Is resilience related to depression, anxiety and energy?
European Social Survey results
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Introduction

• Resilience - “An individual’s stability or quick recovery (or even growth) under significant adverse conditions” (Leipod & Greve, 2009, p. 41).

• Higher psychological resilience relates with lower risk of various physical and mental disorders (Davydov, Stewart, Ritchie, Chaudieu, 2010).

• However, it is not clear what psychosocial characteristics predict resilience in socially diverse Europe.
Research question

• How resilience relates with anxiety, depression and energy levels in European citizens?
Methodology

• The data gathered in 2012 within the European Social Survey was used for analysis.
• The number of respondents in this study was 17425 (48.4% of males, 51.6% of females) aged 15 to 101.
• The countries were grouped into:
  - Western (Germany, Switzerland, France, Belgium, Netherlands),
  - Scandinavian (Sweden, Denmark, Norway),
  - Baltic States (Lithuania, Estonia).
Methodology

• One-item questions, measuring psychological resilience, depression, anxiety, energy levels from European Social Survey were included in the study, as well as age and gender.

• Linear regression model was used for statistical analysis (psychological resilience as a dependent variable, and depression, anxiety, energy levels, age, gender as independent variables).
Results

Resilience in Western¹ Europe ($R^2=0.14$)

- **Depression***
  - $B(SE)=-0.24(0.01)$ $b=-0.15$ $t=-17.92$

- **Anxiety***
  - $B(SE)=-0.28(0.01)$ $b=-0.19$ $t=-23.59$

- **Energy levels***
  - $B(SE)=0.19(0.01)$ $b=0.15$ $t=18.99$

- **Age***
  - $B(SE)=0.00(0.00)$ $b=-0.07$ $t=-9.64$

$p<0.05$;

¹ – Switzerland, Germany, France, Belgium, Netherlands
Results

Resilience in **Scandinavian** countries (R²=0.15)

- **Depression***  
  B(SE)=0.31(0.04) b=-0.19 t=-7.55

- **Anxiety***  
  B(SE)=0.24(0.04) b=-0.15 t=-6.07

- **Energy levels***  
  B(SE)=0.19(0.02) b=0.17 t=7.32

p<0.05

1 – Denmark, Sweden, Norway
Results

Resilience in the **Baltic States**\(^1\) \((R^2=0.17)\)

- **Depression\(^*\)**
  - \(B(SE)=-0.36(0.04)\) \(b=-0.25\) \(t=-4.15\)

- **Energy levels\(^*\)**
  - \(B(SE)=0.18(0.06)\) \(b=0.15^*\) \(t=2.70\)

\(p<0.05\)

\(^1\) – Lithuania, Estonia
### Predictors of higher resilience (summary)

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Western Europe</th>
<th>Scandinavia</th>
<th>Baltic States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Energy level (high)</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Depression (low)</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Anxiety (low)</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Age (younger)</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td></td>
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</tbody>
</table>

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Implications for policy

• Politicians should take in consideration a variety of social and economic issues when planning health policy and strategies for health maintaining and promotion.

• Attention should be drawn to promoting both strategies of health: disease treatment and disease prevention in both somatic and mental health.
Implications for practice

• Practitioners could pay more attention to increasing the levels of resilience in their clients as a means for prevention of mental health diseases.
Conclusion

• The study demonstrates that resilience plays a significant role in mental health promotion.
• Further studies might throw more light on the possible relationship between resilience and other protective factors for major mental health problems and sociodemographic issues.
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