



Original article

Not in Education, Employment, or Training Status Among Young Swiss Men. Longitudinal Associations With Mental Health and Substance Use



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A B S T R A C T

Purpose: Not in Education, Employment, or Training (NEET) youth are youth disengaged from major social institutions and constitute a worrying concern. However, little is known about this subgroup of vulnerable youth. This study aimed to examine if NEET youth differ from other contemporaries in terms of personality, mental health, and substance use and to provide longitudinal examination of NEET status, testing its stability and prospective pathways with mental health and substance use.

Methods: As part of the Cohort Study on Substance Use Risk Factors, 4,758 young Swiss men in their early 20s answered questions concerning their current professional and educational status, personality, substance use, and symptomatology related to mental health. Descriptive statistics, generalized linear models for cross-sectional comparisons, and cross-lagged panel models for longitudinal associations were computed.

Results: NEET youth were 6.1% at baseline and 7.4% at follow-up with 1.4% being NEET at both time points. Comparisons between NEET and non-NEET youth showed significant differences in substance use and depressive symptoms only. Longitudinal associations showed that previous mental health, cannabis use, and daily smoking increased the likelihood of being NEET. Reverse causal paths were nonsignificant.

Conclusions: NEET status seemed to be unlikely and transient among young Swiss men, associated with differences in mental health and substance use but not in personality. Causal paths presented NEET status as a consequence of mental health and substance use rather than a cause. Additionally, this study confirmed that cannabis use and daily smoking are public health problems. Prevention programs need to focus on these vulnerable youth to avoid them being disengaged.

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IMPLICATIONS AND CONTRIBUTION

Not in Education, Employment, or Training youth require special focus because they are more likely to be drug users and to report depressive symptoms. Mental health, cannabis use, and daily smoking also should be at focus among youth because it increases the risk of becoming disengaged from society.

Conflicts of Interest: The authors have no conflicts of interest to declare.

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Nowadays, an increasing number of youth are disengaged from major social institutions such as the education system and the labor force [1], especially in the context of the current economic downturn. These youth are termed “Not in Education,

Employment or Training” (NEET). In 2011, the prevalence rate of NEET youth across Organization for Economic Cooperation and Development (OECD) countries was 16% among the 15–29 year olds (7% inactive and 9% unemployed) and 20% among the 25–29 year olds (12% inactive and 8% unemployed) [2]. Public health literature has recently shown interest in this phenomenon because NEET youth may be a vulnerable and socially excluded subgroup of youth, with increased risky behaviors and poor mental health [3,4]. The at-risk population includes school dropouts, minorities, foster youth, and youth in the justice system. However, little is known about the characteristics of NEET youth and how they are different from other contemporaries.

Indeed, to our knowledge, no study investigated if NEET status is associated with a set of stable characteristics such as personality. Are NEET youth a specific subgroup of youth with permanent traits? Or is there a difference in transient patterns of behaviors and feelings? This study investigated this topic.

Furthermore, a few previous studies associated NEET phenomenon with increased mental health issues, including conduct disorders, mood disorder, and suicidal thoughts [3,4]. However, causal paths from mental health to NEET phenomenon are not clear. Indeed, youth with prior mental health issues are likely to be disengaged from education and employment [5,6]. On the contrary, being disengaged may lead to feeling of hopelessness and mental health issues [3,6,7]. Indeed, being an NEET may have a demoralizing effect for individuals [2].

Being NEET is also associated to increased risk of substance use and crime [3,7]. Longitudinal studies focusing on the relationship between NEET status and substance use are scarce, but unemployment and school disengagement have often been investigated separately. Studies reported reciprocal effects between substance use and unemployment/school disengagement. Indeed, unemployed youth are more likely to use substance, and substance use increases the likelihood of being unemployed [6,8]. School disengagement and academic failure may also be both causes and consequences of substance use [9,10].

NEET youth is a heterogeneous population, and subgroups shared different patterns of related issues. First, previous studies distinguished between short- and long-term NEET youth. Youth disengaged for long periods suffer serious social and economic problems, whereas short-term NEET youth did not. Second, a recent report distinguished “vulnerable” NEET youth and “non-vulnerable” NEET youth. The first ones are marginalized youth, lacking of social, cultural, and human capital (e.g., long-term unemployed youth, disengaged youth with asocial lifestyle, illness). The second ones are voluntary NEET youth, who choose to be NEET and not lack of social, cultural, and human capital (e.g., traveling youth). The latter are more susceptible to be short-term NEET youth.

To our knowledge, no study investigated longitudinal associations between NEET youth with risky behaviors and mental health, although this design is required for the examination of causality and reverse causality [11]. This study aimed to fill in this gap within a sample of young Swiss men. Therefore, the objectives of the study were twofold: (1) to examine if NEET youth differ from other contemporaries in terms of personality, substance use, and mental health and (2) to provide longitudinal examination of NEET status, testing whether NEET status is a transient or a stable phenomenon, including prospective pathways between NEET status, mental health, and substance use to see if there were reinforcing factors for staying or becoming NEET.

Methods

Participants and procedures

The present study analyzed the data collected in the Cohort Study on Substance Use Risk Factors, a longitudinal study designed to assess substance use patterns and their related consequences for young Swiss men. Participants were enrolled during conscription in three of Switzerland’s six army recruitment centers; these cover 21 of the 26 Swiss cantons (including all French-speaking cantons) and are located in Lausanne (French speaking), Windisch, and Mels (both German speaking). Army recruitment is obligatory in Switzerland; thus, all young Swiss men around 20 years old were eligible for the study’s inclusion. Assessments of baseline (September 2010 to May 2012) and follow-up (March 2012 to April 2013) data were carried out outside the army environment and independently of eligibility for military service. Respectively 5,990 and 5,223 (87.2%) participants filled in the baseline and the follow-up questionnaires. Missing values were deleted listwise, and the final sample consisted of 4,758 participants (91.1% of the follow-up sample). More information on sampling and nonresponse is available from Studer et al. [12,13]. In summary, the results indicated that nonresponse bias was small. There was no significant difference between respondents and nonrespondents regarding the occupational status for any outcome (personality, substance use, mental health). The study protocol (Protocol No. 15/07) was approved by Lausanne University Medical School’s Clinical Research Ethics Committee.

Measures

Not in Education, Employment, or Training status. Current occupational status was assessed by asking participants “what is your current professional status?” Answers were aggregated into “studying/working” (including participants in military service or civic service) and “NEET.” These youth included people who are no longer studying and are out of work, including participants currently looking for a job and those not looking for a job (e.g., jobless, at home, sabbatical).

Personality. Six aspects of personality were assessed: traits of neuroticism/anxiety, aggression/hostility, and sociability were measured using the Zuckerman–Kuhlmann Personality scale [14]; the sensation seeking trait was measured with the brief sensation-seeking scale [15]; and the behavioral inhibition system and behavioral approach system were assessed using the behavioral inhibition system/behavioral approach system scale [16].

Mental health. Screening measures for symptomatology of mental health were used. The WHO’s Major Depressive Inventory (International Classification of Diseases, Tenth Revision) was used to assess levels of depression [17] during the two previous weeks. The number of depressive symptoms was used because of the small number of participants with major depressive diagnosis. Mental health was assessed using the Short Form Health Survey [18], with the mental component summary, assessed for the four previous weeks. Higher score indicated better mental health.

Alcohol use. Alcohol use was assessed using the extended quantity–frequency measure of alcohol use [19] and following

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