidal ideation, and self-harm in the past 12 months was assessed.

Results:

Three latent social support classes were identified: Caregiver-focussed support, Other support, and Limited support. In all three countries, most adolescents belonged to the Caregiver-focussed support class, although these proportions differed significantly by country (Vietnam: 81.6%; Kenya: 65.3%; Indonesia: 54.0%). Adolescents in this class had significantly lower odds of any mental disorder, suicidal behaviours and self-harm in the past 12 months as compared to the Limited support class. Adolescents belonging to the Other support class also demonstrated lower odds of these outcomes than those in the Limited support class.

Conclusions:

The strong inverse associations between caregiver focussed support and poor mental health indicate the need to engage parents and caregivers in adolescent mental health interventions and public health strategies. Enhancing parenting skills may encourage adolescents to seek support from their

primary caregivers. Strategies to upskill those already in an adolescent's social support network to recognise signs of and respond to poor mental health may further reduce the risk of mental disorders.

Disclosure of Interest Statement:

None

Funding:

NAMHS was funded by The University of Queensland in America (TUQIA) through support from Pivotal Ventures, a Melinda French Gates company.