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ORIGINAL ARTICLE

Influence of resilience on health-related quality of life in adolescents[☆]

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KEYWORDS

Resilience;
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quality of life;
Adolescents;
KIDSCREEN-52;
Stress;
Emotional moods

Abstract

Objective: To analyse the influence of resilience on the different dimensions of health-related quality of life in a group of adolescents in Cuenca.

Method: A descriptive, cross-sectional, multicentre and multistage study was carried out in five secondary schools during the 2015–2016 school year.

Instruments: A self-administered questionnaire, which included sociodemographic characteristics and the CD-RISC 10 scale to assess resilience together with the KIDSCREEN-52 questionnaire to measure health-related quality of life.

Results: Data were obtained from 844 students, of whom 54% were girls and the mean age was 16.36 ± 1.05 years. Higher resilience scores were observed in boys. Health-related quality of life was lower in girls (except in the dimension of social acceptance) and in the oldest group. Resilience was significantly associated with all KIDSCREEN-52 dimensions and proved to be a relevant predictor, especially in the dimensions related with mental health and all those that measure social relationships.

Conclusion: Our study provides evidence on the synergy between health-related quality of life and resilience in adolescents. Resilience is associated with higher levels of quality of life in adolescents and as the scores are lower in girls, it could be one of the explanatory factors for their poorer health-related quality of life.

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PALABRAS CLAVE

Resiliencia;
Calidad de vida
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KIDSCREEN-52;
Estrés;
Estado de ánimo

Influencia de la resiliencia sobre la calidad de vida relacionada con la salud en adolescentes**Resumen**

Objetivo: Analizar la influencia de la resiliencia sobre las distintas dimensiones de la calidad de vida relacionada con la salud en un grupo de adolescentes escolarizados en la ciudad de Cuenca.

Método: Se realizó un estudio descriptivo, transversal, multicéntrico y polietápico en 5 institutos de Educación Secundaria durante el curso académico 2015–2016.

Instrumentos: Cuestionario autoadministrado que incluía variables sociodemográficas y las escalas CD-RISC 10 para evaluar resiliencia y KIDSCREEN-52 para medir la calidad de vida relacionada con la salud.

Resultados: Se recogieron datos de 844 estudiantes, de los cuales el 54% fueron chicas y la edad media de la muestra fue de $16,36 \pm 1,05$ años. Se observaron valores superiores de resiliencia en los chicos. Con respecto a la calidad de vida relacionada con la salud, fue menor en las chicas (salvo en la dimensión de aceptación social) y en el grupo de mayor edad. La resiliencia se asoció significativamente con todas las dimensiones del KIDSCREEN-52 y resultó ser un predictor relevante, especialmente en las dimensiones relacionadas con la salud mental y en todas las que miden relaciones sociales.

Conclusión: Nuestro estudio aporta evidencias sobre la sinergia calidad de vida relacionada con la salud-resiliencia en adolescentes. La resiliencia se asocia con niveles más elevados de calidad de vida en adolescentes y, al ser menor en chicas, puede ser uno de los factores explicativos de su peor calidad de vida relacionada con la salud.

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What is known?

Adolescence is a transition stage that makes the capacity to adapt necessary. The most resilient individuals are stronger and better able to face adverse and/or stressful situations.

What does this paper contribute?

Among adolescents, resilience is a factor that is associated with a more positive perception of health-related quality of life. This association is stronger in girls.

Resilience as a personal skill can be strengthened and trained by means of specific programmes that make it possible to improve adolescents' capacity to cope.

Introduction

Resilience is a complex and heterogeneous construct. One of its most widely agreed definitions is that it is an ability of individuals to get good results in spite of the presence in their lives of severe threats against their adaptation and development.¹ More recently, resilience has been considered to be a personal skill that aids healthy stable

functioning in life, even when adverse circumstances are present.²

The most resilient individuals have been found to tend to actively face things when they are under stressful situations.³ Nevertheless, resilience has also been associated not only with personal factors such as self-sufficiency, self-esteem or a strong personality, as it is also linked to interpersonal factors such as social and family support. All of these factors contribute to improving adaptation and acting appropriately in adverse situations.⁴

It is important for adolescents to be resilient as they are in a transition phase and have to deal with multiple adverse situations. The deep biological, psychological and social transformations which occur in this phase often lead to conflict, crisis and contradictions. These are unstable years when individuals have to take important decisions for the future. There is worry about academic performance, the search for independence from the family and autonomy, all of which may lead to arguments with their parents. There is also an increasing need to belong and gain the recognition of their peer group.⁵ Although adolescents are usually considered to be a healthy population, it is true that they are going through a stage in life that is complex. It tests their ability to adapt and to face new challenges. Adolescence is therefore a complex time of stress and uncertainty, with many challenges. This, together with the intrinsic limitations of this group in dealing with stress, makes them a vulnerable⁶ population, with the risk of a worse health-related quality of life (HRQL).

There is growing interest in evaluating HRQL in healthy as well as in sick adolescents. The KIDSCREEN questionnaire

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