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**School closures, exam cancellations and isolation:
The impact of Covid-19 on young people's mental health**

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ABSTRACT (150 words)

Schools often provide structure and safety to students but particularly for vulnerable children and young people. The Covid 19 pandemic has caused unprecedented upheaval across society as a whole but it is clear that the effects are uneven and that some groups have been more directly and negatively impacted, both in the UK and globally. While there is now much helpful quantitative data on the effects of Covid 19 on education, there has been little in depth qualitative study which examines the experiences and attitudes of young people as students and specifically the effect of school closures and exam cancellations on their mental health and wellbeing. This paper discusses findings from online group interviews with a total of 45 young people and aims to understand the impact on mental health and wellbeing and what young people, themselves, suggest would help mitigate the effects of the global pandemic on their mental health and wellbeing in school.

Keywords (4 or 5): Covid 19, vulnerability, disadvantage, mental health and wellbeing, adolescents

Introduction

In March 2020, just as in many countries worldwide, the Government of Scotland closed schools to most students as a measure to stop the spread of the Covid 19 virus. There has been deepening concern about the impact of this action on young people in general and important questions raised about risks of short and longer term impacts for those already identified as vulnerable. Such impacts are likely to be cognitive, emotional and relational and have short-term, medium and long term effects (UNESCO 2020). This paper reports qualitative data from online focus group interviews with 45 young people aged 14-18 years, undertaken as one arm of a large scale national study '*In isolation instead of in school*' (INISS) (McCluskey et al. 2020). We contextualise young people's experiences and reflections on school closures, isolation and exam cancellations on their mental health and wellbeing.

The overarching aim of the INISS study was to understand the impact of Covid 19, isolation, school closure and exam cancellation on young people. It was undertaken between May and October 2020 and focused specifically on those young people in the senior phase of high school (aged approx. 14-18 years), who were preparing for the national diet of exams in May 2020, but who then had all these exams cancelled completely because of the national lockdown. The study took place in Scotland but the questions raised and the findings that emerge, speak to issues and questions common across many international educational contexts. The study provides valuable new insights into the mental health and wellbeing impacts of school closures, and what young people, themselves, suggest would help mitigate the effects of the global pandemic on their mental health and wellbeing in school.

Throughout this period there was vociferous debate about school closures and exam cancellation across the UK and Europe, recognising that this phase of high school represents a key period of transition, with outcomes and decisions that have long term effects for entry to higher education, further or vocational education, apprenticeships, employment, other training or voluntary work.

The three questions guiding the main study overall were:

1. How do isolation, school closure and exam cancellation caused by Covid-19 affect the mental health and wellbeing of the generality of young people in Scotland?
2. Are there additional impacts on the mental health of groups of young people typically identified as vulnerable?
3. What do young people, as students, think would help address their concerns about mental health in the context of the pandemic?

Planned outcomes of the study centred on informing national policy recommendations to a) help address concerns about the mental health and wellbeing of the generality of students who have faced isolation, school closure and exam cancellation; and, b) plan targeted interventions to support those identified as vulnerable. The focus on interventions for vulnerable young people encompasses for example, children and young people: entitled to a free school meal (often used as a proxy indicator of poverty in the UK); on the child protection register; with mental health difficulties; with complex additional support needs and/or who receive support from more than one agency; who are looked after, in care or on the edge of care; at risk of harm and neglect, sexual exploitation or offending; or, those living in families facing challenges because of parental conflict, alcohol or substance abuse (Scottish Government 2020a). The work of Harvard University's Achievement Gap Initiative (e.g. Ferguson et al. 2015) provides convincing evidence that a sense of belonging to school increases motivation, engagement and achievement. Given the seismic disruption to education caused by the pandemic, the strain on connections between schools and young people (Bayrakdar and Guveli 2020; Drane et al, 2020; The Children's Society 2020; UNESCO 2020), it is urgent and

essential to understand and engage with what this may mean for young people, particularly those most vulnerable.

Covid 19 and the impact on schools in lockdown in 2020

When the UK entered its first legally enforced 'lockdown' in March 2020, schools closed their doors to most students across all the four jurisdictions. Only young people officially identified as vulnerable and the children of designated keyworkers e.g. in health or social care, were still able to attend school in person. Teachers continued to work long and often extended hours to provide support to all school students online but were also required to teach in person, in school, children of keyworkers and children identified as 'vulnerable'. It is known that levels of engagement with school varied hugely (Green 2020; Nelson and Sharp 2020; Sibieta and Cottell 2020; Scottish Government 2020c). It has been said often since then, but it is still fundamentally important to fully acknowledge that this was an unparalleled, extreme change to 'how we do things', on a scale and at a speed previously unknown in most global economies.

Crucially, this first period of lockdown coincided with the annual diet of national exams in the UK. The official school leaving date falls in June each year, and so it too occurred in this first lockdown period. As schools continue to adapt and respond to the Covid 19 pandemic, at the time of writing, this paper provides an assessment of the combined effects of lockdown, school closure and exam cancellation on young people in this age range, from their own perspectives. Crucially, it allows young people the opportunity to express what they think will help their mental health and wellbeing in the context of Covid 19.

Review of the literature

Research and methodology in this field is emergent and fast developing. Much relevant research initially focused on adult populations, rather than children and young people and it is well known that (pre-Covid 19), in terms of mental health, parents and children's views on mental health often do not converge well (e.g. Bajoux et al., 2018). Given the multi-layering effects of health and educational disadvantage, it is vital to address this gap in knowledge and understand potential impacts for young people, families and schools.

There were a number of studies which, like our own, were starting or just under way in the late spring/early summer of 2020. These included the Co-Space project led by Cathy Creswell (e.g. Waite et al. 2020), the Oxfordshire Online Mental Health and Wellbeing Survey 2020 led by Mansfield, which published preliminary findings after completion of our INISS study (Mansfield, Jindra and Fazel 2020); and the TeenCovidLife study (Smith et al. 2020). Our study design benefitted from the early reports from YoungMinds and the Scottish Youth Parliament. The first of an eventual three surveys by YoungMinds (2020a) reported data from young people with a history of mental health needs across the UK. Undertaken in the first month of lockdown, 83% of their respondents (N= 2,111) reported worsening mental health due to the Covid19 pandemic and 26% who had been accessing support said that they were not able to access support due to schools closing. Later in the year, as schools re-opened in autumn 2020, in their third survey, 69% of respondents [N= 2,011] described their mental health as poor now that they were back at school; this had risen from 58% who described their mental health as poor before returning to school; 40% of respondents said that there was no school counsellor available to support students in their school; only 27% had had a one-to-one conversation with a teacher or another member of staff in which they were asked about their wellbeing, by the time they completed the survey; and almost a quarter of respondents (23%)

said that there was less mental health support in their school than before the pandemic, while only 9% agreed that there was more mental health support (YoungMinds 2020b).

The first 'Lockdown Lowdown' report in April 2020 (Scottish Youth Parliament 2020), with 2,421 responses from young people aged 11-25, noted that almost 40% were 'extremely' or 'moderately concerned' about the impacts on their education, and around 50% 'moderately' or 'extremely concerned' about exams. The same survey reported 39% felt 'moderately' or 'extremely concerned' about their own mental well-being and 46% were 'moderately' or 'extremely concerned' about the well-being of others. (Scottish Youth Parliament 2020a). The first TeenCovidLife survey ran from May to July 2020, drawing responses from 5,548 young people aged 12-17 years old and revealed that 55% of male and 60% of females 15-17 years found it either 'quite difficult' or 'very difficult' to adapt to doing schoolwork at home and 53%, while 54% of females and 65% of males in the same age group reported feeling 'some' or 'a lot' of pressure from schoolwork (Generation Scotland 2020, pp23-24).

These were all highly valuable studies but none included qualitative data; none involved direct engagement with individual young people. Each of these studies included questions about school but none put school closures and exam cancellations as its centre. Each was survey led and although our study similarly included a large national online survey, from the outset our team was also committed to bridging the gap between survey data and gaining a more textured, nuanced understanding of young people's experiences and what they, themselves, suggest would support their mental health and wellbeing.

Defining Vulnerability

In this study, with its interest in issues of vulnerability, one of the first and most challenging tasks was to agree a working definition of vulnerability. As an interdisciplinary team drawn from education, law, psychology and public health, based in academia, national government and Unicef, we were drawing on a plethora of different disciplinary and professional definitions. It quickly became clear that the study needed to adopt a broad and flexible common definition. The Scottish Government published its 'Vulnerable Children' report (2020a) in May 2020 seeking to address the impact of the Covid 19 outbreak on children and families, highlighting a range of individual, family and socio-economic factors which may increase risk of negative effects on mental health and wellbeing. It noted that these effects are likely to be further exacerbated by the Covid 19 pandemic, the unprecedented nature of the controls imposed by lockdown itself, and the speed at which these controls were implemented. This report also recognised that there were likely to be differential impacts on some groups of young people; those living in a household where there was already neglect, violence, conflict, alcohol or drug abuse; those who were 'shielding' personally on Government advice because they were in their terms, 'extremely high risk/clinically extremely vulnerable or moderate risk/highly vulnerable', or who were young carers for a family member who was shielding; or living with someone officially designated as a key worker

At this stage, anecdotal evidence also suggested that these differential effects might extend to young people living with lone parents who ordinarily lived with their other parent for part of the week. There was concern too about the potential impact on looked after and accommodated young people for whom arrangements may have had to change with little time for preparation and planning. The potential immediate and longer term effects on young people who lost family members during lockdown and/or due to Covid 19 was of course a serious consideration. All these effects were likely to be exacerbated where young people were living in families experiencing the stress of severe financial difficulty, and facing the prospect of increasing economic uncertainty and hardship in months to come. In addition, as our study got under way, voices were already calling

attention to the unequal effects of Covid 19 on women and on Black and Minority Ethnic communities, e.g. Fawcett Society (2020a, 2020b), with corollaries for the experiences of school students in the UK and internationally (Andrew et al. 2020; Bayradakar and Guveli 2020; Drane et al. 2020, Reay 2020).

Research methods

In developing our method and design we were fortunate to be able to draw on the rapid reviews of evidence and discussions with practitioners and policy makers about new risks of school exclusion in the context of Covid 19 led by members of the Excluded Lives project team at Oxford University; (Daniels et al. 2020, Emery et al. 2020). We were grateful too for many collegial and collaborative conversations with research teams across the UK, especially, as noted above, with Mina Fazel and Kate Mansfield of the Oxwell Study. An integrated mixed methods design (Greene 2007) allowed us to address the overarching research aims of the INISS study. A Research Advisory group, consisting of three young people aged 18-24 (one member of Unicef's youth panel and two Members of the Scottish Youth Parliament) and three external research experts (one each from NHS Scotland, The Data for Children Collaborative with Unicef and academia) advised on each stage of the research and all aspects, meeting online three times over the course of the research.

The overall design utilised two main methods: a) a national online survey open to all senior high school students (in year groups Secondary 3-Secondary 6, usually aged 15-18 years old) and b) online focus group interviews with young people, to allow in depth exploration of emerging findings from the survey. Further information about the larger study and its online survey can be found in the preliminary report of early findings (McCluskey et al. 2020), with more detailed analysis of the survey currently underway to expand on these preliminary results. This paper's primary interest is in examining the qualitative data from these focus groups.

Research access

Communication about the study was pursued through a variety of media e.g. on the INISS study's dedicated website; on Scottish Youth Parliament, YouthLink and Pupil Inclusion Network websites and on GLOW, the website for the Government's national education agency, known as Education Scotland. GLOW is available to all school students, teachers and parents. Focus group participation was invited through three main avenues: all survey participants were asked to tick a box in the survey if they would be willing to join in an online focus group interview to discuss the topic in greater detail. Secondly, potential applicants could also take up the invitation directly without completing the survey, through clickable links on GLOW and the INISS study website, and thirdly, through Scottish Youth Parliament, which gave invaluable direct support in reaching potential interview participants.

The interview schedule

The focus group interview schedule borrowed from Booth and Ainscow's Index for Inclusion (2011) to examine school connectedness and how this might be affected by school closures and exam cancellation as well as questions about mental health support; asking what supports school had offered, what support should be offered by school, by government, and also what young people themselves could do.

Ethical considerations

The study received ethical approval from The University of Edinburgh in June 2020. We acknowledge that an open invitation to participation has inherent limits to inclusive participation and that this also limits the support the research team was able to put in place

to support participation. We aimed to mitigate these challenges as much as possible while not underestimating the potential impact. The contact details for the principal investigator were always clearly signposted and we took care to provide full and clear information to participants about the aims, purposes and processes involved in the study and what being involved would entail, and state clearly that participation was voluntary. This information encouraged young people under age 16 to talk to a trusted adult about their participation, including for example, in cases where they might ordinarily expect to receive additional support in school.

Guided overall by British Psychological Society (BPS) and British Educational Research Association (BERA) ethical guidelines, we also followed Unicef's 'Procedure for ethical standards in research, evaluation, data collection and analysis' (2015) and in relation to the particular issues of consent and assent in this context, Berman's 'Ethical considerations for evidence generation involving children on the COVID-19 pandemic' (2020). All data was anonymised, including the data from the Snapchat mini-surveys conducted for the first focus group which involved members of the Scottish Youth Parliament (See e.g. Figure X)

While there were no meaningful financial or other material benefits to participation, all focus group participants received a £20 Amazon e-voucher, in acknowledgement of their time and contribution.

The interview process

We undertook four, online, focus group semi-structured interviews, involving a total of 45 young people from rural, urban and suburban areas across Scotland (see Table x below). These interviews took place in August and September 2020, just as schools were resuming fully for the first time since the initial lockdown and after students had received achievement awards based on teacher judgement and supported by quality assurance at local and national level.

The interview topic guide was circulated to all participants in advance of interview. As noted above, one interview was hosted by Scottish Youth Parliament (SYP) and involved 15 Members of the Scottish Youth Parliament, many of whom had also canvassed local opinion beforehand, e.g. via snapchat surveys. The remaining three were led by the research team. Each interview had two facilitators and the principal investigator was involved in all four interviews in order to provide consistency. The number of participants ranged from 2-15, involving a total of 32 females, 12 males, and one young person preferring to self-describe as 'unsure'. One advantage of undertaking the interviews online was the opportunity for young people living in rural and remote areas to be involved. We were therefore pleased that young people from 15 different high schools and from across 17 of the 32 Scottish local authorities participated overall. We were less successful in ensuring we included a range of young people who would typically receive additional support with learning or behaviour in school. In the end only four of the 45 participants had experience of in-school support.

Table X Focus group participants

Focus group interviews	Total number of participants	Total number of local authorities	Total number of schools	Gender balance	Ethnic background	Number of participants receiving additional support in school currently or in the past
4	45	17	15	Male 12 Female 32	White 30 Mixed 5	4

				Prefer to self-describe 1	African 3 Asian or Asian British 1 Other ethnic group 1 Prefer not to say 1 Unknown 3	
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All focus group interviews were digitally recorded and transcribed with consent and lasted between 60 and 90 minutes. Using Zoom as a format allowed participants to make use of features such as the ‘reactions’, and the ‘hands up’ function to signal to facilitators when they wished to speak. We found that conversation flowed well in each interview and an indication of the level of engagement is provided by the fact that five young people sent in additional comments by email following the interviews. These later comments are incorporated into the findings discussed below.

Data analysis

Coding and thematic analysis adopted approaches from Braun and Clarke (2006) and Strauss and Corbin (2015). A coding frame was developed based on a review of all the data, mostly using codes at two levels but in some cases three levels, in relation to, for example, personal wellbeing activities, social wellbeing activities, and professional support,. An example of codes for personal wellbeing activities is given below.

Table x. Example of coding: Personal wellbeing activities

1.1 Exercise and sports
1.2 Entertainment
1.3 Creative hobbies
1.4 Self-care
1.4.1 Sleep
1.4.2 food and drink
1.4.3 Relaxation/meditation/reflection
1.5 Pets
1.6 Time to myself
1.7 School work and learning

A number of comments were assigned to more than one code, where a more granular analysis was warranted by the data. Each interview transcript was analysed independently by two researchers who then shared and compared these initial analyses. Further analysis and development of themes was then assisted in each case through team discussion and process checks to identify the themes and sub-themes that emerged.

Findings and Discussion

The findings are reported below under the four key themes to emerge from the analysis. These are:
(i) The impact of isolation, home learning and exam cancellation on mental health and generality of

young people; (ii) the impact on the mental health of groups of young people typically identified as vulnerable; (iii) experiences of returning to school and (iv) young people's views on what had helped, or could help, their mental health and wellbeing.

The impact of isolation, home learning and exam cancellation on mental health and generality of young people

Participants focused on five key areas within this theme; the initial positive impact of lockdown on young people's mental health, the changes to everyday structure and habits, increased reliance on social media as a primary form of communication, the availability of support for mental health during lockdown, and the impact of exam cancellation.

For some, lockdown offered a welcome change:

I actually felt that lockdown had a more positive impact in my mental health, but that's probably because of my spontaneous nature. It felt nice not to be told around like told what to do by a bell. I could just get work done in my own case. Yeah. And I thought a lot more independent. (FG 3, 3)¹

It is worth noting that this sense of personal agency and autonomy was mentioned by most of the young people we interviewed and may raise broader questions about regular school structures and processes, quite apart from changes wrought by the pandemic. However, just as often, we heard about a shared sense of uncertainty and the negative effects of this. This uncertainty related to the duration of the lockdown and the flux around arrangements for learning at home and the examinations, with what one participant described as the 'fiasco' (FG3, 10) and another the 'lack of transparency' (FG 2, 5) associated with the decisions of the national examination body, the Scottish Qualifications Authority;

I think that there was quite a lot of uncertainty at the beginning of lockdown about how long it would last for and like when we're going back to school and how our results would be decided. And I found that really stressful. I think a lot of people did because we didn't know exactly what to do and we didn't know how long this could go on for. (FG 3, 1)

In another interview, one young person said,

Seeing how much work each of my teachers put out definitely gave me personally a lot of anxiety and stress. I definitely did see a decline in my mental health during that period because of the amount of work being put out and the time constraint I had to try and complete it in. (FG1, 2)

However, there were accounts of more positive experiences in terms of school contact, such as the following;

So our school did like a child-centred thing...trying to see like how we feel about the learning and trying to ask us how we thought. [It] felt they were actually listening to us. Our teachers would give us all our work that we needed to do at the start the week so that we can do it over the week. So I think this put less stress on us because we didn't have to fulfil the the normal structure when it wasn't a normal time for us. It felt like we were actually being considered. (FG 3, 4)

¹ The numbering of quotations refers to time points within the group interviews rather than individual participants.

Emotional and Behavioural Difficulties

When this story and similar accounts were shared in the focus groups, there was often strongly expressed support for individual teachers who had offered consistency, individual interaction, extra help. This was highly valued and appreciated by participants.

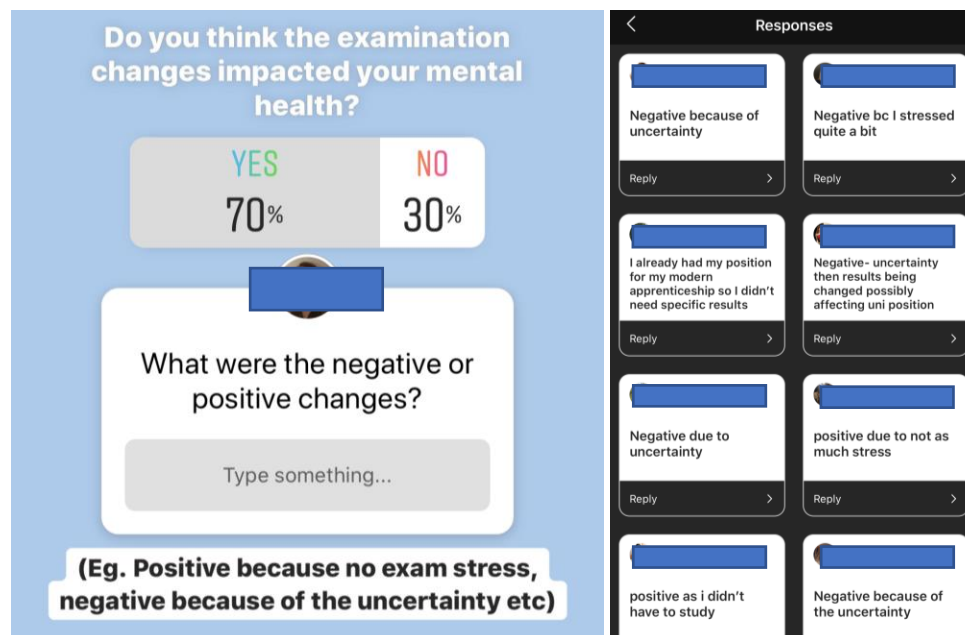
Most participants also talked at length about the immediate effects of the sudden and complete loss of social contact with peers. Specifically, one young person volunteered the following personal experience;

I think also the lack of having social interactions in person also kind of affected people's mental health, especially mine because I had a friend group that completely fell apart during lockdown. And it was difficult to deal with especially because it was over text. I don't like to deal with arguments and situations like that over text, I prefer to do it in person. But I think a lot of relationships, whether it be friends, family, partners may have experienced some difficulty during that time. (FG 2, 1)

Discussion of digital connectivity also featured in each interview. It was clear that access and provision varied substantially across different local authority areas. In some areas, schools already had well developed online modes of communication with home while in others this was not the case. Based on what these young people had to say, it seemed that in areas where systems were already in place, schools were able to adapt more readily to provide support for home teaching. The issues for homes where there was very limited access to devices was also noted specifically.

The first focus group, which, as noted above involved 15 Members of the Scottish Youth Parliament, offered an additional set of insights as they reported on their own views but also on views and experiences of their constituents. An example of such one informal mini-survey conducted in an advance of this focus group interview is shown below:

Figure X : Example of mini-survey results



These focus group participants also offered their own verbal summaries of feedback from these informal surveys e.g.

Emotional and Behavioural Difficulties

In my survey, people said they have become more comfortable in their own company, but more negatively, they didn't have much motivation and sleeping more but consistently more said it had a negative impact on their mental health. (FG1,1)

Some people felt less stressed because they had no school but once things started to go online, their lack of motivation absolutely caused them more stress than in the first place. Some people who already had previous mental health issues it started to go downhill for them and people found it hard being away from friends and family. (FG1, 2)

Comments like these were helpful in expanding on the more individual comments and in trying to understand where there was commonality of experience and perspective.

The impact on the mental health of groups of young people typically identified as vulnerable

Focus group participants often drew on examples from personal experience or from within their peer groups in considering vulnerability, and suggested a range of young people for whom impacts were felt most severely. Examples included young people with pre-existing mental health conditions; young people who receive additional support with learning; those living in households where there is violence and abuse; young carers; those living in a family where someone had developed long Covid, and members of some minority groups, such as LGBT+. As one remarked,

Even if you're not talking about LGBT issues directly, just being around somebody who you know, has a shared experience with you. And that wasn't really happening in the same way in lockdown (FG 4, 29).

Another mentioned OCD;

'...especially people with OCD, with all the focus on handwashing... '(FG 3, 35)

Some spoke more personally;

Many of us are actually young carers...caring for people, we are in that vulnerable category, so that puts a lot of stress on us FG1, 31).

I struggled with an eating disorder for years and that sort of vulnerable group... [it] could make things worse (FG1, 34).

I said a few times I wasn't doing that well, but I didn't get anything back (FG 1, 22).

It's been a bit jarring and a bit frightening, because my mum contracted coronavirus and was quite ill. She got the long form of the virus and is still recovering so that has added to my stress. I had to make dinner around the house and help out more.(FG 3, 2)

There was strong agreement across the focus groups that there could be material impact of Covid 19 on those who were already known to be vulnerable but, as can be seen above, participants reported instances where young people experienced new or additional vulnerability as a result of the pandemic.

Experiences of returning to school

Participants described the mental health impacts of returning to school in both positive and negative ways. Overall, returning to school was seen as having a positive impact on wellbeing for most. Participants talked about feeling happier, relieved to be able to talk in person with friends again. However this was often coupled with anxiety about Covid-related risks such as a perceived lack of clarity on social distancing rules in school, or the large numbers of people gathered in one place, or an awareness of lost learning;

I started to get very worried about things like nobody is wearing masks. I felt like I had to make sure that every single thing was cleaned, because I didn't know who had touched it, who had come in there before me (FG3, 16).

I felt my mental health was worse at that point [coming out of lockdown]... seeing people after 3/4 months... it was quite overwhelming and having to connect with people again was quite difficult FG1, 45).

Sometimes when you haven't got that much work done, having that recognition and understanding... that at least you have done something...is crucial to your self-esteem and your confidence and getting back into it. (FG 2, 5)

What had helped, and what could help, mental health and wellbeing?

When asked about what had helped or could help address their concerns in the context of the pandemic most participants had strong views and articulated these very clearly. Significantly for this study, most felt that when schools re-opened to all students in August 2020, there was too little support for those who were particularly vulnerable, but also for the generality of students. Many felt that schools focused too much on 'getting back to normal', and offered too few opportunities for students to reflect on the impact of the pandemic, as they navigated the transition from lockdown to a full school timetable. Notably, several young people pointed out that in their first Personal and Social Education (PSE) lesson back in school they were asked to work on drafting university application forms rather than use the time and space to reflect on their well-being after a turbulent and calamitous five months. As one said;

I was handed a form to do UCAS [University entrance application form]. It was almost like, 'let's get your future sorted out' (FG 1, 7).

Another commented;

The first day of PSE, no mention of lockdown for six months and no talking about the impact, but when senior management see people not social distancing, they shout, 'there is still a global pandemic!' (FG 1, 9).

As well as calls for all teachers to assist young people to reflect on their experiences, there were also consistent demands for increased mental health support in schools more broadly. There were calls for improved training for staff so that they were better equipped to address the impact of the

pandemic on students' mental health and able to offer more signposting to counselling and other kinds of support. A number of participants suggested that counselling should be available to all young people in school and that there should be more funding and more emphasis on support services, noting that support had been variable and a 'postcode lottery' for many during the lockdown. One participant spoke about the introduction of 'mental health ambassadors' in their school and how they had seen fellow students benefit from speaking to people their own age, suggesting that perhaps that they felt more comfortable talking to someone who had 'been in their footsteps more recently' (FG 4, 18).

Nearly all participants expressed a view that there had not been enough support in terms of mental health and well-being for young people during lockdown. Some of what had been on offer was seen as somewhat surface level, e.g. where students had been encouraged to complete check-in surveys by their school. It was felt this exercise lacked real personal engagement or follow-up. Participants also commented that they saw the mental health support and advice offered by government as being too vague, for example encouraging young people to 'go for a walk' (FG 4, 5), rather than signposting young people to counselling sessions or consistent support services.

There was also concern expressed for teachers in many discussions and recognition that they too were often having to adapt at very short notice to constant change, and often with limited information. The stress on them was recognised, with one young person talking about a teacher who had been visibly upset during initial lessons back in school. While not within the remit of the study to investigate teacher experiences, these comments from young people suggest the need for future research in this area.

Overall, these young people underlined the need for all school staff to talk about the pandemic more openly and be ready to make space and time for discussion as needed, and secondly but no less importantly, the need for schools to develop dedicated specialised support for mental health and well-being, available to all.

In summary, findings from these focus group discussions indicate that exam cancellations came as a relief for most, but also caused anxiety and uncertainty; home learning was stressful for some and maintaining motivation for learning was difficult for many; some enjoyed the greater opportunities for self-directed learning; some faced difficulties related to social and family situations, or tech/digital arrangements at home; some schools and individual staff gave highly valued individualised support including for pupils identified as vulnerable prior to lockdown. Most young people talked about experiencing both negative and positive impacts. There were consistent and strong calls for increased levels of in-school support for lost learning and for mental health and wellbeing. This was seen as a responsibility for all school staff and a right for all young people.

Discussion

These findings raise important questions for current and future provision, for current and future policy and for the eventual achievements and outcomes for children and young people in school. The aim of the focus group interviews was largely exploratory and the data represents a snapshot in time. In this, it is important to acknowledge again that with a sample size of 45, and with data gathered from young people who cannot be said to fully represent all vulnerable students, and who, furthermore, were interviewed at one point in a uniquely challenging context, there are clear limits to generalisability. Nonetheless, the richness of the discussions, and the consistency of the messages from young people, about their own and others' experiences, deserve to be taken seriously.

These interviews gave insight into concerns about self and others in terms of pre-existing mental health conditions and general wellbeing, issues for those with additional learning needs, and young people living in households where there is hardship or violence and abuse, among others. They describe the many impacts of missing school, of the isolation of that first lockdown, of the cancellation of high stakes examinations, and local variability in levels of school support – both pastoral and pedagogical. The many examples young people gave of challenges and vulnerabilities, reveal their direct experience and understanding of how these different dimensions may interact, and give rise to serious negative consequences.

These young people also offer valuable insight into interventions which have the potential to address issues of mental health and wellbeing and to mitigate new and existing risks. These include calls for staff to offer explicit reassurance in relation to lost learning, a significant improvement in training for all school staff on mental health and well-being; specialised training for guidance / pastoral care teachers; structured opportunities and spaces for conversation, reflection, listening and sharing of experiences, concerns, questions; the provision of school counselling as a norm; expanded opportunities for peer support, for example through the wider introduction of mental health ambassadors; and better signposting to avenues of support beyond school. It could be argued that such structured support is long overdue, and that calls to respond to links between mental health issues, school connectedness should have been heeded before now. Earlier we referred to the work of the Harvard Achievement Gap Initiative (e.g. Ferguson et al. 2015) which provides convincing evidence that a sense of belonging to school increases motivation, engagement and achievement. Risks of poorer mental health in school, and associated with the social, political or educational issues outlined by e.g. Cole (2015) Tejerina-Arreal et al. (2020) and are known to increase when that sense of connection with school is lost, when relationships break down between home and school, staff and students, or between students and students. The work of Antonovsky (1979) reminds us that young people are more likely to thrive when they perceive their lives as comprehensible, manageable and meaningful. The potential costs of the pandemic for young people in education are not only individual, but also societal; personal but also social and economic, making efforts to tackle it necessary and urgent.

The Scottish Government published further guidance in June 2020; ‘Support for Learning; All our children and all their potential’ which addresses the ways in which such factors and risks can manifest in young people’s behaviour and relationships in school. Although it does not refer to Covid 19 *per se*, its stance on behaviour as communication is explicit;

‘Unmet needs and an inability to express intense, difficult feelings can result in a child or young person expressing these through verbal or physical aggression. This behaviour can be the consequence of a range of issues including, for example, tolerance levels for external stimulation or past or continuing traumatic experiences. The impact and reverberation of this on practitioners and professionals as well as children, young people and their families must be acknowledged’ (Scottish Government 2020b, 51).

The impact of the pandemic is likely to have long term and serious deleterious effects for some individual students, their families, local communities and society. This paper is driven by a concern that its impact is likely to further increase and intensify vulnerability, and that pre-existing and new risk factors may arise from school closures, isolation and lockdown.

Conclusion

Our concern is that the negative mental health impacts of the pandemic may be experienced more acutely and more severely by those young people already isolated or on the margins, and more

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vulnerable to risk. Our findings suggest that categories of risk have expanded as a result of the pandemic and that a policy response must acknowledge vulnerabilities and offer a long term funding commitment which enable schools to embed significantly strengthened system-wide support. As noted in the opening sections of this paper, Scottish Government (2020 a, b) has provided timely and explicit support for local authorities and schools with which to develop strategic planning and policy responses to the pandemic. A commitment to see all behaviour as communication, combined with recognition of the value of the insights to be gained from listening to young people themselves, offers a foundation for that support. Our concern is that the harm caused by missing out on school will be significantly accelerated and exacerbated for many individuals, families and communities already harmed deeply by the pandemic.

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