

# Young People, Covid-19, and Mental Health: The REACH Covid-19 Study (Part 1)

## Report 1: Concerns, Worries and Positives

Charlotte Gayer-Anderson, Gemma Knowles, Alice Turner, Lynsey Dorn, Joseph Lam, Samantha Davis, Rachel Blakey, Katie Lewis, Schools Working Group, Young Persons Advisory Group, Vanessa Pinfold, Natalie Creary, Jacqui Dyer, Stephani L. Hatch, George Ploubidis, Kamaldeep Bhui, Seeromanie Harding, Craig Morgan

## **CSMH Report R003**

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### **Further information:**

Please see: <https://www.thereachstudy.com/>

For further information or to request specific analyses, please contact the research team at: [gemma.knowles@kcl.ac.uk](mailto:gemma.knowles@kcl.ac.uk) / [craig.morgan@kcl.ac.uk](mailto:craig.morgan@kcl.ac.uk).

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# Background and Procedures

## Background and Procedures



REACH (Resilience, Ethnicity, and AdolesCent Mental Health) is an ongoing cohort study of adolescent mental health in two inner-city London boroughs, Southwark and Lambeth.

Twelve state-funded secondary schools in Southwark and Lambeth were invited to participate in REACH in 2015-2016, selected to be representative of mainstream secondary schools within the two boroughs, based on: (i) the proportion of students eligible for free school meals and (ii) the proportion of students from minority ethnic groups. All students in school years 7 to 9 (n, 4,945) were invited to participate at baseline, creating three cohorts – age 11-12 (Cohort 1; school year 7), 12-13 (Cohort 2; school year 8), and 13-14 (Cohort 3; school year 9). Each cohort completed questionnaires annually for three years. The fourth year of data collection – the Time 4 (T4) Covid-19 wave – is currently underway, and aims to track the mental health of adolescents, who have previously taken part in the REACH study, throughout the Covid-19 pandemic.

REACH is co-designed and implemented in partnership with young people and teachers. For T4, in March-April 2020, we conducted several focus groups and interviews with our Young Persons Advisory Groups (YPAG) and Teacher Advisory Group (TAG) to shape our research questions, methods of recontact, and the content and wording of the questionnaire.

## **Procedures, Time 1 (2016-2017), Time 2 (2017-2018), Time 3 (2018-2019)**

Each year, eligible participants, and their parent(s)/carer(s), were informed about the purpose and procedures of the REACH study, via in-school assemblies, information packs sent out to young people and their parent(s)/carer(s), the study website, and via school websites and mailing lists. Any parent or carer who did not want their child to participate could either return a completed opt out form or contact their school or the research team directly.

On the day of data collection, students were asked to provide written assent before completing a computerised battery of validated questionnaires, in class, on study tablet computers. Trained researchers were present in the classroom to offer guidance if needed. The assessment battery took around 60 minutes to complete and consisted of a range of questionnaires to collect detailed information on mental health and risk and protective factors.

## **Procedures, Time 4 (T4) (Covid-19 Wave 1, May to August 2020)**

At Time 3 (T3), students were provided with a 'Consent to Contact' form, providing options to be contacted about participation in future waves of data collection via email, phone, home address, one or more of their personal social media accounts, and/or via contact details provided for a nominated person. As the full extent of the Covid-19 pandemic became apparent, with the start of lockdown and the closures of schools in the UK, procedures were put in place to recontact all students who had taken part in at least one pre-pandemic wave of REACH and who, by then, had provided re-contact information (n 2,692).

To maximise participation, students were informed of the purpose of this wave of data collection and invited to participate via one or more of: (i) personalised links delivered by email and/or text message and/or social media accounts; (ii) hard copies of information sheets posted to home addresses, to ensure those without access to a computer could be informed of the study; (iii) telephone calls to students who had not responded to initial emails or text messages (or to those who had only

consented to being contacted by phone); (iv) via school websites and mailing lists.

After providing online informed consent, participants completed the assessment battery, which was conducted online via Qualtrics (a commercial population survey platform) and took approximately 30 minutes to complete. Students were compensated with £15 Love2Shop e-voucher for participating in this wave of data collection.

All procedures were approved by the Psychiatry, Nursing and Midwifery Research Ethics Subcommittee (PNM-RESC), King's College London (ref:15/162320).

Focus of this  
report



## Focus of this report

Data collection is still ongoing; the analyses presented in this report were conducted on the first 1,074 students who participated between when the survey link was opened (in May 2020) and the start of the new academic year (and UK schools reopening) in September 2020.

In this report, we present findings in relation to 3 questions, within the overall sample, and by demographic group (gender, ethnic group, and household income [indicated by receipt of free school meals]):

1. What changed for young people during the Covid-19 pandemic, and what were the impact of these changes in young people's circumstances and routines?
2. What were the most frequently reported concerns and worries relating to the pandemic?
3. What were the most frequently reported positive impacts of the pandemic on the lives of young people?

For a full list of questions and measures used, please see the document **Appendix: Measures & Sample Characteristics**.

This report accompanies the journal article, currently in press:

Knowles G, Gayer-Anderson C, Turner A, Dorn, L, Lam J, Davis S, Blakey R, Lowis K, Schools Working Group; Young Persons Advisory Group; Pinfold V, Creary N, Dyer J, Hatch SL, Ploubidis G, Bhui K, Harding S, Morgan C. (In Press) Covid-19, social restrictions, and mental distress among young people: a UK longitudinal, population-based study. *Journal of Child Psychology and Psychiatry*

## Sample Characteristics (see Appendix: Measures & Sample Characteristics)

Between May and August 2020, 1,074 young people completed the T4 questionnaire. Of these, 1055 had completed questionnaires prior to the

pandemic (T1-T3) (39% of 2,692 who provided recontact information by May 2020; 22% of 4,784 who participated at any previous time point).

There were some variations in response at T4 by demographic group and prior mental health. Those who completed the T4 questionnaire (vs. those who did not) were more likely to be girls (i.e., 67.5% vs. 46.2%), more likely to be in the British white ethnic group (i.e., 21.4% vs. 13.1%), and less likely to be in the Black Caribbean ethnic group (9.5% vs. 18.2%). Among boys, but not girls, those with a probable mental health problem (i.e., measured using the Strengths and Difficulties Questionnaire with a score  $\geq 18$  being indicative of an individual having a probable mental health problem) at prior time points, particularly at T2 and T3, were more likely to participate at T4 than those without.

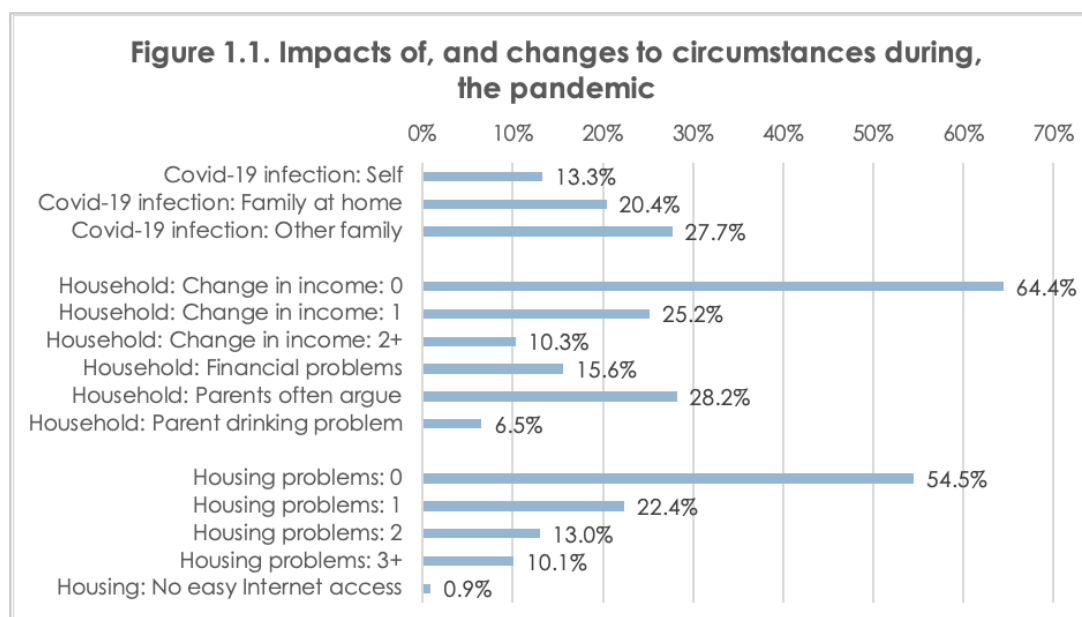
To account for non-response bias, we calculated inverse probability weights (see **Appendix: Measures & Sample Characteristics** for further details). This allowed us to broadly restore the representativeness of the sample on core demographic variables and prior mental health problems, ensuring the results are broadly generalisable to adolescents and young people in Southwark and Lambeth, south London.

# Question 1

Changes and  
impacts

## (Question 1) Changes and Impacts

**Figure 1.1.** presents the percentage of young people who reported having a Covid-19 infection themselves or among their family members, and the degree to which the pandemic resulted in changes to their household circumstances (i.e., financial, relational, or living standards)



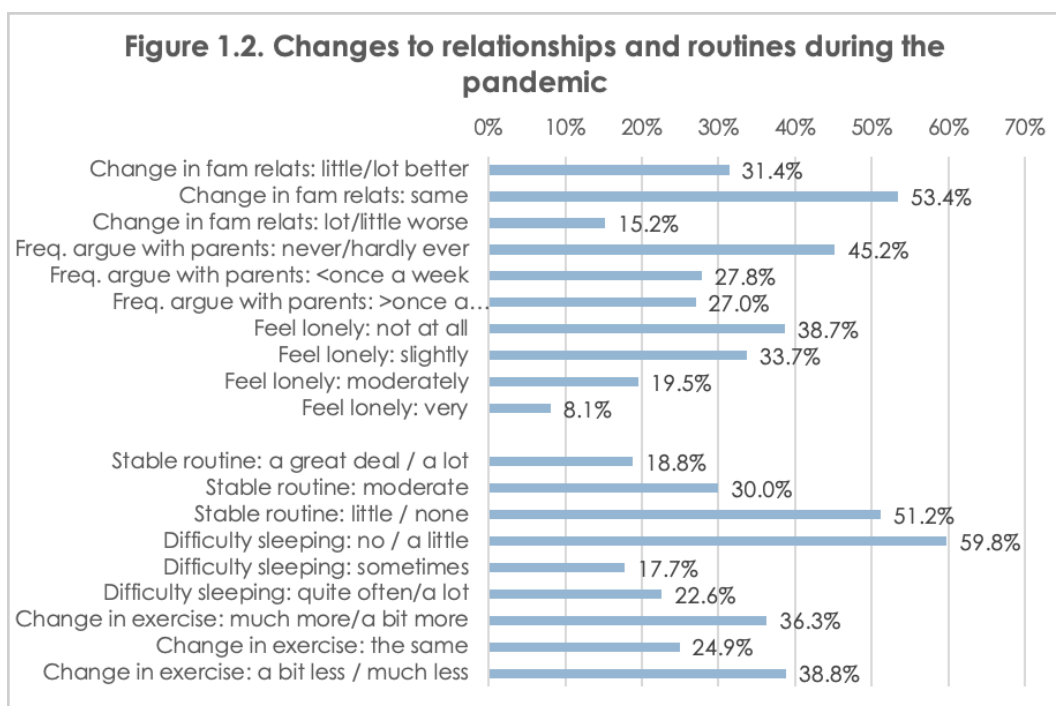
N.B. Percentages are descriptive (not weighted)

### Key findings

- 36% (n, 382) of young people reported at least one change to their family employment status or income resulting from COVID-19. Response options for this question were: job loss for one or both caregivers; adult getting paid less; difficulties in paying rent, bills or buying necessities; adult having to work longer hours; having to apply for public assistance; using a food bank; and/or losing accommodation / being evicted.
- Continuing family financial problems, i.e. not being able to pay rent or bills in the last year, was more frequently reported by young people eligible for free school meals (23%) compared with those not on free school meals (14%) (Appendix 2, Figure S2.1.), and by those in the black Caribbean group (22%) compared with young people in the British white group (10%) (Appendix 3, Figure S3.1.).

- 46% (n, 489) of young people reported at least 1 housing problem, including problems with damp, rot, shortage of space, or noise from neighbours

**Figure 1.2.** presents the percentage of young people who reported changes to their relationships with family and friends, and changes to their daily routine, during the pandemic.



N.B. Percentages are descriptive (not weighted)

## Key findings

- 31% (n, 336) of the sample felt that their family relationships had improved a little or a lot since the pandemic started; this was more frequently reported by young people in the mixed ethnic group (37%), versus 25% in the British white group (Appendix 3, Figure S3.2.).
- Conversely, 15% (n, 163) reported their family relationships had got worse. Frequent arguments with parents were more often reported by girls compared with boys (31% versus 20%; Appendix 1, Figure S1.2.), and by those in the British white group compared with black Caribbean group (36% versus 20%; Appendix 3, Figure S3.2.).

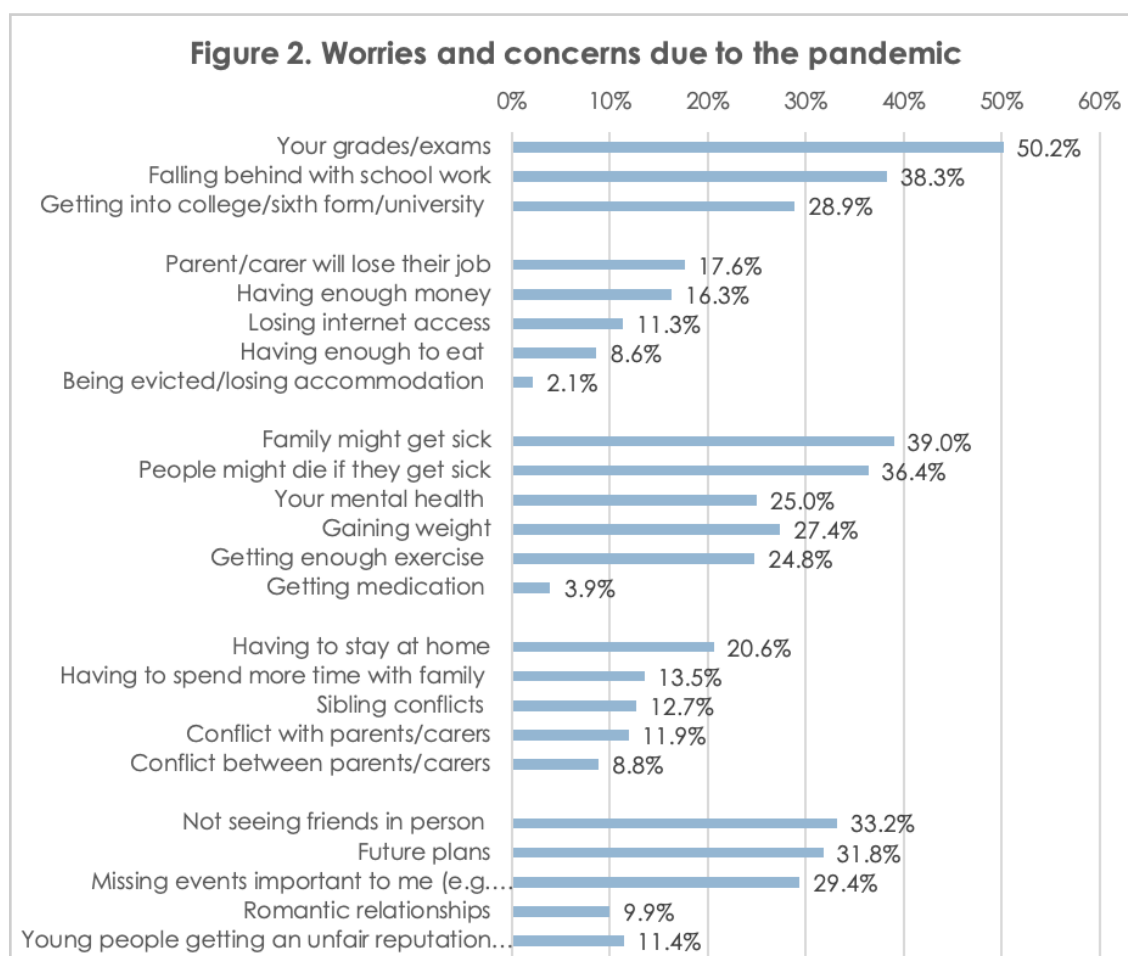
- High proportions of the sample reported little or no daily routine (51%, n, 530), difficulty sleeping in the last 4 weeks (40%, n, 430), and doing less exercise since the pandemic started (39%, n, 409). These difficulties were particularly prominent in girls compared with boys (Appendix 1, Figure S1.2.). Black Caribbean adolescents more often reported having no stable routine in the previous 4 weeks (60%) compared with British white young people (43%). British white adolescents more frequently reported exercising a little or a lot less since the pandemic (48%) compared with those in the black Caribbean group (32%) (Appendix 3, Figure S3.2.).

# Question 2

## Worries and Concerns

## (Question 2) Worries and Concerns

**Figure 2** presents the proportion of young people that responded a lot or a great deal to the question: "In the past 4 weeks, due to the COVID-19 pandemic, to what extent have you been concerned about the following: ...".



N.B. Percentages are descriptive (not weighted)

## Key findings

- The most frequently reported concerns broadly related to education (29% to 50%), Those most frequently concerned about education were girls compared with boys (Appendix 1, Figure S1.3.), and those in black African ethnic group compared with young people in the British white group (Appendix 3, Figure S3.3.).
- Health was broadly the next largest concern to young people.



Compared with boys, girls were particularly concerned about their mental health (30%, versus 14% of boys) and gaining weight (34%, versus 14% of boys) (Appendix 1, Figure S1.3.). Broadly, young people in the mixed ethnic group were more frequently concerned about their own and others' health and those from British white group, generally, the least concerned (Appendix 3, Figure S3.5.).

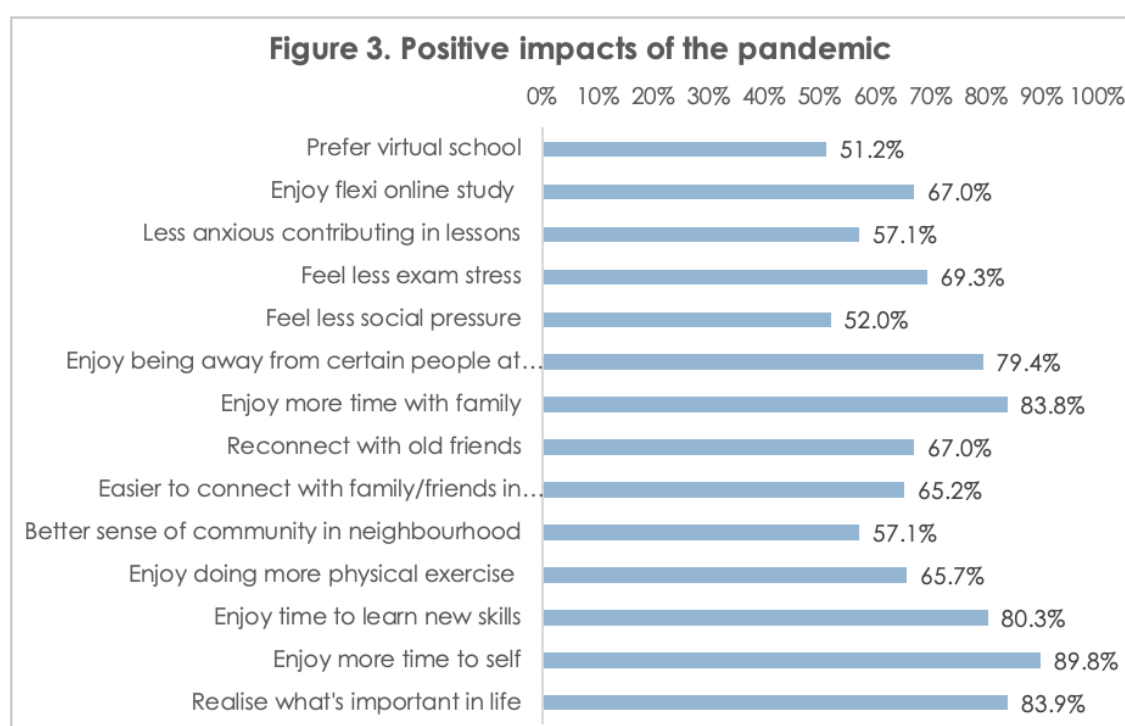
- Concerns about factors relating to family financial situations were more common among those on free school meals compared with those not on free school meals (Appendix 2, Figure S2.3.), and among those in the black Caribbean group compared with the British white and the non-British white group (Appendix 3, Figure S3.4.).
- Girls compared with boys (Appendix 1, Figure S1.3.) and young people in the mixed ethnic group, compared with all other ethnic groups (Appendix 3, Figure S3.6.), were more commonly concerned about relationships at home.

# Question 3

## Positives

## (Question 3) Positives

The figure below presents the percentage of young people who responded 'somewhat true' or 'certainly true' to the question: "Some people have found that the social distancing measures have had some positive effects on their daily life. To what extent have you found the following to be true: ...".



N.B. Percentages are descriptive (not weighted)

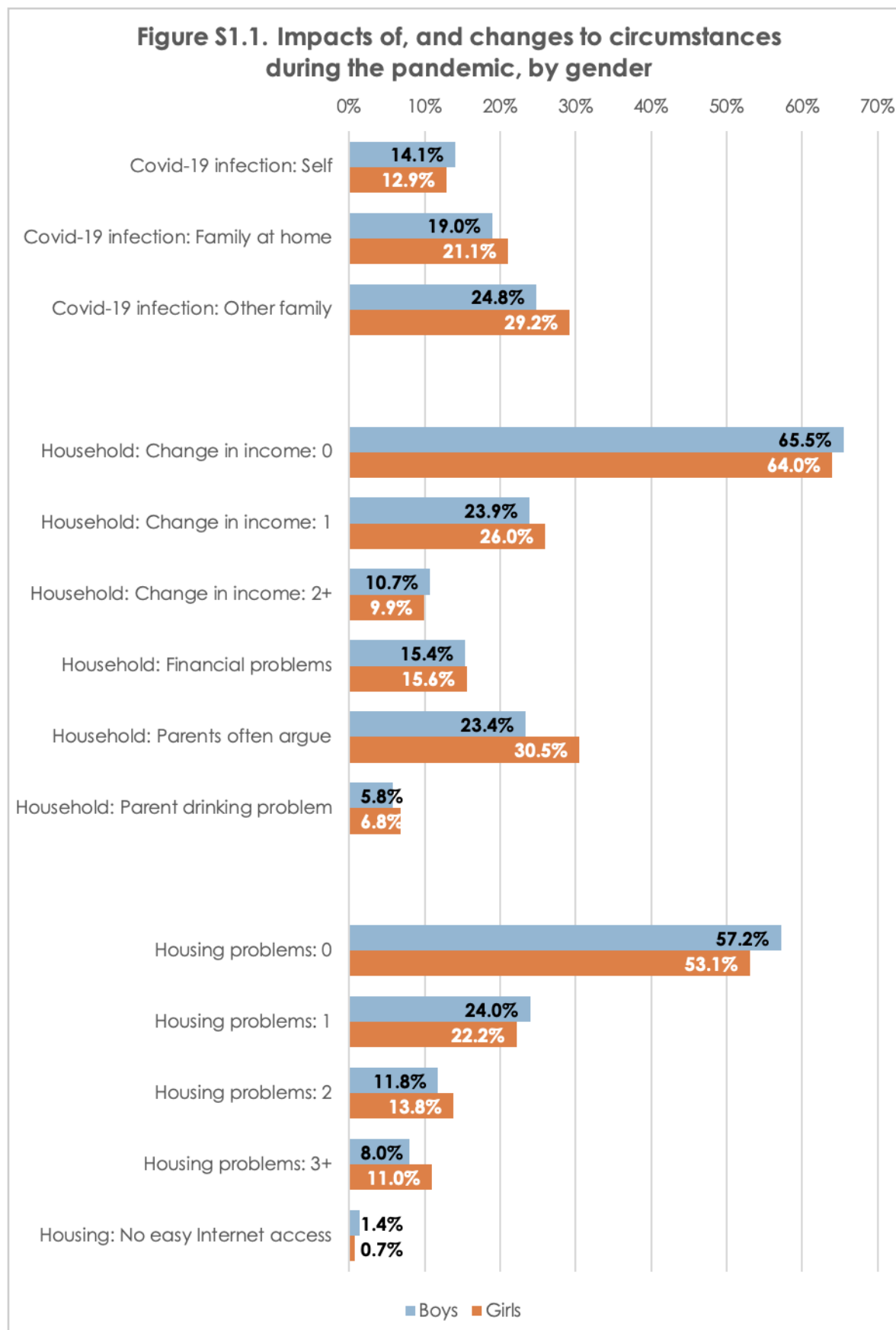
## Key findings

- Overall, a large proportion of young people (51% to 90%) reported experiencing several positive impacts of the pandemic; 88% (n, 946) reported 4 or more positive impacts of the pandemic.
- The most frequently endorsed positives were having more time to themselves (90%), having more time to spend with family (84%), and the pandemic helping them to realise what is important in life (84%).
- The least reported positives were preferring virtual school (51%) and feeling less social pressure (52%).

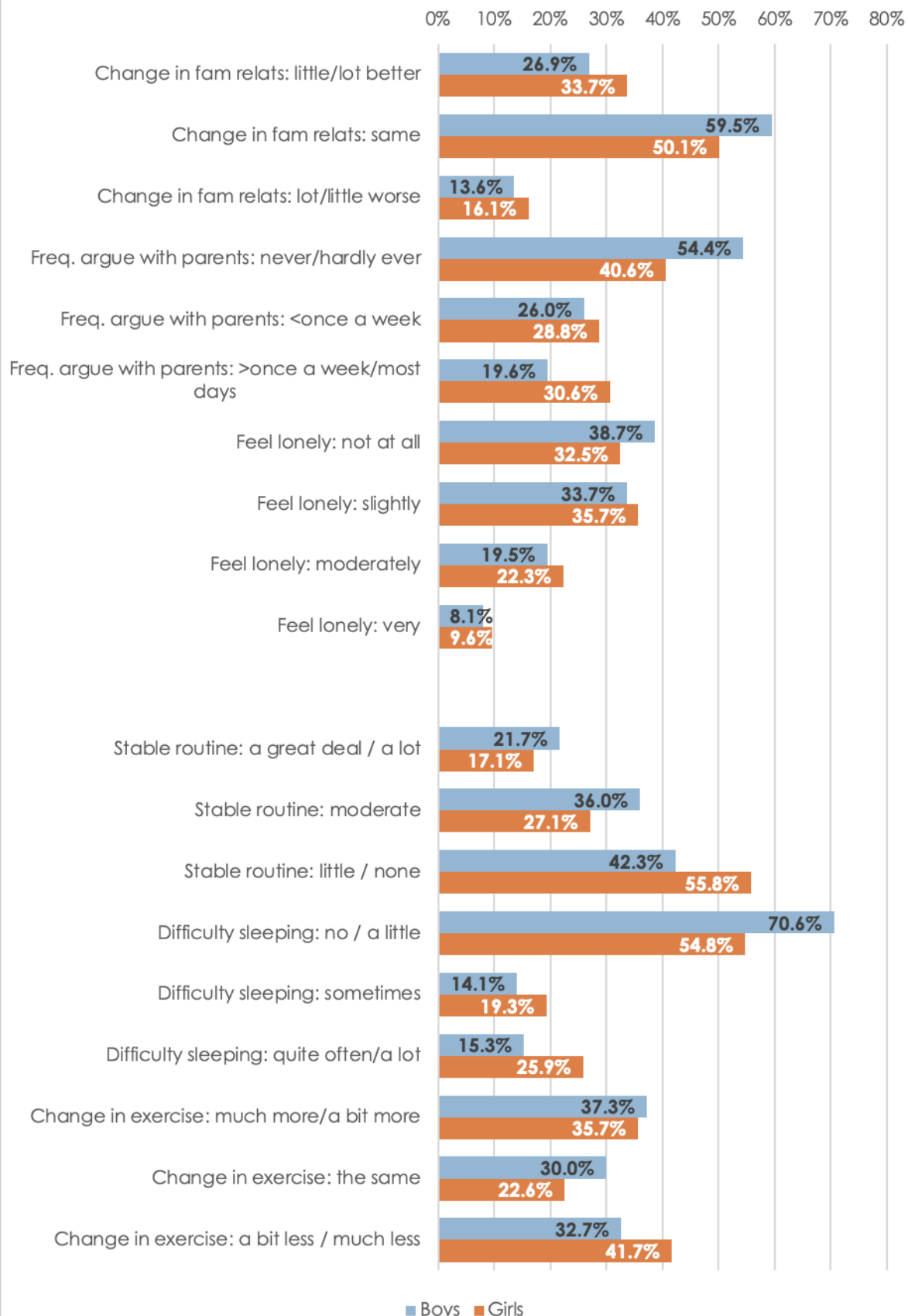
- There were few differences across demographic groups (gender, free school meal status, and ethnic group) in the endorsement of each of these items. The biggest differences were for: i) feeling less exam stress which was endorsed more frequently by girls (73%) compared with boys (62%) (Appendix 1, Figure S1.4.) and by those on free school meals (75%) compared with those not on free school meals (67%) (Appendix 2, Figure S2.4.); and ii) enjoying being away from certain people at school which was reported more often by girls (82%, versus 73% of boys) (Appendix 1, Figure S1.4.), and by young people in the black Caribbean ethnic group (90%) compared with those in all other ethnic groups (ranging between 69%-83%) (Appendix 3, Figure S3.8.).

# Appendices

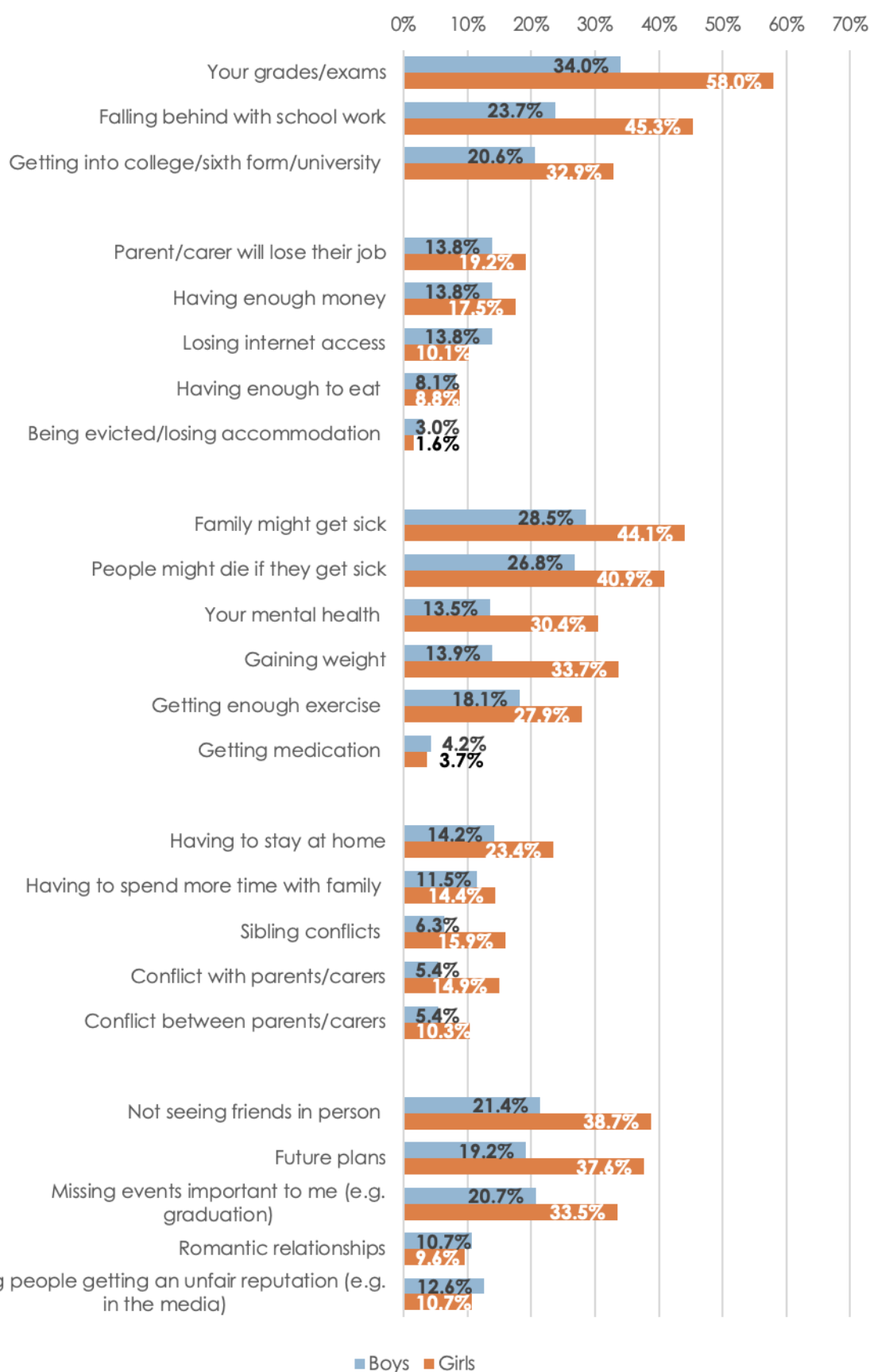
## Appendix 1: Results by Gender



**Figure S1.2. Changes to relationships and routines during the pandemic, by gender**

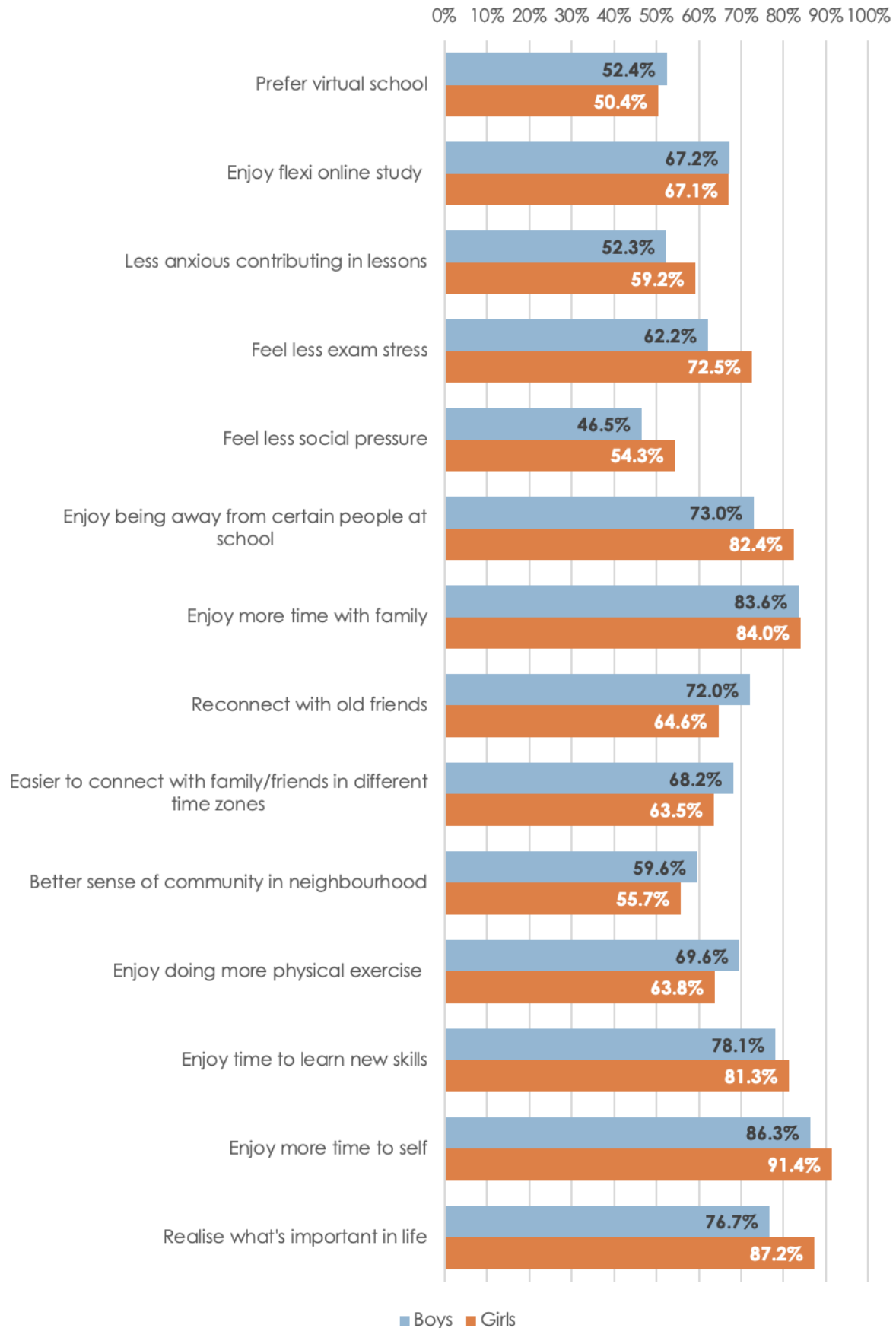


**Figure S1.3. Worries and concerns due to the pandemic, by gender**

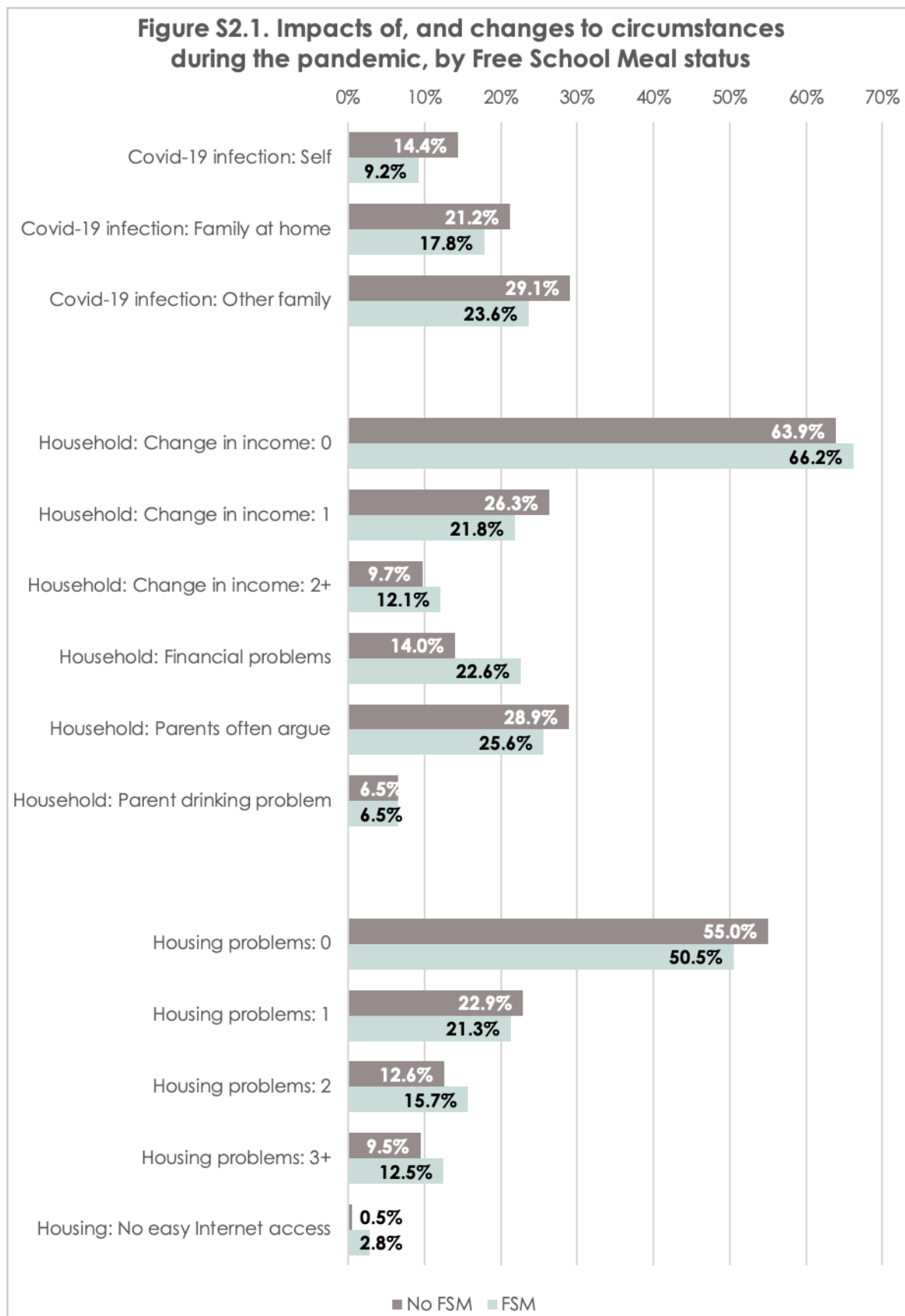




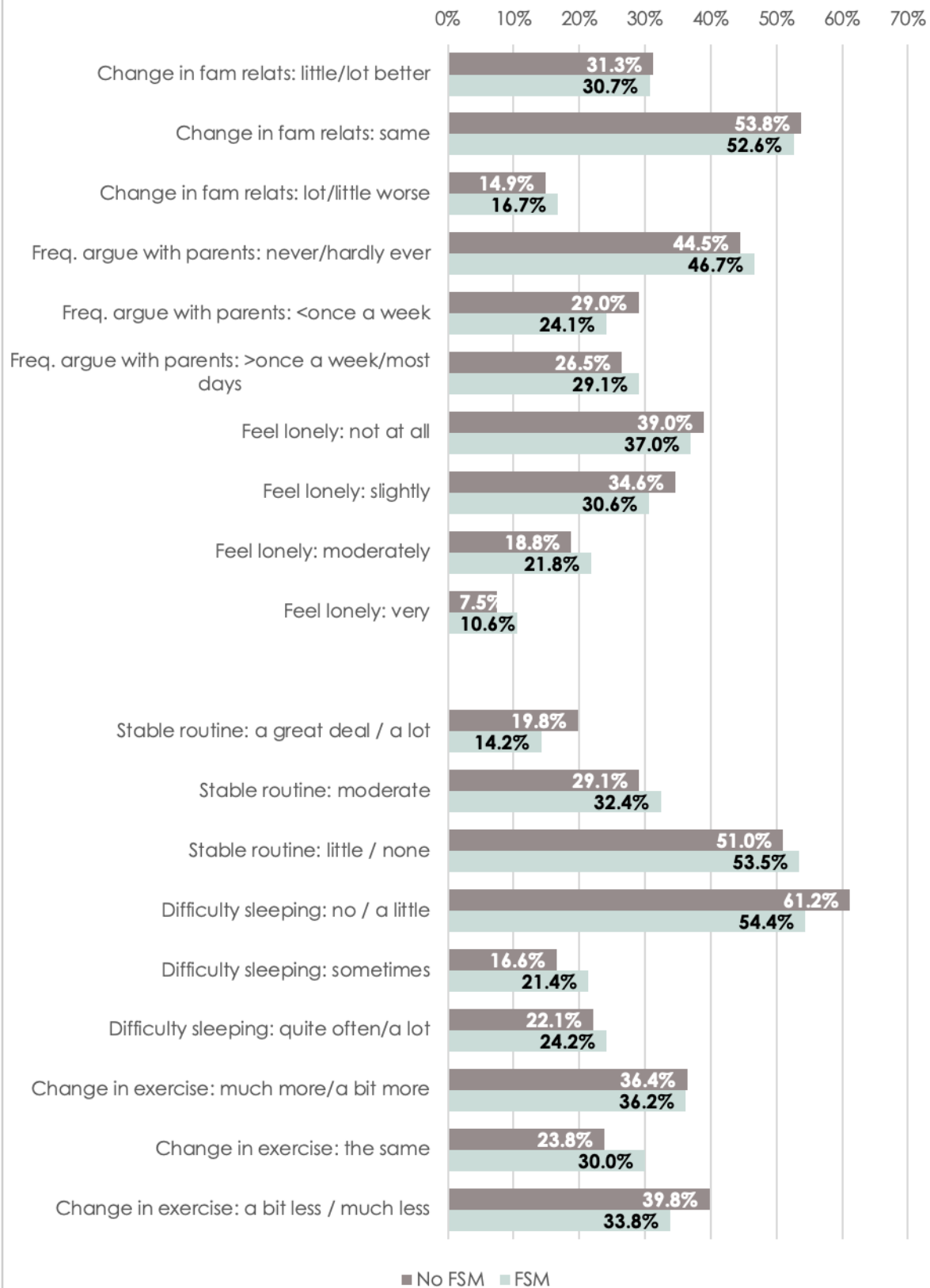
**Figure S1.4. Positive impacts of the pandemic, by gender**



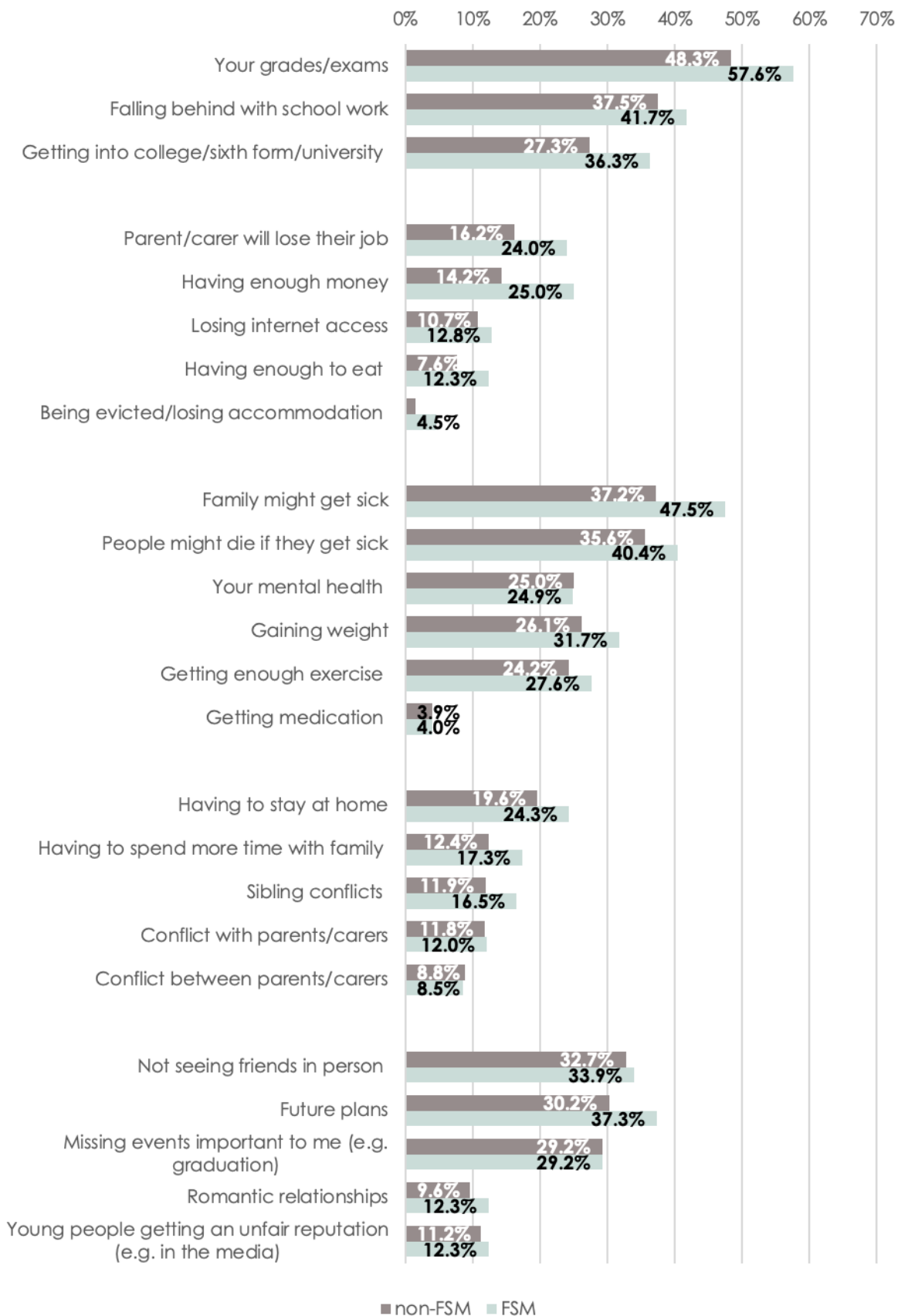
## Appendix 2: Results by Free School Meal Status



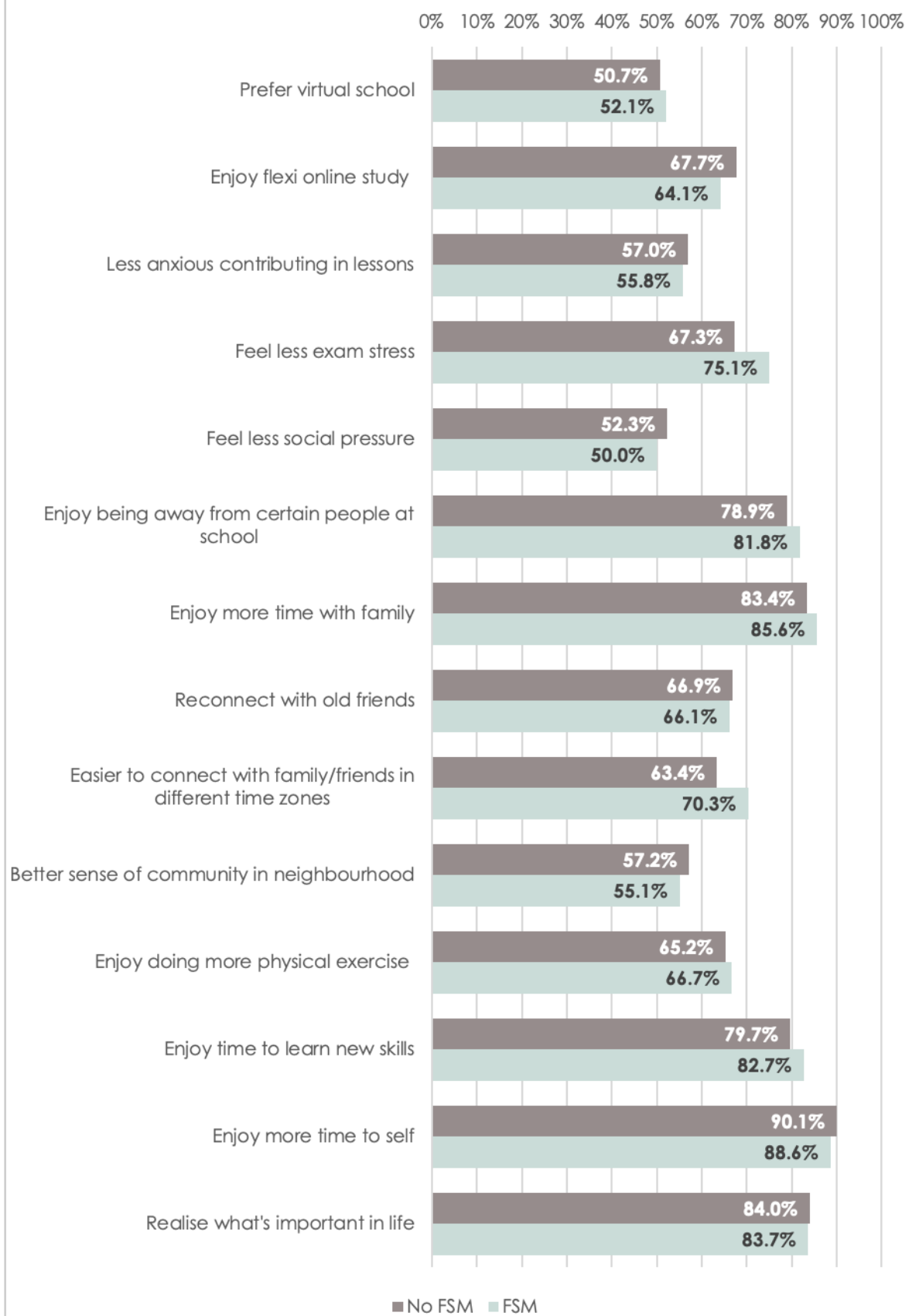
**Figure S2.2. Changes to relationships and routines during the pandemic, by Free School Meal status**



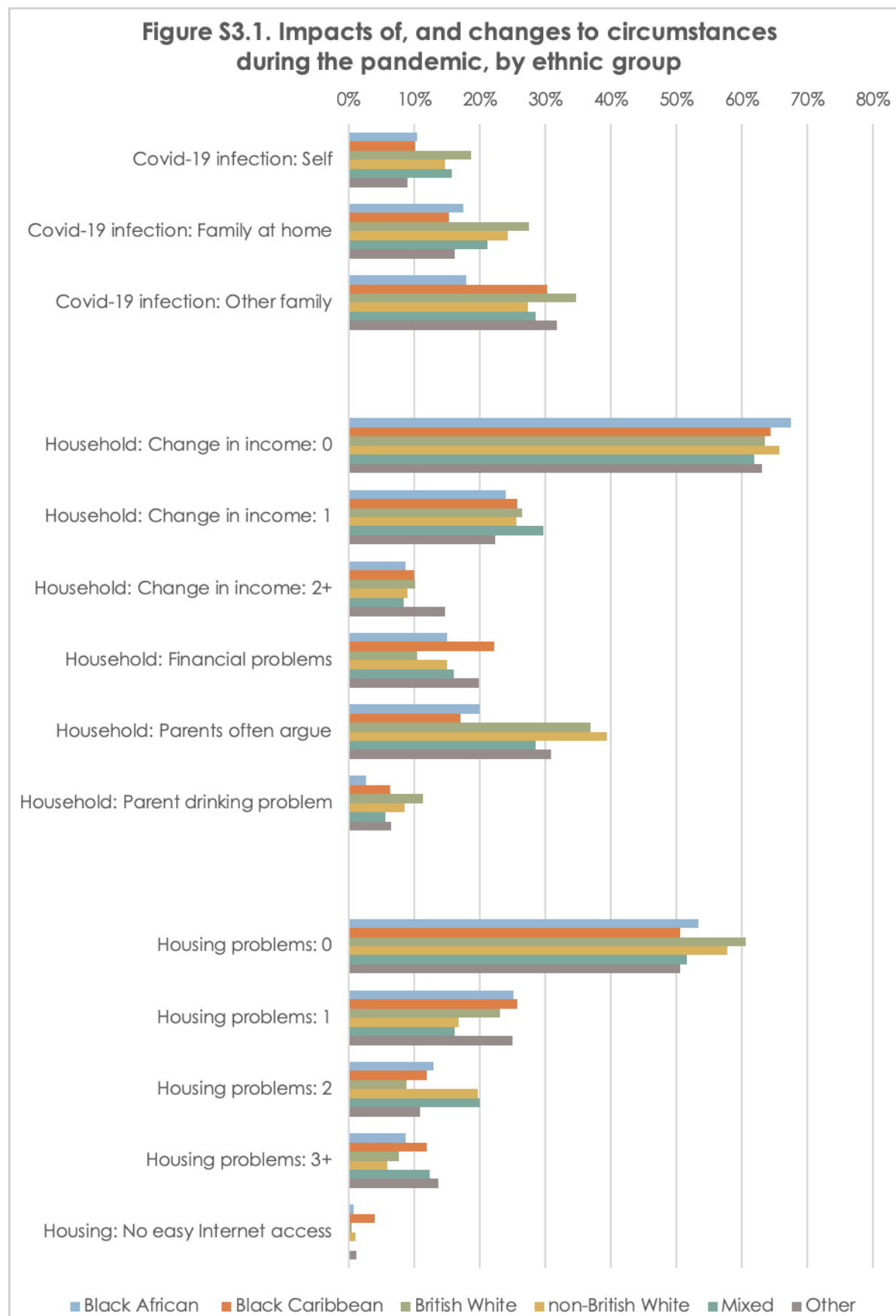
**Figure S2.3. Worries and concerns due to the pandemic, by Free School Meal status**



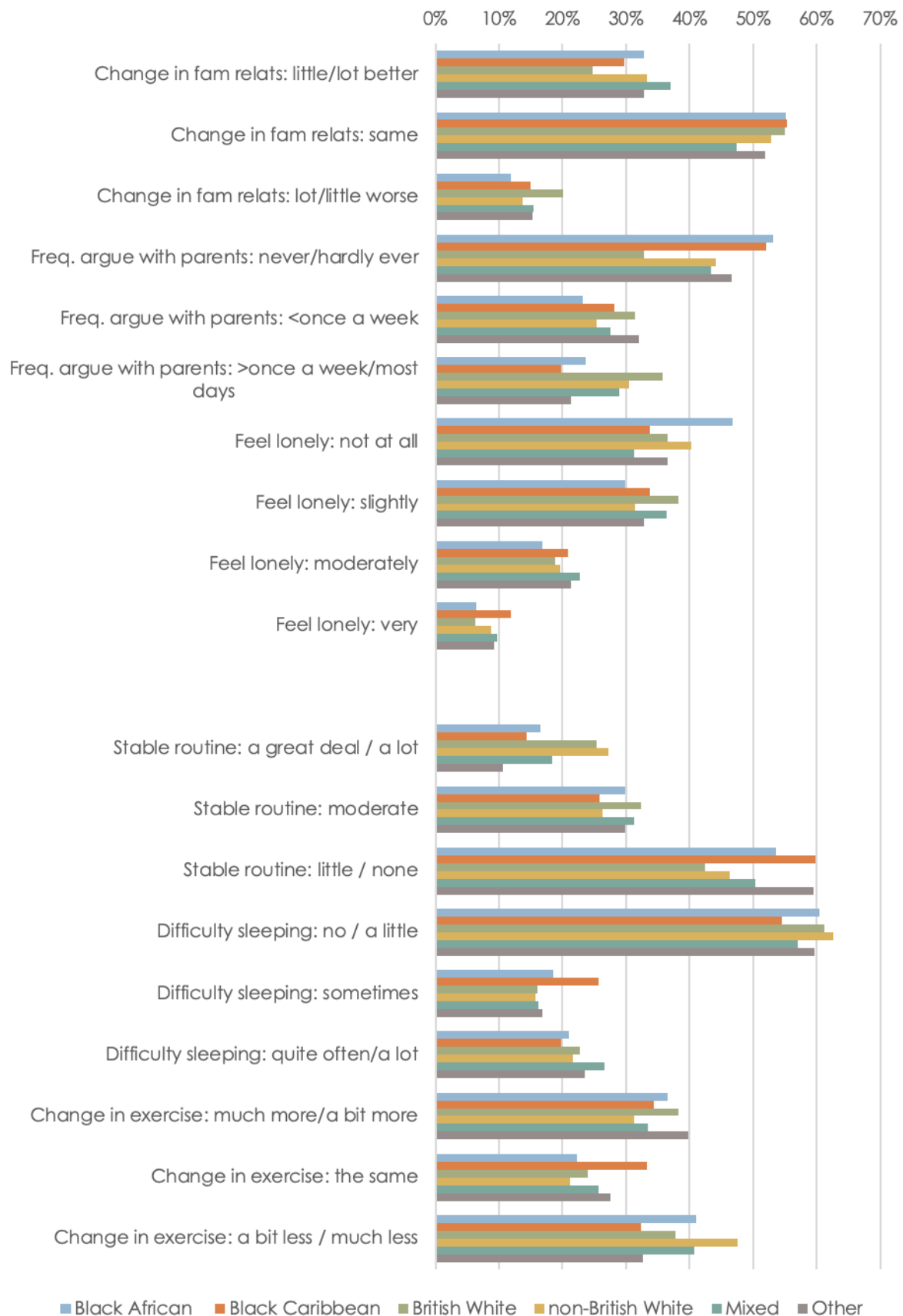
**Figure S2.4. Positive impacts of the pandemic, by Free School Meal status**



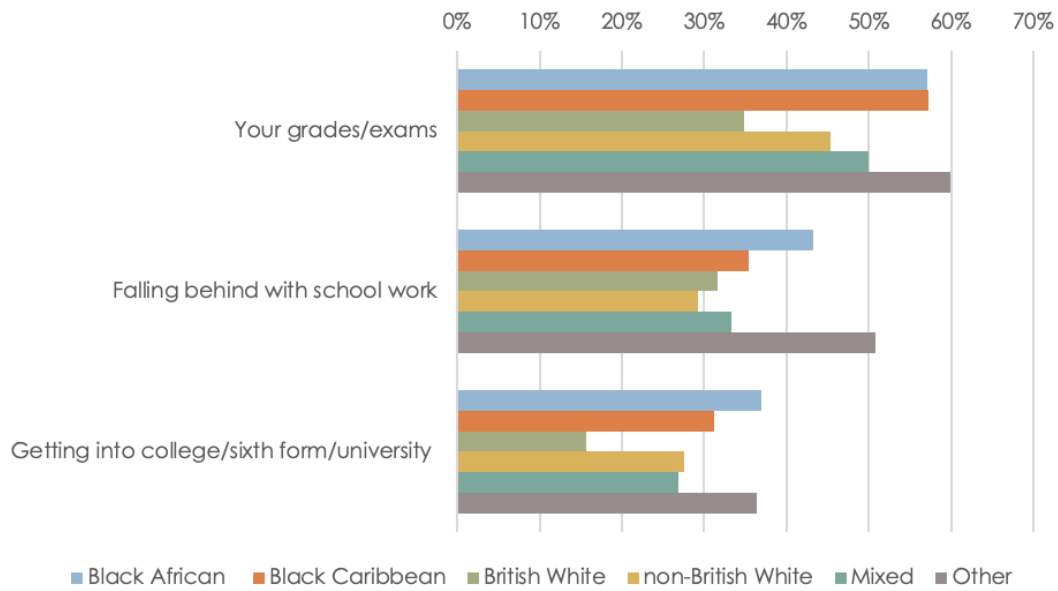
## Appendix 3: Results by Ethnic Group



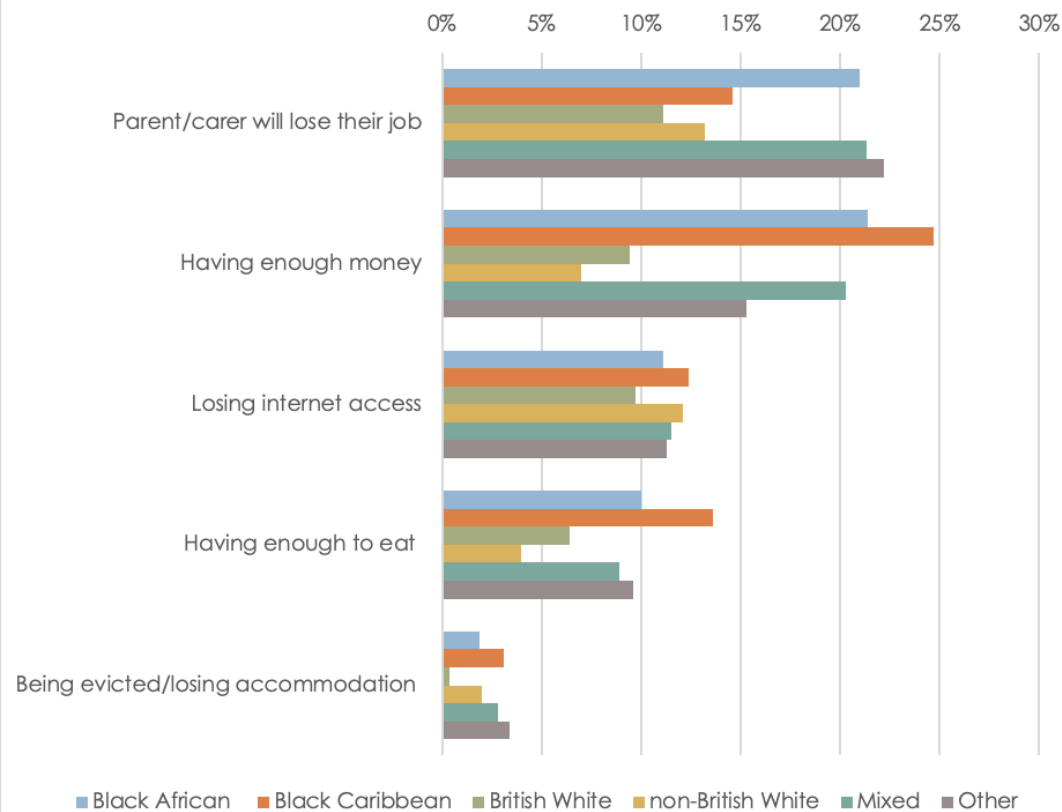
**Figure S3.2. Changes to relationships and routines during the pandemic, by ethnic group**



**Figure S3.3. Worries and concerns about education due to the pandemic, by ethnic group**

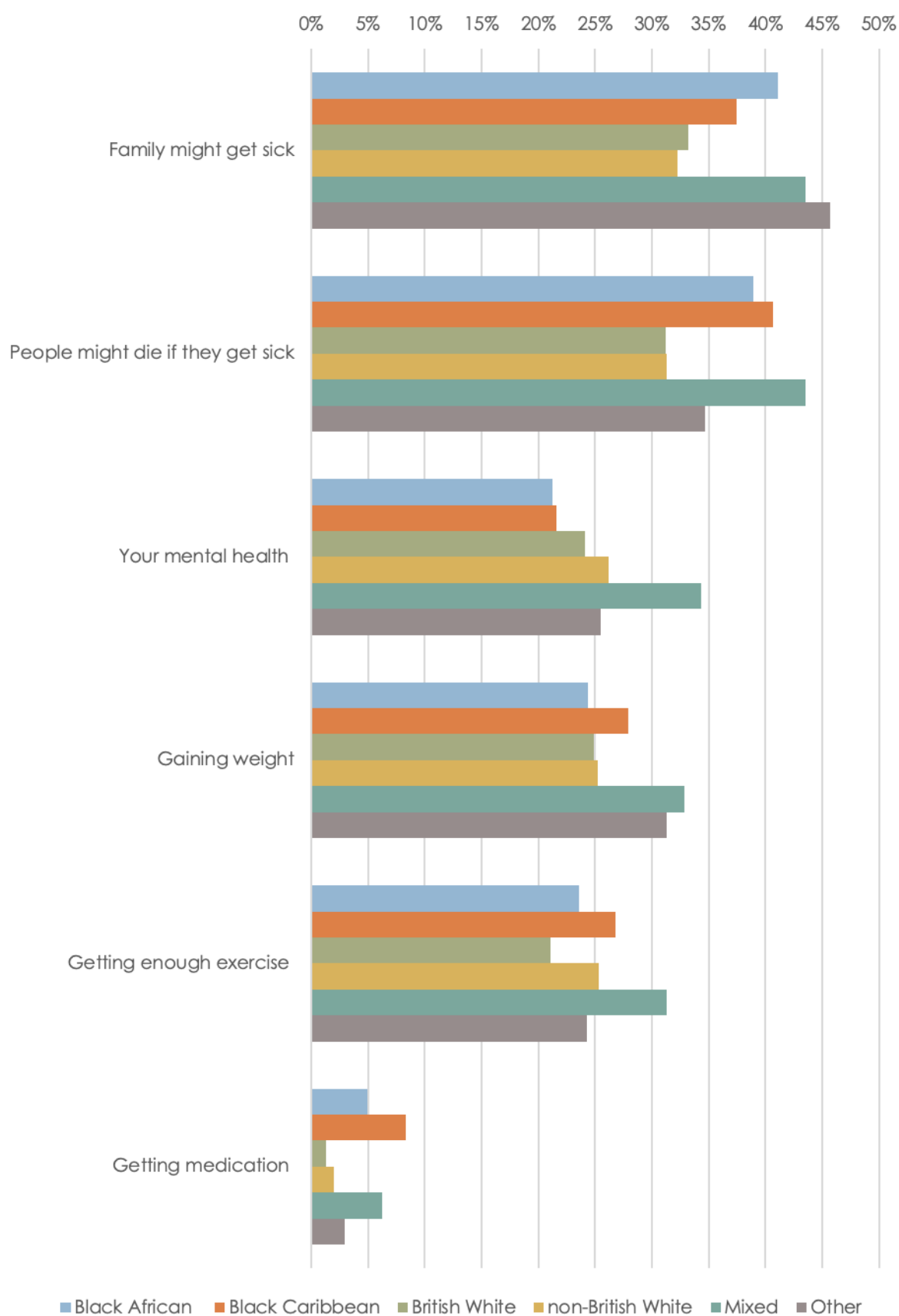


**Figure S3.4. Worries and concerns about finance due to the pandemic, by ethnic group**

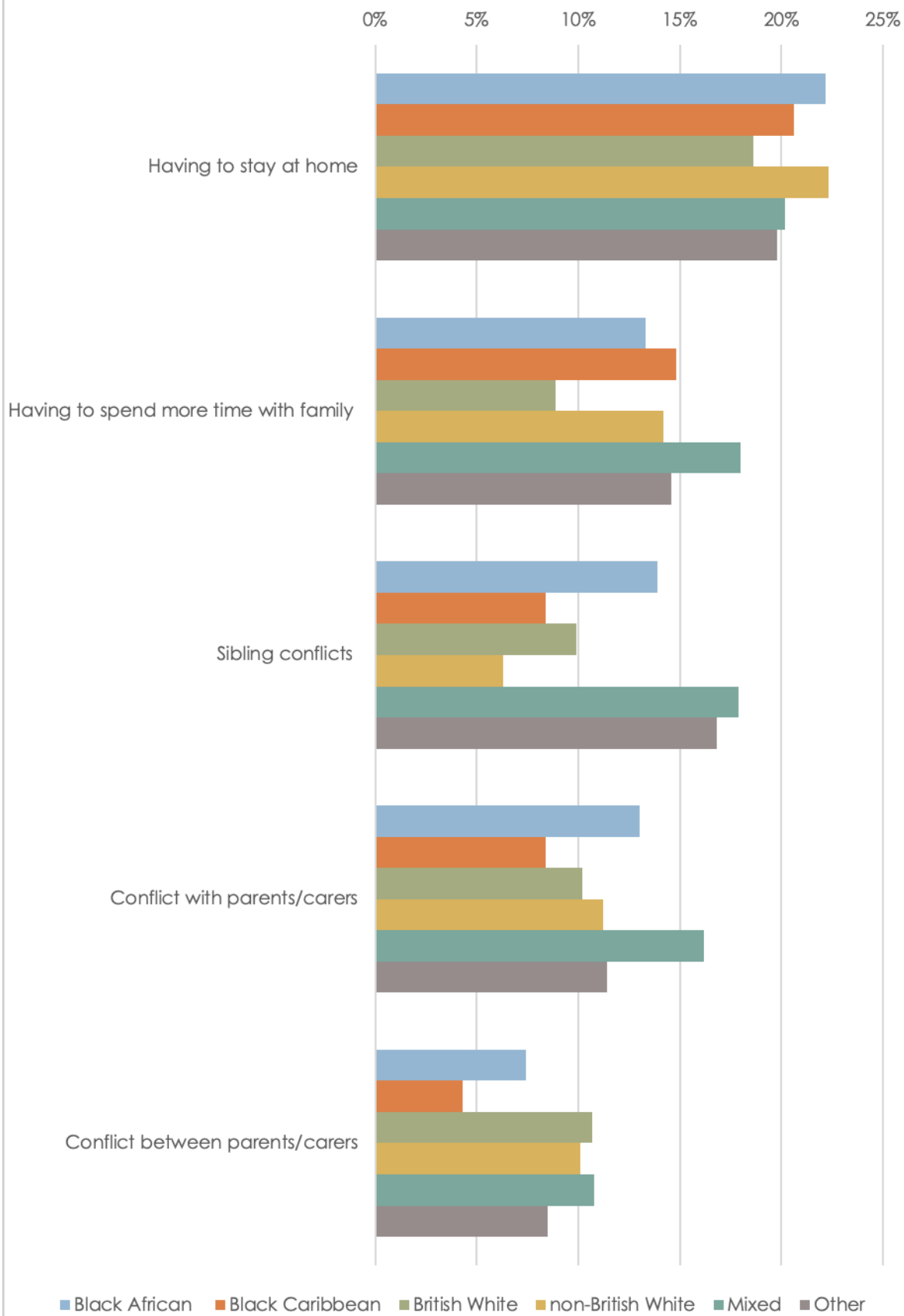




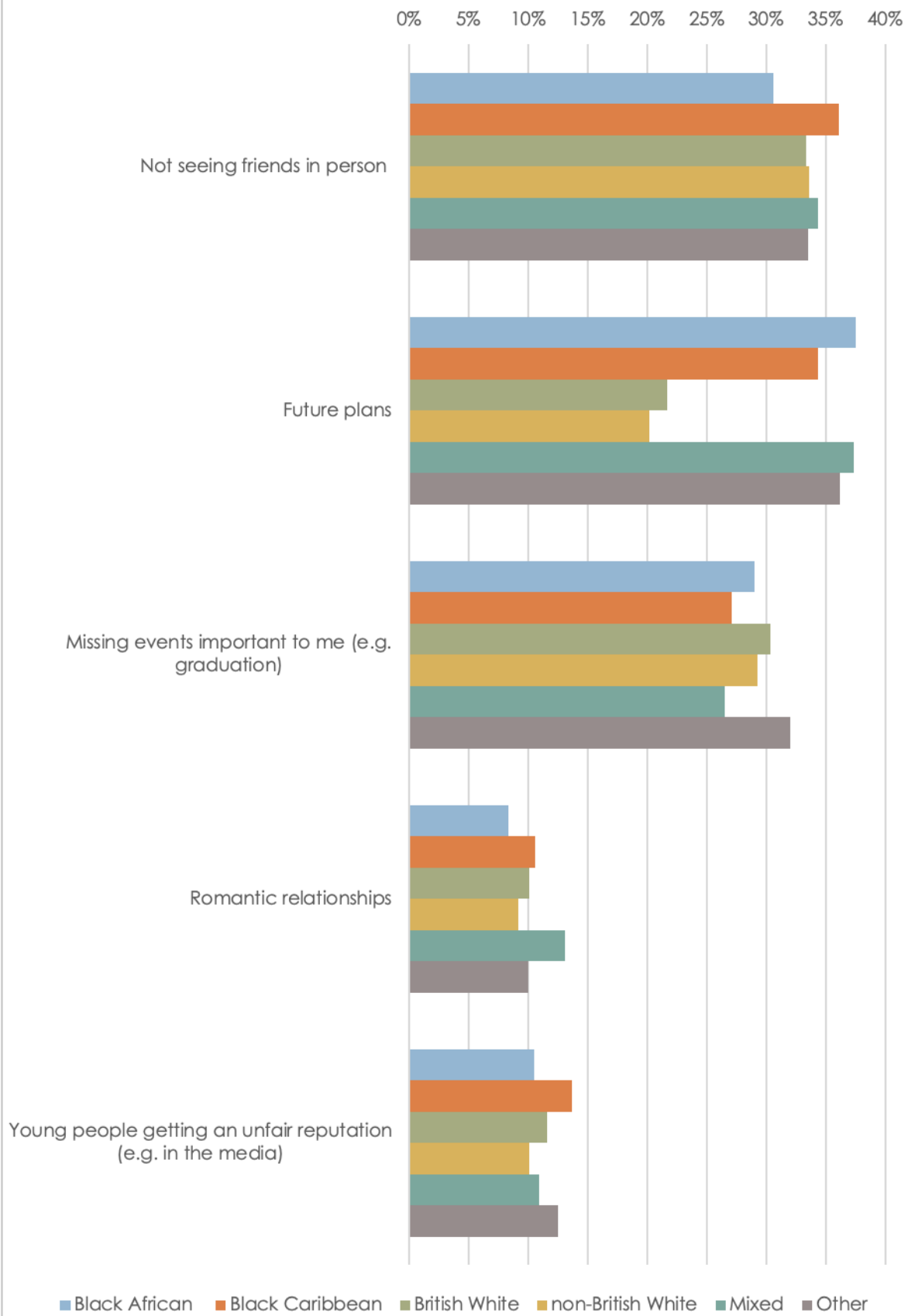
**Figure S3.5. Worries and concerns about health due to the pandemic, by ethnic group**



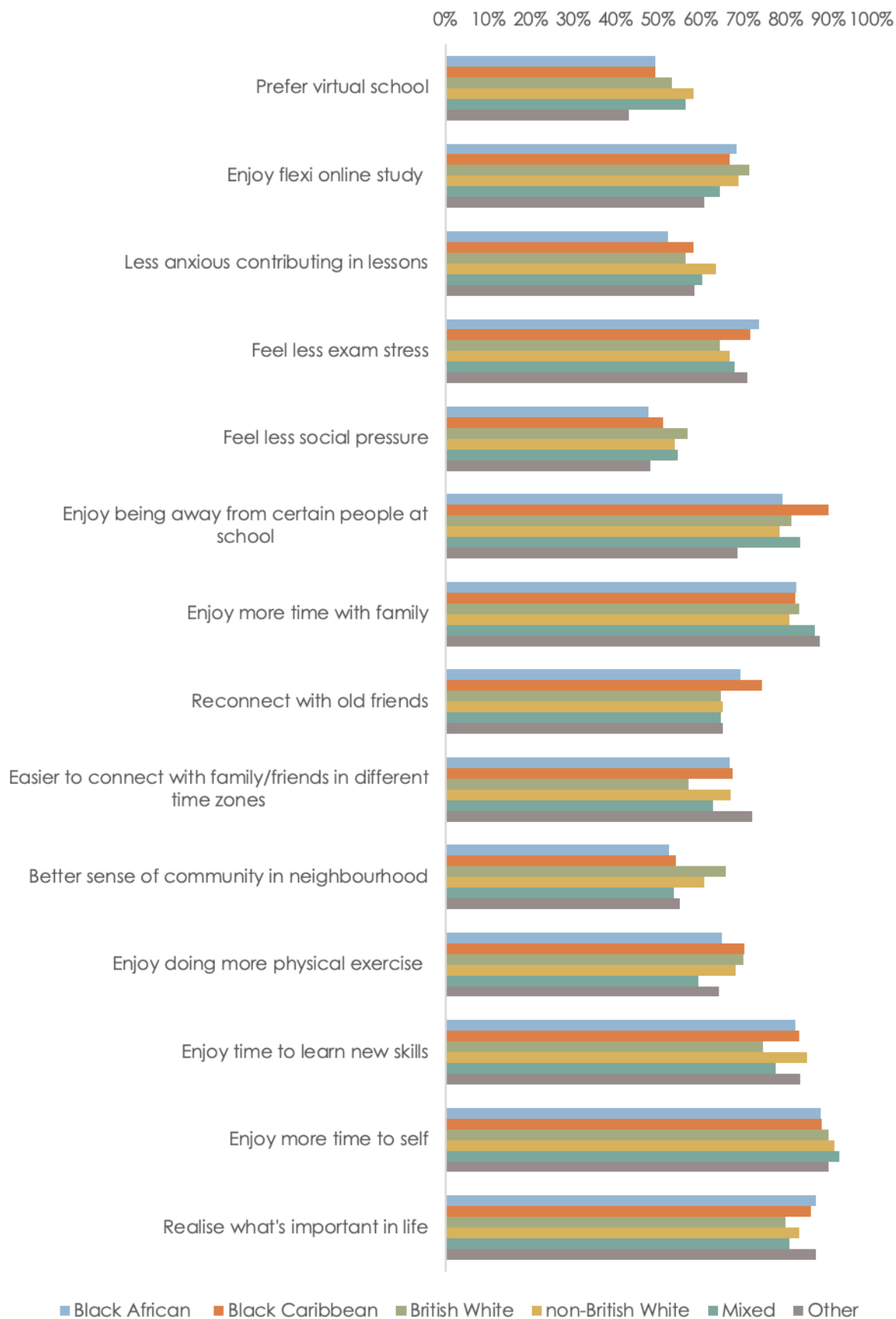
**Figure S3.6. Worries and concerns about family relationships due to the pandemic, by ethnic group**



**Figure S3.7. Other worries and concerns due to the pandemic, by ethnic group**



**Figure S3.8. Positive impacts of the pandemic, by ethnic group**





Centre for  
**Society and  
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**ESRC Centre  
for Society and  
Mental Health**

44-46 Aldwych

London

WC2B 4LL

[www.kcl.ac.uk/csmh](http://www.kcl.ac.uk/csmh)

[csmh@kcl.ac.uk](mailto:csmh@kcl.ac.uk)

[@kcsamh](https://twitter.com/kcsamh)