

# BELGIAN HEALTH AND WELL-BEING COHORT (BELHEALTH)

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**BELHEALTH**  
BELGIAN HEALTH AND WELLBEING COHORT

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## Introduction

The Belgian Health and Well-being Cohort (BELHEALTH) is a longitudinal study that aims to follow the health and well-being of a large sample of the Belgian population for a minimum of two years. Every three months, an online survey is sent to the same participants to collect data on their state of physical and mental well-being, as well as on aspects that could influence it. The aim of the study is to inform health authorities about the changing mental health needs of citizens and to identify those groups who are experiencing the most difficulties - and who need priority support - in the face of the upheavals our societies are experiencing.

The BELHEALTH study is a continuation of the 11 COVID-19 health surveys conducted during the health crisis, with 11,560 participants from these surveys making up the present cohort. The first BELHEALTH survey took place in October 2022 and the second in February 2023. Because some groups were under-represented in the base cohort (e.g. men, young adults, residents of Wallonia), we sent targeted postal invitations to complete them in order to be as representative as possible of the general population. In total, 831 additional people were recruited, bringing the cohort to 12,391 adults.

## Message to our participants

We would like to thank the 8,346 participants who took part in this second BELHEALTH survey. Among them are the “new recruits” who joined the study through targeted invitations, and we welcome them; we appreciate your trust and cooperation! Finally, we would like to express our deepest gratitude to those who have faithfully participated in our surveys for more than two years now. We understand that some of the questions on mental health may be tiring, but it is crucial to keep the same scales for comparison over time and to analyze changes. The next BELHEALTH survey will go online in June 2023. We will inform you by e-mail. The results are on the [website of the cohort](#). Thank you all!



**Sample size**  
N = 8346



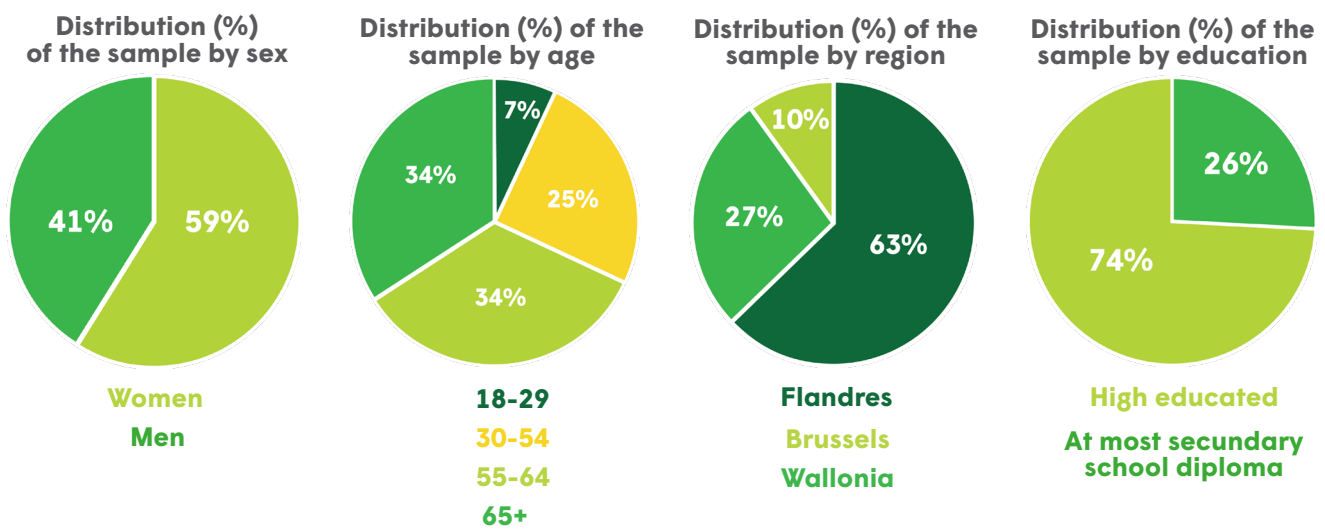
**Data collection method**  
Online survey



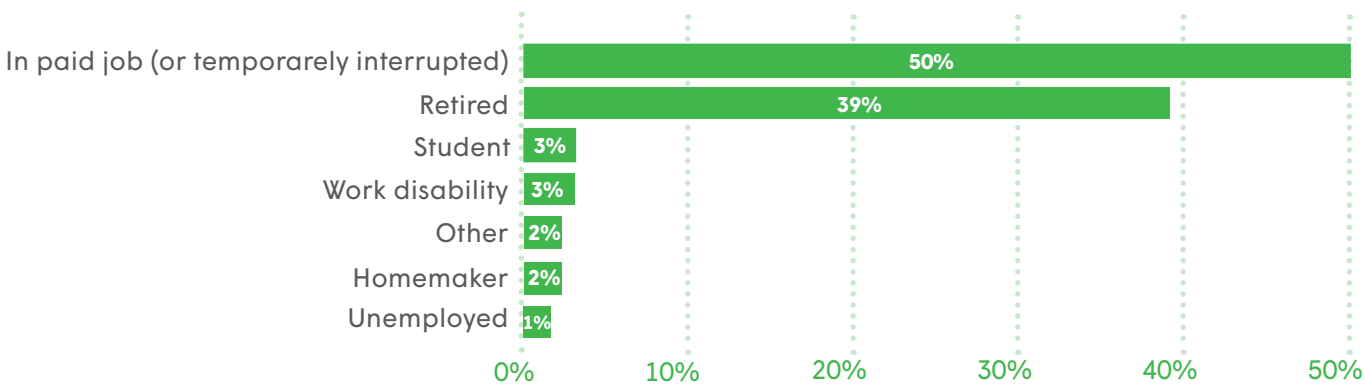
**Period**  
6-27 February 2023

# Profile of participants

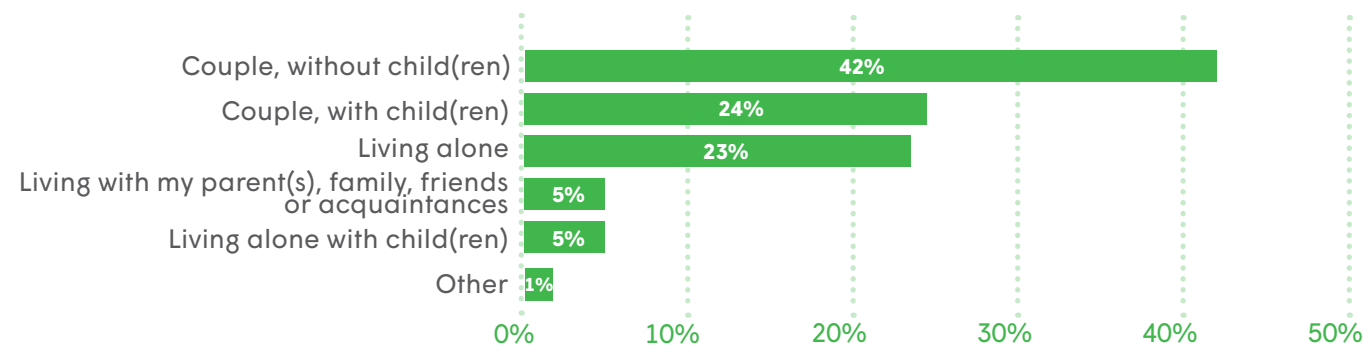
The sample includes in total 8346 participants.



Distribution (%) of the sample by work situation



Distribution (%) of the sample by household type

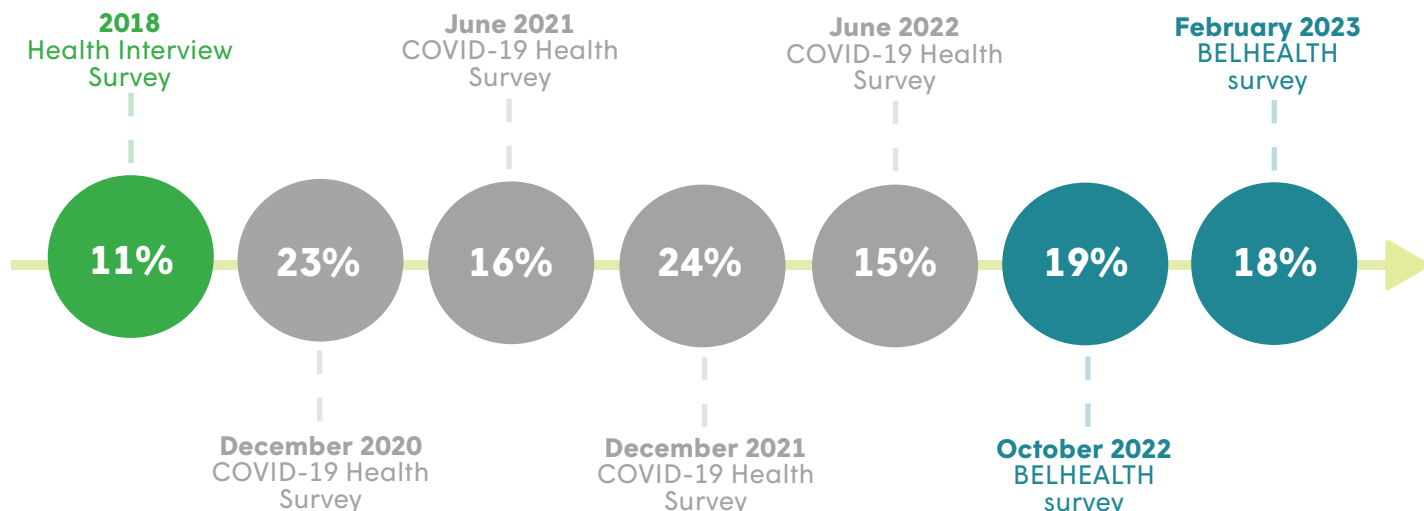


Because some groups are under-represented in our sample (for ex. youngsters), correction factors are applied in the analyses to match the distribution in the Belgian population. More methodological information can be found in [this document](#).

# Anxiety

**% of people with generalized anxiety** (measured with the GAD-7 scale)

Timeline Health Interview Survey (HIS) 2018, COVID-19 Health Surveys 2020-2022 and BEL-HEALTH study 2022-2023, Belgium



The proportion of people who experience anxiety has not changed much between October 2022 (19%) and February 2023 (18%): the difference is not statistically significant after controlling for age and sex. However, this percentage remains significantly higher than the pre-pandemic levels reported in 2018 (11%).

Not all equal

Not all adults have the same risk to develop mental health problems. These risks vary according to factors such as age, educational level, etc.

## Overview of inequalities



### AGE

People aged 18-29 years were more likely to have anxiety symptoms (24%) compared with people of 50-64 years (18%) and 65+ years (10%).



### EDUCATION

People with at most a secondary school diploma were more likely to have anxiety symptoms (20%) compared with high educated people (15%).



### REGION

People living in Wallonia were more likely (22%) to have anxiety symptoms compared with people living in Flanders (16%).



### HOUSEHOLD TYPE

People who are living as a couple with children were less likely to have anxiety (17%) compared with people living alone without (18%) or with (27%) children.



### WORK SITUATION

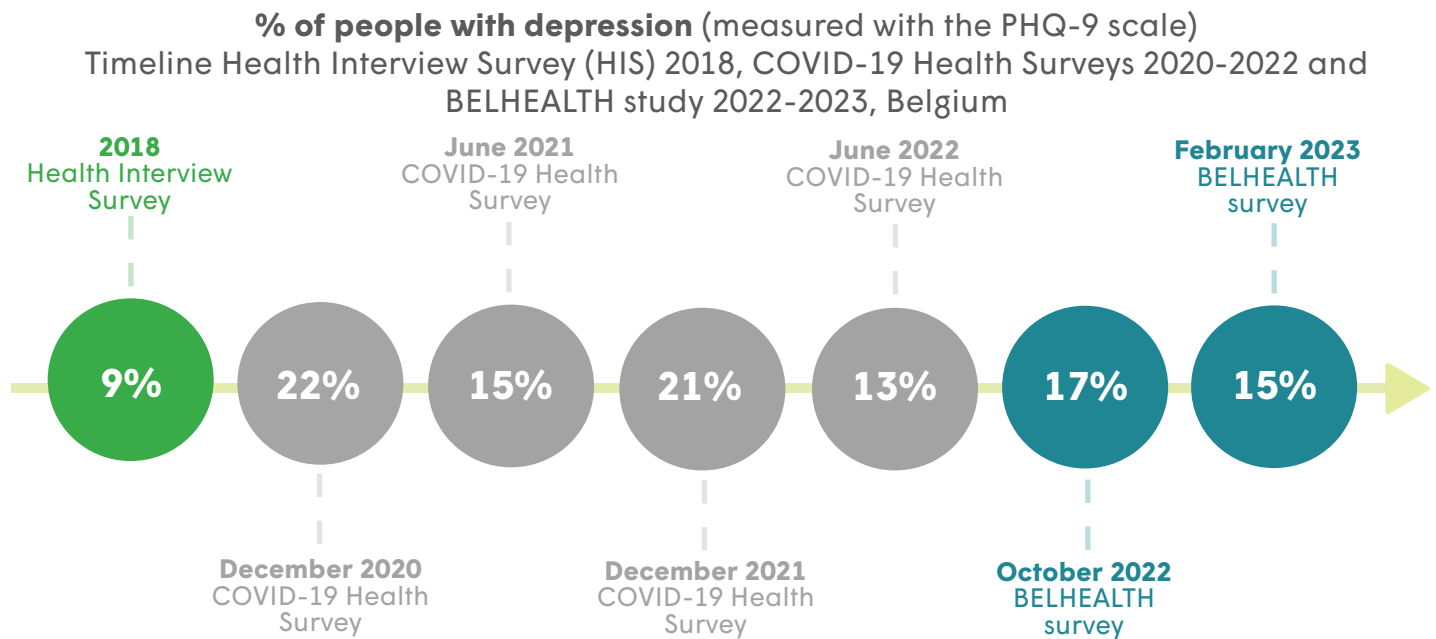
People who have a paid job were less likely to have anxiety symptoms (19%) compared with people who were incapable to work (39%).



### FINANCIAL SITUATION

Those who have (great) difficulty making ends meet were more likely to experience symptoms of anxiety (39%) than those who find it somewhat difficult (17%) to very easy (9%) to make ends meet.

# Depression



The proportion of people who experience depression has not changed much between October 2022 (17%) and February 2023 (15%): the difference is not statistically significant after controlling for age and sex. However, this percentage remains significantly higher than the pre-pandemic levels reported in 2018 (9%).

Not all equal

Not all adults have the same mental health risks. These risks vary according to factors such as age, educational level, etc.

## Overview of inequalities



### AGE

People aged 18-29 years were more likely to have depression symptoms (20%) compared with people between 50-64 years (15%) and 65+ years (9%).



### EDUCATION

People with at most a secondary school diploma were more likely to have depression symptoms (17%) compared with higher educated people (12%).



### REGION

People living in Wallonia were more likely (19%) to have depression symptoms compared with people living in Flanders (12%).



### HOUSEHOLD TYPE

People living as a couple without (11%) or with (13%) children were less likely to have depression symptoms compared with people living alone without (19%) or with (20%) children.



### WORK SITUATION

People who have a paid job were less likely to have symptoms of depression (15%) compared with people who have a disability to work (36%).

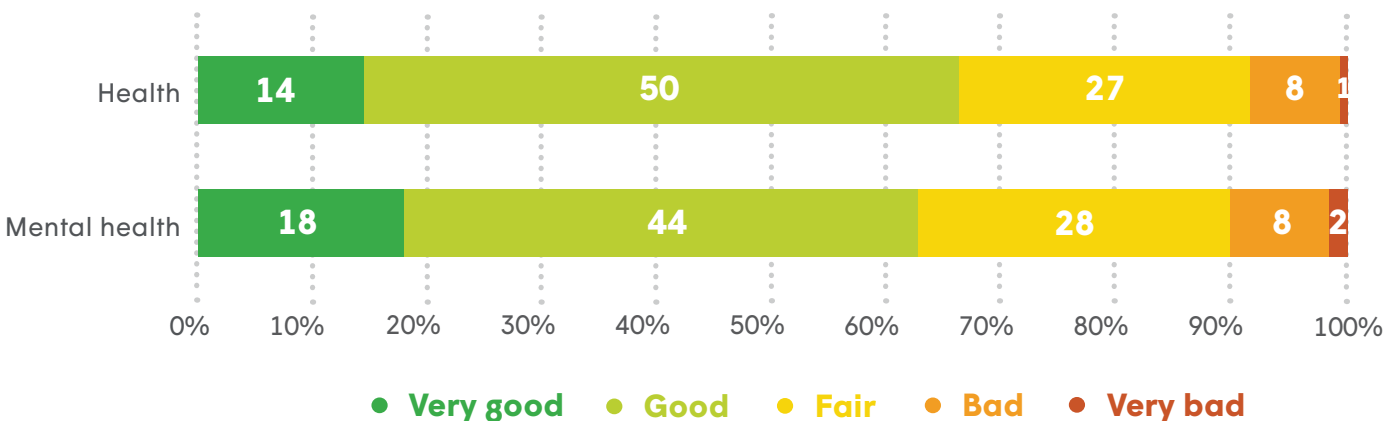


### FINANCIAL SITUATION

Those who have a (great) deal of difficulty making ends meet are more likely to experience symptoms of depression (35%) than those who find it somewhat difficult (14%) to very easy (7%) to make ends meet.

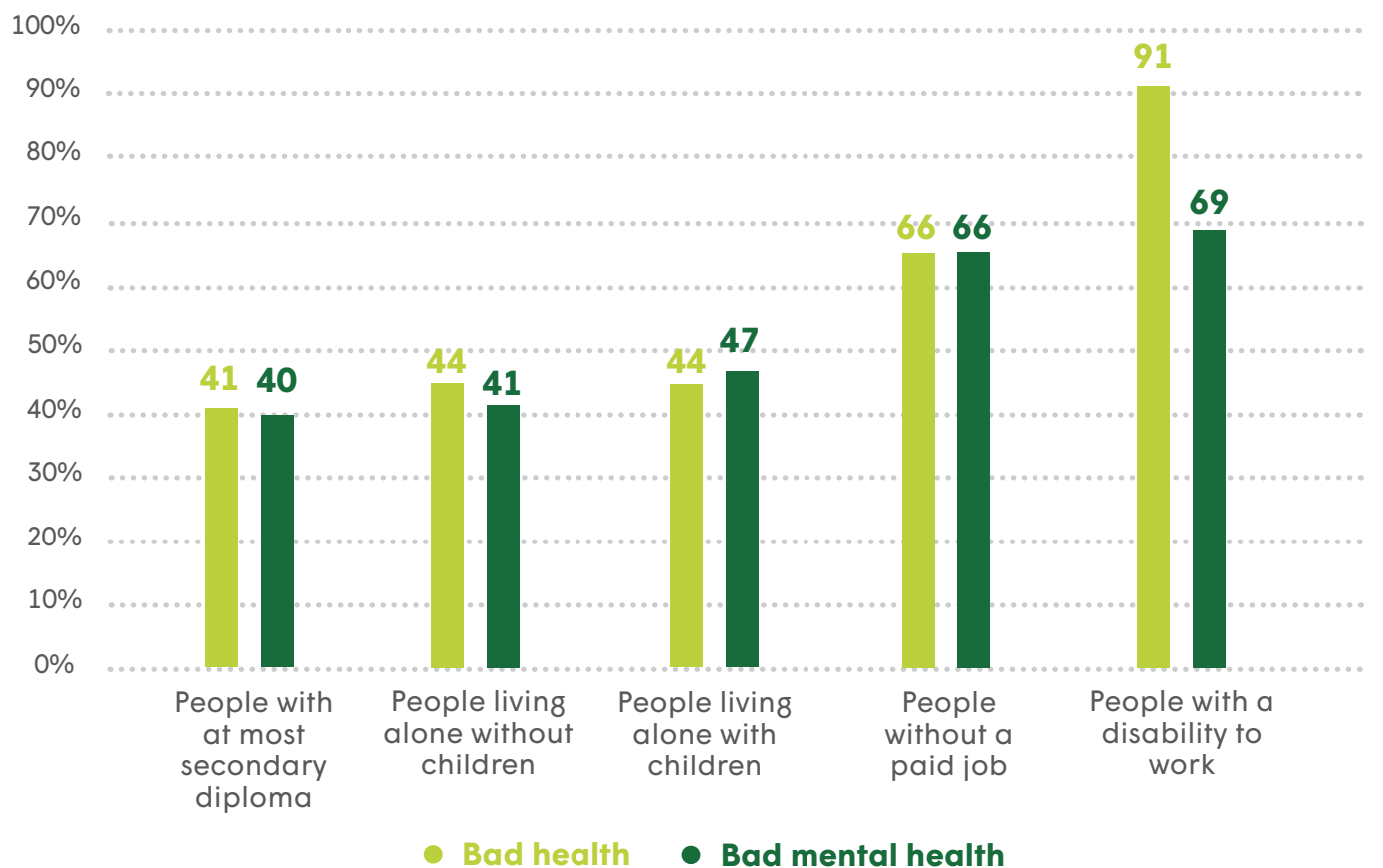
# Subjective (mental) health

Participants were asked to evaluate their own (subjective) health and mental health in general on a scale ranging from “very good” to “very bad”.



The results of February 2023 show that 64% of adults score their subjective health and 62% of adults score their subjective mental health as (very) good. Individuals aged 50 to 64 years had a significantly higher risk (42%) of reporting poor general health scores, while individuals aged 18 to 29 years (48%) and women (40%) had a significantly higher risk of reporting poor mental health scores. Furthermore, the health and mental health scores were highly correlated.

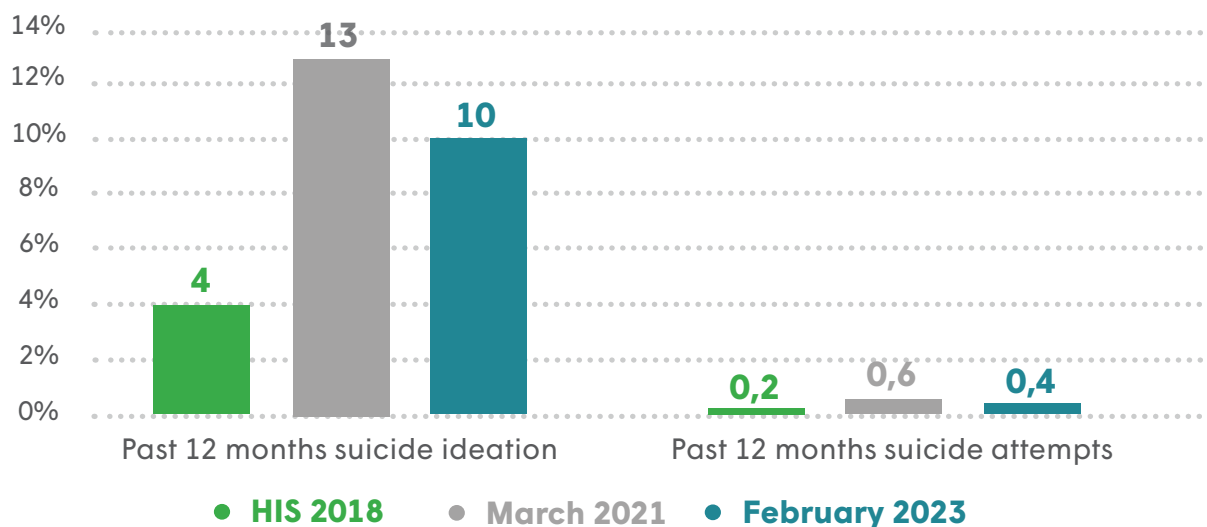
## Proportion of the population (18 years and older) perceiving their health status as fair, poor or very poor



# Suicide ideations and attempts

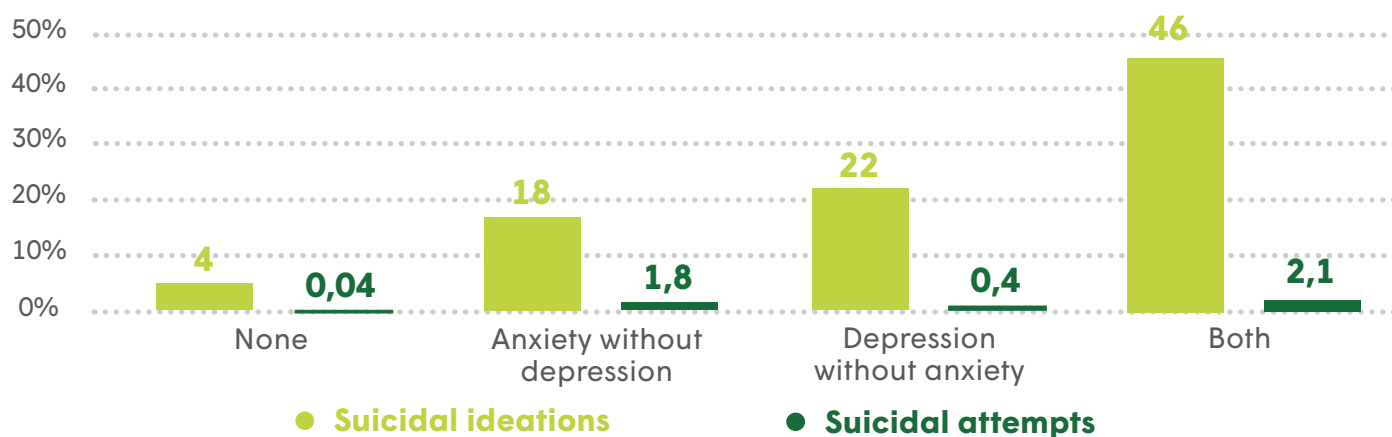
Participants were asked if they had seriously thought of ending their life and if they attempted to commit suicide in the past 12 months.

**Percentage (%) of people (18 years and older) with suicide ideations and attempts in the previous 12 months, HIS 2018, 6<sup>th</sup> COVID-19 Health Survey (March 2021), 2<sup>nd</sup> BELHEALTH survey (February 2023), Belgium**



In the HIS 2018 survey, 4% had thought about suicide in the past 12 months and 0.2% attempted to commit suicide. In March 2021, when the social measures were not yet completely relaxed in covid times, 13% said they had thought about it in the past 12 months (April 2020 to March 2021), while 0.6% attempted to commit suicide. In February 2023, 10% said they had thought about it in the past 12 months, which is significantly lower compared with March 2021 after controlling for age and sex. In February 2023, 0.4% said they attempted to commit suicide in the past 12 months, which is not significantly different with March 2021 after controlling for age and sex.

**Percentage (%) of people with suicidal thoughts and attempts by mental health status, 2<sup>nd</sup> BELHEALTH survey (February 2023), Belgium**



People with anxiety, depression, or both (comorbidity) are more likely to have thought about or attempted suicide in the past 12 months than people without these disorders.

# Use of psychotropic medication

Participants were asked if they used any prescribed sedatives (sleeping tablets or tranquillizers), or antidepressants in the past 2 weeks.



The following groups showed a higher risk to use sleeping tablets or tranquillizers: people who were disabled to work (35%), people living alone (21%), 65+ years (20%), people between 50-64 years (17%), people living in Wallonia (17%), women (16%), and people with at most a secondary school diploma (16%).

A larger percentage of individuals with anxiety or depression symptoms (32% and 34%) use sleeping tablets or tranquillizers compared to those who do not have anxiety or depression symptoms (10% and 11%).

Women (14%), people between 30-49 years (13%) and 50-64 years (16%), people with at most a secondary school diploma (14%), people living alone (15%) and people who were disabled to work (37%) showed a higher risk to use antidepressants.

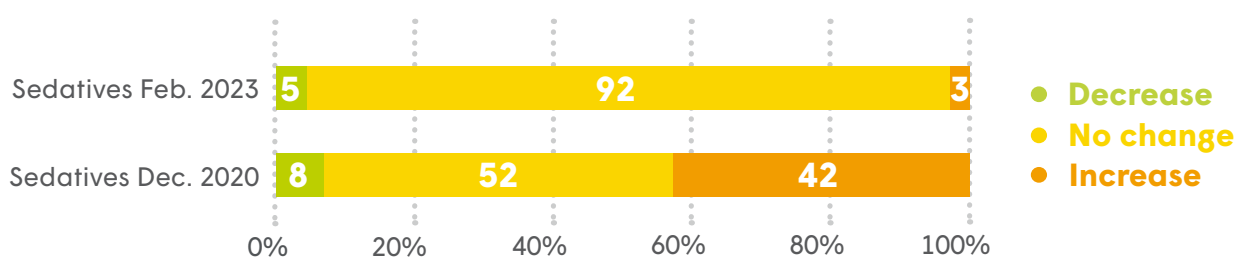
A larger percentage of individuals with anxiety or depression symptoms (30% and 31%) use antidepressants compared to those who do not have anxiety or depression symptoms (9% and 9%).



## Perceived change in use of sedatives (sleeping tablets or tranquillizers)

In the survey, participants were asked to report on any perceived changes in their use of sedatives over the past six months, specifically since September 2022. Three levels of change were distinguished, "Decrease" (I have decreased my consumption or I stopped using it/them since then), "No change" (My consumption remained the same as before or did not use it/them before, nor now) and "Increase" (I have increased my consumption). The same question was asked in the COVID-19 Health Survey conducted in December 2020, but with a different reference period. In that survey, participants were asked about their sedative use over the course of the previous year, before the onset of the coronavirus pandemic.

### Distribution (%) of people (18 years and older) according to their perceived change in the use of sedatives, 5<sup>th</sup> COVID-19 Health Survey (December 2020), 2<sup>nd</sup> BELHEALTH survey (February 2023), Belgium



Compared with December 2020 (during COVID-19 times), significantly less people reported an increase in their use of sedatives.



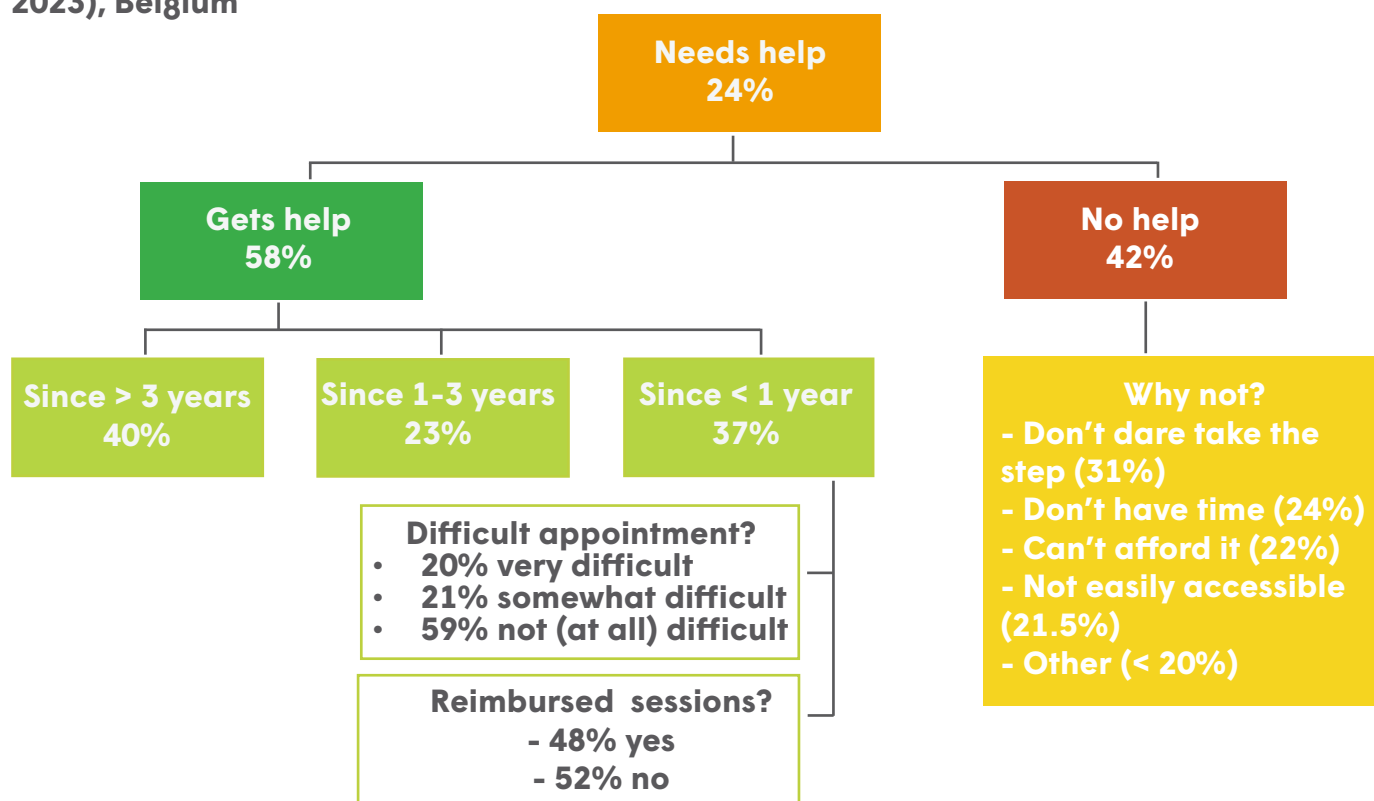
# Mental health care use and access

The second BELHEALTH survey assessed the population's current needs, access to and use of professional support for mental health problems. Nearly one in four adults (24%) reported needing mental health care in the past 6 months with a greater proportion of women (29%) and individuals living alone with children (37%). Out of the individuals who expressed a need for mental health care in the last six months, only 58% received professional help. Of these, 40% were already followed before the sanitary crisis (more than 3 years ago), but the majority (59%) started receiving support since less than 3 years ago. Most people who addressed a mental health professional in the past year claimed it was rather easy to get an appointment (60%), while 20% found it very to extremely difficult. **Besides, almost half (48%) benefited from the recent care reform, which offers partial reimbursement of counseling with a first line registered psychologist.**

For those who did not take advantage of the reimbursed sessions (52%), 28% were not aware of the reform, 46% consulted a psychologist who was not covered by the convention, 7% reported that it required too much effort to understand how it works, and 5% looked for a first-line conventioned psychologist but none were available.

Only 62% of the people who consult a mental health care professional reported being very to extremely satisfied of the support they receive.

**Distribution (%) of people (18 years and older) according to current needs, access to, and use of professional support for mental health problems, 2<sup>nd</sup> BELHEALTH survey (February 2023), Belgium**



On the other hand, 42% of people in need of mental health support did not receive professional help. The most cited reason is because they do not feel at ease to take the step (31%), but many practical reasons also interfere, like not having time, access facility or financial resources for mental health counseling (21-24%).

Mental health problems are still somewhat misunderstood or stigmatized in many societies. This may cause people not to seek help, isolate from friends and family, or disinvest from work and social activities. Stigma is here reflected in the fact that 1 out of 3 people in need of help did not engage in seeking because of being afraid to take the step (31%) or being afraid of what others may think (8,5%).

# Perception towards mental health

We also measured knowledge and attitudes towards mental health problems more directly in the BELHEALTH survey. Participants were presented with a series of affirmations related to mental health and asked to rate their level of agreement on a 4-point scale, ranging from “strongly disagree” (1) to “strongly agree” (4).

## Distribution of people (%) who agreed or strongly agreed with the following statements about mental health

People with a depression have caused their mental health problems themselves

5%

You never recover from mental health problems

29%

If someone talks about his/her mental health problems, some friends will leave him/her

45%

If the employer finds out that the employee is suffering from mental health problems, the employee might lose his/her job

54%

Antidepressants have side-effects

95%

● Agree to strongly agree

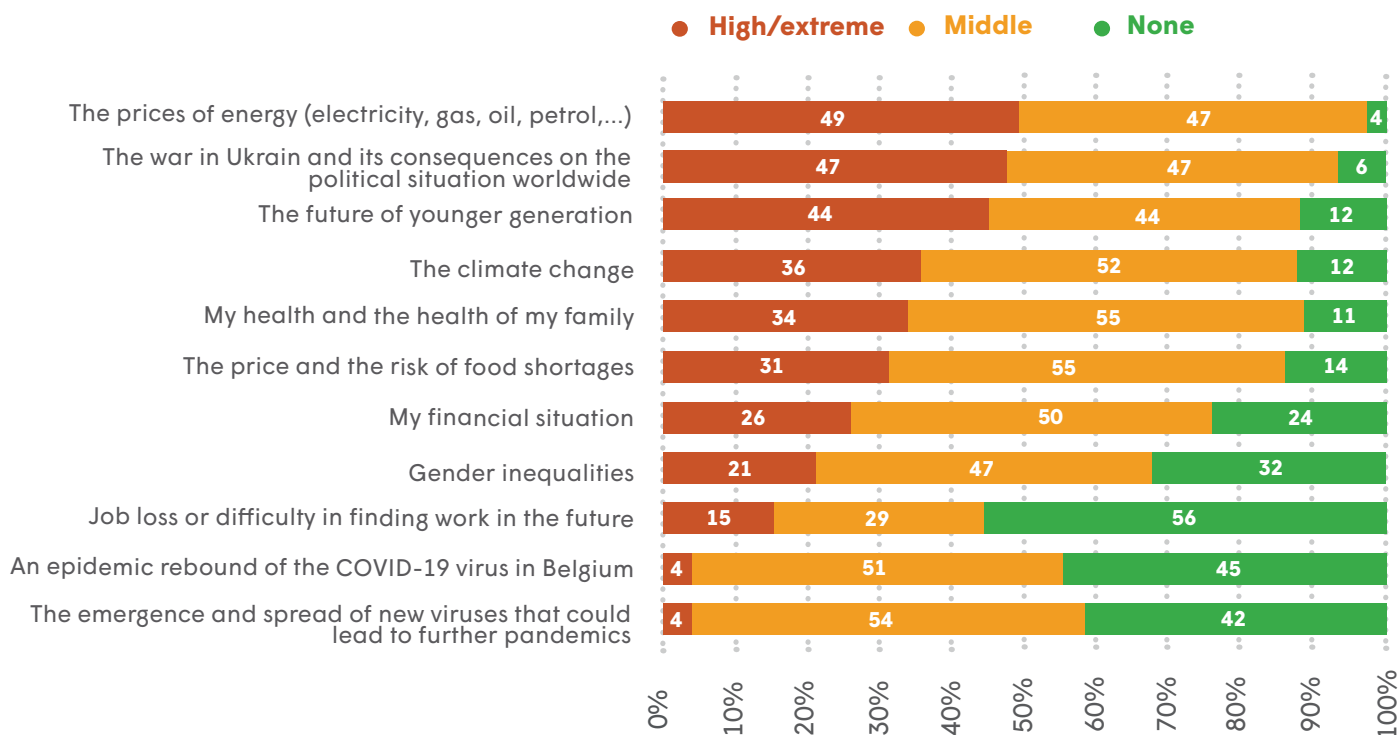
● Disagree to strongly disagree

Results show that 5% of the respondents believe that a person with depression is faulty for his/her mental condition. Men (8%), people aged 18-29 (8%) and people with at most a secondary diploma (6%) believed it more than women (2%), 50-64 (3%) and high educated people (4,5%), respectively. 29% thought that one never recovers from mental health problems. People living in Brussels (20%) and high educated people (25%) believe it less than people living in Flanders (30,5%) and Wallonia (28%) and people with at least a secondary diploma (31%). **45% estimate losing friends if one talks about own mental issues, and up to 54% agree that if an employer finds out about mental health problems of an employee, the latter might lose her/his job.** Older people (aged 50-64: 53% and 57%; aged 65+: 48% and 67%) are more likely to agree with the assumptions about losing friends or jobs compared to younger people (aged 18-29: 36% and 43%). These results indicate that there is still a lot of stigma attached to mental health problems, that need to be overcome through public understanding and education.

# Specific concerns

Participants were asked if they worried about listed topics at the moment of the survey (February 2023). Three levels of concern were calculated: High/extreme very to extremely), Middle (slightly to moderately) and None (not at all). The most frequent reported worries in February 2023 were about the prices of energy, the war in Ukrain and the future of the younger generation.

**Proportion (%) of people (18 years and older) according to their level of concern about the different topics mentioned, 2<sup>nd</sup> BELHEALTH survey (February 2023), Belgium**



“Women, people with at most a secondary school diploma, people living alone with children and people living in Wallonia were significantly more worried about the energy prices.”

“Significantly more women, people with at most a secondary school diploma and people living alone with children were highly worried about the health and health of their family and about the future of the younger generations.”

“Young people, people aged 65+ and high educated people were significantly more highly worried about the climate change.”

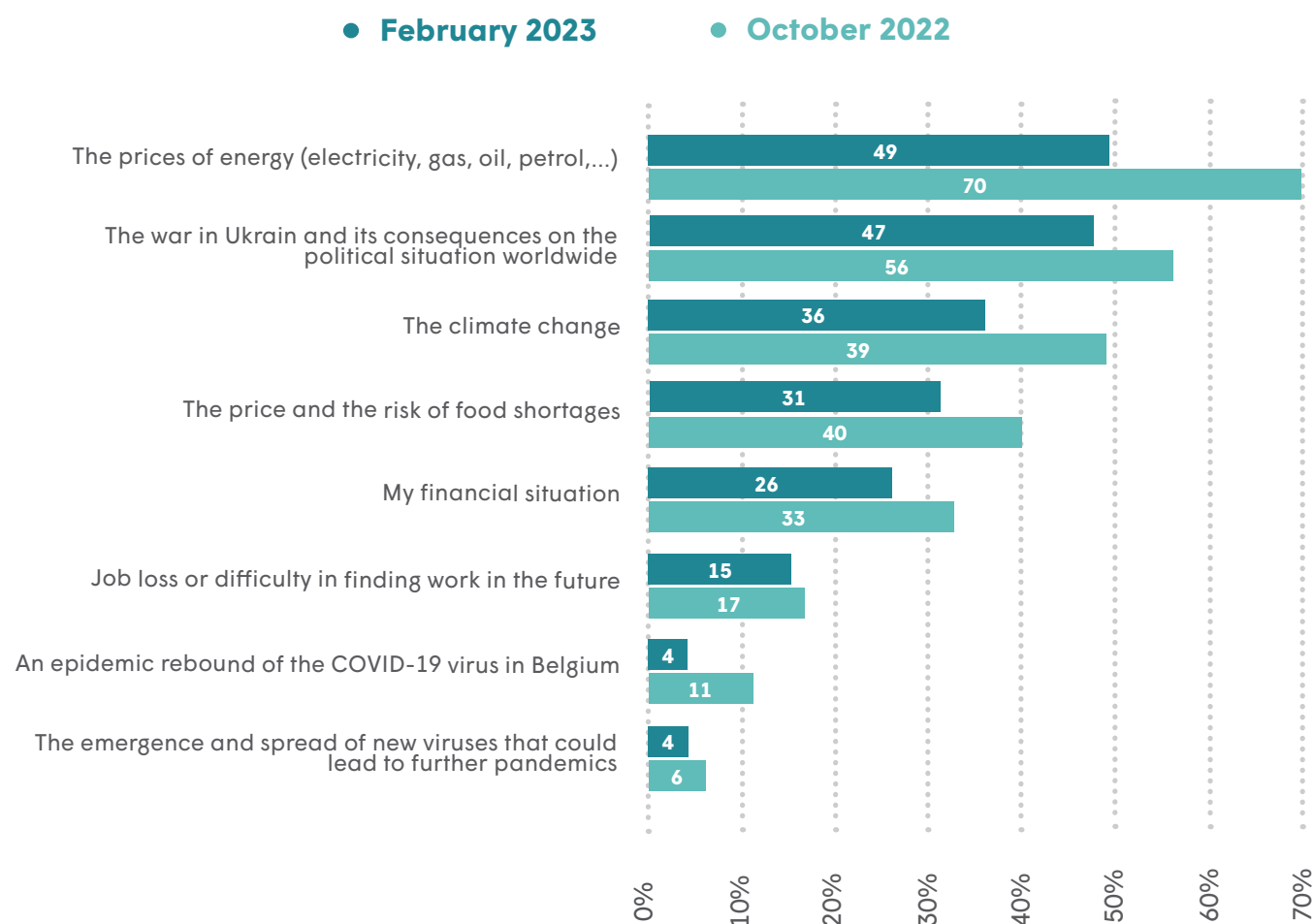
“People of middle age (30-64 years) were more worried about the Ukrain war.”

“People with at most a secondary school diploma were particularly highly worried about an epidemic rebound of COVID-19 or spread of new viruses.”

“Significantly more young people, women and people in a paid job were worried about gender inequalities.”

“Significantly more young people, women and people living alone with children were worried about their financial situation.”

### Proportion (%) of highly worried people (18 years and older) according to the different topics and time period, BELHEALTH study 2022-2023, Belgium



Except job loss or difficulty in finding work in the future, fewer people report these issues as being of great concern in February 2023 compared with October 2022.

# Social contacts

Participants were asked to judge their social contacts in the past 2 weeks, where following answers could be given: 1= Very unsatisfying, 2= Rather unsatisfying, 3=Rather satisfying and 4= Very satisfying.

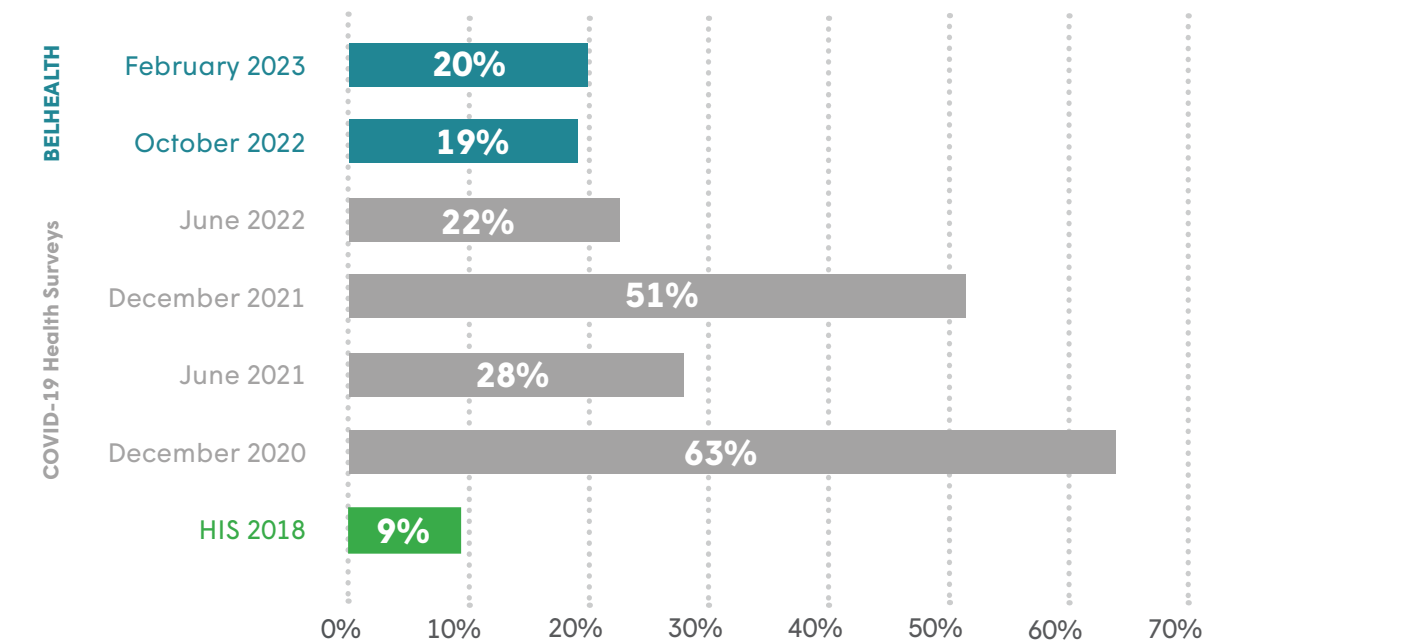


In **February 2023**, 20% of adults were rather to very unsatisfied with their social contacts.

Not all equal

People who were most often unsatisfied regarding social contacts were men (21%), people living alone with child(ren) (31%), people with at most a secondary school diploma (22%) and people living in Wallonia (22%).

**Evolution of the % of people unsatisfied with their social contacts (18 years and older), HIS 2018, COVID-19 Health Surveys 2020-2022, BELHEALTH study 2022-2023, Belgium**



The percentage of people unsatisfied with their social contacts in February 2023 is not significantly different from October 2022 (19%) after controlling for age and sex. However, this percentage remains significantly higher than the pre-pandemic levels reported in 2018 (9%).

There is an association between satisfaction with social contacts and mental health. Individuals who are not satisfied with their social contacts in February 2023 are more likely to experience anxiety and/or depression compared to individuals who are satisfied with their social contacts.

# Social support

Participants were asked to perceive the level of support they receive from those around them using the OSLO-3 scale. Three categories were generated based on the total scores (range 0-11): "poor support" 0-5, "moderate support" 6-8 and "strong support" 9-11.

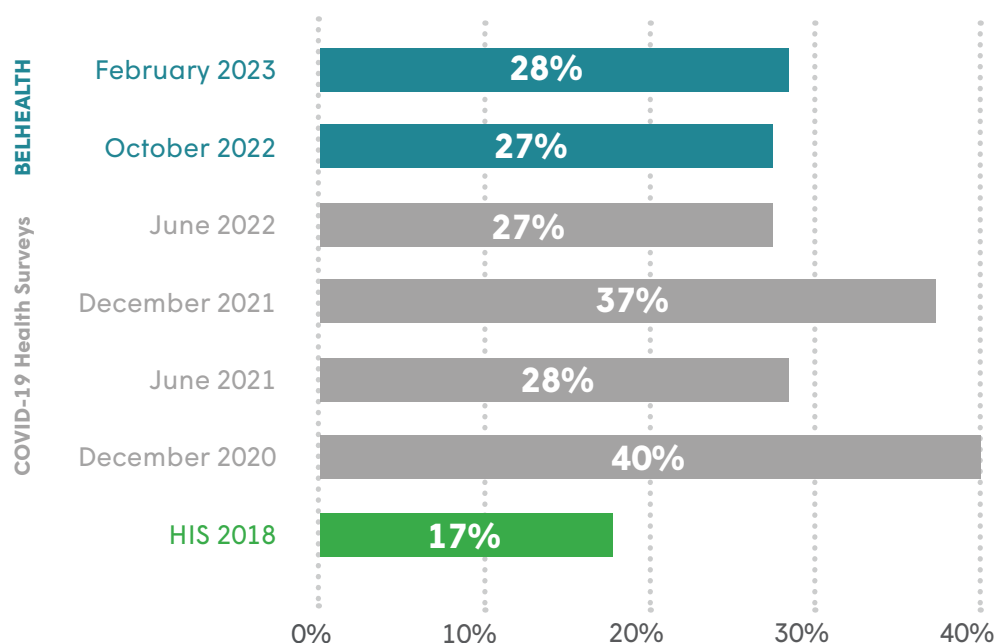


According to the **February 2023** survey, 28% of people feel unsupported by those around them.

Not all equal

People who reported more having poor social support were people aged 50-64 (32,5%) and people living alone with child(ren) (46%).

**Evolution of the % of people (18 years and older) reporting poor social support, HIS 2018, COVID-19 Health Surveys 2020-2022, BELHEALTH study 2022-2023, Belgium**



The rate of people with poor perceived support in February 2023 is not significantly different from October 2022 (27%) after controlling for age and sex. However, this percentage is significantly higher than the corresponding figure reported in 2018 (17%).

There is an association between social support and mental health. Individuals who felt poorly supported in February 2023 were more likely to experience anxiety (OR=4.7, 95%CI= 3.7-6) and/or depression (OR=5.9, 95%CI= 4.6-7.6) compared to individuals who felt moderately to strongly supported.

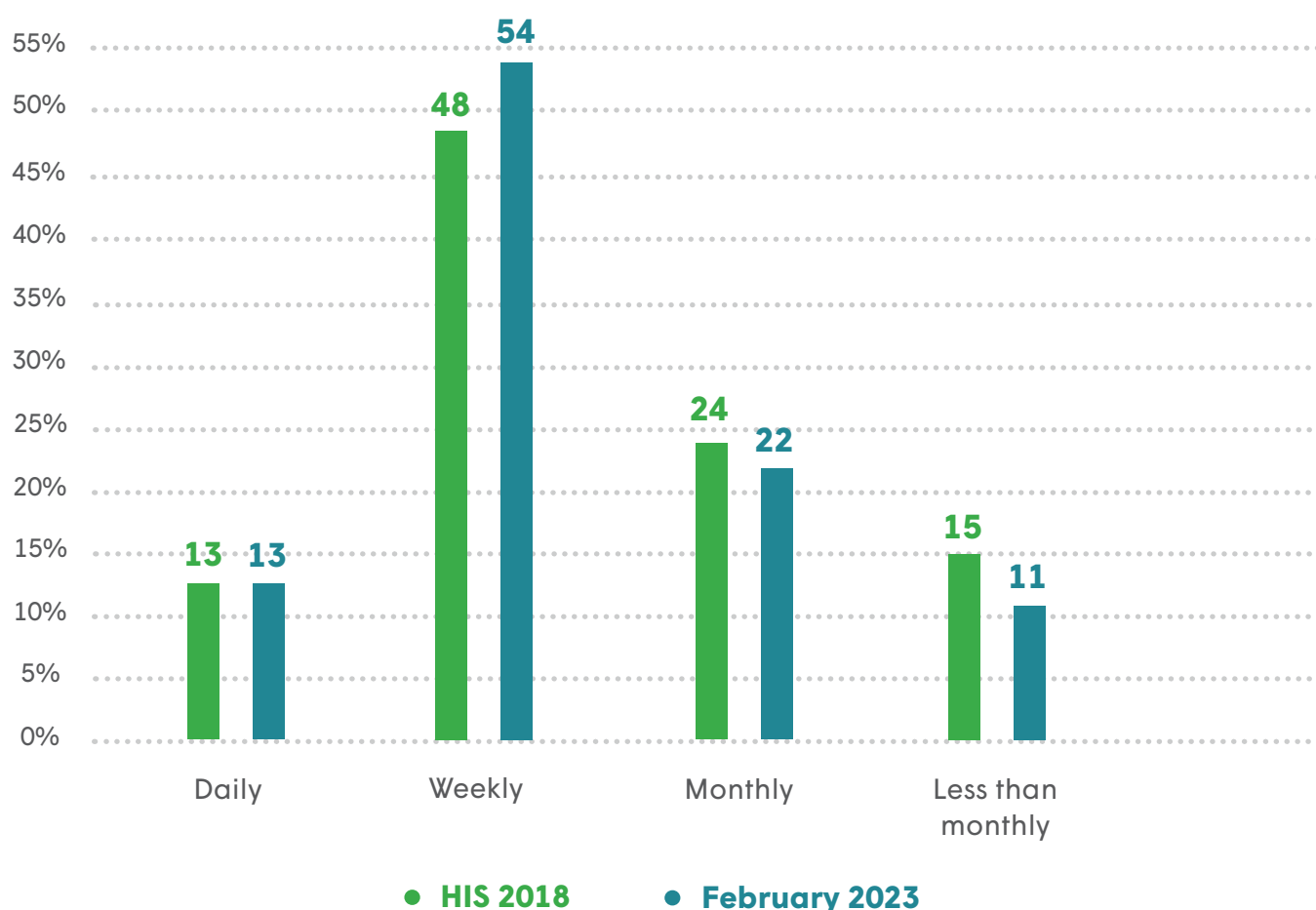
# Use of alcohol

Participants were asked how often and how much they drank alcohol in the past 12 months. They were also asked how often they had 6 or more drinks containing alcohol on a single occasion. Finally, they were asked about their perceived change in alcohol use compared with six months ago (September 2022).

## Current alcohol use

In February 2023, 84% of the people aged 18 and over had consumed alcohol in the 12 months prior to the questionnaire, 16% were non-users (10% of the people had never used alcohol, while ex-drinkers made up 6%).

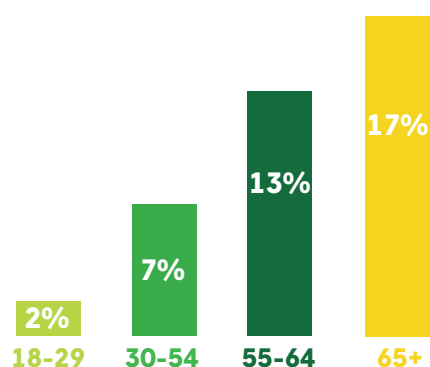
**Distribution (%) of people (18 years and older) who used alcohol in the last 12 months according to their level of alcohol use, HIS 2018, 2<sup>nd</sup> BELHEALTH survey (February 2023), Belgium**



Compared to the use of alcohol in 2018, there are more adults drinking alcohol weekly (54% vs 48%) and fewer adults drinking alcohol monthly (22% vs 24%) or less than monthly (11% vs 15%).

## Daily alcohol use

**Distribution (%) of people (18 years and older) who used alcohol in the last 12 months on a daily basis, 2<sup>nd</sup> BELHEALTH survey (February 2023), Belgium**



In **February 2023**, 11% of the people aged 18 and over were consuming alcohol on a daily basis. Especially men (14% vs 7% women) and people aged 65 and over (17%) were at higher risk to drink alcohol every day.

## Average number of glasses per week

In **February 2023**, the average number of glasses of alcohol consumed per week was 11. Although people aged 65+ drank significantly more on a daily basis, the weekly amount of drinks did not differ between the different age groups.

According to the recommended limit of no more than 10 glasses of alcohol per week, 18% of the population was found to be at higher risk, or use above this limit. Especially men (27%), 65+ people (20%), people with a paid job (19%) and people living alone (20%) showed a higher risk of drinking 10 glasses or more alcohol per week.

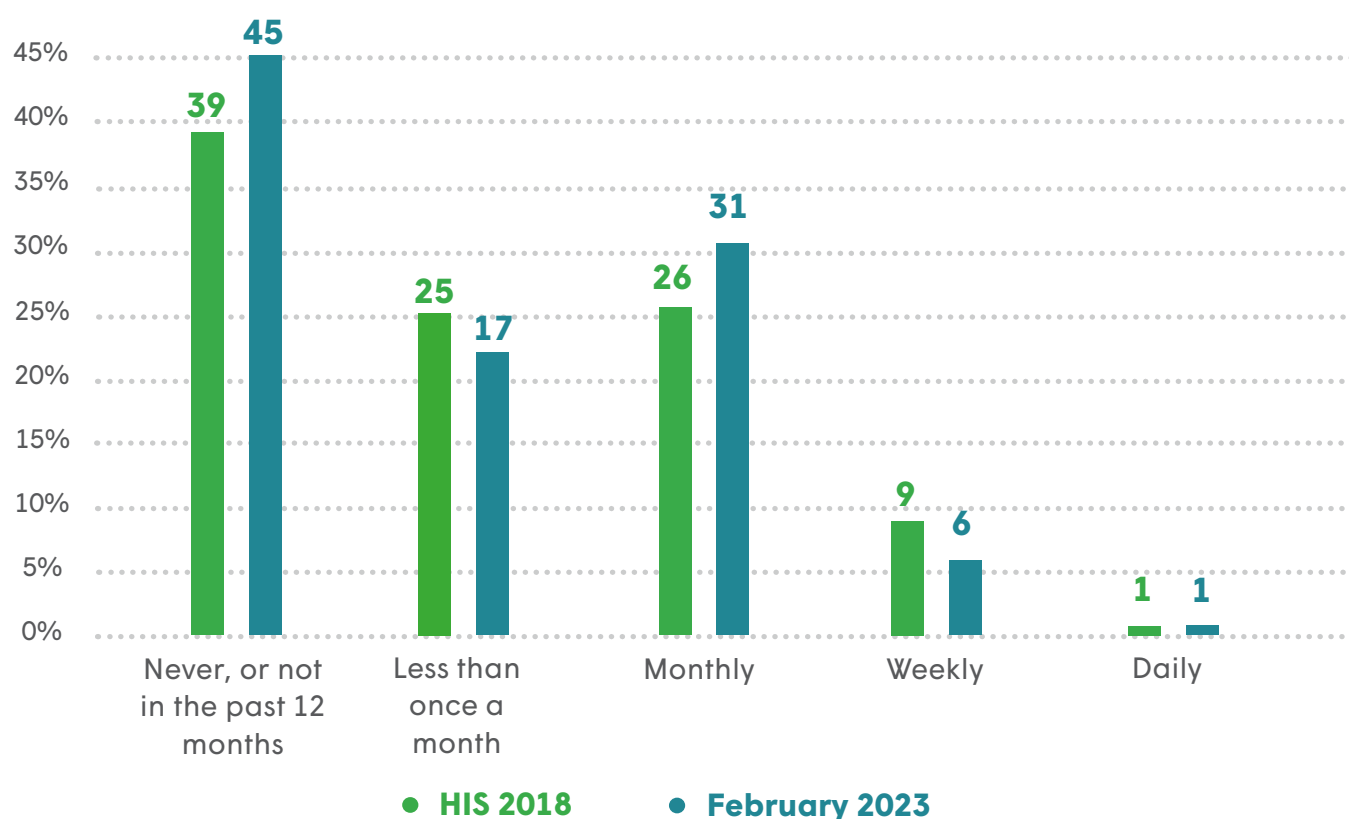
## Risky single occasion drinking (RSOD)

Risky single occasion drinking (RSOD) refers to having 6 standard glasses or more of an alcoholic beverage on one occasion, e.g. at a party, out with friends or alone at home. It is known to be associated with a number of health, social and economic factors, as evidenced in many studies.

Most people (45%) did not practice RSOD in the past 12 months (or ever) and 17% reported RSOD less than monthly. In contrast, 31% of the population drank 6 or more alcoholic drinks on the same occasion monthly, 6% did so weekly and 1% daily. For 7% of the population (aged 18 and over), drinking 6 or more glasses on the same occasion occurred at least once a week. Men (12%), 18-29 years (10%) and people living alone (9%) showed a higher risk of drinking at least weekly 6 or more glasses on the same occasion.



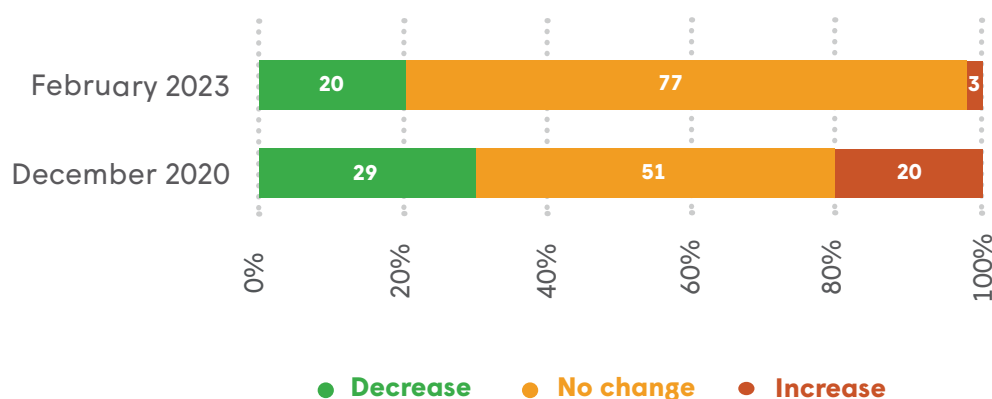
**Distribution (%) of people (18 years and older) according to their risky single occasion drinking, HIS 2018, 2<sup>nd</sup> BELHEALTH Survey (February 2023), Belgium**



**Perceived change in alcohol consumption**

Participants were asked about their perceived change in the use of alcohol. The questions referred to “the last 6 months” i.e. since September 2022. Three levels of change were distinguished, “Decrease” (I have decreased my consumption or I stopped using it/them since then), “No change” (My consumption remained the same as before or did not use it/them before, nor now) and “Increase” (I have increased my consumption). This question was also asked in the 5<sup>th</sup> COVID-19 Health Survey in December 2020, where the comparison period was “last year”, before the coronacrisis.

**Distribution (%) of people (18 years and older) according to their perceived change in alcohol consumption, 5<sup>th</sup> COVID-19 Health Survey (December 2020), 2<sup>nd</sup> BELHEALTH survey (February 2023), Belgium**

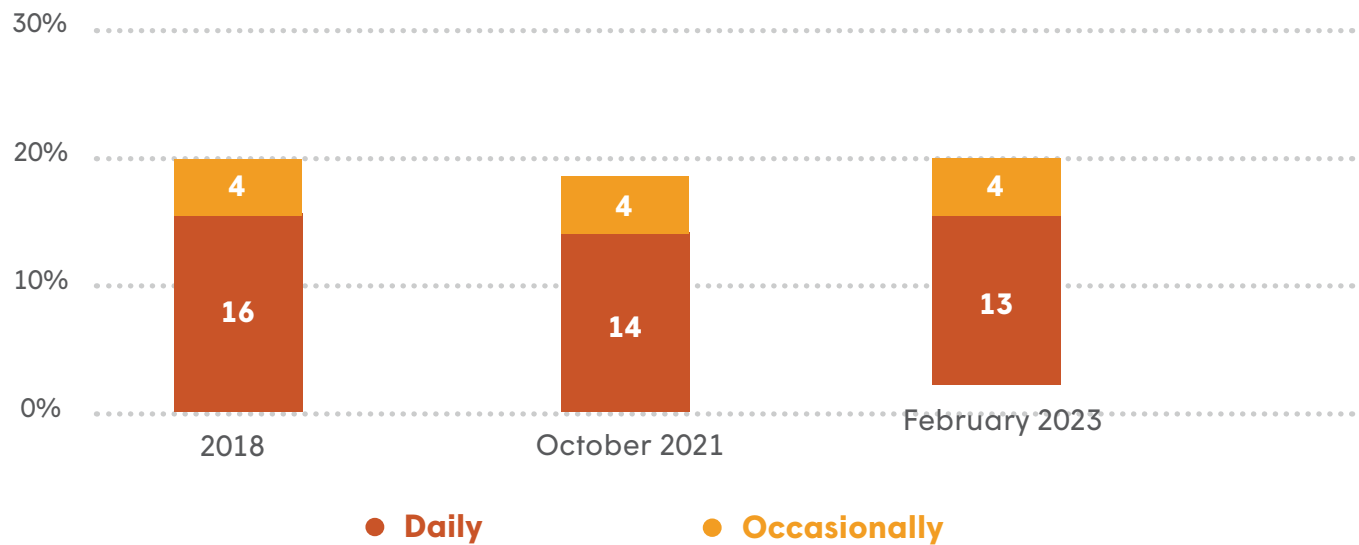


Compared with December 2020 (during COVID-19 times) significantly more people reported no change (77% vs 51%) and significantly less people reported an increase (3% vs 20%) in their use of alcohol.

# Tobacco use

In the second survey of the BELHEALTH (February 2023), with regard to tobacco use, people were asked whether they currently smoke (“Yes, every day” – “Yes, occasionally” – “No, not at all”) and whether their use of tobacco has changed in the past 6 months, since August 2022.. These questions were also asked in the 5th COVID-19 Health Survey (December 2020), the 8<sup>th</sup> COVID-19 Health Survey (October 2021) and in the HIS 2018, which allows for comparison over time.

**Percentage (%) of people (18 years and older) smoking daily or occasionally, HIS 2018, 8th COVID-19 Health Survey (October 2021), BELHEALTH Survey (February 2023)**



Compared to the use of tobacco in 2018, a decrease can be noticed in the daily tobacco users (13% vs 16%).

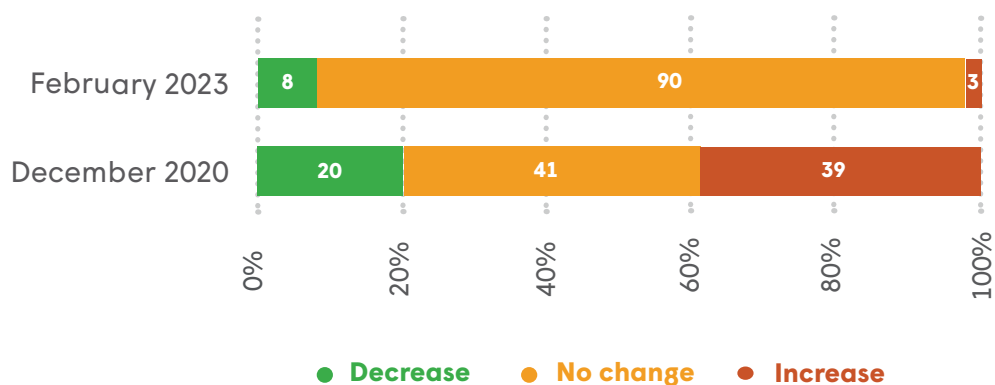
## Daily tobacco use

In **February 2023**, 13% of the people aged 18 and over in Belgium were smoking on a daily basis. People between 30-49 years (15%) and 50-64 years (16%), people living in Wallonia (14%), people with at most secondary school diploma (16%), people without a paid job (28%), people who were disabled to work (27%), people living alone without (20%) and with (21%) children were at higher risk of smoking on a daily basis.

## Perceived change in tobacco use

Participants were asked about their perceived change in the use of tobacco. It contained the same question as the perceived change in alcohol use, with three levels of change: decrease, no change and increase.

**Distribution (%) of people (18 years and older) according to their perceived change in tobacco use, 5<sup>th</sup> COVID-19 Health Survey (December 2020), 2<sup>nd</sup> BELHEALTH survey (February 2023), Belgium**



Compared to December 2020 (during COVID-19 times) significantly more people reported no change (90% vs 41%) and significantly less people reported an increase (3% vs 39%) in their use of tobacco in the past 6 months.

# Conclusion

Based on the findings of the second BELHEALTH survey in February 2023, we can conclude that mental health remains a significant concern among the adult population in Belgium. The prevalence of anxiety and depression remains high, with 18% and 15% of the population reporting these issues, respectively. The survey found that although nearly a quarter of adults reported needing mental health care, only 58% of those individuals received professional help. The survey also revealed that a significant proportion of the population feels unsupported by those around them, with 28% reporting this issue, and 20% expressing dissatisfaction with their social contacts. Despite the decrease in specific concerns compared to October 2022, still a certain amount of the Belgian adult population were worried about the future of the younger generation, the price of energy and the war in Ukraine. Furthermore, risky behaviour such as exceeding the recommended alcohol limit also remains a concern. The results show additionally that there is still stigma attached to mental health problems.

**Questions? mail [belhealth@sciensano.be](mailto:belhealth@sciensano.be) or visit our [website](#) Belgian Health and Well-being Cohort**

**The next survey will take place in June 2023. An invitation will be sent by mail to all participants in the cohort.**



**BELHEALTH**  
BELGIAN HEALTH AND WELLBEING COHORT

**By**

 **sciensano**