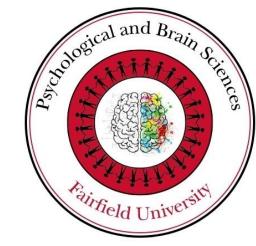


Psychological Well-Being Among Adolescent Girls in the World Health Organization-HBSC Survey: The Impact of Early Menarche on Mental Health, Body Image, and Life Satisfaction



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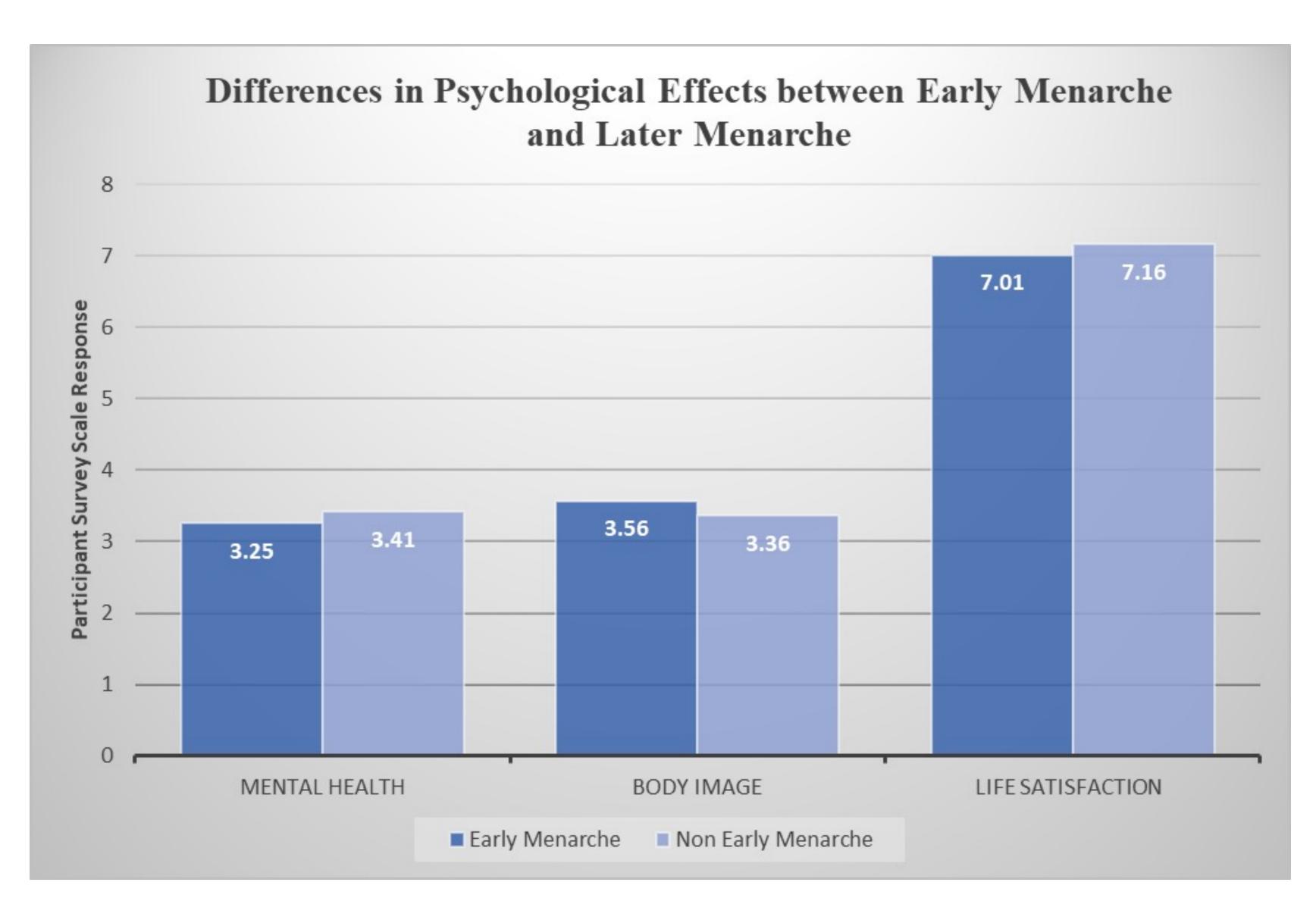
- Many mental health (MH) conditions first develop during adolescence (e.g., Solmi et al., 2022), and there has been a global increase in MH problems in the last decade – particularly among adolescent girls (see Cosma et al., 2023; Racine et al., 2021).
- Early puberty for girls (i.e., early menarche [EM]) is one identified risk factor for MH problems and other negative psychosocial outcomes (e.g., Vijayakumar & Whittle, 2023), and the age of puberty is generally decreasing globally (e.g., Leone & Brown, 2020).
- To date, few studies have evaluated the link between EM and psychological well-being (PWB) with large international datasets (e.g., Currie & Morgan, 2020; Lian et al., 2022; Steppan et al., 2019). Thus, our research goal was to leverage a global sample of adolescent girls to further explore links between EM and PWB.



Method

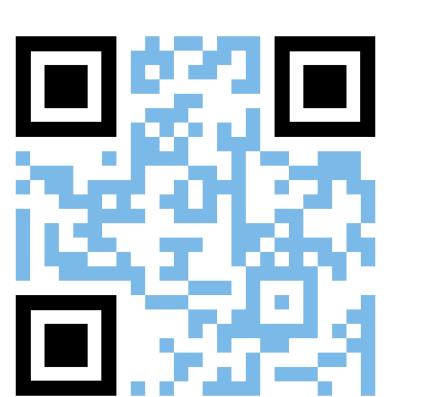
- 2014 dataset (last year EM measured): World Health Organization-Health Behavior in School-Aged Children (WHO-HBSC), a quadrennial survey (Cosma et al., 2023; Kelly et al., 2021).
- Total N = 56,767 (i.e., girls who have had menarche), $M^{age} = 14.5$, SD = 1.3
 - EM group (< age 11): n = 4,328
 - Non-EM (\geq age 11): n = 52,439
- Hypothesis: girls with EM (v. non-EM) will report poorer PWB, i.e., MH (HBSC-Symptom Checklist-psychological symptoms), body image (BI; single-item), and life satisfaction (LI; Cantril Scale/Ladder), controlling for age and BMI.

Adolescent girls with earlier menarche (<age 11 v. ≥ age 11) reported poorer psychological wellbeing in a global sample.



MH scale: 1-5 scale; $1 = about \ every \ day$, $5 = rarely \ or \ never$ Bl scale: 1-5 scale; $1 = much \ too \ thin$, $5 = much \ too \ fat$ LS scale: 0-10 scale; $0 = worst \ possible \ life$, $10 = best \ possible \ life$

HBSC website



Copy of this poster

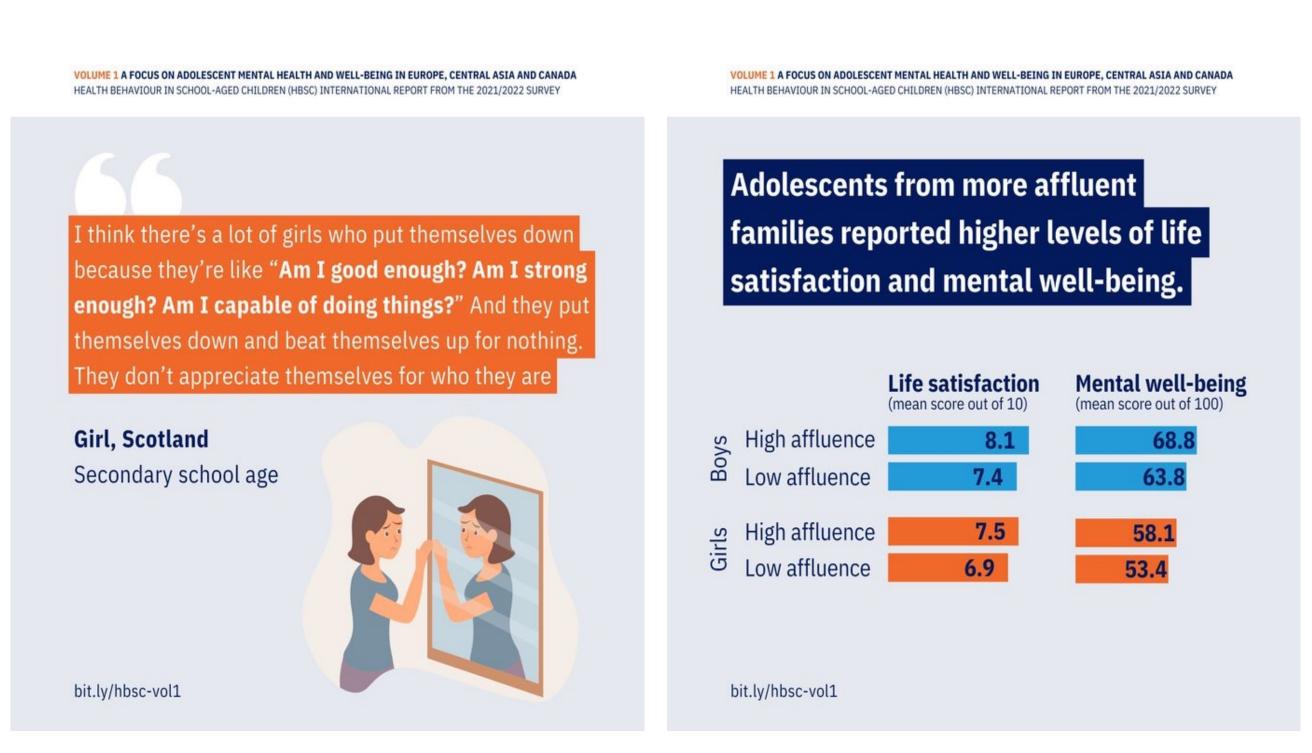


Results

- Main data analysis plan: MANCOVA (all three dependent variables were significantly correlated, p's < .001), controlling for age and BMI.
- Total sample MANCOVA results: *F*(3,45704) = 42.19, *p* < .001, Pillai's Trace = .003 (**hypothesis supported**).
- Cross-national MANCOVA results: our hypothesis was only partially supported, i.e., in 12/38 countries/regions (~32%).

Discussion

- Early menarche was significantly associated with poorer psychological well-being in a large global sample, though a relatively small effect size and significant heterogeneity by country/region.
- Clinical implications: targeting high-risk factors among youth with EM, such as PWB and risky behaviors (Vijayakumar & Whittle, 2023); work guided by bioecological models (e.g., Bronfenbrenner; see Currie & Morgan, 2020).
- Future work: cross-cultural differences; risk and resilience factors; current adolescent samples; boys' puberty; "developmental readiness" hypothesis



References: available upon request | Contact: jdeluca@fairfield.edu Funding: Kathleen B. Trainor Research Fellow Endowment Fund