

**Exploring experiences and impact of the COVID-19  
pandemic on young racially minoritised people in the  
United Kingdom: A Qualitative Study**

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## **Abstract**

Within high-income-countries, the COVID-19 pandemic has disproportionately impacted people from racially minoritised backgrounds. There has been significant research interrogating the disparate impact of the virus, and recently, interest in the long-term implications of the global crisis on young people's mental health and wellbeing. However, less work explores the experiences of young people from racialised backgrounds as they navigate the pandemic, and the specific consequences this has for their mental health. Forty young people (age 16-25) from black, mixed and other minority backgrounds and living in London, participated in consecutive focus group discussions over a two-month period, to explore the impact of the pandemic on their lives and emotional wellbeing. Thematic analysis identified seven categories describing the impact of the pandemic, indicating: deepening of existing socioeconomic and emotional challenges; efforts to navigate racism and difference within the response; and survival strategies drawing on communal and individual resources. Young people also articulated visions for a future public health response which addressed gaps in current strategies. Findings point to the need to contextualize public health responses to the pandemic in line with the lived experiences of racialised young people. We specifically note the importance of long-term culturally and socio-politically relevant support interventions. Implications for policy and practice are discussed.

**Keywords (6 max):** COVID-19; young people; racial minorities; Public mental health; policy recommendations, support

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## 1.0 Introduction

People from historically marginalised communities, particularly those from groups who face exclusions specifically linked to race (racialised), have borne the greatest epidemiological, economic, social and psychological consequences of the COVID-19 pandemic [1-3]. While the social and emotional wellbeing of young people is of particular concern [4-5], available literature is rarely disaggregated by race or ethnicity. This limits our ability to fully understand differential and compounded impacts created by structural differences, which elevate the risk of adverse mental health outcomes for young people from racialised backgrounds. For example, studies have explored the impacts of the pandemic on young people from high-income-countries', mental health and wellness, in addition to investigating young people's perceptions of their government's response to the pandemic. A Portuguese survey exploring experiences of COVID-19 among people aged of 16 to 24, found that the stressors carried biological, psychological and social impacts [6]. A UK survey of 2,036 young people aged 13-25, identified that 80% of respondents reported a deterioration of their mental health statuses, and heightened feelings of anxiety and loneliness due to the COVID-19 pandemic [7]. Singh et al.'s [8] narrative review of studies exploring the mental health implications of COVID-19 and lockdowns on young people and adolescents suggested a series of factors leading to this vulnerability. These include: developmental age, educational status, pre-existing mental health conditions, proximity to economic deprivation, heightened challenges experienced by school-aged children and college-aged young people from lower-income backgrounds. In a rare study exploring disaggregated data, a survey exploring abuse and mental health across the UK during the pandemic found that the youngest participants (18-29) people from racially minoritised backgrounds

faced the most significant risks of experiencing abuse, self-harm and suicidal ideation [9].

Scholars point to how structural inequities have made people from racialised background more susceptible to the virus and its corresponding financial and social outcomes [1, 10-12]. For example, a US study explored the differences in racial and ethnic minorities' health experiences throughout the COVID-19 pandemic, finding they were more likely to have lost a job due to the pandemic, missed housing payments, faced food insecurity, and report higher feelings of anxiety [13].

Institutionalised exclusion and marginalisation have created a more volatile environment for racially minoritised people to weather this pandemic, both within the UK and across other high-income-countries. For example, protests against racist policing in the UK and the brutal murder of George Floyd by a Minneapolis police officer led to widespread attention of oppressive and racist policing practices facing racially marginalised people globally. In the UK, acknowledgement of oppressive and racist practices in policing forced many to confront their own heightened vulnerability to a new global health threat and its connections to long standing racism and systemic oppression [14].

A growing body of evidence highlights the negative impact that racialised experiences of everyday life have on health outcomes for adults from racially minoritised backgrounds [15-17]. However, there is limited literature exploring the mental experiences of young people from these communities and its connections to deepening precarity and mental health consequences. Our work contributes to this gap, through exploring the following research questions: *How have young people*

*from racially minoritized communities been affected by the pandemic? How does this relate to their emotional wellbeing, and how do they cope with these new sets of challenges? And, importantly, how can programmes better support their needs?* Our work is framed by a non-medicalised framing of mental distress, in order to maintain an emphasis on the downstream factors and symptoms that may lead to the development of poor mental health outcomes in the future [18].

## **2.0 Methods**

### ***2.1 Research design and setting***

We used qualitative research methods to explore the perspectives and experiences of COVID-19 and initial lockdown period in the UK, among young people aged 16-25 from racially minoritised backgrounds living in London. A repeated focus group design was conducted over eight weeks to explore young people's experiences, perceptions of the response, and coping strategies amidst the pandemic. The design emphasized a strength-based exploration, which counters a deficits-based approach by interrogating resilience and survival within communities in the face of socio-political stressors. Strength-based exploration has proven to be a valuable platform for supporting development of more meaningful health programs and enabling environments [19-21].

The study was informed by co-design [22], working in partnership with Wandsworth Community Empowerment Network's (WCEN) Black Minds Matter (BMM) collective; a London based youth activist organisation committed to advocating for and improving young racially minoritised people's mental health and wellbeing. Peer facilitators [BMM members aged 20-30] contributed across the life of the project, informing the research design, collection and analysis of data as part of the research

team. Methods and analysis are reported in accordance with the consolidated criteria for reporting qualitative research (COREQ) guidelines [23].

## **2.2 Participants and sampling**

Ethical approval was provided by the corresponding authors' institution (Project ID 16127/003). Forty participants between the ages of 16 to 25 were recruited to two cohorts, broken into three age categories (16-17; 18-20; 21-25). In cohort 1, participants were purposively sampled from within the WCEN BMM collective, to ensure an existing level of trust between participants and researchers given the nature of the topics being explored. The second cohort were identified through snowballing sampling methods, recruiting from additional youth organisations in London linked to WCEN. Peer facilitators were members with connections these organisations. Demographic details are presented in Table 1.

Table 1. Participant's Demographics

<b>Characteristics</b>		<i>N (%)</i>
	Total Participants	40 (100%)
<b>Race/Ethnicity</b>		
	Black African and or Black Caribbean	35 (87.5%)
	Mixed Ethnicity	2 (5%)
	South Asian	3 (7.5%)
<b>Gender Identity</b>		
	Female	32 (80%)
	Male	8 (20%)
<b>Age</b>		
	16-17	10 (25%)
	18-20	20 (50%)
	21-25	10 (25%)
<b>Education</b>		
	College*	23 (57.5%)
	Undergraduate/ University	12 (30%)
	Postgraduate/ Masters	5 (12.5%)
<b>First Half of Postcode [IMD decile index*]</b>		
<b>Postcodes within Greater London area</b>	2 <sup>nd</sup> decile [N17]	1 (2.5%)
	3 <sup>rd</sup> decile [SE2, SE6, SE8, SW9, RM8]	8 (20%)

	4 <sup>th</sup> decile [SE1, SE5, SW2, SW8, CR0, CR7, BN2]	12 (30%)
	5 <sup>th</sup> decile [SW6, CR4]	5 (12.5%)
	6 <sup>th</sup> decile [SW1]	10 (25%)
	9 <sup>th</sup> decile [TW2]	1 (2.5%)
<b>Postcodes outside of Greater London area</b>	8 <sup>th</sup> decile [BR2]	1 (2.5%)
	9 <sup>th</sup> decile [AL4]	2 (5%)

\* College in the UK meaning, the preliminary schooling that people may do in preparation for an Undergraduate degree at a University, and or where people can learn vocational skills

\*\* Index of Multiple Deprivation (IMD) decile index is how relative deprivation is measured in England [24]. The British Ministry of Housing Communities & Local Government calculates IMD scores annually, within deciles ranging Lower-layer super output area (LSOA) or neighbourhood scores from 1, being least deprived, to 10, being most deprived. The IMD scores are the most current published data and are from 2019 [25]. For this research, the IMD scores presented were calculated by averaging all of the IMD scores from the first half of participants' postcodes within the local authorities.

Recruitment was conducted by email and telephone discussions, and handled by the WCEN project manager, who was also available to answer any research queries. All participants were informed of the benefits and potential risks of participating in this study, given participant information sheets regarding the study, and signed informed consent forms electronically given remote data collection strategies in place due to the pandemic. Consent was re-affirmed verbally at the start of each discussion group.

### **2.3 Data Collection**

Focus groups were organised by age (see table 2) to account for differences in life circumstances of adolescents and young people. Facilitators worked in pairs to run each group; combining an academic or senior staff of WCEN member, with one of our peer facilitators. All groups were trained on the data collection protocol (topic guides, ethical protocols) by RAB. Sessions were facilitated using a topic guide, exploring participants' experiences and perspectives of COVID-19 and government's response, coping strategies, and planning for how policy and communication could be improved to better support young people from these backgrounds. The topic guides were drafted by RAB and revised following discussions with peer facilitators, given their proximity to the experiences being explored in the guides.

Each group met four times, fortnightly over eight weeks. Facilitators reminded participants during each focus group meeting of their right to withdraw from the study. The focus group discussions were held on zoom on an institutional account, were audio recorded and lasted average of 60 minutes. During each focus group discussion, facilitators were given a link to a password-protected, live Google document that allowed for anonymous editing. Participants were invited to anonymously populate the Google document with their answers if they felt uncomfortable sharing feelings verbally in the groups.

Table 2. Age demographic focus group section assignment by recruitment cohort

		Age Group	Number of Participants Enrolled
Cohort 1	Group 1	21-25	5
	Group 2	18-20	5
	Group 3	16-17	5
	Group 4	16-17	5
Cohort 2	Group 5	18-20	4
	Group 6	18-20	5
	Group 7	18-20	6
	Group 8	21-25	5

## 2.4 Analysis

Each group (n=8) met four times, resulting in 36 total focus group discussions (FGD). In this study we focus on 24 FGDs that explored topics most pertinent to our study questions (impact of the pandemic and desires for public mental health policy). Of these FGDs, 20 audio recordings were transcribed verbatim by NK. Four recordings were not clear enough for transcription purposes and google documents for these groups were used instead. All participants were anonymised at point of transcription. Microsoft excel was used to organize and manage data. Data was analysed iteratively using of Braun and Clarke's [26] thematic analysis method, following all six steps: (1) familiarisation with data; (2) generation of initial



codes; (3) searching for themes; (4) reviewing the themes; (5) defining and naming themes; and lastly (6) producing the final report. A group analysis was coordinated to ensure the full involvement of young people throughout.

RAB and NK familiarised themselves with all of the focus group transcripts, analysing them by age cohorts to explore cross cutting themes. Each independently coded a set of FGDs (NK: 16-17, RAB: 21-25), then devised an initial structure of a coding framework to organise data driven codes using six categories loosely guided by the topic guides. Transcripts from the 18-20 cohort were distributed to peer facilitators and senior facilitators, who independently coded and identified data driven codes. A team analysis meeting created a bottom-up framework, and which was cross-checked with the initial framework developed by RAB and NK. After refinement a seventh category was created based. NK verified the more detailed themes and categories, by re-reading a selection of transcripts applying the final coding framework. No changes were made. The coding framework was approved by the research team, and a summary of findings was shared with participants, to check the validity of our claims [26-30]. Peer researchers also verified the initial draft of the results section, to reach consensus about the major findings and potential implications of the work. This approach further reduced barriers for peer researchers' engagement in the breadth of the academic process [31-32].

### **3.0 Results**

Analysis produced seven categories which described the impact of and efforts to manage the pandemic by young people: (1) socioeconomic challenges: deepening current burdens and future instability, (2) emotional challenges: disruptions to life and fears of the future, (3) government's response: too much too soon and lack of

clarity, (4) navigating racism and difference during the pandemic response, (5) survival during crisis: finding the new you in this new situation, (6) community: transitions, successes, and spirit, and (7) visions for a future response.

### **3.1 Socioeconomic challenges: current burdens and future instability**

The socioeconomic challenges faced by young people were consistent across all age cohorts, specifically the experiences of financial insecurity. Parents had lost income, and young people had also lost work, increasing feelings of precarity. Concerns were intensified as government policies seemed to create new financial strain on their lives. For example the potential loss of access to subsidised travel for children under 18 in London was frequently discussed, with one participant stating:

It's a lot. It's like over a pound when I get on the bus, so I really put on like seven pounds on if I'm like going different- if I'm taking different busses. They still have the cap, I think. But it's just stress. I can't be bothered to get on the bus anymore because I have to pay. (*Focus Group 4, 16-17-year-old*)

Many worried about how this would affect their ability to move around the city, which would have knock-on consequences for other issues, such as schooling or engaging in employment. Participants also expressed insecurity about the future, highlighting frustration regarding the lack of job opportunities available, and the impact this would have on their future, as many relied on the industries that were most disrupted by the pandemic:

Another thing is, um, I was looking for part-time jobs during the pandemic, which is really stupid, but I still wanted to try so like when they reopen. Hopefully I get a job or something like that. I can't remember who said it, but one of the MPs - I'm not sure if he's a MP, but they said that they would increase more jobs for young people, especially those under 18. And I trusted them and it's not working. I don't see any jobs for us. (*Group 4, 16-17-year-old*)

### **3.2 Emotional challenges: disruptions to life and fears of the future**

In addition to distress from expected consequences, such as grief related to covid-related deaths among family, and missing friends and relationships, participants noted specific emotional challenges that they attributed to government management of the pandemic. These linked to new worries about school, stark changes to routines and uncertainty as the UK eased out of its first lockdown in July 2020. Young people across all age groups struggled with deepening of existing or the emergence of new mental health difficulties as a result – most notably anxiety. For younger participants specifically, unclear communication regarding school caused stress and anxiety, as noted by one young person: *'I feel like the closer we get to September the more anxious I get because I don't know like I have no idea what's gonna happen next year.'* (Group 4, 16-17-year-old). Changes to routine established emotional challenges as highlighted by the anxiety felt by the absence of a routine, and the difficulties participants had in managing time is illustrated below:

....It's like quite hard to adjust, especially since I was expecting school to like, come back the next month. I was like, it's not that bad. I'll just wait for school to come back. And it wasn't ever - well it's gonna come back, [but] it seemed like it wasn't ever coming back because I was just like, I don't know what to do.... I'm like, Okay, what do I do? (Group 3, 16-17-year-old)

As the country began to ease out of the first lockdown in Summer 2020, participants worried that their social skills had been negatively impacted during isolation. They noted anxiety about reintegrating into the outside world, as lockdown restrictions were lifted, as illustrated in the following quote:

I feel like after corona and everything was announced and being locked in your house for so long... and then you go out- like for me personally... to be out for longer just would make me feel uncomfortable. Like I'd start feeling like I'd about to have an anxiety attack. Just because

I don't really know... you hear so much about what's going on and how bad it is... It makes me worry more than I'm used to. (Group 7, 18-20-year-old)

### **3.3 The government's response: lack of clarity, and too much too soon**

Across all age groups, participants' perceptions of the government's response reflected feelings of frustration and disappointment. Beyond their distress at the loss of their 'normal' way of life, many felt that the government had misread the scale of the impact of the lockdown and virus on their lives. For example:

And I was just like these guys have really got their lives on hold. Thinking that one day things will eventually like go back to normal. And the government is just going to be like alright yeah that's enough. Everyone go back to what you were doing before. And I was just realizing that too much has changed for that to happen. For everything to just go back. Like it's gotten to a point where even if the virus like disappears off the face of the Earth. Things are not just going to return to normal. Like too much has changed. The economy has been impacted too much. People's way of lives have been impacted. (Group 5, 18-20-year-old)

Additionally participants expressed frustrations regarding the UK government's handling of the pandemic and its impact on their emotional state. *'But um I feel like, maybe specific to the UK, it wasn't handled well. So the sense of panic was kind of amplified.'* (Focus Group 5, 18-20-year-old). At the heart of this, was concern about poor government communication, disagreeing with the UK response, particularly lockdown policies:

But we've treated it as like, this unknown force of nature, that's gonna wipe out half the population. And now, like, the approach - and that approach has just ruined a lot of people's lives and set a lot of people back many years, months, whatever. (Group 5, 18-20-year-old)

Young people also felt they were excluded from government COVID-related messaging, expressing frustration at being blamed for increases in cases, or systematic vulnerability to the virus:

I feel like, I don't wanna say the government doesn't care about us. But ... I feel like young people are not a priority in the government's mind right now. Because even like, when you go for information there's nothing tailored for, for young people. (*Focus Group 5, 18-20-year-old*)

This was compounded by their experiences of race related marginalisation within the response strategy. Participants across all age groups were acutely aware that people from Black and other minority groups were not only more vulnerable, but simultaneously being blamed for that vulnerability and the poorer outcomes within their communities. For example:

'Well....they kind of blame the BAME community for not taking COVID seriously, when it's hitting us the most.' (Group 3, 16-17-year-old).

But still, I think there could have been a lot more clear, um, guidelines like even just in the past few months, when the government is encouraging a lot of young people and in particular, to go out and make use of the eat out, help out scheme. And they were encouraging that. And then within a matter of weeks, they're now blaming young people, because the rates have been going up, so it's such a contradiction, and I think they're just looking for a scapegoat. And unfortunately, young people have become that scapegoat. Because they're sending everyone back to school, sending everyone back to universities, but and then blaming them. So, I don't know what message they're trying to send out at the moment. But I don't think it's clear. (*Group 7, 18-20-year-old*)

### ***3.4 Navigating racism and difference during the pandemic response***

As alluded to in the above theme, young people felt that there were racialized dynamics that deepened the psychological burden and impact of the pandemic in their lives. For example, young people described the dilemma that they faced as the Black Lives Matter movement surged in summer months; balancing a desire, and drive to participate in protests seeking to change their lives, alongside anxiety about their increased vulnerability to COVID-19:

I was just saying that I think like, that's a dilemma a lot of Black people face because even I remember when I was going to the protest, my sister was like, I really, really want to go. My sister's that has type one diabetes, and she was just like, 'I'll be risking my life'. And I was like, I don't think it's like, pro-Black to risk your life. I just think your Blackness is not defined by if you went to a protest, or if you even signed the petition, but like, like the fact that you're living and just doing what you want to do, and having that autonomy. That's what we all want to do. *(Group 1, 21-25-year-old)*

Young people across age groups were sensitive to the mental health challenges they faced as a result of the pandemic. However, a desire to act on these issues often intersected with stigma related to mental health services held by older generations in their households. It is important to note that many participants consciously rejected stigma held by their elders, but noted the difficulties faced in accessing services more widely in their communities, as exemplified within this conversation:

Participant 2: Because they're (community elders) thinking 'There's nothing wrong with me. What? What are you talking about?' But it's like, they hear they hear certain words and obviously the stigma around it. So it's gonna be a negative connotation. Like, it's just 9 times out of 10 it's just a prevention thing.

Participant 3: Yeah. And I think there's the thing like, historically, the help hasn't been there, like there has been no help to access. So it was sort of like, you have to be okay. Because you have no choice.

Participant 2: Yeah.

Participant 3: And that was instilled in people. So now even though the help is there, because we're so used to um people, like, what not having our best interest at heart, we choose not to use it. *(Group 2, 18-20-year-olds)*

Young people, particularly in older age groups, had a sense that their communities had been consistently left behind and overlooked by governments, and that the

pandemic enabled much of the same to continue. As powerfully stated by one young person:

I'm fed up [with] thinking they're (*the government*) going to help - they're not going to help. They don't care, we are not a priority to them, they have their own people, and they don't care. Yeah. (*Group 1, 21-25-year-old*)

In addition, many felt that the health communication strategies in place were ill-suited to their specific age, ethnic and cultural contexts. Among 16-17 age cohort in particular, it was felt that cultural and age representation was essential to ensure young people trusted the source of the information, which would contribute to their willingness to act on it.

Like, if you get an adult, the answer is not going to be able to relate to them. youngsters are like, I'm, I'm 17, you're, you're 27. How am I meant to relate to you? Like you're giving me this information, but it's not going to help me because look at you and look at me. (*Group 3, 16-17-year-old*)

### ***3.5 Survival during crisis: finding the new you in this new situation***

Participants described a range of new self-care strategies, defined broadly by all age groups as intentional practice that privileges and supports their physical and mental wellbeing.

Yeah I just wanted to stay healthy, you know. And I just wanted to be - just collect, look after myself in a sense. Self-care. (*Group 6, 18-20-year-old*)

Um, I would just say focusing on myself more, okay. Just relaxing, making sure that I'm mentally okay. (*Group 6, 18-20-year-old*)

Participants engaged in activities such as Yoga, listening to music, and spending a lot of time online. Some participants expressed their enjoyment of the increased free time they had as an unintentional outcome of the lockdown, stating:

I'm really, I'm really enjoying that. It's just like sleeping when you want, waking up when you want. Just doing a couple of things from your bed, it's just like I am really enjoying that time because I know I'm not going to get that again. And I think I'm just really enjoying taking the time for myself. *(Group 5, 18-20-year-old)*

### **3.6 Community: transitions, successes, and spirit**

Participants highlighted the role of communities in accommodating systemic neglect and establishing new modes of communication and engagement during and after the lockdown. Young people indicated how social media has become a site for community engagement and acknowledged their contributions to supporting other community members during this crisis.

Analysis highlighted a pointed frustration toward the government's disregard for their communities noting that survival and community systems often needed to fill the gaps left by institutions, as illustrated below:

Um, I feel like if I left it to the government? No, definitely not. I know, I'm opening a youth club. So, I don't, I'm not worried about them. But if I left it to them, no, no, they're not worried about our problems. Our problems are our problems, and they need to be dealt with by us. In their eyes. *(Group 1, 21-25-year-old)*

Participants noted the heightened importance and power of community in their lives during the pandemic. They highlighted expansion of existing support and developments of new relationships and scaffolding that had not previously existed, to respond to personal, financial and social emergencies faced by the community:

During the lockdown time and my neighbours had a church group, and they were giving out money. Well not giving out money. They were paying people's rent fines, like things that people couldn't afford bills, and stuff like that. They supported me a bit during lockdown. *(Group 1, 21-25-year-old)*



Throughout periods of prolonged physical isolation, how young people gather and engage with their communities has evolved to meet the moment. Analysis highlighted how young people turned to social platforms, as a new stie for community engagement during lockdown, as highlighted: *'I watch a lot of YouTube so I like the content coming out I feel like because like everyone's indoors um I feel like there's more community base as well.'* (Group 5, 18-20-year-old).

Analysis highlighted that young people were aware of their capacity to work individually and collectively for change. During the pandemic, young people's awareness of their role within their communities were amplified, and they began to shift their actions, through checking in with others and joining online communities. and supporting neighbours or those viewed as vulnerable. For example, a participant who worked at a primary school shared their duty to ensure their stresses from the pandemic, and concurrent protests did not impact younger children they supported:

But being in that environment, I have to put their problems before mine because obviously if I come in with a negative energy and like they can see, I'm not really feeling like as positive as I should be as someone they're meant to be like, looking to for help. I just didn't want to be that person to like, bring them down even more. (Group 2, 18-20-year-old)

The quote above highlights the duty shared by young people, as their concern for the difficulties wider community members have faced manifests as a responsibility to safeguard them, specifically from the amplified mental health difficulties throughout the COVID-19 crisis.

### **3.7 Visions for a future response**

Our research also gave participants the opportunity to reflect on a new vision for future public health and public mental health responses to the pandemic.

Perspectives varied between groups. For the youngest cohort, ages 16-17,

Participants expressed appreciation for the platform provided by this research itself, and desires for peer-led COVID support groups, as they valued the opportunity to discuss their challenges with peers who have had similar experiences.

I said it in the previous sessions... a discussion group like this, it says, because it allows young people to kind of talk to each other about how they feel, instead of just holding it in. And just like, everyone can share their experience with each other. And then if you hear that someone's experiences similar to yours, you won't feel that lonely anymore. So, something like this, it doesn't even have to be like a massive thing to just be with like, group for people. I just something like even in a place or an environment I like...we'll just talk to each other about how you feel and how you're coping with things. *(Group 3, 16-17-year-old)*

This cohort also suggested that the government could improve communications about the pandemic with young people, by stressing a logic of care, and the importance of feeling like they connect with the speaker, as highlighted by the following quote:

Maybe it's a young professional, basically giving the message out, because when it's like an older white person giving me news, I don't know, just. So maybe if there's like a young person, you'd be able to trust them more kind of take more seriously. And it's like, a person that seems like they genuinely care. Because I feel like a lot of the times people just say it because not as they don't care. But it's just like, if a young professional, just the person that seems like they genuinely care about you, and your well-being lots of people will be more interested in what they're saying. It doesn't even have to be a young professional, just a professional that seems to care about you. *(Group 3, 16-17-year-old)*

The two older cohorts felt strongly that the government could improve its response by backing organizations and projects led locally by typically minoritised community members. In addition to arguing that young people should be involved in establishing communication strategies, participants within the oldest cohort highlighted the enhance ongoing work already being done within minoritised communities:

But maybe just amplify like, some of like the services that are already there... a lot of the mental health services and like services that are made by us like there's so many people who are have got great youth projects, who've got like mentorship projects for Black children. And I feel like they're not amplified enough. Like maybe in our community they are. But they're not on the BBC, they're not on like the NHS website. Like, I feel like the government needs to amplify people who are already doing the work. Because there's a lot of people that are actually doing this work, and doing it last specifically for Black children. So, I feel like those voices definitely need to be amplified. *(Group 1, 21-25-year-old)*

Lastly, all age groups agreed on the importance for compassion from systems they engage in. The youngest cohort (ages 16-17) asked for patience while navigating the pandemic and expectations for their school performance.

I think now that we're going back to school, I think there should be more. I don't know how to describe it, but like, a bit more understanding for young people because like for, for us, like I've made for myself, as soon as we go back to school, there's like our mocks are coming up. And it's understandable because we did miss out on doing our mocks, but I just feel like, there should be more understanding that young people are missing conditions at school. Like some people can't replicate that working environment at home. So, to be more understanding, and like, maybe take off some of the pressure that is when young people, because we did miss out on a lot. And we had to go through, like a very rough time. *(Group 3, 16-17-year-old)*

The oldest cohort expressed concern for the difficulties faced by young people, noting the potential impacts of these compounded struggles, and the need for action to mitigate this

I think we are resilient people, but I just feel like these younger people, like, their resilience is unmatched, because they're literally doing stuff that they shouldn't have to do. Um, and also society's just harder for them. Like, they're gonna now pay to go to school, like, what is that? I mean, like, you can't even have free travel. And it feels like so small, but it's such a big thing. *(Group 1, 21-25-year-old)*

#### **4.0 Discussion**

Through a series of focus group discussions with young people in London from racially minoritised backgrounds, our study highlights the intersections of existing and historical exclusions faced by their communities and how the pandemic's worsening of those realities, created frustrations and distress.

Young people spoke specifically about loss of opportunities for income generation, and how this potentially shaped their futures, as the central concern in relation to socio-economic realities. Many participants in our study are from deprived backgrounds, which have been among the hardest hit during the pandemic. Many continued to search for work, despite the disappearance of sectors where jobs normally existed. The newly developed anxieties and emotional distress linked to the loss of these opportunities poses a particular mental health concern for this group of young people, as recent evidence from Sweden indicates that employment precarity is a key social determinant shaping the development of mental health problems in previously healthy young people [33]. Given that many young black people face exclusion from appropriate mental health services in the UK[34], creating and cementing new pathways is concerning.

Participants in this study also indicated the compounded difficulties of navigating the pandemic when negotiating their identity linked to their marginalised status. Many spoke of the ways in which their wellbeing was hindered by the push and pull of systems that simultaneously identified them as vulnerable, then blamed them for that vulnerability, and wider demands to be seen as protesting against the factors that drive their vulnerability. Consensus from work in other high-income settings like

the UK, which supports their experiences, noting the amplification of vulnerability faced by racialised minorities, particularly with regards to the mental health of Black people [35-37]. Our study's findings contribute to this literature, emphasising the specific difficulties facing *young* Black people. This is significant, as these encounters are the starting point of a life-long exposure to the psychological pressures of paradoxical decisions that risk wellbeing on the one hand, in order to fight for access to rights, justice and change in their communities on the other. Recent work by Wakeel and Njoku [38] in the US, notes that these challenges occur across the life span, contributing to weathering of various aspects of health, including mental health. The compounding pressures of the pandemic and protests to end anti-black racism among our participants forms a clear pathway to deepening mental health challenges of young people from racialised backgrounds, as the constant flow of information affirms Black people's proximity to mortality, creating an additional burden that young Black people are forced to navigate [39-40].

However, in addition to these difficulties, there were consistent accounts of self-care across the cohorts. Increasing such positive health behaviours has been supported by studies in other European contexts, such as in Portugal where Branquinho et al. [6] found that many young people enjoyed the free time they experienced due to lockdowns, as it created the time for personal development. Specifically, participants in our study described new habits such as meditation or exercising to keep physically and mentally well, which has been noted as beneficial to managing stressors caused by the crisis elsewhere in Europe [41-44]. As such, these strategies emerge as a starting point for expanding future public health strategies linked to the pandemic. However, we argue the need for these supports to be extended into the long term – as noted by many young people in our study, the

impacts of the pandemic have changed the landscapes of their lives for the long term. The need to manage stressors will not be addressed by brief one-off interventions, and will likely require provision of structural and other economic resources to enable meaningful participation. This goes beyond free/low-cost services, but thinking about related incidental costs, such as travel, which has been suggested as critical to securing good mental health in a post-pandemic UK [45]

#### ***4.1 Study implications and limitations***

The pandemic has driven many researchers into online data collection, in response to social distancing guidelines. However, for participants in our study, connectivity issues and access to mobile data occasionally limited the ability of participants from the most marginalized backgrounds to participate in our study, which at times affected attendance. We tried to account for this in advance, by conducting a longitudinal design, to increase chances for engagement. Furthermore, the online groups meant that audio recording from within laptops varied at times being inaudible or not recording at all (n=4). The inclusion of google docs made for a useful backup and highlights the value of triangulating methods within online qualitative studies.

The methodology used gave young people a chance to share and explore what they were feeling and experiencing, by acknowledging and reaffirming their pandemic experiences, and sharing strategies they used to navigate the crisis. This points to the value of research methods that are interested in paradigms of transformation – noting the importance of orientations and methods that acknowledge young people's capacity for survival and positions them as experts in their own right [46].

Table 3. From struggles to solutions – recommendations to support emotional wellbeing of young Black and minority young people in during and post-pandemic

Category	Code	Impact	Recommendations
<b>1. Socioeconomic challenges: current burdens and future instability</b>	<ul style="list-style-type: none"> <li>Insecurity about future</li> </ul>	<ul style="list-style-type: none"> <li><i>Interruption of school &amp; concerns of school progression</i></li> <li><i>Feeling lost and stuck</i></li> <li><i>Uncertainty about getting securing employment</i></li> </ul>	<ul style="list-style-type: none"> <li>Maintain financial support for families</li> <li>Protecting work/internship schemes for vulnerable young people from hard hit communities</li> </ul>
<b>2. Emotional challenges: disruptions to life and fears of the future</b>	<ul style="list-style-type: none"> <li>Mental health conditions and emotional wellbeing</li> </ul>	<ul style="list-style-type: none"> <li><i>Impact of isolation on mental health</i></li> <li><i>Stress from school</i></li> <li><i>Stress from changes to routine</i></li> <li><i>Stress and anxiety from the UK easing out of the first lockdown in July 2020</i></li> <li><i>Concerns of social skills being negatively impacted from prolonged isolation</i></li> </ul>	<ul style="list-style-type: none"> <li>Online peer support networks connecting young people in regular conversations</li> <li>Staged transitions back to the 'real world' as young people reengage with wider communities</li> <li>Support for schools to manage increased anxiety among young people about their futures</li> </ul>
<b>3. The governments response: too much too soon and lack of clarity</b>	<ul style="list-style-type: none"> <li>Feeling excluded from government messaging and approach</li> </ul>	<ul style="list-style-type: none"> <li><i>Government's approach to the pandemic caused a loss of 'normal' way of life</i></li> <li><i>Government messaging was not tailored and inaccessible</i></li> <li><i>Not surprised at perceived government failings from government's reputation of being uncaring</i></li> </ul>	<ul style="list-style-type: none"> <li>Giving young people ownership over health messaging to ensure that it is targeted to their needs</li> </ul>
<b>4. Navigating racism and difference during the pandemic response</b>	<ul style="list-style-type: none"> <li>Psychological burden of negotiating racial minoritised identity</li> </ul>	<ul style="list-style-type: none"> <li><i>Lockdown gave time to reflect on struggles within their communities</i></li> <li><i>Importance of representation (e.g. similar age, race/ethnicity, socioeconomic background) when accessing support services and interpreting messaging</i></li> </ul>	<ul style="list-style-type: none"> <li>Including young people in design of racially sensitive communications around the pandemic</li> </ul>
<b>5. Survival during crisis: finding the new you in this new situation</b>	<ul style="list-style-type: none"> <li>Finding joy within lockdown</li> </ul>	<ul style="list-style-type: none"> <li><i>Creative ways to find joy amidst crisis</i></li> <li><i>Prioritisation of self-care practices</i></li> <li><i>Adoption of new hobbies and habits</i></li> </ul>	<ul style="list-style-type: none"> <li>Reducing barriers to access self-help support for young people (i.e – free data packages for vulnerable households)</li> </ul>
<b>6. Community transitions, successes and spirit</b>	<ul style="list-style-type: none"> <li>Community evolution from pandemic</li> </ul>	<ul style="list-style-type: none"> <li><i>Community filling gaps left by government failings</i></li> </ul>	<ul style="list-style-type: none"> <li>Funding and financial support for local community organisations responding to pandemic</li> </ul>

In table three, we summarise our six areas of importance highlighted by young people, alongside recommendations that flow from their calls for action raised within discussions.

Overall, participants communicated feelings of being overlooked and excluded from the government's response to the virus. As messages and services are not generally tailored for young people, participants emphasised the need to develop bespoke messaging for young people to communicate similar information as that which was given to the adult population. Government and public health officials should cultivate a youth-friendly messaging stream to release critical information and changes to the rules, as a significant component of society felt excluded, forgotten, frustrated and anxious during initial stages of the pandemic. Consequently, visions for future public health responses reflected a desire for compassion from wider institutions in light of the difficulties that they experience pre- and post-pandemic. We suggest that systems can best show compassion for the pressures on young people's lives, by responding not just to emotional distress, but the social and political drivers of uncertainty in their lives; protecting jobs and internship schemes, increasing financial resources to vulnerable households and reducing as many economic barriers to participating in social life as we reopen society and communities.

## **4.2 Conclusion**

Young people from minoritised backgrounds are a continued focus of social welfare interventions, often designed on their behalf. Within these efforts, we often fail to recognise their continued survival in the face of adversity, as a process that makes them experts in their own right.

Alongside young co-researchers, this study sought to understand how the pandemic affected young people from racialized backgrounds. Through a repeated measure



focus group design, we explored how young people's mental health and well-being were affected by the pandemic and related policy, highlighting barriers and coping strategies and solutions. While participants in the study expressed frustration with the government messages, which were consistently identified as unclear and unfairly targeted, they illuminated survival mechanisms and practised self-care to cope during the pandemic. Importantly, they had clear accounts of what needed to be done to make messaging and responses better suited to their needs; highlighting the importance of establishing online peer-support groups, and financial backing for local community-based and -led strategies targeting the COVID-19 pandemic and related emotional and social struggles. It is our hope that this work amplifies young people's ongoing experiences of the pandemic and enables explicit responses from wider systems in the face of an ongoing crisis, for those hardest hit.

#### **4.3 Declaration of Competing Interests**

The authors declare no conflict of interest regarding the research, authorship, and publication of this article.

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#### **Authors and Contributions**

**Rochelle Ann Burgess (RAB):** conceptualisation, methodology, formal analysis, supervision, writing- original draft, writing- reviewing & editing. **Nancy Kanu (NK):** methodology, project management, investigation, formal analysis, writing- original

draft, writing- reviewing & editing. **Tanya Matthews (TM)**: project management, investigation, formal analysis, writing-reviewing & editing. **Owen Mukotekwa (OM)**: project management, investigation. **Amina Smith-Gul (ASG)**: investigation, formal analysis. **Intisar Yusuf (IY)**: investigation, formal analysis. **Isabella Lamptey**: investigation, formal analysis, writing- reviewing & editing **Nyisha McCauley (NM)**: investigation, formal analysis, writing- reviewing & editing. **Renae Wilson (RW)**: investigation, formal analysis, writing- reviewing & editing. **Michael Pirsola (MP)**: investigation, formal analysis, writing- reviewing & editing. **Malik Gul (MG)**: conceptualisation, supervision, writing- reviewing & editing. **Data Verification**: The data has been verified by all authors.

## References

1. Bentley GR. Don't blame the BAME: Ethnic and structural inequalities in susceptibilities to COVID-19. *American journal of human biology*. 2020;32(5):e23478-n/a.
2. Burgess RA, Osborne RH, Yongabi KA, Greenhalgh T, Gurdasani D, Kang G, et al. The COVID-19 vaccines rush: participatory community engagement matters more than ever. *The Lancet*. 2020;397(10268):8-10.
3. Lund EM. Even more to handle: Additional sources of stress and trauma for clients from marginalized racial and ethnic groups in the United States during the COVID-19 pandemic. *Counselling Psychology Quarterly*. 2020:1-10.
4. Wright L, Steptoe A, Fancourt D. How are adversities during COVID-19 affecting mental health? Differential associations for worries and experiences and implications for policy. medRxiv. 2020.
5. United Nations Population Fund. Adolescents and Young People & Coronavirus Disease (COVID-19): Coronavirus Disease (COVID-19) Preparedness and Response UNFPA Interim Technical Brief; 2020 [Available from: [https://www.unfpa.org/sites/default/files/resource-pdf/COVID-19\\_Preparedness\\_and\\_Response\\_-\\_UNFPA\\_Interim\\_Technical\\_Briefs\\_Adolescents\\_and\\_Young\\_People\\_23\\_March\\_2020.pdf](https://www.unfpa.org/sites/default/files/resource-pdf/COVID-19_Preparedness_and_Response_-_UNFPA_Interim_Technical_Briefs_Adolescents_and_Young_People_23_March_2020.pdf)].
6. Branquinho C, Kelly C, Arevalo LC, Santos A, Gaspar de Matos M. "Hey, we also have something to say": A qualitative study of Portuguese adolescents' and young people's experiences under COVID-19. *Journal of community psychology*. 2020;48(8):2740-52.
7. YoungMinds. Coronavirus: Impact on young people with mental health needs Survey 2: Summer 2020. YoungMinds; 2020.
8. Singh S, Roy D, Sinha K, Parveen S, Sharma G, Joshi G. Impact of COVID-19 and lockdown on mental health of children and adolescents: A narrative review with recommendations. *Psychiatry Res*. 2020;293:113429-.
9. Iob E, Steptoe A, Fancourt D. Abuse, self-harm and suicidal ideation in the UK during the COVID-19 pandemic. *The British Journal of Psychiatry*. 2020;217(4):543-6.
10. Bhala N, Curry G, Martineau AR, Agyemang C, Bhopal R. Sharpening the global focus on ethnicity and race in the time of COVID-19. *The Lancet*. 2020;395(10238):1673-6.
11. Aldridge RW, Lewer D, Katikireddi SV, Mathur R, Pathak N, Burns R, et al. Black, Asian and Minority Ethnic groups in England are at increased risk of death from COVID-19: indirect standardisation of NHS mortality data. Wellcome open research. 2020;5.
12. Farmer P. On Suffering and Structural Violence: A View from Below. *Daedalus*. 1996;125(1):261-83.
13. El-Mohandes A, Ratzan SC, Rauh L, Ngo V, Rabin K, Kimball S, et al. COVID-19: A Barometer for Social Justice in New York City. *American Journal of Public Health*. 2020;110(11):1656-8.
14. Joseph-Salisbury R, Connelly L, Wangari-Jones P. "The UK is not innocent": Black Lives Matter, policing and abolition in the UK. *Equality, Diversity and Inclusion: An International Journal*. 2020;40(1):21-8.

15. DeVylder J, Fedina L, Link B. Impact of Police Violence on Mental Health: A Theoretical Framework. *American journal of public health* (1971). 2020;110(11):1704-10.
16. Music G. Covid, racism and Black Lives Matter: A deadly constellation. *Developmental child welfare*. 2020;2(3):197-207.
17. Williams DR, Lawrence JA, Davis BA. Racism and Health: Evidence and Needed Research. *Annual review of public health*. 2019;40(1):105-25.
18. Garcia JA, Sanchez GR, Sanchez-Youngman S, Vargas ED, Ybarra VD. RACE AS LIVED EXPERIENCE: The Impact of Multi-Dimensional Measures of Race/Ethnicity on the Self-Reported Health Status of Latinos. *Du Bois review*. 2015;12(2):349-73.
19. McGorry PD, Hartmann JA, Spooner R, Nelson B. Beyond the “at risk mental state” concept: transitioning to transdiagnostic psychiatry. *World Psychiatry*. 2018;17(2):133-42.
20. Williams DR, Lawrence JA, Davis BA, Vu C. Understanding how discrimination can affect health. *Health services research*. 2019;54(S2):1374-88.
21. Richards M, Romero E, Deane K, Carey D, Zakaryan A, Quimby D, et al. Civic Engagement Curriculum: a Strengths-Based Intervention Serving African American Youth in a Context of Toxic Stress. *Journal of Child & Adolescent Trauma*. 2016;9(1):81-93.
22. Njeze C, Bird-Naytowhow K, Pearl T, Hatala AR. Intersectionality of Resilience: A Strengths-Based Case Study Approach With Indigenous Youth in an Urban Canadian Context. *Qualitative health research*. 2020;30(13):2001-18.
23. McCammon SL. Systems of Care as Asset-Building Communities: Implementing Strengths-Based Planning and Positive Youth Development. *Am J Community Psychol*. 2012;49(3):556-65.
24. Robert G. Participatory action research: using experience-based co-design to improve the quality of healthcare services. *Understanding and Using Health Experiences—improving patient care*. 2013.
25. Tong A, Sainsbury P, Craig J. Consolidated criteria for reporting qualitative research (COREQ): a 32-item checklist for interviews and focus groups. *International Journal for Quality in Health Care*. 2007;19(6):349-57.
26. Ministry of Housing Communities & Local Government. English indices of deprivation 2019: mapping resources Gov.uk. 2019.
27. Ministry of Housing Communities & Local Government. The English Indices of Deprivation 2019 (IoD2019). 2019.
28. Braun V, Clarke V. Using thematic analysis in psychology. *Qualitative Research in Psychology*. 2006;3(2):77-101.
29. Birt L, Scott S, Cavers D, Campbell C, Walter F. Member Checking: A Tool to Enhance Trustworthiness or Merely a Nod to Validation? *Qualitative Health Research*. 2016;26(13):1802-11.
30. Creswell JW, Miller DL. Determining Validity in Qualitative Inquiry. *Theory Into Practice*. 2000;39(3):124-30.
31. Thomas DR. Feedback from research participants: are member checks useful in qualitative research? *Qualitative Research in Psychology*. 2017;14(1):23-41.
32. Slettebø T. Participant validation: Exploring a contested tool in qualitative research. *Qualitative Social Work*. 2020:1473325020968189.

33. Schneider H, Maleka N. Patterns of authorship on community health workers in low-and-middle-income countries: an analysis of publications (2012–2016). *BMJ global health*. 2018;3(3):e000797-e.
34. Memon A, Taylor K, Mohebati LM, Sundin J, Cooper M, Scanlon T, et al. Perceived barriers to accessing mental health services among black and minority ethnic (BME) communities: a qualitative study in Southeast England. *BMJ Open*. 2016;6(11):e012337.
35. Castleden H, Morgan VS, Neimanis A. Researchers' Perspectives on Collective/Community Co-authorship in Community-based Participatory Indigenous Research. *Journal of Empirical Research on Human Research Ethics: An International Journal*. 2010;5(4):23-32.
36. Canivet C, Bodin T, Emmelin M, Toivanen S, Moghaddassi M, Östergren P-O. Precarious employment is a risk factor for poor mental health in young individuals in Sweden: a cohort study with multiple follow-ups. *BMC Public Health*. 2016;16(1):687.
37. Novacek DM, Hampton-Anderson JN, Ebor MT, Loeb TB, Wyatt GE. Mental health ramifications of the COVID-19 pandemic for Black Americans: Clinical and research recommendations. *Psychological Trauma: Theory, Research, Practice, and Policy*. 2020.
38. Loeb TB, Joseph NT, Wyatt GE, Zhang M, Chin D, Thames A, et al. Predictors of somatic symptom severity: The role of cumulative history of trauma and adversity in a diverse community sample. *Psychol Trauma*. 2018;10(5):491-8.
39. Yancy CW. COVID-19 and African Americans. *JAMA*. 2020;323(19):1891-2.
40. Wakeel F, Njoku A. Application of the Weathering Framework: Intersection of Racism, Stigma, and COVID-19 as a Stressful Life Event among African Americans. *Healthcare*. 2021;9(2):145.
41. Behan C. The benefits of meditation and mindfulness practices during times of crisis such as COVID-19. *Irish Journal of Psychological Medicine*. 2020;37(4):256-8.
42. O'Donnell KT, Dunbar M, Speelman DL. Effectiveness of using a meditation app in reducing anxiety and improving well-being during the COVID-19 pandemic: A structured summary of a study protocol for a randomized controlled trial. *Trials*. 2020;21(1):1-2.
43. Khandelwal S. Efficacy of Mindfulness Meditation Intervention on Mental Health During the Times of COVID-19. Available at SSRN 3631052. 2020.
44. Brand R, Timme S, Nosrat S. When pandemic hits: Exercise frequency and subjective well-being during COVID-19 pandemic. *Frontiers in psychology*. 2020;11:2391.
45. Rose N, Manning N, Bentall R, Bhui K, Burgess R, Carr S, Cornish F, Devakumar D, Dowd JB, Ecks S, Faulkner A. The social underpinnings of mental distress in the time of COVID-19—time for urgent action. *Wellcome open research*. 2020;5.
46. Mannell J, Willan S, Shahmanesh M, Seeley J, Sherr L, Gibbs A. Why interventions to prevent intimate partner violence and HIV have failed young women in southern Africa. *Journal of the International AIDS Society*. 2019;22(8):e25380.

Supplementary data: Appendices

A1. Socioeconomic challenges coding framework table

Colour coding by age group

	Multiple Ages
	16-17
	18-20
	21-25

<i>Category:</i>	<b>Socioeconomic challenges</b>	
<i>Code</i>	<i>Definitions</i>	<i>Sample Codes</i>
Money problems	Loss of financial support (eg. bus passes); Economic issues caused by pandemic	It's a lot. It's like over a pound when I get on the bus, so I really put on like seven pounds on if I'm like going different- if I'm taking different busses. They still have the cap, I think. But it's just stress. I can't be bothered to get on the bus anymore because I have to pay. <i>(Focus Group 4, 16-17-year-old)</i>
		I think children should be, I feel like children in poverty should be getting resources for free because it will help them for their future as well. <i>(Focus Group 4, 16-17-year-old)</i>

Insecurity about future	Finding work; Career prospects; Lack of general opportunities	Another thing is, um, I was looking for part-time jobs during the pandemic, which is really stupid, but I still wanted to try so like when they reopen. Hopefully I get a job or something like that. I can't remember who said it, but one of the MPs - I'm not sure if he's a MP, but they said that they would increase more jobs for young people, especially those under 18. And I trusted them and it's not working. I don't see any jobs for us. ( <i>Focus Group 4, 16-17-year-old</i> )
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## A2. Emotional challenges coding framework table

### Colour coding by age group

	Multiple Ages
	16-17
	18-20
	21-25

<i>Category:</i>	<b>Emotional challenges</b>	
<i>Code</i>	<i>Definitions</i>	<i>Sample Codes</i>
Mental health conditions	Depression diagnosis; Anxiety; Negative mental health heightened during isolation	You know what I mean? Also like I was gonna say, when things like this if that person's also feeling comfortable enough to actually want to speak about these things, because sometimes things like that happen. You just - not want to be by yourself but you end up pushing other people away. Not on purpose, but because that's the only way you really know how to express how you're feeling and you may not know how to say how you are feeling. Because there are no words for it. <i>(Focus Group 2, 18-20-year-old)</i>
		Yeah, I'd say like, in terms of mental health, because I tend to see a lot of like those kinds of scientists saying that a lot of young people's mental health have been or will be affected by this, but they haven't really given a medium where like, that can be helped. <i>(Focus Group 4, 16-17-year-old)</i>
		Um, one of my friends during this current period, well it wasn't because of COVID. But COVID didn't help because she was now isolated, but she did, like become suicidal again. And it's because she was by herself. And like, we, like, we were her support system. And we couldn't reach out because



		<p>when we couldn't, like, go out, she couldn't come. What could we do at this point? <i>(Focus Group 7, 18-20-year-old)</i></p>
<p>Change to routines</p>	<p>Changes in sleep; Anxiety caused by lack of a routine; Struggles with time management, creates and deepens anxiety</p>	<p>Not that it's like anyone's responsibility to do that for me. I know that I should do that. It's like quite hard to adjust, especially since I was expecting school to like, come back the next month. I was like, it's not that bad. I'll just wait for school to come back. And it wasn't ever - well it's gonna come back. It was like it seemed like it wasn't ever coming back because I was just like, I don't know what to do. I'm so used to people telling me what to do when I have to do something myself and decide. I'm like, Okay, what do I do? <i>(Focus Group 3, 16-17-year-old)</i></p> <p>Um I mean, I know I'm not managing my time, but I'm not too bothered about it. Because there's not a lot going on for me. But there is a thing that I need to do for uni that I've been like pushing back for months now, and I should probably start that. But its because of the way that my schedule has changed this last week. So, I'm going to bed at like stupid hours, and then I'm waking up late and staying in bed for another couple hours. By the time I'm like ready to do stuff, I'm just like, there's not actually a lot of time left. So I should probably do something about that, but at the same time, I'm not in a rush for it. <i>(Focus Group 5, 18-20-year-old)</i></p> <p>I felt like very like, confused. I didn't know what was going on. There was like - I wasn't really doing anything. Usually, I'd be up the school and stuff but the days were just like, all mixed together. Like it wasn't really a pattern anymore. It was discombobulated. <i>(Focus Group 6, 18-20-year-old)</i></p>

		My sleep schedule was inverted. So you would never catch me during the day ever. But perhaps at night, you might catch me darting through the corridors to go to the kitchen or something. <i>(Focus Group 5, 18-20-year-old)</i>
Difficulty managing long-term conditions during COVID	Difficulty accessing health care, further creating isolation and anxiety; Disability; Managing long term health conditions; Health challenges	<p>And I don't mind, during lockdown, I got quite sick because I was meant to have appointments because I um I have like arthritis issues. So literally once lockdown started, they cancelled my appointments. And so that kind of left me at home. And because of how severe the pain was getting, I couldn't really do anything. <i>(Focus Group 7, 18-20-year-old)</i></p> <p>This entire time we've just been hearing while people are dying people are sick, because it spreads so easily this, this, this this this. Its like, nothing to be productive in, you know, reassuring that we'll be okay. It's more like, if you catch it like you're most likely gonna die. So just keep that in mind type of thing. And that's just not been helpful to anybody really, especially like people who have previous existing health conditions, because it's like, they felt that- a lot of them, especially like people that I know, just didn't go out. And that's even unhealthy for anybody's mind, regardless of if you're sick or not. <i>(Focus Group 7, 18-20-year-old)</i></p>
Stresses over school	Exam scandal; Having to self-teach; Instability and anxiety over future	<p>And on the news with the sixth formers who got real marks, and lost, they lost things, like not being able to go to universities they wanted to go to. That's worrying me, because if next year, another lockdown happens, like the pandemic gets worse again. Then my grades, maybe will end up like their's and I don't know what. So I'm worried about my future right now. <i>(Focus Group 4, 16-17-year-old)</i></p> <p>No, so we didn't get given any zoom classes, which was really hard on us. So, what they did was they just gave us like PowerPoints where we have to go through. And even though they gave us the PowerPoints, it wasn't that informative. So, more that, they gave us all the work, like telling us, you're doing all the work, they weren't there to like, guide us or help us. <i>(Focus Group 3, 16-17-year-old)</i></p>

		<p>I feel like the closer we get to September the more anxious I get because I don't know like I have no idea what's gonna happen next year. <i>(Focus Group 4, 16-17-year-old)</i></p>
		<p>Usually at this time I would be worried about like exams and stuff, like I would be prepping for it. But it all just ended so suddenly. So it was like, like it was like they just threw me into the deep end. <i>(Focus Group 6, 18-20-year-old)</i></p>
<p>Easing out of lockdown</p>	<p>Anxiety reintegrating back into the 'outside world'; Stress about communication skills being negatively impacted from isolation; Feelings of indifference towards adapting to this new way of life</p>	<p>My mum was a bit worried, a bit worried. Yeah, because - well all parents are worried to be honest. But she was worried, because she thinks like, if I go out a lot of times she's gonna see me in a sense where I might catch the virus or I don't know something might happen. You know? <i>(Focus Group 6, 18-20-year-old)</i></p> <p>I will say seeing friends made me happier. Being able to have a bit of a social life. <i>(Focus Group 6, 18-20-year-old)</i></p> <p>And everyone was in the same boat. Which was yeah - which was kind of like sad as well. Cause everyone wants just wants to just have a normal life. It won't happen. And we just kind of have to deal with new changes. <i>(Focus Group 6, 18-20-year-old)</i></p> <p>I did feel a little shy or a little bit anxious, but I think it's because I haven't been ready to meet people that much. I mean, I don't communicate with people generally, but I think because I haven't been going to Uni, in quite a while. And talking to people- seeing people every week. But I think my ways of communication have kind of diminished a little bit. <i>(Focus Group 1, 21-25-year-old)</i></p> <p>I feel like after corona and everything was announced and being locked in your house for so long. And then you go out- like for me personally, I just - to be out for longer just would make me feel uncomfortable. Like I'd start feeling like I'd about to have an anxiety attack. Just because I don't really know, what like – with corona, you hear so much about what's going on and how bad it is. And you know, always be careful. It makes me worry more than I'm used to. <i>(Focus Group 7, 18-20-year-old)</i></p>

### A3. Perception of government response coding framework table

#### Colour coding by age group

	Multiple Ages
	16-17
	18-20
	21-25

<i>Category:</i>	<b>Perceptions of government response</b>	
<i>Code</i>	<i>Definitions</i>	<i>Sample Codes</i>
Loss of 'normal' way of life	Quick return to normal placed people at risk; Dislike of the government's push to normal; Families forced to work in unsafe conditions	And I was just like these guys have really got their lives on hold. Thinking that one day things will eventually like go back to normal. And the government is just going to be like alright yeah that's enough. Everyone go back to what you were doing before. And I was just realizing that too much has changed for that to happen. For everything to just go back. Like it's gotten to a point where even if the virus like disappears off the face of the Earth. Things are not just going to return to normal. Like too much has changed. The economy has been impacted too much. People's way of lives have been impacted. <i>(Focus Group 5, 18-20-year-old)</i>
Poor messaging	Lack of clarity; Poor communication; Lack of trust in government; Lack of justification for guidelines (e.g. masks, rule of 6)	Um, I don't know. It just, I feel like a broken record. Just clarity. Just state what we need to do. Yeah, and especially in the way they were talking about how BAME individuals that are more susceptible to catch, the virus or like there's a high death rate for BAME individuals by saying that immediately. You know? Speak to BAME people. 'Oh, whoa, this is a bit

		<p>more dangerous for us'- which would, again inspire us to obey the rules more often. So again, just being clear. <i>(Focus Group 3, 16-17-year-old)</i></p>
		<p>Everyone has no idea what's going on. People are scared. People are dying. So, the higher places like government, people aren't sure as well. It makes it worse for everyone else. So, I understand where they're coming from, but also they need to like set down rules, which will apply to you. Not just 'Oh, you want to stay five feet apart? Or just stay six feet apart?' It doesn't really make any sense." <i>(Focus Group 4, 16-17-year-old)</i></p>
		<p>Yeah. Exactly. There isn't as much transfer. And the government isn't, or hasn't been certain on how things are being transferred, or how to regulate it. And I just feel like things have been taken a bit out of proportion, personally. <i>(Focus Group 7, 18-20-year-old)</i></p>
		<p>But um I feel like, maybe specific to the UK, it wasn't handled well. So the sense of panic was kind of amplified. <i>(Focus Group 5, 18-20-year-old)</i></p>
		<p>But we've treated it as like, this unknown force of nature, that's gonna wipe out half the population. And now, like, the approach - and that approach has just ruined a lot of people's lives and set a lot of people back many years, months, whatever. <i>(Focus Group 5, 18-20-year-old)</i></p>
<p>Excluded from messaging</p>	<p>Feeling disconnected from traditional media sources; Feeling forgotten and overlooked; BAME people not being treated as a priority</p>	<p>I'm not really sure about Instagram so maybe that's a better way of showing it. Yeah, I think what's interesting too, I'd love to hear everybody else's opinion and perspective, but it seems like a lot of younger people don't really watch television like that. Like we stream and get our media elsewhere, but we don't really watch more traditional television. That's something like our parents would do. <i>(Focus Group 5, 18-20-year-old)</i></p>

		<p>So basically, the news that we're getting, but even different newspapers is like from the perspective and like from the view of that one person, which happens to be a wealthy white man. So, a lot of the times the news that we receive is not we can relate to, because we can't relate to that one. Wealthy white man, the way he sees things he sees, like, poor people as like an inconvenience. 'Why do we have to help them? They should work hard for it.' Whereas from our perspective, we're more understanding, but then we also can't relate to him because we could be like 'Oh, he has all this money, why can't he help us?'. <i>(Focus Group 3, 16-17-year-old)</i></p> <p>I feel like, I feel like, I don't wanna say the government doesn't care about us. But I feel like they're, more focused on - I feel like young people are not a priority in the government's mind right now. Because even like, when you go for information there's nothing tailored for, for young people. <i>(Focus Group 5, 18-20-year-old)</i></p> <p>I was saying this to my mum as well, that they (<i>government officials</i>) weren't even referring to us when they were saying young people on the TV. They were referring to, like, people aged like 20 to 40ish. And they kind of excluded us in their, like plans and explanations, there hasn't really been much. I don't know, room to explain anything for us. <i>(Focus Group 4, 16-17-year-old)</i></p>
Ending language of blame and shame	Frustration as government officials blamed young people for increases in cases; Feelings that young people were a scapegoat for second wave	<p>But still, I think there could have been a lot more clear, um, guidelines like even just in the past few months, when the government is encouraging a lot of young people and in particular, to go out and make use of the eat out, help out scheme. And they were encouraging that. And then within a matter of weeks, they're now blaming young people, and because the rates have been going up, so it's such a contradiction, and I think they're just looking for a scapegoat. And unfortunately, young people have become that scapegoat. Because they're sending everyone back to school, sending everyone back to universities, but and then blaming them. So, I don't know what message they're trying to send out at the moment. But I don't think it's clear. <i>(Focus Group 7, 18-20-year-old)</i></p>

		<p>Exactly. And also, just going off that point, though, the way that they have kind of advertised this in a way like one of the government's like slogans is 'protect granny' or something like, yeah, it's kind of, it's kind of like saying, oh, young people are the reckless ones of our society, the ones that are basically ruining, like any sort of progression. Ruining any sort of like returning to normality. When, in actual fact, if you look at it, young people have been trying their best throughout all of it. But it's the government and like the way that everything is set up. It's not designed to protect young people, but they're designed to blame young people. <i>(Group 7, 18-20-year-old)</i></p>
		<p>Well or when they kind of blame the BAME community for not taking COVID seriously, when it's hitting us the most. <i>(Group 3, 16-17-year-old)</i></p>

#### A4. Survival during crisis – findings the new you in this new situation coding framework table

##### Colour coding by age group

	Multiple Ages
	16-17
	18-20
	21-25

<i>Category:</i>	<b>Survival during crisis - finding the new you in this new situation</b>	
<i>Code</i>	<i>Definitions</i>	<i>Sample Codes</i>
Self-care strategies	Meditating; Avoiding social media during these times; Finding enjoyment during lockdown	I'd say for me, I haven't been on social media as weird as that sounds, like I've kind of tried to stay away from it. Because like, a lot of the time when I went on social media there was just like loads of negative things. <i>(Focus Group 2, 18-20-year-old)</i>
		I'm really, I'm really enjoying that. It's just like sleeping when you want, waking up when you want. Just doing a couple of things from your bed, it's just like I am really enjoying that time because I know I'm not going to get that again. And I think I'm just really enjoying taking the time for myself. <i>(Focus Group 5, 18-20-year-old)</i>
		I would walk more, um eat healthier as well. To stay safer to be honest. Healthier. <i>(Focus Group 6, 18-20-year-old)</i>
		Yeah I just wanted to stay healthy, you know. And I just wanted to be - just collect, look after myself in a sense. Self-care. <i>(Focus Group 6, 18-20-year-old)</i>



		Yeah, um, I would just say exercising. For me personally, just for the stress. <i>(Focus Group 6, 18-20-year-old)</i>
		Um, I would just say focusing on myself more, okay. Just relaxing, making sure that I'm mentally okay. <i>(Focus Group 6, 18-20-year-old)</i>
Creation	Creating new systems and activities of support; New ways to connect with people; New habits and routines; Starting new businesses	I'd say like currently, I'm a bit more optimistic compared to like, the middle of lockdown. I was like, the middle of lockdown hit me the hardest cause I was very unmotivated. I don't know if that's a word de motivated. Yeah, I didn't have any motivation at all to do anything. I just didn't see the point. And it was like just even simple tasks. I couldn't do it. Just like I just struggled to get out of bed. I just stayed in bed and listen to music and slept all day. So, I'm kind of getting out of that and getting up more recently, I started cooking a lot more because it's like a distraction at least have something to do. So, I realized I'm actually not that bad. I should have done it more often. <i>(Focus Group 3, 16-17-year-old)</i>
		For some reason, when I spend the whole day doing one thing. When I can focus on one thing, I become extremely productive. So I kinda just make a schedule around that and assigned various things to to different days. So that I can come out of lockdown slash quarantine feeling like I didn't they just waste months of my life. <i>(Focus Group 5, 18-20-year-old)</i>
		So I started a eyelash company and a lipgloss company as well. Just like a cosmetic company. <i>(Focus Group 7, 18-20-year-old)</i>
		Yeah, I got into a bit of art, just more basic drawings or more basic, like, for example, like sunsets. <i>(Focus Group 6, 18-20-year-old)</i>
		So I'm like, there is no point in procrastinating because you could have gotten this done a week ago. You know? Let me just do it now. So, self disciplining myself. I think I've gotten better at that. Discipling myself. <i>(Focus Group 6, 18-20-year-old)</i>

Social support systems	Increased reliance and engagement with friends and family; Supporting friends and family who need you	<p>I'm in managing my time. But maybe, I think maybe because I live with my parents that obviously, they're like, your parents like, helping you manage your time. Yeah. I just yeah. Other than that, if I was living by myself, I don't think I would be managing my time. <i>(Focus Group 5, 18-20-year-old)</i></p> <p>But now I get to see my friends. Even if it's just a come to the station and meet. You know? Because we kind of live close. <i>(Focus Group 6, 18-20-year-old)</i></p>
Agency	Belief that life will pass by, waiting on the government so people should take control of their own lives and maximize the situation to their benefit; Finding optimism in the current situation	<p>I would say there is joy in the fact that things haven't just crumbled to pieces. <i>(Focus Group 5, 18-20-year-old)</i></p> <p>Before I was procrastinating, saying I'll do it later, or later, and then another time. Okay, then next week Monday I'm gonna start. But now is the thing where I've got nothing else to do. I might as well do it, you know? So yeah, so as I said, I enjoy doing what I do now because I've kind of developed from from it anyway. <i>(Focus Group 6, 18-20-year-old)</i></p> <p>There's a lot of people who aren't used to making their own decisions and having their own agency when it comes to taking control of their life. You know they just pass through the system, go to uni, get a job, pay their taxes et cetera. But now you're in a position where if you just sit down and wait for the government to tell you, you can go out now life will just pass you by. <i>(Focus Group 5, 18-20-year-old)</i></p> <p>Even though COVID's been really bad, I would honestly say, not an advantage, but like most of like, the exams I had to do, were at home. So it meant that some of the exams I had to do were open book. So that is the advantage. But also for me personally, since everything is slowed down, it's given me more time to like develop myself. <i>(Focus Group 5, 18-20-year-old)</i></p>

A5. Navigating racism and difference coding during the pandemic response framework table

Colour coding by age group

	Multiple Ages
	16-17
	18-20
	21-25

<i>Category:</i>	<b>Navigating racism and difference during the pandemic response</b>	
<i>Code</i>	<i>Definitions</i>	<i>Sample Codes</i>
Psychological burden	Anger; Psychological separation for survival; Negotiating Black identity or other minoritised identity	<p>Especially it's like they're saying we're not allowed to go out and then that you want to be productive, and go to the protests, but then you've got to mind COVID-19 that's still out there. Now, and you're just trying to think of what's next. <i>(Focus Group 2, 18-20-year-old)</i></p> <p>And that was instilled in people. So now even though the help is there, because we're so used to um people, like, what not having our best interest at heart, we choose not to use it. In some of the same time, its like with the police. Historically, like Black communities haven't had a good relationship with the police. And even though now more lack people and stuff are trying to join the police to make it better, there's still a lot of stigma. Like if you say, 'oh im going to call the police' in the ghetto, people are going to look at you sideways. <i>(Focus Group 2, 18-20-year-old)</i></p>

		<p>I was just saying that, I think like, that's a dilemma a lot of Black people face because even I remember when I was going to the protest, my sister was like, I really, really want to go. My sister's that has type one diabetes, and she was just like, 'I'll be risking my life'. And I was like, I don't think it's like, pro-Black to risk your life. I just think your Blackness is not defined by if you went to a protest, or if you even signed the petition, but like, like the fact that you're living and just doing what you want to do, and having that autonomy. That's what we all want to do. <i>(Focus Group 1, 21-25-year-old)</i></p> <p>So yeah. And even though there's a pandemic, I still feel like, it's good still, because racism is a killer. People get killed because the color of the skin, and it's not a choice. <i>(Focus Group 4, 16-17-year-old)</i></p> <p>It don't matter. Don't let them <i>(the government)</i> have power, do it for yourself, I'm fed up are thinking they're going to help - they're not going to help. They don't care, we are not a priority to them, they have their own people, and they don't care. <i>(Focus Group 1, 21-25-year-old)</i></p>
<p>Importance of representation</p>	<p>Need to see people who look like you (eg. Similar age, race, socioeconomic background); People who understand your experience; Challenging stigma in BAME communities regarding seeking mental health support</p>	<p>I don't know if this is more of a personal thing, but sort of normalizing that as well. normalizing asking for help going out to like actively seek help when you feel you need it. Because especially in our community, that is not a normal thing. <i>(Focus Group 2, 18-20-year-old)</i></p> <p>But anyways, one big news company to kind of like that we can relate to that we can share our news, our truth, because we can only relate to ourselves, we can't expect that one white male that has like pressed pushing out his agenda into all these news companies, like newspapers, we can't expect him to relate to us because he's never going to relate to us. <i>(Focus Group 3, 16-17-year-old)</i></p>

Like, if you get an adult, the answer is not going to be able to relate to them. youngsters are like, I'm, I'm 17, you're, you're 27. How am I meant to relate to you? Like you're giving me this information, but it's not going to help me because look at you and look at me. (*Focus Group 3, 16-17-year-old*)

P2: Because they're (*community elders*) thinking 'There's nothing wrong with me. What? What are you talking about?' But it's like, they hear they hear certain words and obviously the stigma around it. So it's gonna be a negative connotation. Like, it's just 9 times out of 10 its just a prevention thing.

P3: Yeah. And I think there's the thing like, historically, the help hasn't been there, like there has been no help to access. So it was sort of like, you have to be okay. Because you have no choice.

P2: Yeah.

P3: And that was instilled in people. So now even though the help is there, because we're so used to um people, like, what not having our best interest at heart, we choose not to use it. (*Focus Group 2, 18-20-year-olds*)

A6. Community: transitions, successes and spirit coding framework table

Colour coding by age group

	Multiple Ages
	16-17
	18-20
	21-25

<i>Category:</i>	<b>Community: transitions, successes and spirit</b>	
<i>Code</i>	<i>Definitions</i>	<i>Sample Codes</i>
Community systems at work	Community to fill institutional gaps and failures; Need for youth clubs	Um, I feel like if I left it to the government? No, definitely not. I know, I'm opening a youth club. So, I don't, I'm not worried about them. But if I left it to them, no, no, they're not worried about our problems. Our problems are our problems, and they need to be dealt with by us. In their eyes. <i>(Focus Group 1, 21-25-year-old)</i>
		During the lockdown time and my neighbours had a church group, and they were giving out money. Well not giving out money. They were paying people's rent fines, like things that people couldn't afford bills, and stuff like that. They supported me a bit during lockdown. I didn't know that they were available via like social media and stuff. But they were, like more on my doorstep as my neighbours. <i>(Focus Group 1, 21-25-year-old)</i>

Community spirit evolution	Evolutions of ways to communicate with people; Changes in the meaning of community engagement	<p>I'd say things like this, because a lot of the times like we're just to young people out of many, but we have all these opinions. So, I'm pretty sure there are other young people that keep their opinions to themselves. So, I think by talking about these things, because a lot of the times, we just assume that someone's doing okay during this like lockdown, but then they could be having a hard time as well, if we was all open about it and spoke about our experiences to one another. <i>(Focus Group 3, 16-17-year-old)</i></p> <p>As I said you don't need to parade around doing up superman or whatever. You just need to pay attention and just open your eyes and think. If there's a situation where you could help are you going to go 'Ah I'm too shy' or 'What if they tell me to get out of their face' or something. Just uh be a bit more aware and look to see if there's any way you can help. <i>(Focus Group 5, 18-20-year-old)</i></p>
Social media as site of community	Using social media to engage with community	<p>I watch a lot of YouTube so I like the content coming out I feel like because like everyone's indoors um I feel like there's more community base as well. <i>(Focus Group 5, 18-20-year-old)</i></p>
Responsibility to wider community	Deep concern for others, beyond family, despite not trusting information	<p>And I feel like I've also learned to not put my feelings aside but at the same time, I put my feelings aside obviously for the other children because I obviously have my own problems going on. But being in that environment, I have to put their problems before mine because obviously if I come in with a negative energy and like they can see, I'm not really feeling like as positive as I should be as someone they're meant to be like, looking to for help. I just didn't want to be that person to like, bring them down even more. <i>(Focus Group 2, 18-20-year-old)</i></p>

## A7. Visions for a future response coding framework table

### Colour coding by age group

	Multiple Ages
	16-17
	18-20
	21-25

<i>Category:</i>	<b>Visions for a future response</b>	
<i>Code</i>	<i>Definitions</i>	<i>Sample Codes</i>
Giving young people ownership	Government communication strategies will improve through giving ownership to young people	So if we kind of remove the idea that young people are useless, they don't do anything for our society, because a lot of the times older people just say that this generation is messed up, or this generation is like useless, or this generation, they just kind of put us down a lot. So we just end up seeing ourselves as just like, we're not helpful to society, there's no point in getting involved in anything. So, if we can just present ourselves and present young people as helpful that we need you like young people. 'You're useful young people. We care about you, young people. You're special.' Which is anything to be able to promote ourselves, and each other is just useful, we're not useless. ( <i>Focus Group 3, 16-17-year-old</i> )



Peer support groups	Online platforms for young people to share their experiences with peers of COVID/lockdown	<p>And like in a very healthy environment, where like, there was no judgment, no mockery or anything like that. I feel like that is something young people could do, because as well as helping themselves by like getting it off their chest, they're helping others because some people need to hear what others are going through to kind of like, think about what they're going through at the same time. So maybe more discussions like this will opportunities to have more discussions like this? And not only about just this lockdown, just other things in general. But other issues in general, because I don't think it should only stop with how we cope with Coronavirus. Like other issues like that young people face like maybe poverty or like racism, colourism or like just loads of issues that we all have, we should just have Black in a community where we can have these open discussions about it. And it's like, there's no right or wrong answer to anything that we're saying. Because it's your own perspective. It's your own experience. <i>(Focus Group 3, 16-17-year-old)</i></p> <p>I said it in the previous sessions... a discussion group like this, it says, because it allows young people to kind of talk to each other about how they feel, instead of just holding it in. And just like, everyone can share their experience with each other. And then if you hear that someone's experiences similar to yours, you won't feel that lonely anymore. So, something like this, it doesn't even have to be like a massive thing to just be with like, group for people. I just something like even in a place or an environment I like...we'll just talk to each other about how you feel and how you're coping with things. <i>(Focus Group 3, 16-17-year-old)</i></p>

<p>Compassion and understanding from systems</p>	<p>Need for patience and understanding from institutions regarding the difficulties that young people in school have endured</p>	<p>I think it would, it would make young people feel like they're more supported in a way and that, like, we're also worried about you as well. It's just kind of like, I think because our family just wanted to make sure everyone's safe at home, but then they don't really realize the effects that is lockdown has on young people, and how young people might struggle to cope with it. So, it was just like grouping young people with every other group and within the society, and it's just not really fair to do that. Because I feel that young people have really struggled, not the most, but struggled a lot with the whole lockdown. Because we are missing school, we can't see our friends, it's really stressful. And we're seeing a lot of things on social media, because young people spend a lot of time on social media, a lot of things have been going on. We're exposed to so much and it's like there wasn't it didn't seem there could have been it didn't feel that there was much support. <i>(Focus Group 3, 16-17-year-old)</i></p>
		<p>I think we are resilient people, but I just feel like these younger people, like, their resilience is unmatched, because they're literally doing stuff that they shouldn't have to do. Um, and also society's just harder for them. Like, they're gonna now pay to go to school, like, what is that? I mean, like, you can't even have free travel. And it feels like so small, but it's such a big thing. <i>(Focus Group 1, 21-25-year-old)</i></p>
		<p>I think now that we're going back to school, I think there should be more. I don't know how to describe it, but like, a bit more understanding for young people because like for, for us, like I've made for myself, as soon as we go back to school, there's like our mocks are coming up. And it's understandable because we did miss out on doing our mocks, but I just feel like, there should be more understanding that young people are missing conditions at school. Like some people can't replicate that working environment at home. So, to be more understanding, and like, maybe take off some of the pressure that is when young people, because we did miss out on a lot. And we had to go through, like a very rough time. <i>(Focus Group 3, 16-17-year-old)</i></p>

<p>Improving government response by building in BAME contributions</p>	<p>Publishing accessible messages tailored to young people; Utilizing youth advisors to interpret COVID-related messaging for young people</p>	<p>But maybe just amplify like, some of like the services that are already there are a lot of the mental health services and like services that are made by us like there's so many people who are have got great youth projects, who've got like mentorship projects for Black children. And I feel like they're not amplified enough. Like maybe in our community they are. But they're not unlike BBC, they're not on like the NHS website. Like, I feel like the government needs to amplify people who are already doing the work. Because there's a lot of people that are actually doing this work, and doing it last specifically for Black children. So, I feel like those voices definitely need to be amplified. <i>(Focus Group 1, 21-25-year-old)</i></p>
<p>Improved communication through connection</p>	<p>Successful communication linked to a logic/context of care; Fostering connection through those that are similar to you (eg. Similar age, race, socioeconomic background)</p>	<p>Maybe it's a young professional, basically giving the message out, because when it's like an older white person giving me news, I don't know, just. So maybe if there's like a young person, you'd be able to trust them more kind of take more seriously. And it's like, a person that seems like they genuinely care. Because I feel like a lot of the times people just say it because not as they don't care. But it's just like, if a young professional, just the person that seems like they genuinely care about you, and your well-being lots of people will be more interested in what they're saying. It doesn't even have to be a young professional, just a professional that seems to care about you. <i>(Focus Group 3, 16-17-year-old)</i></p> <p>I'd say someone who's able to communicate with them. Cause, say if they want to go with someone who doesn't know anything about what they're going through, it will be harder to talk to them. Because, for example, as we said, if I if one of us were to go to like a white person and try and tell them what we're going through, like at family, at home, they wouldn't be able to understand anything. Even like with expectations. I'm quite I'm pretty sure it's common with all like being community and families. They have high expectations. I won't say when</p>

		<p>we go to like no offense for like a white family and we told them all. This is what they'll be like. Not even that hard, like they wouldn't understand where we're coming from. <i>(Focus Group 3, 16-17-year-old)</i></p>
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