

# BELGIAN HEALTH AND WELL-BEING COHORT (BELHEALTH)

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**BELHEALTH**  
BELGIAN HEALTH AND WELLBEING COHORT

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## Introduction

The fourth **Belgian health and well-being cohort** (BELHEALTH) survey was successfully completed by 7,127 members of the cohort between 21 November and 15 December 2023. We would like to thank them all.

This bulletin begins with a description of the sample and includes a link to the post-stratification methodology used in our analyses. The first theme that is discussed in the results of the survey is mental health and the use of mental health care. Attention then turns to the use of psychotropic drugs, specifically sedatives and antidepressants, along with their patterns of use and associated risks of dependency. The report also examines sleep problems, a topic previously addressed in BELHEALTH surveys but explored in greater depth in this 4<sup>th</sup> wave. Finally, it looks at current concerns, whether related to world events or personal problems, and their impact on well-being. The bulletin concludes with participant feedback on the survey itself.



**Sample size**  
N = 7,127



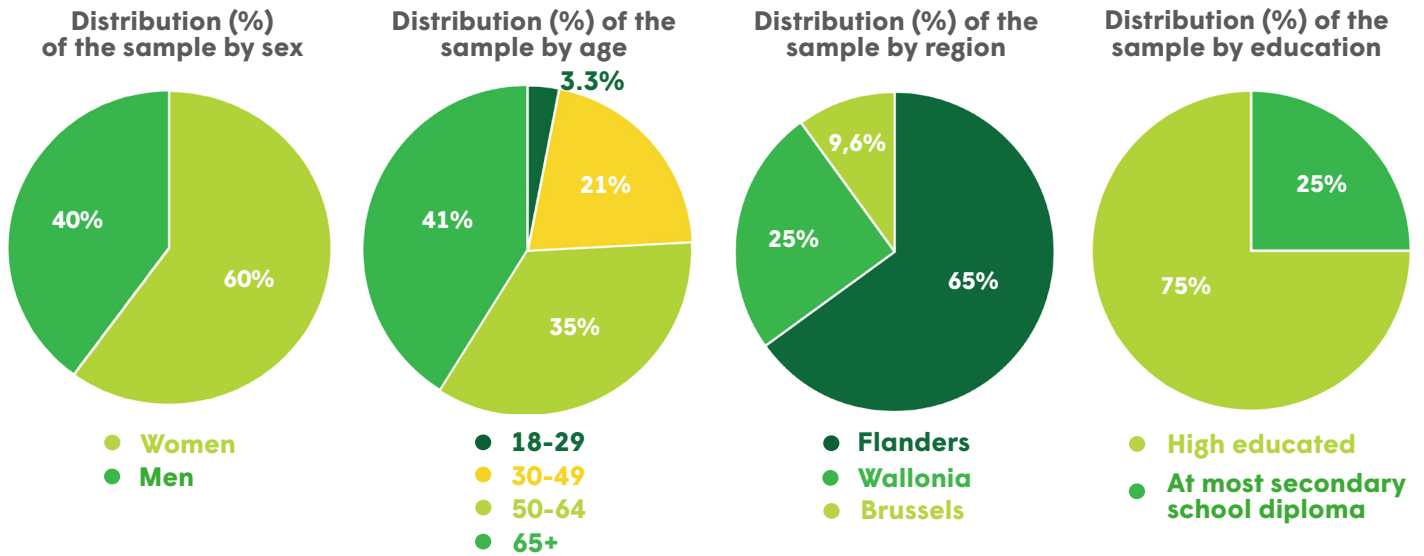
**Data collection method**  
Online survey



**Period**  
21 November - 15 December 2023

# Profile of participants

The sample includes in total 7,127 participants.



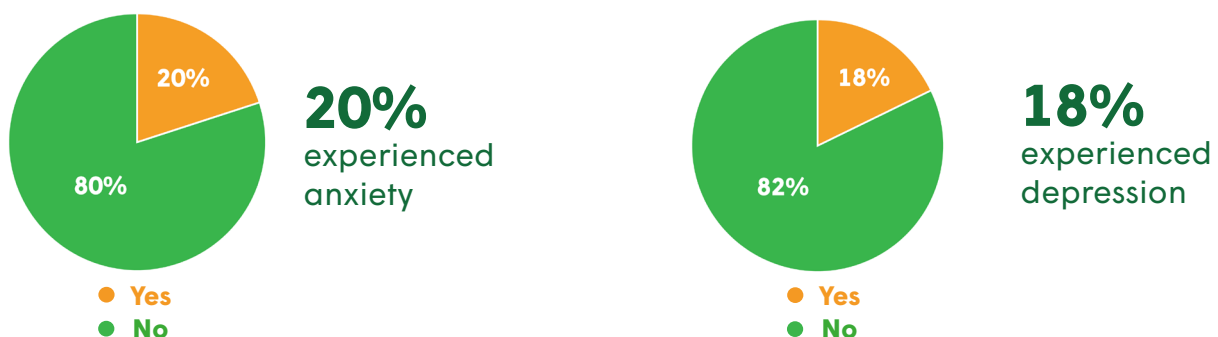
Because some groups are under-represented in our sample (for ex. young people), correction factors are applied in the analyses to match the distribution in the Belgian population. More methodological information can be found in [this document](#).

## Mental health

The **BELHEALTH survey** aims to evaluate several dimensions of mental health and monitor them over time.

### Anxiety and depression

Participants were asked to what extent they experienced symptoms listed in the instruments measuring generalised anxiety<sup>1</sup> and depressive<sup>2</sup> disorders. Possible answers ranged from 0 = “No, not at all” to 4 = “Yes, almost every day”, with a reference period of the past two weeks. The total scores allow estimating the likelihood of suffering from generalised anxiety disorder and depressive disorders.



**The following groups were more likely to express a general anxiety disorder:** people living in Wallonia (24%) compared to people living in Brussels (17%) and Flanders (17.5%), people with a lower level of education (22%) compared to people with a higher level of education (15%), people aged 18-29 years (28%) compared to people aged 30-49 years (22.5%) and 65 years and older (9.3%).

<sup>1</sup> GAD-7 scale: Generalised Anxiety Disorder screens for generalized anxiety disorder.

<sup>2</sup> PHQ-9 scale: Patient Health Questionnaire aims to diagnose and measure depression severity.

**The following groups were more likely to express any depression:** people living in Wallonia (23%) compared to people living in Flanders (15%), people with a lower level of education (14%) compared to people with a higher level of education (9.4%). The age groups 18-29 years (22%) and 30-49 years (23.5%) expressed higher percentages of any depression compared to those aged 65 years and older (8.1%). Similarly, people aged 50-64 years (17.5%) showed a higher percentage compared to the older age group (8.1%), but a lower percentage compared to the people aged 30-49 years (23.5%).

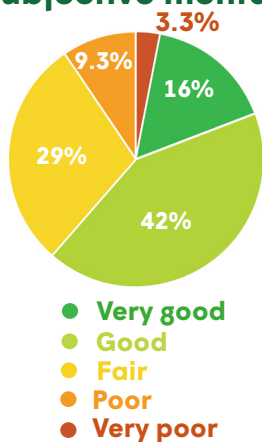
### Suicide thoughts and attempts

Suicide and suicide attempts are critical societal and public health concerns, with far-reaching impacts on individuals and their loved ones, and society as a whole. In November 2023, participants were asked whether they had seriously thought about ending their lives and whether they had attempted suicide in the 12 months prior to the survey.

A total of 10% of the people reported having had suicidal thoughts in the 12-month period before the survey, while 0.6% reported having attempted suicide in the same period. Unfortunately, these results are similar to those of February 2023 (9.9% and 0.4%, respectively).

**The following groups were more likely to report having had suicidal thoughts in the 12-month period before the survey:** people aged 18-29 years (19%) compared to people aged 50+ (3.8%-9.0%), people aged 30-64 years (9.0%-11.2%) compared to people aged 65+ (3.8%), people with a lower education (12%) compared to people with a high education (6.4%), and people living in Wallonia (14%) compared to Flanders (7.0%).

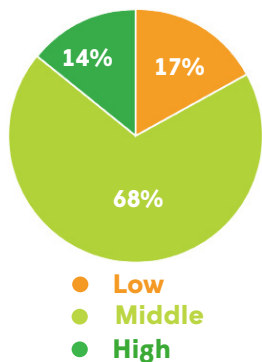
### Subjective mental health



Participants were asked to evaluate their own (subjective) mental health in general on a scale ranging from 1 = “very good” to 5 = “very poor”.

**13%** evaluated their mental health as poor or very poor.

### Life satisfaction

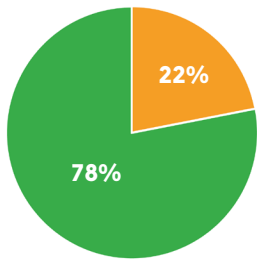


Participants scored how satisfied they were with their life on an 11-point scale, from 0 = “not at all satisfied” to 10 = “fully satisfied”. Three levels of life satisfaction were distinguished: “low” (0-5), “middle” (6-8) and “high” (9 and 10) life satisfaction.

**17%** experienced low life satisfaction

The groups of people least satisfied with their lives were the people aged 18-64 years (17%-22%) compared to people aged 65+ (9.1%), people with a lower education (20%) compared to people with a high education (13%), and people living in Wallonia (25%) compared to Flanders (13%).

## Social contacts



- (Rather) unsatisfied
- (Rather) satisfied

Participants were asked to rate their social contacts over the past 2 weeks. There were four response categories: 1= Really unsatisfying, 2= Rather unsatisfying, 3= Rather satisfying and 4= Really satisfying.

**22%**

were (rather) unsatisfied with their social contacts in last November.

## Need and use of mental health care

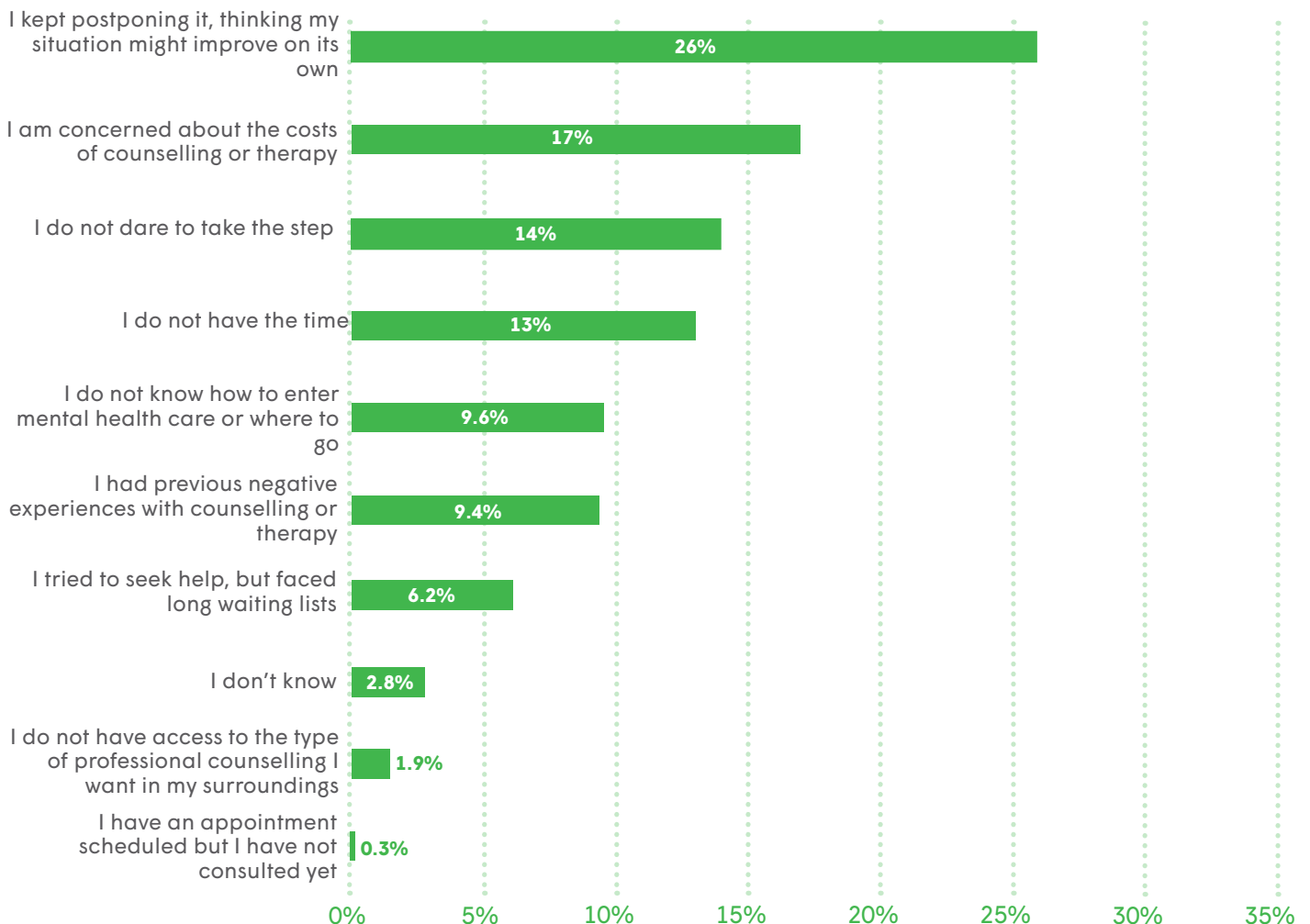
The 4<sup>th</sup> BELHEALTH survey questioned current needs, access to and use of professional support for mental health problems.

30% reported they had felt the need for mental health care in the past 6 months. Among those in need of mental health care, 38% did not seek it.

More women (34%) than men (26%) felt the need for mental health care. The need for mental health care was highest in the youngest age group (55%) and decreased to 8.6% among people aged 65+.

The percentage of people who did not seek mental health care while they felt the need for it was higher among people aged 65+ (53%) compared to people aged 18-64 (31.5%-40%).

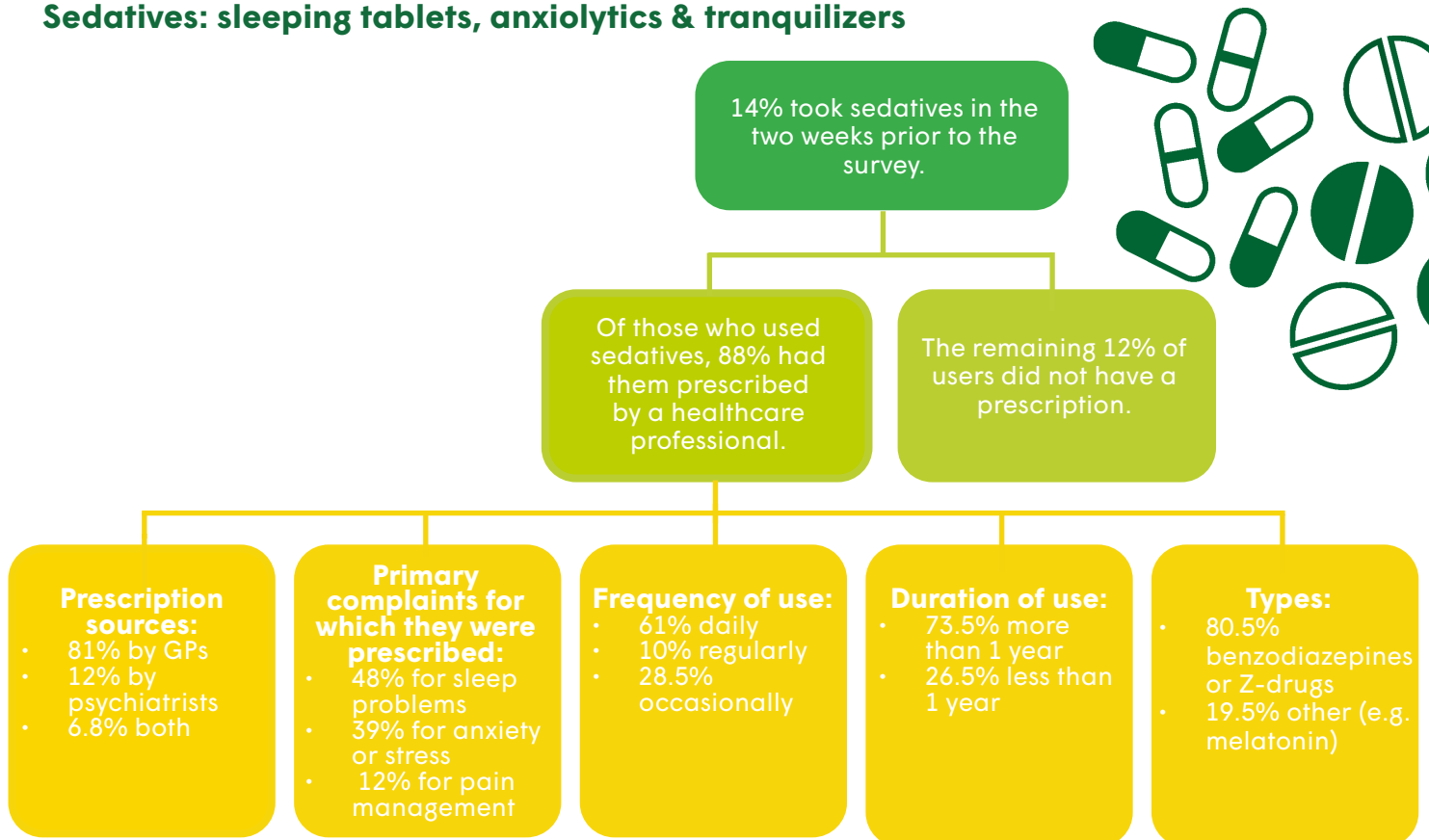
## Reasons for not seeking professional mental health care among those who declared being in need, 4<sup>th</sup> BELHEALTH survey (November 2023), Belgium



# Use of psychotropics

The term “psychotropics” refers to drugs that affect the mind, emotions, and behavior. These medications are primarily used to treat various mental health conditions, such as depression, anxiety, bipolar disorder, schizophrenia, and other psychiatric disorders. Psychotropics work by altering brain chemistry and neurotransmitter activity to alleviate symptoms associated with these conditions. Examples of psychotropic drugs include sedatives (sleeping tablets, anxiolytics, or tranquilizers) and antidepressants. In the fourth survey, we asked about the use of sedatives in the two weeks prior to the survey.

## Sedatives: sleeping tablets, anxiolytics & tranquilizers



## Who takes sedatives?

The following groups were more likely to use sedatives (sleeping tablets, anxiolytics, or tranquilizers): people living in Wallonia (20%) compared to people living in Flanders (11%), people with a lower education (16%) compared to people with a higher education (11%), people 65 years and older (19%) compared to people 18-29 years old (6.1%) and 30-49 years old (11%). Furthermore, a larger percentage of people with anxiety or depression symptoms reported to use them (both 30%) compared to people without anxiety or depression symptoms (10% and 11%, respectively).

## Benzodiazepines & Z-drugs

The majority of sedative users (80.5%) indicated to use benzodiazepines and Z-drugs. These types of drugs are considered as appropriate for punctual and short-term use, and current clinical guidelines advise gradually reducing their intake if it extends beyond four consecutive weeks. These medications have been linked to adverse effects including dependence, tolerance, falls, and motor vehicle accidents, particularly in older individuals. Consequently, deprescribing has gained attention in Belgium among adults aged 18 and above.

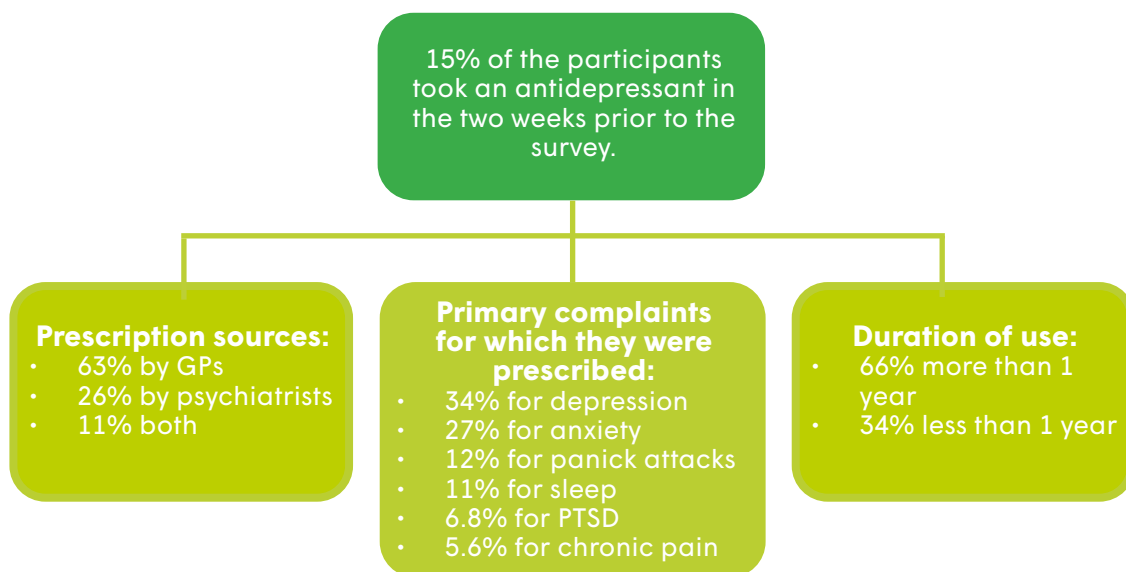
Among those who have used benzodiazepines or Z-drugs in the past fortnight:

- ➔ 58% reported to use them daily.
- ➔ 78% reported to take them for more than 1 year. Notably, among those using these medications for over a year, 66% reported to use them daily in the two weeks prior to the survey.
- ➔ 15% of daily users expressed feelings of dependence based on the Severity Dependence Scale.

## Key message

The majority (78%) of benzodiazepines & Z-drugs users reported to use them for more than a year. These findings are significant given the recommended prescription duration of four weeks for such medications.

## Antidepressants



## Who takes antidepressants?

The groups of people that were more likely to use antidepressants were people living in Wallonia (18%) compared to people living in Flanders (13%), people with a lower education (18%) compared to people with a higher education (10%), people aged 50-64 years (20%) compared to people aged 30-49 years (13%) and 65 years and older (12%). Furthermore, a larger percentage of people with anxiety or depression symptoms reported to use antidepressants (33% and 37%, respectively) compared to people without anxiety or depression symptoms (both 10%).

# Sleep

In the previous BELHEALTH survey (wave 3, in June 2023), three-fourths (74%) of the people aged 18 years and older experienced sleeping problems. Because of this high number, we explored this problem further in wave 4 (November 2023) using the Brief version of the Pittsburgh Sleep Quality Index (B-PSQI). This tool consists of six questions, from which a total score for sleep quality is calculated, ranging from 0 to 15. A score over 5 indicates poor sleep quality.

In total, 42% of the people (18 years and older) were identified as having poor sleep quality.



More women (47%) than men (37%) had poor sleep quality.



People with at most a secondary school diploma were more likely to experience poor sleep quality (44%) than people with a high education (38%).



People living in Wallonia were more likely to experience poor sleep quality (47%) than people living in Flanders (41%).

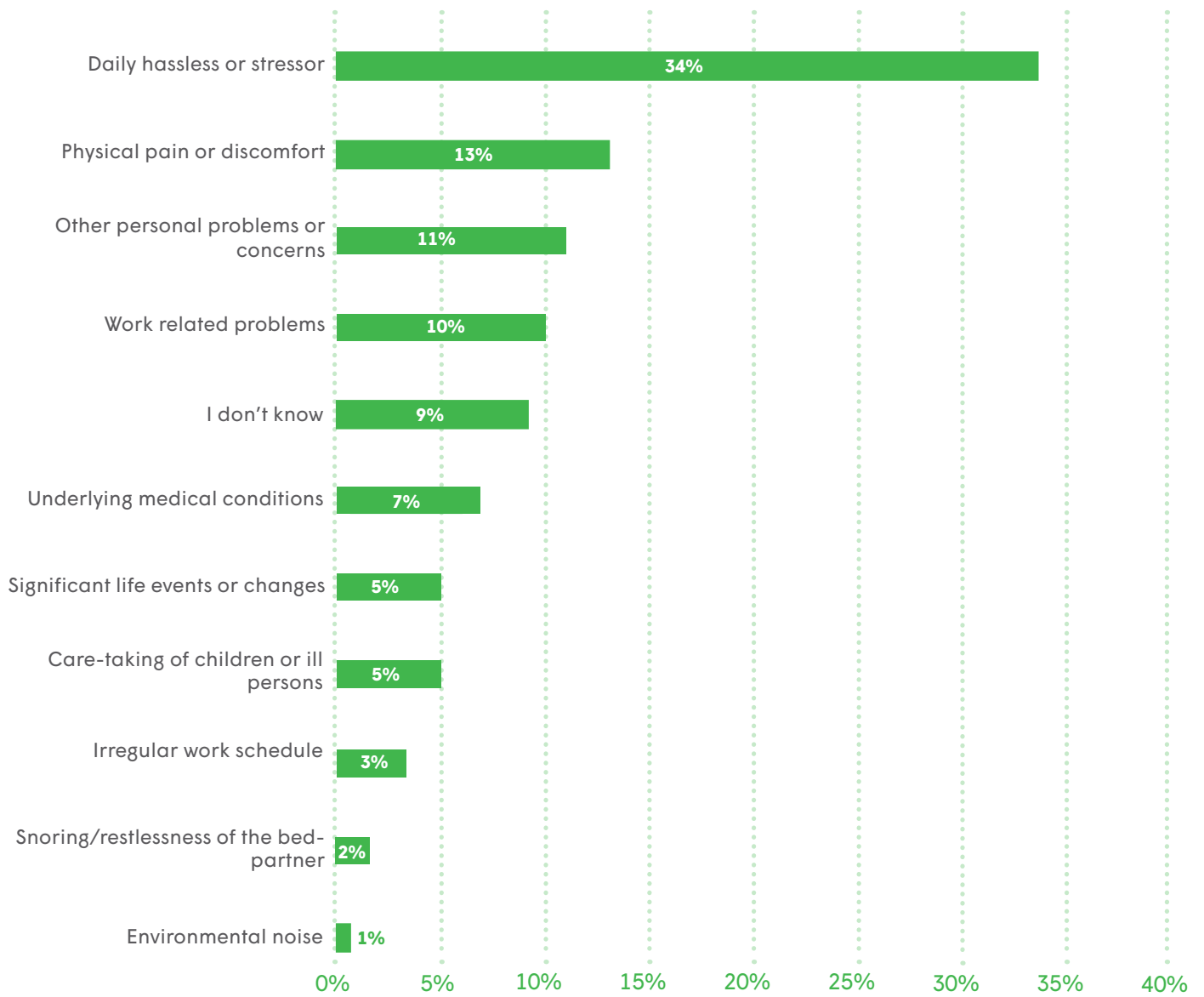
Furthermore, among people with poor sleep quality

- ➔ 33% experienced anxiety (compared to 9.5% among those with a better sleep quality).
- ➔ 29% suffered from depression (compared to 9.3% among those with a better sleep quality).
- ➔ 29% reported low life satisfaction (compared to 8.9% among those with a better sleep quality).
- ➔ 16% evaluated their health as (very) poor (compared to 4.3% among those with a better sleep quality).
- ➔ 21% used sedatives (compared to 8.6% among those with a better sleep quality).

The top three main causes of sleep problems were daily hassles or stressors (34%), physical pain or discomfort (13%), and other personal problems or concerns (11%). This top three was the same for women and men.



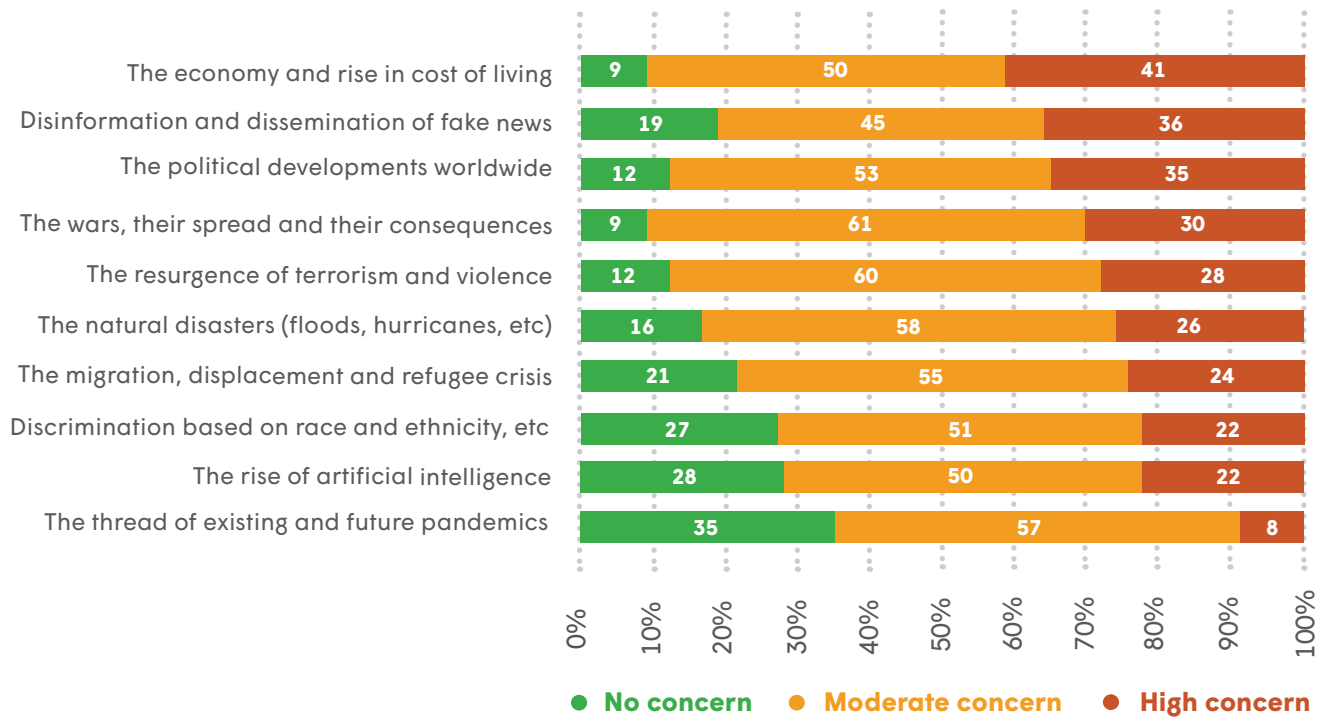
## Distribution (%) of the main causes of sleep problems, 4<sup>th</sup> BELHEALTH survey (November 2023), Belgium



# Specific concerns

Participants were able to express their degree of concern (from “not at all” to “extremely”) about certain topics at the time of the survey. They were also asked about the impact of these concerns on their well-being in the four weeks prior to the survey. The most frequently reported concerns in November 2023 were the economy and rise in the cost of living, disinformation and dissemination of fake news, the global political developments, and the wars and their consequences.

**Percentage (%) of people according to their level of concern about the different topics listed, 4<sup>th</sup> BELHEALTH survey (November 2023), Belgium**



“Women were more worried about the wars, natural disasters, resurgence of terrorism and violence, economy, the rise of artificial intelligence (AI), and discrimination than men.”

“People aged 65+ were more worried about disinformation, migration and the rise of AI than people aged 18-64 years. In contrast, people aged 18-64 years were more worried about the economy and rise in cost of living.”

“People with a lower education were more worried about epidemics, the resurgence of terrorism and violence, the economy, migration, and the rise of AI than people with a high education. ”

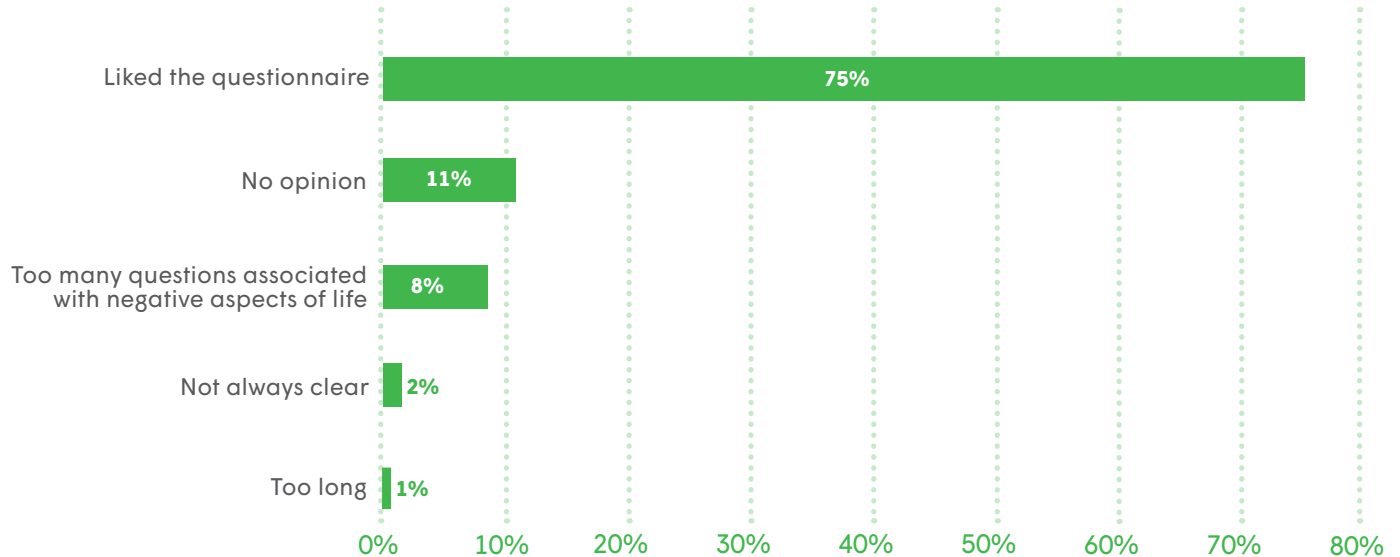
“People living in Brussels and Wallonia were more often worried about epidemics, political developments worldwide and discrimination than people living in Flanders.  
People living in Wallonia were more worried about terrorism than people living in Brussels and Flanders, and they were more worried about the economy and the rise of AI than people living in Flanders.  
People living in Brussels were more worried than people living in Flanders about disinformation. ”

Global events have also an impact on people’s wellbeing. Nearly one-third (32%) reported that they (very) often felt helpless or powerless in the face of global events. Almost one out of five (19%) reported they (very) often found it difficult to stop thinking about the consequences of global events on their future or on their loved ones. Finally, almost one out of five (18%) reported they (very) often felt that the current state of the world was negatively affecting their overall well-being.

# The floor is yours

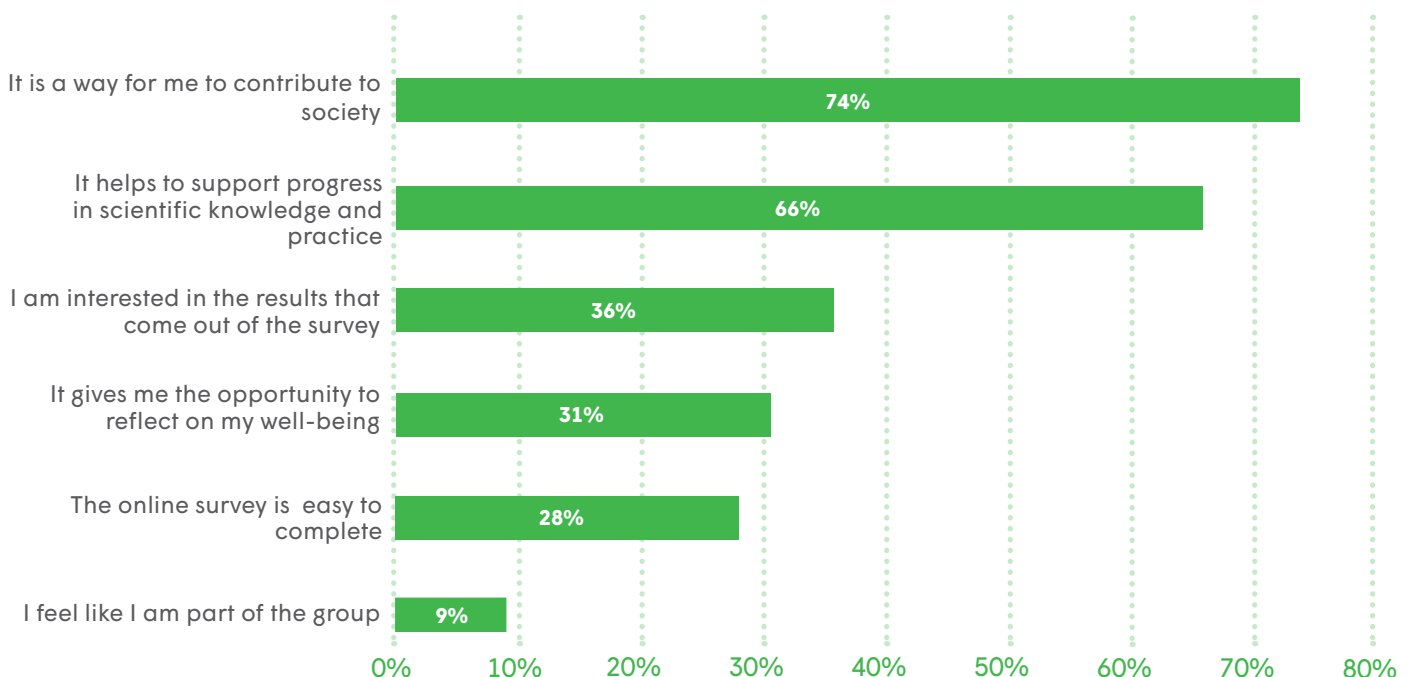
In the last survey (4<sup>th</sup> wave, November 2023), we wanted to know your opinion on the questionnaire. Among the possible answers, three out of four liked the questionnaire - thank you! Some (7.7%) felt that the questionnaire covered too many negative aspects of life. We will try to improve this point in the future.

## Experience of participants with the fourth BELHEALTH questionnaire



The success of the BELHEALTH project depends largely on your willingness to participate. And we know it takes effort. So, we wanted to know what motivates you to continue participating in the project. Multiple answers could be provided. Most of you (3 out of 4) said it is a way to contribute to society. Many of you (2 out of 3) also participate because it helps to support progress in scientific knowledge and practice.

## Motivations to participate in the BELHEALTH survey



# Conclusion

In November 2023, we still observed high levels of anxiety (20%), depression (18%) and suicide thoughts (10%). Additionally, 14% of the people reported using sedatives. Among them, we paid particular attention to benzodiazepines and Z-drugs, which were used in eight out of ten cases. The results showed that 78% of benzodiazepines and Z-drug users had been taking these medications for over a year, highlighting the need for further efforts to inform on the dangers of long-term use.

During this 4<sup>th</sup> wave, we also delved deeper into sleep quality, using a different questionnaire than in previous surveys. The findings revealed that a significant portion (42%) of the people experienced poor sleep quality. Notably, poor sleep quality was associated with higher usage of sedatives, and with poorer mental and overall health. These findings underscore the importance of addressing sleep problems.

Lastly, the survey revealed that most people's main concern was the economy and cost of living. Women, people with lower education and those living in Wallonia were more worried about this. On the other hand, people were less concerned about the threat of current and future epidemics. This was already the case in February 2023.

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



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