

CO1.10: Life satisfaction among children aged 11, 13 and 15 years

Definitions and methodology

Subjective well-being among children can be measured based on self-reported levels of satisfaction among respondents in life-satisfaction surveys. Data on life satisfaction among children are taken from the Health Behaviour in School-aged Children survey. Children aged 11 to 15 years are asked to report on the quality of their current life based on the Cantril life satisfaction scale of 0 to 10 (Cantril, 1965), with 0 representing the worst possible life and 10 representing the best possible life. This indicator presents life satisfaction as the mean score among children. The data are presented for 2009/2010.

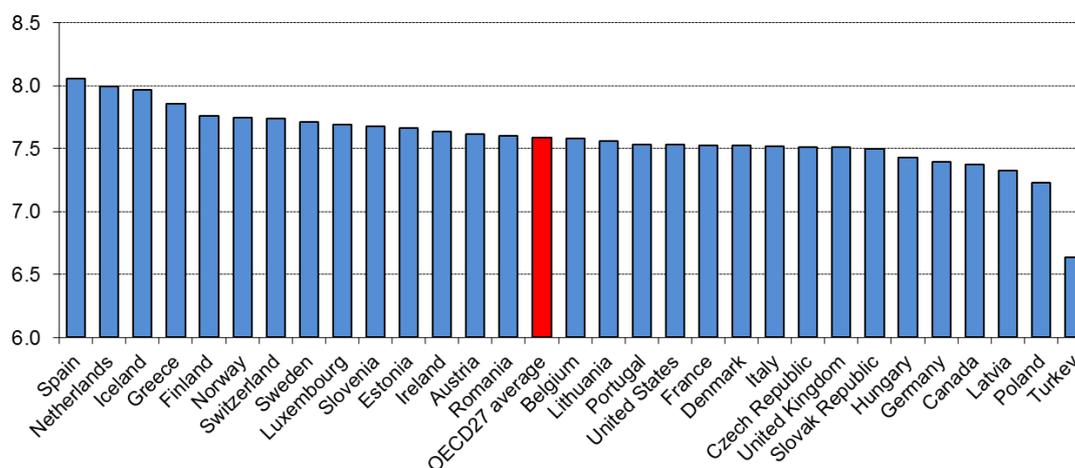
The HBSC survey collects information on many socio-economic factors that affect health behaviour among children. This indicator also presents information on the life satisfaction level among children by family structure and family affluence. Family structure is defined by whether the child lives with both or just one parent, while family affluence is defined by the Family Affluence Scale (FAS) calculated based on responses to the survey. The FAS scale is based on a composite measure calculated for each surveyed student based on their response to questions about household possessions. A three point ordinal scale is used, where FAS low (score=0,1,2) indicates low affluence, FAS medium (score=3,4,5) indicates middle affluence, and FAS high (score=6,7,8,9) indicates high affluence. For more information please see Currie *et al.* (2012).

Key findings

For all countries for which data are available, the mean level of life satisfaction is in the top half of the scale – above in a scale of 0 to 10 (Chart CO1.10.A). The average among children aged 11-15 in OECD countries is just above 7.5 and varies from a high of just above 8 in Spain to a low of 6.6 in Turkey. Other OECD countries with relatively low levels of life satisfaction (below 7.5) include Canada, Germany, Hungary and Poland

Chart CO1.10.B shows that in all OECD countries, except the Slovak Republic, the level of satisfaction is lower among girls than boys. In general, countries with high level of satisfaction among boys also have high level of satisfaction among girls. The difference in the level of life satisfaction among boys and girls is high (above 0.35 points) in Austria, Canada, Denmark and Switzerland.

Chart CO1.10.A Life satisfaction among children aged 11 to 15, 2009/10
 Mean life satisfaction score of 11, 13 and 15 year-old children, on a scale of 0 to 10¹

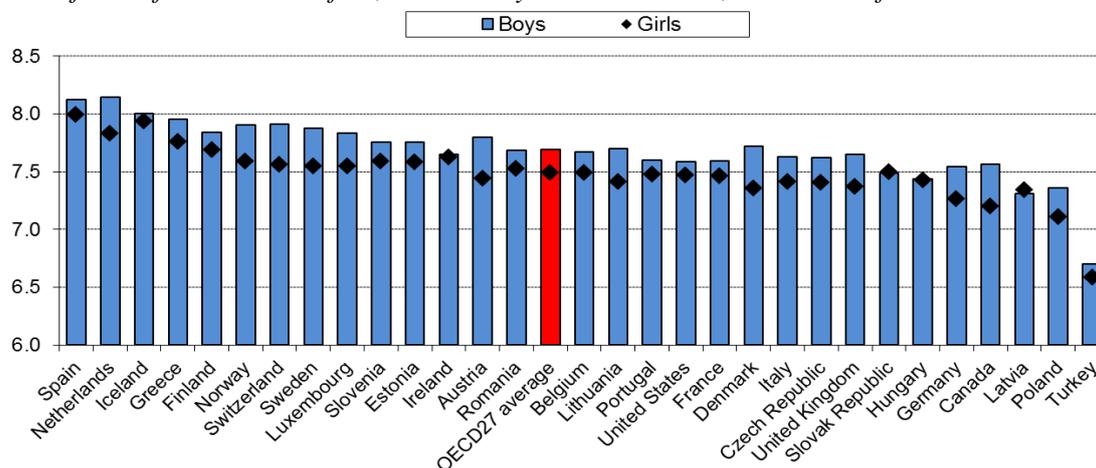


1) 0 = worst possible life; 10 = best possible life. Countries are ranked in ascending order of proportion of children reporting life satisfaction score of 6 or above.

Source: Health Behaviour in School-aged Children 2009/2010.

Other relevant indicators: CO1.8: Healthy eating; and CO1.9: Physical activity; CO2.1: Income poverty

Chart CO1.10.B Life satisfaction among children aged 11 to 15, by gender, 2009/10
 Mean life satisfaction score of 11, 13 and 15 year-old children, on a scale of 0 to 10

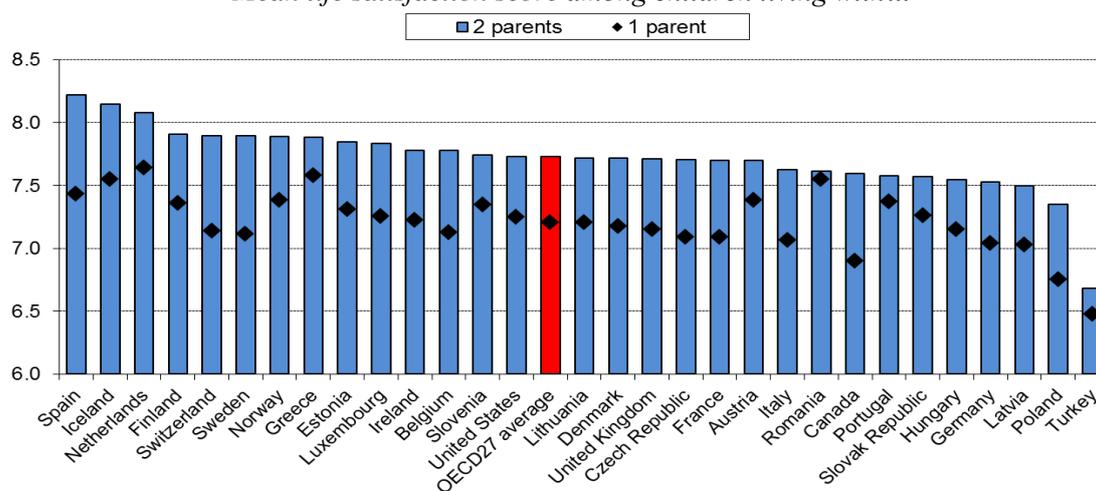


1) see note (1) for Chart CO1.10.A
 Source: Health Behaviour in School-aged Children 2009/2010.

Life satisfaction among children by socio-economic characteristics

Chart CO1.10.C presents the level of life satisfaction among children by family structure based on whether the child lives with both parents or just one parent. The data show that in all countries children living with two parents are more satisfied with life than children living with just one parent. Among OECD countries, the difference is particularly big, at more than 0.7 points, in Spain, Sweden and Switzerland. While the difference is small in Austria, Greece, Portugal, the Slovak Republic and Turkey, at less than 0.4 points.

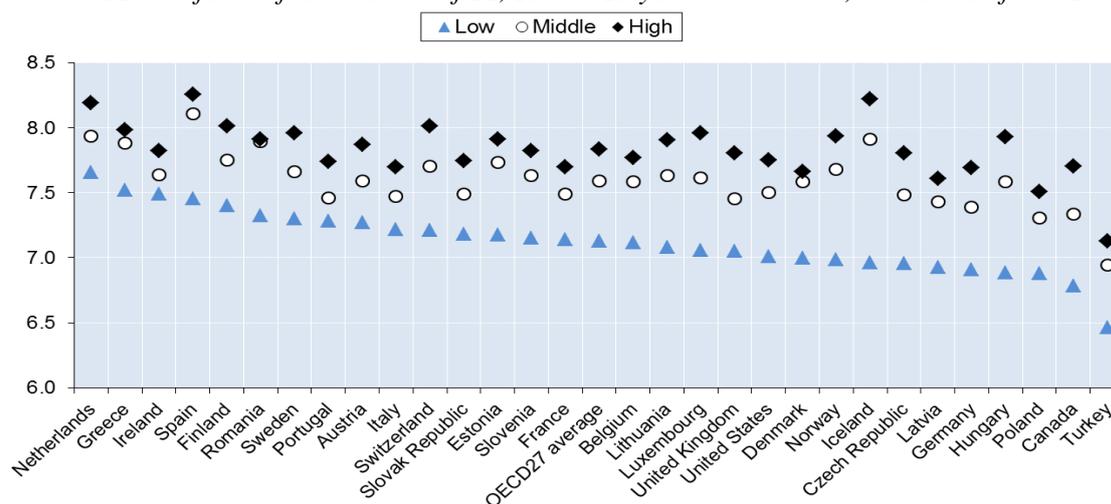
Chart CO1.10.C Life satisfaction among children aged 11 to 15, by family structure, 2009/10
 structure, 2009/10
 Mean life satisfaction score among children living with...^{1,2}



1) see note (1) for Chart CO1.10.A ; 2). Data is not available for children who do not live with either parent, often under foster care.
 Source: Health Behaviour in School-aged Children 2009/2010.

Chart CO1.10.D presents the level of life satisfaction among children based on level of affluence using the HSBC FAS scale. The data show that in all countries children from high affluence families have the highest level of life satisfaction followed by children from middle affluence households, and children from low affluence households have the lowest levels of life satisfaction. The difference in life satisfaction between children from high and low affluence children is particularly large in Canada, Hungary, Iceland and Norway at more than 0.9 points.

Chart CO1.10.D Life satisfaction among children aged 11 to 15, by family affluence, 2009/10
 Mean life satisfaction score of 11, 13 and 15 year-old children, on a scale of 0 to 10



1) see note (1) for Chart CO1.10.A
 Source: Health Behaviour in School-aged Children 2009/2010.

Comparability and data issues

Self-reported data on life satisfaction have been taken from the Health Behaviour in School-aged Children survey (HBSC) 2009/10. The last data collection included all OECD countries except Australia, Japan, Korea, Mexico and New Zealand.

These data come from confidential surveys of young people, and may be subject to response bias. Sample selection methods differ across countries. The sample sizes are similar for each country, while the population sizes differ markedly, so that the potential for error in sample-representativeness is much larger for the United States than for the Netherlands.

HBSC data were collected separately for Flemish- and French-speaking communities in Belgium while data for the United Kingdom reflect results for England, Scotland and Wales (data for Northern Ireland is not included). This indicator presents one value for Belgium and the United Kingdom on basis of a population-weighted average.

The survey used for this indicator asks respondents to report the level of satisfaction at the time of the survey. As such the response may be influenced by seasonal variation, for example, if the survey was conducted before or after a holiday period. The response may also be affected by temporary changes in the respondent's personal situations such as a family bereavement or promotion at work, and may not reflect their overall life satisfaction.

Life satisfaction by socio-economic groups are descriptive and are not regressed with control factors, thus the differences may not be directly and exclusively related to characteristics of the socio-economic

groups defined here, but could also be due to other related factors. While the HBSC survey includes information on many factors, only the major socio-economic factors are presented where the difference in the prevalence of smoking is statistically significant across most countries.

Sources and further reading: Currie et al. (2012). "Social determinants of health and well-being among young people. Health Behaviour in School-aged Children (HBSC) study: international report from the 2009/2010 survey", (www.hsbc.org).