







AIMS

When Covid-19 forced the closure of schools in Scotland to most pupils in March 2020, there was widespread concern about the impact this might have on the mental health and wellbeing of young people and, in particular, on those preparing for national level exams such as Nationals, Highers and Advanced Highers. This project therefore set out to investigate:

- (i) how isolation, school closure and exam cancellation caused by Covid-19 affected the mental health of the generality of young people in Scotland
- (ii) whether there were additional impacts on the mental health of groups of young people typically identified as vulnerable
- (iii) what young people, as pupils, think would help address their concerns about mental health in the context of the pandemic

KEY FINDINGS

The results of this study indicate that young people in the senior phase of secondary education perceived that their mental health and wellbeing had been negatively impacted by Covid-19, with schools providing only limited support during periods of closure. A snapshot of preliminary findings are as follows:

- A total of 9% of young people met clinical threshold levels for depression, 7% for anxiety, and 28% were categorised as having elevated avoidance and intrusive thoughts and behaviours in relation to the Covid-19 pandemic.
- Although only a minority of survey responders met clinical thresholds, between a third and two
 fifths of all young people surveyed, reported that school closure had negative impacts on their
 mental health and wellbeing. 34% of survey participants reported that feelings of anxiety became
 much or a bit worse; 44% reported that feelings of depression became much or a bit worse
- Returning to school generally had a positive impact on wellbeing, though this was coupled with anxiety about Covid-19 related risks.
- There were strong views on the need for greater mental health and wellbeing support in schools.

WHAT DID THE STUDY INVOLVE?

A total of 759 young people completed the INISS online survey. A further 45 young people participated in four online, in-depth focus groups. A Research Advisory Group, consisting of three young people (aged 18-24: two MSYPs and one member of UNICEF UK's Youth Advisory Board) and three external research experts, advised on the research. Ethical approval was obtained from Moray House School







of Education and Sport Ethics Committee, University of Edinburgh.

The survey (n=759¹)

Between August and September 2020, survey data were collected from 759 young people aged 14-20 years old (M = 16.38 years). Of total participants, 458 (60%) identified as female, 269 (35%) as male, 9 (1%) as non-binary, 6 (1%) chose to self-describe, and 17 (3%) did not specify their gender identity. Young people specified their ethnic background as White (N= 640, 84%), Asian or Asian British (N = 47, 6%), Mixed (N = 28, 4%), African (N = 17, 2%), Caribbean or Black (N = 5, 1%), or other (N = 14, 2%), and 8 (1%) young people did not specify an ethnicity.

We asked about anxiety and depression², avoidance and intrusive thoughts about Covid-19³ and general wellbeing⁴. To understand perceptions of impacts of Covid-19 school closures and exam cancellations on mental health and wellbeing, young people, after each of the measures above, were asked 1) 'Since the start of Covid-19, have these things been worse, the same, or better than before?', 2) 'Did the exam cancellations make these things worse, the same, or better than before?' and 3) 'Did your school closing to most pupils make these things worse, the same, or better than before?'

Focus groups (n=4, with 45 participants in total)

One focus group was hosted by Scottish Youth Parliament (SYP) and involved 14 MSYPs, many of whom had also canvassed local opinion beforehand. The remaining three, sought, as far as possible, a gender and ethnic balance, and representation from a wide range of schools. All focus groups were digitally recorded and transcribed with consent. Each focus group lasted 60- 90 minutes. Coding and thematic analysis adopted approaches from Braun and Clarke (2006) and Strauss and Corbin (2008). All focus group participants received a £20 Amazon e-voucher in acknowledgement of their time.

WHAT WERE THE RESULTS AND WHAT DO THEY MEAN?

This report summarises a snapshot of preliminary results from the qualitative and quantitative data.

How did isolation, school closure and exam cancellation caused by Covid-19 affect the mental health of the generality of young people in Scotland?

Findings from the survey show:

- 69 (9%) of young people were categorised in the 'clinical threshold' range and 34 (5%) were categorised in the 'borderline clinical threshold' range for self-reported depression symptoms.
- 55 (7%) of young people were categorised in the 'clinical threshold' range and 44 (6%) were categorised in the 'borderline clinical threshold' range for self-reported anxiety symptoms.

¹ Note: Only data is reported for young people who completed all the measures in full. A full analysis, with likely multiple imputation, has yet to be conducted and therefore participant numbers may rise in later reports.

² Revised Child Anxiety and Depression Scale Short Version (RCADS-25; Ebesutani et al, 2012)

³ Child Revised Impact of Events Scale short version (CRIES-8; Perrin, Meiser-Stedman & Smith, 2005)

⁴ Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS; Stewart-Brown, Tennant, Tennant, Platt, Parkinson, & Weich, 2009)

⁵ The thresholds for sub-scales were set using normative data for male and female participants, based on grade (adjusted from USA) as per the RCADS-25 scoring syntax. As noted on the CORC website, "a t-score of 65 means that the score is roughly in the top 7% of scores of un-referred young people of the same age (described as borderline clinical by the developer) and a score of 70 means that the score is roughly in the top 2% of scores of un-referred young people of the same age (described as the clinical threshold by the developer)." Normative data was not available, and therefore non-normed t-scores were used, for participants who described as non-binary, those who chose to self-describe, and for participants who preferred not to disclose their gender. As with the CRIES-8 measure, it is important to note that the RCADS-25 scale does not confirm diagnosis.







- 214 (28%) of young people were categorised as having elevated avoidance and intrusive thoughts and behaviours⁶ in relation to the Covid-19 pandemic.
- Around a third to a half of young people said that their feelings of anxiety (N = 257, 34%). depression (N = 333, 44%), general wellbeing (N = 291, 38%) and avoidance and intrusive thoughts about Covid-19 (N = 289, 38%) got much or a bit worse due to school closures.
- Around a third of young people said that their feelings of anxiety (N = 208, 27%), depression (N = 243, 32%), general wellbeing (N = 228, 30%) and avoidance and intrusive thoughts about Covid-19 (N = 234, 31%) got much or a bit worse due to the cancellation of exams.
- Around a half of young people said that their feelings of anxiety (N = 330, 44%), depression (N = 400, 53%), general wellbeing (N = 318, 42%) and avoidance and intrusive thoughts about Covid-19 (N = 289, 38%) got much or a bit worse due to since the start of Covid-19.

Findings from the focus group discussions indicate that:

- Exam cancellations came as a relief for most, but also caused stress and uncertainty
- Home learning was stressful for some, especially when learning new concepts
- Maintaining motivation for learning was difficult for many, though some enjoyed the greater opportunities for self-directed learning
- Some young people faced difficulties related to social and family situations, increased dependence on social media and tech/digital arrangements at home, though social media was seen as a support by many during lockdown
- Some schools, individual teachers and school-based counsellors gave highly valued individualised support including for pupils identified as vulnerable prior to lockdown
- Young people who had not previously received support from school but who looked for support during this lockdown found it hard to access.

Are there are additional impacts on the mental health of groups of young people typically identified as vulnerable?

The survey did not require participants to share information on any diagnoses or difficulty typically associated with increased levels of vulnerability or of poorer mental health and wellbeing. However, participants were asked 'Have you ever received any mental health support? For example, from an adult at school / CAMHS / private psychologist / counsellor / charity service.' The responses were:

- 134 (18%) of participants indicated that they had received mental health support in the past
- 71 (9%) were currently receiving mental health support

Focus group participants often drew on examples from experience within their peer or friendship groups to respond to this question, suggesting impacts were felt most severely among: (i) young people with pre-existing mental health conditions; (ii) young people who receive additional support with learning; (iii) young people living in households where there is violence and abuse; (iv) young carers; and (v) members of other minority groups, such as LGBTQI.

⁶ CRIES-8 measure: Avoidance and intrusive thoughts and behaviours were measured in relation to the Covid-19 pandemic in general. No criterion A event (DSM-V, e.g. exposure to actual or threatened death, serious injury, or sexual violence) was asked, nor identified, nor was a timeline of 1 month or more that supports a diagnosis of PTSD. It is also unknown if the avoidance or intrusive behaviours and thoughts created clinically significant distress or impairment in social, occupational, or other important areas of functioning, which is required for a diagnosis of PTSD.







What do young people, as pupils, think has helped or could help address their concerns about mental health in the context of the pandemic?

In the focus groups, young people described the mental health impacts of returning to school in both positive and negative ways:

- Returning to school generally had a positive impact on wellbeing, though this was coupled with anxiety about Covid-related risks and concern about a perceived lack of clarity on social distancing rules in school
- Most participants felt that when schools re-opened to all pupils in August 2020, there was too little support for pupils typically seen as vulnerable, but also for the generality of pupils
- Many felt that schools focused too much on 'getting back to normal', and offered too few opportunities for pupils to reflect on the impact of the pandemic
- There was strong support for increased mental health support in schools overall

WHAT IMPACT COULD THE FINDINGS HAVE?

This study was small scale and largely exploratory and it is important to avoid generalising beyond the data. Nonetheless, we hope that these initial findings will help to inform policy and practice in response to any future school closures and social restrictions; support the development of educational interventions to address the impact of Covid-19 on young people's mental health and wellbeing; and contribute to UNICEF's broader, longer term planning to support young people's recovery from the impact of the Covid-19 pandemic.

HOW WILL THE OUTCOMES BE DISSEMINATED?

The findings will be shared directly with the Scottish policy education field and with UNICEF UK. Plans are in place for direct meetings with UNICEF UK and Scottish Government's Mental Health Directorate, Education Scotland's Head of Inclusion, Equalities, Health and Wellbeing, NES NHS and SQA. A summary of findings will be made available to all key stakeholders and sent to all Scottish secondary schools and study participants for whom we have an email address. Study information and summaries of findings will be available as downloads on the University of Edinburgh INISS website.

FURTHER RESEARCH

Further funding is now being sought to: (i) Add to analysis of these results through structural equation modelling, in order to investigate relationships between Covid-19, SIMD, additional support needs, and school characteristics. This is essential for developing evidence-based policy and programmatic recommendations; (ii) Undertake a larger study to investigate the medium to longer-term impact of Covid-19 on the relationship between school attainment, transitions and mental health and wellbeing.

CONCLUSION

The results of this study indicate that many young people in the senior phase of secondary education perceive that their mental health and wellbeing have been negatively impacted by Covid-19 and in particular by school closure. These impacts indicate the need for a comprehensive national policy response which supports the mental health of all young people in schools. As one of our focus group participants said: 'I think a lot of the time, like kids especially young people kind of struggle to kind of voice their feelings. If they don't feel like they're kind of supported or cared about. So I think a lot of the time, teachers, kind of need to like start checking in on people's mental health and because people never really ask how your mental health is a lot of time in school.' (Young person, Focus Group 4)







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ADDITIONAL INFORMATION

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