

Left behind: inequalities in the negative impacts of the COVID-19 pandemic among adolescents in the WHO European Region

The [new WHO Europe report](#) summarizes findings from the Health Behaviour in School-aged Children (HBSC) survey round 2021/2022 regarding the unequal impact of the COVID-19 pandemic on adolescents' health and health behaviours in 22 countries and regions of the WHO European Region.

Summary of findings:

- The pandemic and imposed restrictions had an unequal impact on adolescents, being more negative for those who were vulnerable to health problems and thereby increasing pre-existing inequalities.
- No clear geographical patterns were detected in the extent to which different risk factors contributed to the negative pandemic impact on adolescents' health, mental health and health behaviours (physical activity and eating and drinking habits).
- More girls and 15-year-olds than boys and younger adolescents reported negative impacts. The largest gender and age inequalities were seen in mental health.
- Nearly 30% of adolescents in the 22 countries and regions reported that COVID-19 had had a negative impact on their mental health.
- Social inequalities were linked to adolescents experiencing negative impacts of the pandemic in many countries and regions.
- Having experienced the hospitalization of a family member due to COVID-19 was also an important risk factor in more than half of the countries and regions.

How the findings should inform policy-making:

- Understanding the COVID-19 impact on more disadvantaged groups is essential to avoid increases in the social gradient in health.
- Interventions should be tailored to gender and age, especially focusing on promoting resilience to reduce long-term harmful effects.
- Policy-makers should identify and promote protective factors that contribute to building resilience among the most vulnerable groups to enable them to cope with the medium- and long-term consequences of the pandemic and future crises.
- The role of different risk factors on various health and health-related behaviour outcomes varied widely across the countries and regions, highlighting the need for country-/region-specific interventions.
- Differences in country- and region-level policies and measures and cultural factors should be further investigated, as sharing good practices may support decision-making in future crises.
- Social policies targeting average families and adolescents are usually insufficient to meet the needs of families and individuals who are already at risk. In addition to the vulnerable groups highlighted in this report, policy-makers should develop actions for groups who often are underrepresented or even excluded from surveys, such as refugees, adolescents with disabilities and those who have dropped out from school.
- There is a need to grow understanding of the combinations of risks that tend to occur together and the intersectional effects created when individuals exist simultaneously in different risk groups.