

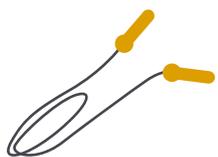


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Office of Research – Innocenti



IT'S DIFFICULT TO GROW UP IN AN APOCALYPSE

CHILDREN'S AND ADOLESCENTS' EXPERIENCES, PERCEPTIONS AND OPINIONS ON THE COVID-19 PANDEMIC IN CANADA



UNICEF OFFICE OF RESEARCH – INNOCENTI

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And we never give up.

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Executive summary

Study overview

The COVID-19 crisis has long-reaching implications for children's lives. Prior to the pandemic, Canada already ranked as one of the lowest among rich countries for children's well-being (UNICEF Canada, 2020). To date, research on Canadian children's and youth's experiences during the pandemic has tended to focus on specific topics (e.g., physical activity), directed by researchers, and has lacked a broad exploration of young people's perspectives.

We report on a child- and youth-centred, exploratory research study on the perceived negative and potential positive impacts of the COVID-19 pandemic. We also asked participants to give policy recommendations to government, for the current or future world crises. This qualitative study was informed by three child and youth advisory teams, throughout. We conducted 10 focus groups and 23 semi-structured interviews, with a total of 74 young people, aged 10–19 years, from four provinces and one territory. We sought to actively recruit from groups who might have been most affected by the pandemic (e.g., LGBTQ+, racialized and Indigenous children and youth).



Main findings

We found changes in young people's relationships with parents and siblings, with an increased closeness that was, at times, described as "unnatural". Young people also told of more distant relationships with friends, extended family and family living outside their household (e.g., non-residential parents). Children and youth also lost out on extracurricular and other activities, while doing more household-based activities, such as baking, and increasing their use of technology. With regard to the emotional impact, young people described experiencing more boredom, worry and gratitude, and younger participants reported feeling anger as a result of the pandemic as well. Across ages, participants also reported methods of coping, such as spending time outside and finding objects that provided comfort. Young people also reported having greater levels of worry for others in the world, and expressed concerns about their own and others' development during this time, with young people at transitional points (e.g., about to leave high school) feeling especially challenged. Additional themes were increases or decreases in focus and motivation, identity and self-awareness, and shifts in sleeping, eating and activity schedules. Finally, participants reported having challenges with school, including difficulties being engaged but also feeling overwhelmed or alone in their learning.

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Policy recommendations

POLICY RECOMMENDATION 1.1. Establish the principle that the best interests of children and youth are a priority in all crisis strategies and plans, and track their ongoing well-being.

POLICY RECOMMENDATION 1.2. When devising policies that will affect children and youth, seek regular input and feedback from large numbers of diverse young people.

POLICY RECOMMENDATION 1.3. Establish new or expanded, easily accessible support for transition-aged youth.

POLICY RECOMMENDATION 1.4. Ensure that children and youth have opportunities to engage in relationships and activities that are meaningfully and developmentally relevant to them.

POLICY RECOMMENDATION 2.1. Become more future ready, with resilient policy infrastructure that is capable of responding to world crises, such as pandemics, and also, when crises occur, act more quickly and decisively and avoid rapid fluctuations in rules.

POLICY RECOMMENDATION 2.2. Accompany decision-making with transparent rationale, based on input from experts (e.g., researchers, medical professionals) and those with lived experience.

POLICY RECOMMENDATION 2.3. Educate and inform children and youth through visible and accessible websites that are targeted at young people, and through sustained social media campaigns.

POLICY RECOMMENDATION 3.1. Put in place policies, practices and people to ensure that every young person can return to in-person schooling and reconnect with social and academic learning journeys.

POLICY RECOMMENDATIONS 3.2. Provide more opportunities for relationship-building with teachers, guidance counsellors and mentors, and provide the educational opportunities youth need to pursue future career goals.

POLICY RECOMMENDATIONS 3.3. Ensure access to devices, data and digital infrastructure that are of sufficient quality for the full participation of all students.

POLICY RECOMMENDATIONS 4.1. Provide culturally appropriate, easily accessible, rapidly available services (e.g., medical, mental health), which meet the needs of specific populations (e.g., LGBTQ+ or Indigenous youth), with mental health services that prioritize face-to-face interactions.

POLICY RECOMMENDATIONS 4.2. Provide support for safe housing, including shelters, and other support for independent living.

PHOTO COURTESY OF FOCUS GROUP PARTICIPANT



I chose [a stop sign] because like let's say last year I was in sixth grade, and now like when you're going to high school, there's a whole bunch of stuff that usually we'll be able to do, but then because of COVID you're not able to do it.

– 13-YEAR-OLD FOCUS GROUP PARTICIPANT

Introduction

In times of economic and social crisis, it is well established that children are often the worst affected (e.g., Goldman et al., 2020; UNICEF, 2020). The COVID-19 crisis has had significant implications for children's physical, psychological, material and social well-being (Duan et al., 2020; Loades et al., 2020; Xiang et al., 2020). The negative implications may be widespread – for example, broadly impacting children's and youth's development, education and financial security – but there are indications of relatively unexplored positive impacts as well (SickKids, 2020). To explore gaps in the evidence, and in line with increasing calls to listen to children and youth and involve them in decision-making (Aaron, 2021; UNICEF Canada, 2020), in this qualitative study we conducted a broad, child- and youth-centred exploration of young people's experiences of the COVID-19 pandemic.

1.1 Potential impacts

The potential negative impacts of the pandemic are far-reaching. In one mixed-method study (Carroll et al., 2020), young people experienced changes to eating and exercise patterns, increased screen-time, worsened sleep, higher stress and worsened mood (e.g., more irritability and boredom). The act of quarantining itself was associated with significant impacts on children's and youth's health, such as increased distress, worry, feelings of helplessness and fear (Saurabh and Ranjan, 2020). This impact is seen worldwide. One study from China reported a spike in the depression rate among youth, children and adolescents (Duan et al., 2020), and another study in the UK found increased suicidal ideation (O'Connor et al., 2021). When researchers asked adolescents and young people in Portugal about their experiences during the pandemic, they reported boredom, low productivity, and many psychosomatic and psychological symptoms (e.g., head and muscle pain, anxiety and depression) (Branquinho et al., 2020).

In fact, Branquinho and colleagues found that the most affected sub-populations were adolescents and seniors, as well as people from low socio-economic backgrounds.

This indicates that, although the impacts on children are varied, they are likely to be stronger for groups of children who are already facing disadvantages (Allen, Mahamed and Williams, 2020; Crawley et al., 2020; Gupta and Jawanda, 2020; Imran, Zeshan and Pervaiz, 2020; Rosenthal et al., 2020). For example, Rosenthal and colleagues (2020) have described the impact of COVID-19 on homeless children who live in temporary housing, due to an already existing lack of space and less access to essentials, and Van Lancker and Parolin (2020) reported that school closures may place children from lower-income groups at greater risk of experiencing food insecurity and difficulties with online learning than those in higher-income groups. Moreover, Imran, Zeshan and Pervaiz (2020) addressed how COVID-19 can impact children in abusive homes, due to added parental stress and confinement. Remote learning has also been reported to be a challenge, especially for students who experience unstable internet connections or power interruptions, or have scarce learning resources (Raby et al., 2021; Rotas and Cahapay, 2020). Finally, COVID-19 has had a significant impact on transgender and gender-diverse young people (Hawke et al., 2021b). This may be due to diminished opportunities for community support (Paceley et al., 2020). Paceley and colleagues (2020) found that queer and trans youth were in a particularly vulnerable place, as they experienced increased isolation, depression and anxiety, weight gain, self-harm and suicidality. Thus, the crisis is already widening inequities among children (Crawley et al., 2020; Van Lancker and Parolin, 2020), a problem that is expected to worsen over time (Gupta and Jawanda, 2020).

Much of this past body of research appears to have begun with a focus on negative impacts. Despite

these findings, some research has uncovered benefits from pandemic-related restrictions. These included increased family activity, such as cooking together (Carroll et al., 2020), starting new family hobbies (Moore et al., 2020) and learning new skills (Chawla, Sharma and Sagar, 2020). Other studies found reduced stress as a result of a slower pace of life (Cornell, et al. 2022; Hawke et al., 2021a), decreased bullying in school possibly due to increased teacher supervision and more controlled social interactions (Vaillancourt et al., 2021), and reduced substance use (Hawke et al., 2021a; Thorisdottir, 2021). Pelletier, Cornish and Sanders (2021) also found that there was more engagement in unstructured play and quality time with family.

Some Canadian scholars have pointed to wide-ranging rights violations during the pandemic, such as school closures and lack of access to programmes for young people (Blanchet-Cohen, Grégoire-Labrecque and Cooper, 2021; Suleman et al., 2020). Children with more complex needs or who are already furthest from opportunity might have experienced the greatest threats to their rights (Suleman et al., 2020). These rights violations suggest that, during a time of crisis, it might be particularly important to maintain a focus on children's rights as central (Ciotti et al., 2020), although it might also be a time where unique opportunities for activism and participation emerge (Goodwin-De Faria, Bendo and Mitchell, 2021). Thus, the current study was grounded in a rights-based approach, seeking children's and youth's participation throughout (United Nations, 1989). We sought children's perspectives across the different contexts of their lives, including but not limited to home, school and relationships. Our approach also included engaging children and youth in advisory roles, and in seeking young people's perspectives on their agency and decision-making throughout the pandemic, as well as on the steps government and other policymakers should take in ensuring children's well-being and rights are protected.

1.2 The Canadian context

A timeline of the social and economic impacts illustrates how the COVID-19 pandemic shaped Canadians (Statistics Canada, 2021). Five days after

the World Health Organization (WHO) declared COVID-19 a pandemic (11 March 2020), Canada banned non-residents from entering the country and declared a state of emergency (Statistics Canada, 2021). At the same time that many citizens became unemployed, many schools also shut down. Several measures were taken to stop the spread of COVID-19, such as province-wide lockdowns, school closures and curfews. The majority of Canadians engaged in several measures to stay safe (e.g., social distancing, reducing non-essential local travel, wearing masks) (Statistics Canada, 2021). Some restrictions (e.g., restrictions on international travel) were mandated across the country (Government of Canada, 2021). Others (e.g., mandatory use of masks, curfews, closures of non-essential businesses, restrictions on social gatherings) differed across Canada's 10 provinces and 3 territories, or at regional levels (Detsky and Bogoch, 2020). In May 2020, restrictions started to lift, but in June, there was evidence of a decline in people's mental health (Casey, 2021; Statistics Canada, 2021). In or around September 2020, schools reopened, but post-secondary institutions in most of Canada continued to offer courses online (Statistics Canada, 2021). In Ontario, which experienced the longest period of school closure, schools were closed to in-person learning for at least 28 weeks (Ontario COVID-19 Science Advisory Table, 2022).

There are indications that the pandemic contributed to deterioration in the mental health of Canadian youth aged 10–18 years (Cost et al., 2021). Canada is still struggling with how the pandemic is impacting on children's lives. According to the 2020 UNICEF Report Card, Canada already ranked 30th out of 38 developed countries in protecting children's well-being (UNICEF Canada, 2020). According to many reports, the pandemic has exacerbated some common threats to Canadian children, specifically in areas of mental health, child abuse, poverty and food insecurity, as well as racism and discrimination.

The COVID-19 pandemic had an impact on certain groups more than others (Price and Akbari, 2020; Statistics Canada, 2021). It became evident that the COVID-19 pandemic created further increases in inequality. For instance, racialized and Indigenous

groups were affected more significantly than white Canadians and non-Indigenous peoples, showing higher rates of worsened mental health and difficulty meeting essential needs, such as food (Statistics Canada, 2021). Racialized groups include those who are non-white and non-Indigenous. In Canada, governments and others have moved towards the use of the term ‘racialized’ in place of terms such as ‘person of colour’ or ‘visible minority’ in some contexts (e.g., Government of Canada, 2021; Canadian Human Rights Commission, 2020; Canadian Institute of Health Information, 2020). The term ‘racialized’ makes visible the social construction of race, and the process through which some groups have been designated as a ‘race’ and subjected to a history of unequal treatment and violence (Ahmed, 2002; Dalal, 2002; Galabuzi, 2006).

Indigenous children and youth experience pre-existing inequities, in health and across the different contexts of their lives, due to a history of colonialization and systemic racism (Allan and Smylie, 2015). Researchers and Indigenous groups have called for research on the experiences, outcomes and protective factors regarding COVID-19, which meets the need of Indigenous communities (Howard-Bobiwash, Joe and Lobo, 2021; Skye, 2020). One of the few Canadian studies with a focus on Indigenous youth’s experience of the pandemic was conducted by Lee and colleagues (2021). They gathered qualitative data from child and family service providers from a single region in central Canada, approximately half of whom were Indigenous. Lee and colleagues (2021) found that, for some Indigenous young people, school closures removed Indigenous children from a colonial education system, and gave them time to connect with more traditional ways of learning. At the same time, limitations on social gatherings negatively impacted on their ability to connect with their culture and Indigenous communities and support.

It has also been noted that young Canadians were more vulnerable during lockdowns, reporting lower well-being and a decrease in mental health (Hawke et al., 2020; Statistics Canada, 2021). This may be due to school and daycare closures, which had an impact on some children and young people with underlying issues (e.g., those experiencing abuse or poverty)

because it limited their access to opportunities and support (such as safety or nutrition). School closures have also been reported to impact on friendships, and cause isolation and feelings of anxiety and depression among many students (Public Health Ontario, 2020; Li et al., 2021). In addition, the pandemic created inequalities in the system, as young people experienced different levels of access to education and health services, placing some children and youth at greater risk than others (Whitley et al., 2021). Further, a recent systematic review showed a shortage of effective interventions for adolescents’ psychosocial challenges (Boldt et al., 2021). A place to start could be asking youth how best to help them and give them a voice. This idea has been echoed in recent studies (e.g., Branquinho et al., 2020; Efuribe et al., 2020).

1.3 Objectives

Given this Canadian context, we used a child- and youth-centred lens to map the perceived effects of the pandemic on young people’s lives across a range of outcomes, and to capture their stories of how COVID-19 has affected their well-being. The project was conducted in partnership with UNICEF Office of Research – Innocenti.

Specifically, two questions were addressed:

1. How do children and youth (aged 10–19 years) perceive and experience the COVID-19 situation? How has it affected them? How have they coped with the health crisis and associated measures to contain the pandemic? What are the key issues from their perspective?
2. What are children’s ideas and proposals about: (a) responses to the current situation; and (b) how situations like this could be handled better in the future to ensure that children’s rights are protected?

This report summarizes some of the main findings and narratives of Canadian children and youth. It offers a glimpse into how they have experienced the pandemic and highlights some of the policy recommendations they would like to see in Canada.

Methodology

2.1 Participants and procedure

A total of 74 young people, aged 10–19 years, participated in the study. Participants identified across a range of demographic and background options. These were not mutually exclusive, and a number of participants fell into more than one equity-deserving group. Participants identified as girls/women (46%); boys/men (49%); gender neutral, gender fluid or agender (6%); LGBTQ+ (16%); First Nations, Inuit or Métis (5%); racialized (35%); having a disability (7%); and living in residential or foster care settings (8%).

Participants were primarily recruited through the Students Commission of Canada's extensive network of youth programme partners. The Students Commission of Canada is a national charitable organization with a mission to partner with young people to put their ideas for improving themselves and their communities into action. In Canada, recruitment through schools can be a lengthy process, with approval through local school districts sometimes taking a year or more (Ellard-Gray et al., 2015). In contrast, derived rapport sampling involves recruitment through community partners, who have a developed rapport with communities, and also enables us to focus recruitment at the national level. It is recommended for reaching typically hard-to-reach populations (Ellard-Gray et al., 2015). Where specific populations were required, we contacted additional organizations to partner with us. We attempted to recruit from groups who might be most affected by the crisis. Focus groups were connected to a variety of organizations, including those with services targeted towards at-risk and low-income, LGBTQ+ and group home (residential care) programmes, as well as recreational and youth advocacy programmes.

This study was approved by the Research Ethics Boards of Brock and Bishop's universities. Informed consent was obtained from all participants, and also from parents where children were below the age of 14 (Quebec) or 12 (provinces and territories outside of Quebec). There were a number of ethical considerations particular to the current study. For example, data collection was strictly online. This enabled us to reach young people across geographic distances, but was also accompanied by risks, including concerns about privacy, space and a greater sense of disconnection between young people and interviewers (Berman, 2020; Liegghio and Caragata, 2021). We addressed these concerns in multiple ways. As part of the protocol, participants and, where relevant, their parents were asked in advance about space and privacy. We provided flexible options for scheduling. We also checked in with participants about these considerations at the beginning of the interview. With regard to the sense of disconnection inherent in online interviews and focus groups, we provided information on freely available and accessible mental health supports (e.g., Kids Help Phone; <https://kidshelpphone.ca>). We also relied on relational ethics.

Relational ethics recognizes ethics beyond mandatory procedures, and as situated in relationships (Bergum and Dossetor, 2005). One part of relational ethics is seeing the connections between the researcher, the researched and the surrounding communities. In particular, as we recruited young people by partnering with community organizations, we were aware of and highlighted participants' ongoing relationships with staff and others in those organizations (Ellis, 2007, 2017). Thus, although our own communication was typically temporary, researchers encouraged participants to not only access mental health support as needed, but also to rely on the larger community organizations and individuals that supported their involvement in the research.

Three children and youth advisory groups advised the research team, and helped shape the project throughout each phase. The three advisory groups comprised young people aged 14–22 years, from across Canada; racialized urban youth living in Toronto, Ontario, aged 14–19; and young people aged 10–13 living in Quebec. The advisory groups provided suggestions on all aspects of the study (e.g., recruitment, interview probes, interpretation of themes). For example, the younger advisory group allowed us to pilot some aspects of the study, and advised us in areas such as flow of the focus group, and age-appropriate language.

Following contact, online focus groups were scheduled. Each focus group consisted of 5–10 participants per focus group. A total of 10 focus groups were scheduled online, using Zoom between January and April 2021, with participants from across Ontario, Quebec and Saskatchewan (see Figure 1). Focus groups were recorded and transcribed verbatim

for analysis. Prior to the focus groups, participants and parents, where applicable, were contacted and given instructions regarding the meeting and required supplies. Youth were asked to bring an object that symbolized and defined how they perceived and experienced the COVID-19 pandemic. They were also asked to bring paper and drawing supplies.

Focus groups were followed by a total of 23 in-depth, semi-structured interviews with Canadian children and youth from provinces and territories across Canada (see Figure 1), held in June and July 2021. Focus group participants from target populations were invited to participate in an interview. To strengthen representation from specific groups, additional potential participants were drawn from a reserve list of individuals who had expressed interest in being part of a focus group, but where numbers were insufficient for a focus group, by contacting partner organizations of the Students Commission of Canada.

FIGURE 1: Focus group and interview participant locations



10 Focus Groups & 23 Interviews

- Focus Groups, ages 10–13
- Focus Groups, ages 14–19
- Focus Groups, ages 14–19

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2.2 Protocols and instruments

Focus groups lasted, on average, one and a half to two hours. At the beginning of the focus group, the project was again described to participants and the consent form was briefly reviewed. The focus group involved several interactive elements and activities (see *Appendix 1*). Both focus group and interview protocols were drawn from the larger international study design (Viola, Centrone and Rees, 2021), and then adjusted slightly based on feedback from the child and youth advisory groups. Interview protocols were further adjusted, based on preliminary analysis from focus groups. Focus group participants were asked to present their object and explain why they had selected it. The second portion of the first activity involved participants using Mentimeter online polling software to provide three words that completed the following sentence: “COVID-19 makes me feel ...”. A word cloud was automatically generated and shared on screen and responses were discussed during each focus group. Following the completion of all focus groups, responses from across younger (10–13) and older (14–19) age groups were combined (see *Figures 2 and 3*).

Focus group participants were then invited to create a collaborative, imaginative story of a young person, similar to them, experiencing the COVID-19 pandemic. They were asked to draw a picture of this character and to draw a timeline of the key moments for this character during the pandemic. Researchers asked guiding questions that revolved around three themes: daily life, important relationships and physical/virtual spaces. These questions allowed the young people to elaborate on their character’s story and provide additional details about what this character had experienced throughout the pandemic. With the final theme – physical and virtual spaces – the participants were also asked to draw a map of the spaces their character occupied. Drawings were shared with the group at the end of the activity and screenshots were taken.

In a separate activity in the focus group (see Viola, Centrone and Rees, 2021), we displayed several lists of statements on young people’s perceptions of the

pandemic, and participants voted on the statement they were most interested in discussing (see *Figure 4*). Mentimeter was used to facilitate this voting process. Participants also individually answered three poll questions. For each of the three questions, participants were asked: “Pick the sentence from the list that most resonates with you.” They were then presented with a list of statements (e.g., “COVID-19 has had a big impact on our community”). Results are presented in *Figures 5 to 7*.

As a final activity, focus group participants were shown a one-minute clip of Canadian Prime Minister Justin Trudeau discussing the measures that have been put in place to regulate travel. This clip was taken from his press update on 16 January 2021. We then invited participants to share suggestions for government and policymakers, on steps that they should have taken or should take in the future, to limit the impact of COVID-19, and protect the well-being of young people like themselves.

The interviews lasted approximately one hour. Youth who had already participated in a focus group were first invited to expand on any thoughts they might have had or shared from that discussion. All participants were invited to discuss their lives in the areas of relationships (e.g., with family, friends or others), well-being (e.g., negative and positive experiences in their lives), aspirations for the future, attitudes and opinions on the pandemic, and agency (e.g., feeling informed, decision-making opportunities). We asked how their lives had changed in these areas and how they had stayed the same. At the close of the interview, we asked participants what could enhance their situation, or the situation of their family or community members, if the pandemic continued.

2.3 Data analysis

Concerning the analytical approach, we relied on thematic analysis from Braun and Clarke (2012). Thematic analysis is a flexible approach to data analysis. It provides a method of organizing data, and analysing data with the intention of providing meaningful, practical insight into patterns. We used

an inductive approach, to ensure that themes and findings were data-driven and grounded in children’s and youth’s experiences and meanings. Participants’ descriptions of objects and drawings were included in the interview transcripts, and therefore in the analysis.

2.4 Limitations and challenges

The study had a number of limitations. We were unable to include participants from all areas of Canada. The sample is not representative, and thematic findings are not generalizable. Participants were recruited through organizations, which likely created some selection bias. As well, there was likely some form of response bias. For example, it is possible that young people who were particularly disengaged or unconnected to the organization

might have been less likely to participate. Further, although we collected data from some participants at two time points, for some of their experiences young people were reporting on memories from the beginning of the pandemic and after. This use of some retrospective information might have produced different results from if we had followed participants repeatedly, over smaller time points.

An important limitation of the current study was the relatively low number of First Nations, Inuit and Métis participants. Although we recruited some Indigenous participants, it would have been beneficial to oversample Indigenous children and youth. Further, some Indigenous young people who did participate did not speak to any Indigenous-specific challenges or recommendations. The primary research team had no First Nations, Inuit or Métis members, which is likely an important consideration for future research (Lee et al., 2021).

FIGURE 2: Word cloud image from focus group participants aged 10–13 years

COVID-19 makes me feel...

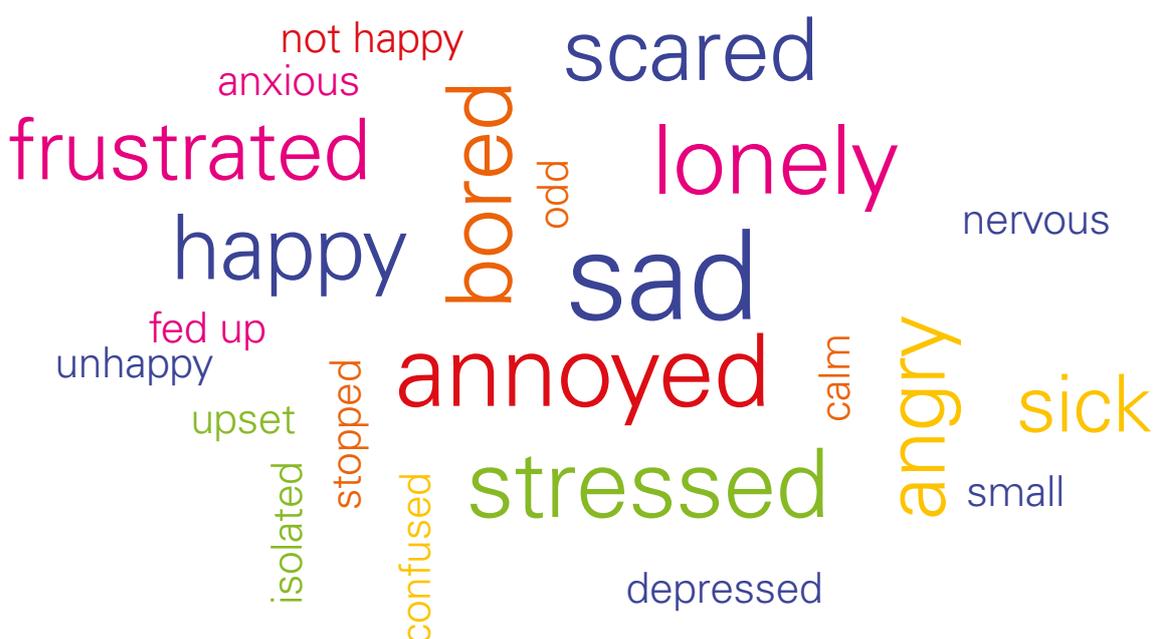


FIGURE 3: Word cloud image from focus group participants aged 14–19 years

COVID-19 makes me feel...



FIGURE 4: Online focus group poll 1

Pick the statement you would be most interested in discussing

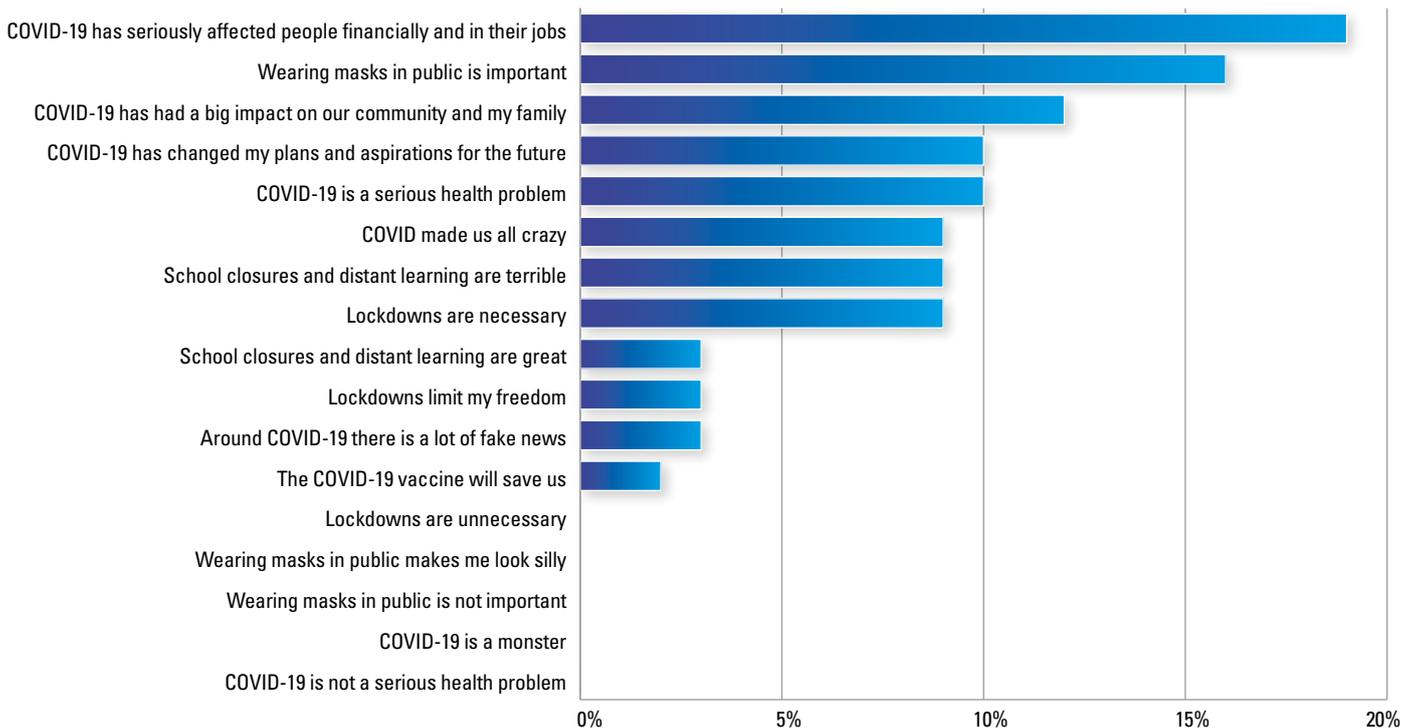


FIGURE 5: Online focus group poll 2

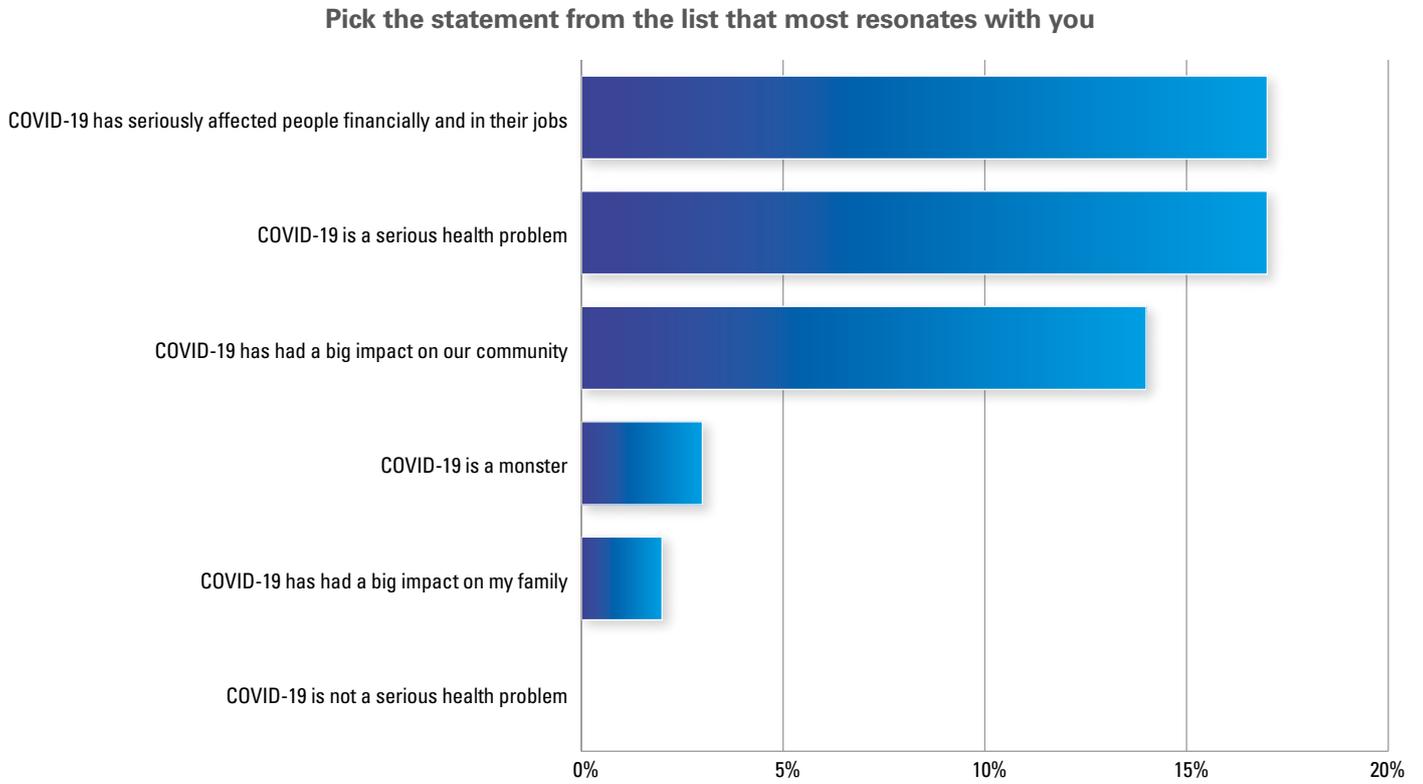


FIGURE 6: Online focus group poll 3

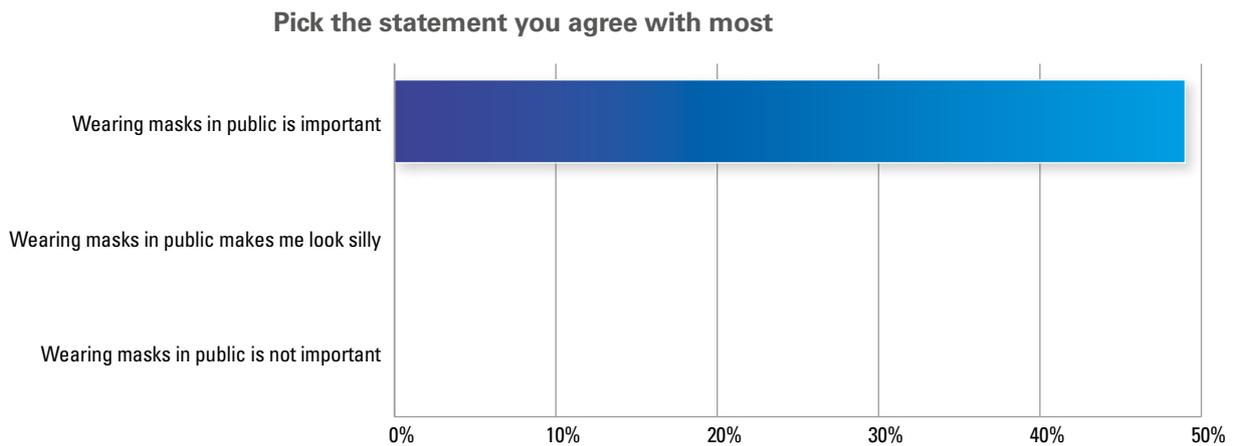


FIGURE 7: Online focus group poll 4

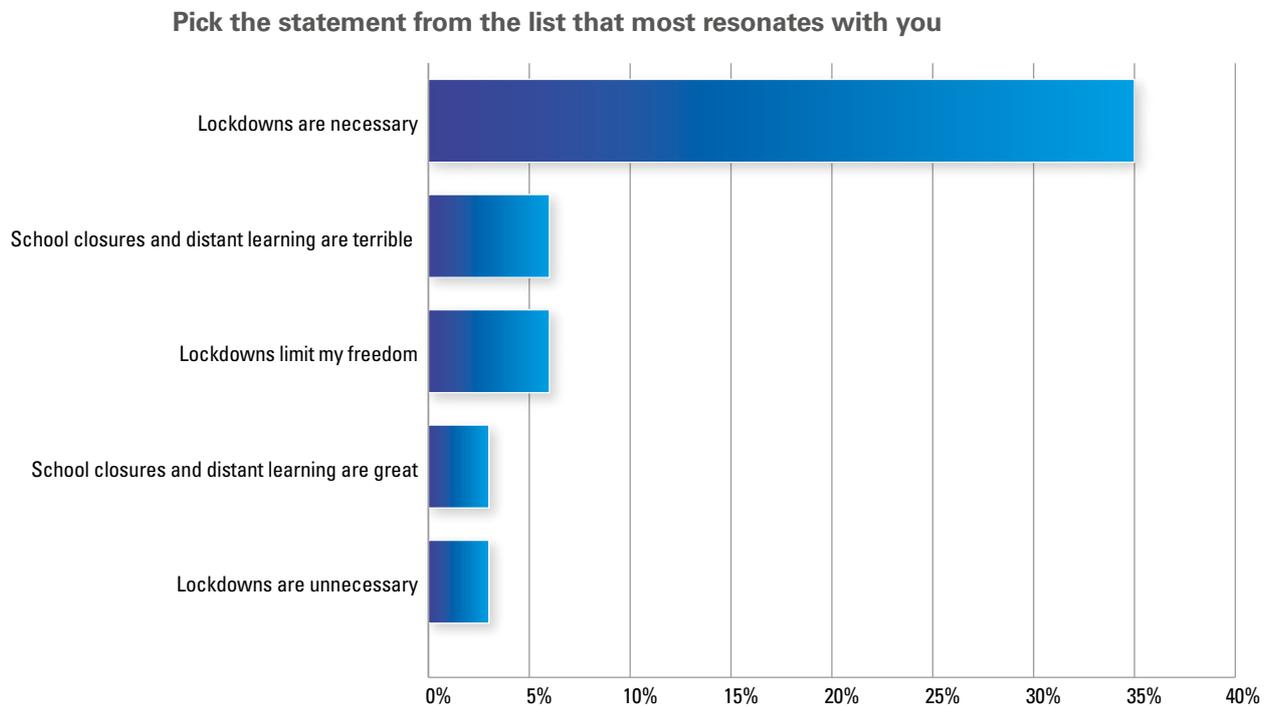


PHOTO COURTESY OF FOCUS GROUP PARTICIPANT



So my object is my Nintendo Switch, mostly because of the fact that lockdown has affected a lot of people and they've been on electronics way more often than they usually would. And also because lockdown is pretty lonely but you also have your friends to play. It's simultaneously lonely and not lonely, so odd feeling.

– 12-YEAR-OLD FOCUS GROUP PARTICIPANT

Thematic areas

A summary of themes can be found in Table 1, including a summary of age-related differences. We also found differences for some other specific groups of participants (e.g., LGBTQ+ participants). We have included these findings in Boxes 1 to 4.

3.1 Changes in relationships

Increased, and sometimes forced, closeness in relationships with parents and siblings

Many participants reported increased closeness with their parents and, to a lesser extent, siblings. They discussed spending much more time with them: “We go to the park sometimes, yeah. And we mostly talk to each other.” The same young person reported that this was different from before the pandemic, because then “I would rarely talk to my mum because I would be at school or in summer I’d be in camp” (male interview participant, 11 years old). Some young people reported less closeness with their parents, because their

parents were highly stressed at work or “trying to work to keep the house from caving in” (female focus group participant, 11 years old). Young people reported playing sports and other activities with siblings, providing caregiving, and also experiencing feelings of annoyance from a lack of space.

Participants in the older groups discussed a different sort of closeness to their parents, which one participant referred to as “forced proximity” (male focus group participant, 19 years old). “The problem is it’s not like you’re growing close with them. It’s just that you’re necessitated to spend large periods of time with them. It’s not like a natural kind of growing together it’s just, you don’t have any choice but to be there” (male focus group participant, 17 years old). This theme was not apparent in focus groups or interviews with participants from the younger age group, and was distinct from the occasional annoyance some young people reported about their sibling relationships.

TABLE 1. Qualitative themes and sub-themes

THEMES	SUB-THEMES	AGE-RELATED DIFFERENCES
Changes in relationships	<ul style="list-style-type: none"> Increased, and sometimes forced, closeness in relationships with parents and siblings 	<ul style="list-style-type: none"> Both younger and older participants described increased closeness. Older participants described this as more unnatural or forced closeness.
	<ul style="list-style-type: none"> Changes in relationships with extended family 	
	<ul style="list-style-type: none"> Changes in friendships 	
Changes in activities and use of time	<ul style="list-style-type: none"> Loss of extracurricular activities 	
	<ul style="list-style-type: none"> New activities, skills and hobbies 	
	<ul style="list-style-type: none"> Engagement in new, online community activities 	

THEMES	SUB-THEMES	AGE-RELATED DIFFERENCES
Developmental implications	<ul style="list-style-type: none"> Concerns about children’s and youth’s development 	
	<ul style="list-style-type: none"> Shifts in normative developmental transitions and trajectories 	
	<ul style="list-style-type: none"> Changes in focus, productivity and motivation 	<ul style="list-style-type: none"> These changes were described by older participants only.
	<ul style="list-style-type: none"> Identity development and enhanced sense of self 	<ul style="list-style-type: none"> These changes were described by older participants only.
	<ul style="list-style-type: none"> Irregular or different sleeping, eating and daily schedules 	
How the pandemic has made young people feel, and how they have responded	<ul style="list-style-type: none"> Mixed emotional responses to the pandemic 	<ul style="list-style-type: none"> Younger groups recorded anger and annoyance as more prominent feelings than older participants did.
	<ul style="list-style-type: none"> Changes in meaningful engagement and connection 	
	<ul style="list-style-type: none"> Larger worries for others in the world, and for the future 	
	<ul style="list-style-type: none"> New measures to cope, including nature, pets, objects and spaces 	
Education	<ul style="list-style-type: none"> School challenges, including difficulties with online school, hybrid learning or new school schedules and structures 	
	<ul style="list-style-type: none"> Inequitable access to devices and the internet 	
	<ul style="list-style-type: none"> Less connected relationships with teachers 	
Agency, decision-making and the larger world	<ul style="list-style-type: none"> Lack of transparent information from government 	
	<ul style="list-style-type: none"> Influence over some others 	
	<ul style="list-style-type: none"> The pandemic’s implications for Canada and the world 	

Note. Age-related differences, based on a comparison between younger participants (aged 10–13 years) and older participants (aged 14–19 years) are noted in the third column.

Changes in relationships with extended family

There were different reports about how young people's relationships with their extended family changed. Many discussed not seeing cousins, grandparents and other extended family members. One expressed concern that "it was hard for the grandparents" (female interview participant, 10 years old) to be so isolated. Other participants reported finding new ways to connect, such as walks from a distance, or being in regular and more contact with extended family because of caregiving roles. For example, some reported seeing grandparents more frequently, because they provided care for participants; others reported that they provided childcare for others (e.g., nieces or nephews).

Changes in friendships

Changes in friendships included loss of friendships or feeling more distant from friends. Participants reported being connected online and sometimes in person with a smaller number of friends than pre-pandemic. There were some benefits to this, because participants reported that it allowed them to choose who they interacted with: "he's finding out who he's actually close to" (female focus group participant, 17 years old). Unlike before the pandemic, there was "no forced social interaction. You can also see who you could actually trust" (male focus group participant, 17 years old).

In interviews, young people stated that their friendships were not worse, precisely, in that there were not new disagreements or conflicts, but that they became more distant, even with friends with whom they were happy to interact. "Our relationship got ... I wouldn't say worse because and I wouldn't say better. But there's no other category ... we're not in some, some type of conflict. Like I can text them right now and have a normal conversation ... but our interactions together just died down completely" (male interview participant, 17 years old), or similarly that the friendship had "not gotten worse. It's just gotten less" (agender/gender-fluid interview participant, 17 years old).

Some young people reported that they were able to see their relationships more clearly, and disconnect from those that they viewed as negative: "I've just realized during the pandemic, like they're not good

for me" (female interview participant, 17 years old). Conversely, one young person discussed having someone else disconnect from them: "we didn't have boundaries set up ... we talked every day and she just blocked me and said, I can't deal with this anymore" (female interview participant, 17 years old).

A number of young people discussed making online friends. Although this was discussed as something that happened before the pandemic, this was sometimes viewed as more important now: "online friends that you make during a pandemic are like your ride or dies" (female focus group participant, 16 years old). Young people reported making online friends through mutual, existing friends. Young people also met online friends through gaming, social media and online schooling.

3.2 Changes in activities and use of time

Loss of extracurricular activities

Many participants reported the loss of extracurricular activities, primarily sports. They noted that "sports were shut down", and that they missed curling, volleyball and many other sporting activities. As one young person said, "I just want to play a game of 5-on-5 basketball" (male focus group participant, 17 years old). For some, this also involved lost opportunities to compete and travel to other parts of the country. A number of youths also discussed losing part-time jobs and, at certain points during the pandemic, having few options for employment.

New activities, skills and hobbies

Many participants discussed spending time gaining "amazing cooking skills" (male focus group participant, 16 years old), and doing other activities such as drawing, crocheting, exercising and learning to cut their own hair. The most commonly mentioned activities involved some form of technology or time spent online – for example, playing video games, such as Minecraft and Roblox, and spending time on social media. Technology was mentioned throughout the interviews and focus groups, and connected

to activities and almost every other theme. When presenting objects, many presented phones, laptops, gaming devices and similar items: “It’s sort of like a separate body part of mine now. I just can’t live without it, which is kind of sad” (male focus group participant, 17 years old).

Several young people discussed having opportunities for activities that they would not have had without the pandemic. For example, one young person discussed taking online violin lessons from their “dream teacher” (third-gender interview participant, 18 years old), an opportunity that was not previously available, and others mentioned “video editing” (male focus group participant, 13 years old). Perhaps even more, young people mentioned spending time outside, going for walks, to parks, alone or with others. Some of this was context-dependent, with some participants mentioning specific activities, such as sledding or fishing (e.g., “there’s a bunch of lakes everywhere. So I got my tackle box in the summertime” – male focus group participant, 17 years old).

Engagement in new, online community activities

A smaller number of participants described new engagement in online community initiatives, which they attributed to the pandemic. Those involved in such activities also mentioned meeting new people, often from other parts of Canada. They reported finding “new passions that I didn’t know I had” through these events and initiatives (female interview participant, 16 years old), and the opportunity to participate in and lead virtual youth leadership, rights and advocacy programmes with adults and youth. They discussed building “virtual relationships” through these opportunities (female interview participant, 15 years old). Another youth also discussed developing and providing mentorship through their own non-profit, because “the pandemic is so hard, especially for, you know, people of colour, people that look and sound like me. We’re trying to help them prepare for high school ... so we meet every other Sunday to deliver workshops” to younger youth in their community (female interview participant, 18 years old). One young person noted that isolation and social restrictions limited the decisions she could make in her life, so

that decisions around youth programmes were “the only decisions I’ve been making for myself” (female interview participant, 16 years old).

3.3 Developmental implications

Concerns about children’s and youth’s development

Young people expressed concern about how lockdowns and living through the pandemic would affect children’s and youth’s development in the long term. They discussed the need for young people to have experience and social stimulation, because their “brains are developing”, “crucial windows” are being missed, and “things aren’t happening, mainly socialization. My sister has developed agoraphobia since the pandemic” (third-gender interview participant, 18 years old). Similarly, another young person said that “kids are going with mental health issues, depression, anxiety, and it’s really interfering on who they should be in the future. And they just can’t grow up to be that person because these restrictions are blocking them from it” (male interview participant, 17 years old). As one young person put it, “it’s difficult to grow up in an apocalypse. It’s very difficult to have these new experiences to still grow, too” (gender-fluid interview participant, 19 years old).

Shifts in normative developmental transitions and trajectories

Participants often reported having developmental transitions and goals delayed or thrown into question. This seemed to be especially the case for young people who were at transition points – for example, at the end of high school (e.g., “grade 12 is the most important year” – female interview participant, 18 years old), or with goals of leaving the family home or foster or residential care. They discussed not wanting to make decisions for the future, being uncertain of what to do, and that it was “kind of hard to make long-term decisions when you don’t know what’s actually going to still be available or open” (male focus group participant, 17 years old). As another youth said, “I’m going to university next year, I might be moving away,



I feel like for quarantine I definitely have to focus in on my mental health. So something that like really spoke to me over quarantine is like just journaling and then I had a candle because I feel like they go hand in hand.

– 18-YEAR-OLD FOCUS GROUP PARTICIPANT

but that can influence my decision because I don't want to choose to go to university ... pay to live there, and then either not be able to live there, or to be stuck in a foreign city stuck in my room the entire time ... it's pretty terrifying to think that you can commit somewhere, and you have no idea what's going to happen, after" (male focus group participant, 17 years old). Young people reported that the pandemic left them feeling in "limbo" (multiple participants) and "uncertain what they wanted to do" (male focus group participant, 17 years old) for their futures.

Changes in focus, productivity and motivation

For some young people, being at home allowed them to "focus on my studies a lot more" and become "more productive". In contrast, others reported a lack of productivity: "I don't think I did anything productive. I was just sitting at home in my room and bed all day ... Just lazy" (female interview participant, 16 years old). One participant described how they spent one day "researching different types of beans. I actually went down that route one morning before class. I was supposed to be doing work, had beans for breakfast, and I'm like, 'What kind of beans are these?' and then I learned a bunch, but a lot about beans, and did no work" (third-gender focus group participant, 18 years old). Focus, productivity and motivation also seemed to shift across different points of the pandemic, with some young people gaining focus, and others losing the motivation they initially had: "I have a feeling that they probably started off caring a lot about what was going on, trying to keep up with all of the news and how it was going everywhere, and they're probably fairly apathetic to it now and just kind of in their own little bubble" (third-gender focus group participant, 18 years old).

Identity development and enhanced sense of self

Older participants discussed gaining new self-awareness and shifts to their identity, as a result of time for self-reflection. For example, in creating the character during the focus group, a participant said

that "he understood himself better, like he got to know who he really was and stuff like that, because he had the time for himself ... that made him feel more self-confident and he has more self-love" (female focus group participant, 16 years old). Others talked about greater "self-awareness and self-actualization" (female focus group participant, 18 years old), spending more time with themselves and gaining new perspectives on themselves. A number of youths talked about "being okay with not having the highest mark in the class", changing their goals and being more flexible in their ideas about their future (female focus group participant, 17 years old). Some found new abilities to plan and create goals: "I found some time to research more about what I want to do and what I want to pursue as a career" (female focus group participant, 16 years old) and to "be more flexible and change future goals in positive ways" (female focus group participant, 18 years old).

Irregular or different sleeping, eating and daily schedules

Participants often described their schedules, including sleeping and eating, as very irregular or different from pre-pandemic: "my day-to-day life is just a jumble of messed-up sleeping schedule, school and just watching my shows and you know spending, wasting my time my parents would say, on shows, cartoons, whatever ... and it's certainly not a good thing. But I mean, I'm getting my work done ... I wake up for my school. I'm looking for a job, you know, getting my tasks done. All while, you know, having that messed up schedule" (male interview participant, 17 years old). Participants brought objects like melatonin and clocks, to represent changes in sleep and schedule, and said that sometimes "time felt endless" (female focus group participant, 17 years old). Although participants sometimes expressed concern about the health effects of changing schedules, they sometimes reported that they could develop schedules that were a better fit to their needs and preferences (e.g., "I realized 9am is my primetime" – female focus group participant, 18 years old).

3.4 How the pandemic has made young people feel, and how they have responded

Mixed emotional responses to the pandemic

Participants reported having negative emotional responses, including feeling sad, mad, stressed, bored, anxious, scared, overwhelmed and alone. They stated that their “mental health was not the best sometimes” (female focus group participant, 16 years old). Multiple participants also expressed feeling “apathetic”, and “detached” or “disconnected” from school, extracurricular activities and people. Others indicated feeling grateful that they had been relatively safe and for the positives in their lives, happy to have time to spend with their family and relax, and optimistic about the future.

For some young people, these feelings already existed but were exacerbated by the pandemic: “Like I go on walks in nature. But, I’m not really speaking to anyone. I’m just listening to my sad, sad music ... I definitely think that I did have a problem before the pandemic but the pandemic definitely did make it a hell of a lot worse” and “It’s kind of hard to care” (male interview participant, 19 years old). A young person from Nunavut noted that “we already have some mental health struggles in the north, because of the specific struggles we face and intergenerational trauma” (female interview participant, 15 years old).

A number of young people told of themselves or family members having COVID, or believing that they might have contracted it. They described being scared, needing to isolate. Some were “scared to get COVID” (male focus group participant, 12 years old), others were scared of the impact of that on the family, “because if my mom got COVID her whole work would stop and my dad, his work would stop and it was scary” (female interview participant, 15 years old). Several participants also specifically described worries for older populations, who might be particularly at risk.

Differences between the younger and older age groups in emotional responses to the pandemic

In focus groups and interviews, unlike the older age

group, the 10–13-year-olds seemed to report that their most prominent feelings were being angry (e.g., “pretty mad”) and annoyed: “I was mad that I didn’t get to talk to my friend or see him. And now that we have two masks, I barely see his full face” (male interview participant, 11 years old). Some differences were also apparent in the word cloud, in response to the statement “COVID-19 makes me feel ...” (see *Figures 2 and 3*). When probed, the younger age group did not identify any targets for their anger, or anyone that they felt was responsible. They did, however, indicate that these feelings were a result of having to wear a mask, being bored, losing activities, not being able to see friends and, in the province of Quebec, feeling “rushed” and needing “to be home in time” for the province’s evening curfew (male focus group participant, 10 years old). Young people’s feelings seem to be a result of the cumulative expectations that the pandemic has placed on their lives: “My brother annoys me, and then being on school [school online] all day annoys me, and then I can’t even do much afterwards anyways ... we have to get our masks, and you have to wait outside in the heat ...” (female interview participant, 11 years old).

Changes in meaningful engagement and connection

Across themes, a number of young people reported a lack of engagement in school, with activities and with those around them. They described feeling “very disconnected from the world like just kind of dissociating you know when you don’t see people for so long, and you kind of forget how to act socially or you feel like going back to that you feel like you lost those social skills and then you lose confidence because you think that you’re not normal ... so that really disconnectedness” (female focus group participant, 16 years old).

For some young people, feelings of meaningful connection seemed to be available – through family members, through community work or through new self-awareness and goals for their future – but for others these were not present. Some discussed lack of connections with parents: “her other parent’s real stressed with work and everything, they work as an essential worker and it’s been very hectic for



Young people also reported using measures to cope. In almost all focus groups and interviews, participants reported going for walks, being outside, and going to parks, often as an activity, either alone or with family members, and as a specific means to cope with negative feelings.

them and maybe they come home, not in the best mood” (female focus group participant, 19 years old). Similarly, a focus group participant (female, 19 years old) described “having to come home to your parent when they come home from work and they’re upset about whatever happened during their day then that gets taken out on you and that stress becomes yours”.

Several participants described the need for others in their lives, including teachers, to have something that drew them all in and kept them connected and engaged, stating that “they need to be aware of how people are feeling, most of the kids feel depression. So I want them to be aware and ask the kids how they’re feeling”, so that young people will not be upset, “because they’ll be feeling like people care about how they feel, right?” (male interview participant, 15 years old). Further, participants pointed to existing supports as necessary, but not sufficient: “we need more, not necessarily a crisis, but this person needs help. Where they can just call in and check in with their person whenever they need to ... Because like if you call Kids Help Phone, you might get a different person every time ... You know, and then you have to reexplain the situation. Whereas, if somebody could really connect with one counsellor or, you know, social worker or something?” (female interview participant, 17 years old).

Larger worries for others in the world, and for the future

When asked about worries and hopes for the future, a number of young people expressed concern that “this may never end” (male focus group participant, 14 years old), or worse, “maybe if it’s bigger” (male interview participant, 11 years old), “that’s my biggest fear right now” (male interview participant, 15 years old). They stated that they hoped “to be able to live normally” (male focus group participant, 17 years old), without masks, and to spend time with friends and family, doing everyday activities like playing basketball and going to the mall.

New measures to cope, including nature, pets, objects and spaces

Young people also reported using measures to cope. In almost all focus groups and interviews, participants reported going for walks, being outside, and going to parks, often as an activity, either alone or with family members, and as a specific means to cope with negative feelings. Young people used art and journals, and reported that social media provided information and the feeling that they were not the only people feeling that way. Social contact, however small, seemed to be particularly helpful. Young people talked about needing someone to talk to, and the need for mental health services, which were sometimes available and sometimes not.

Participants described pets, objects and spaces that provided comfort. Pets provided physical comfort, companionship and someone to talk to, especially when there was “no one else in isolation” (male focus group participant, 16 years old). Young people described spending a lot of time going for walks with their pets. Objects included stuffed animals, blankets and sweaters, which gave “a lot of comfort” (gender-neutral/agender focus group participant, 17 years old).

Participants described bedrooms as central to their lives. These spaces were sometimes presented as providing comfort, and sometimes as “suffocation”, “organized chaos”, “not well-kept”, “this camera is strategically placed for a reason” (focus group participants, aged 17–19 years old). Their bedrooms were also described as the focus of their activities, “the entire room got reorganized at some point or several points”, “their bed is now in their closet”, and “that’s like the fifth location it’s been in”. It was also, however, a place to relax and sleep, and a “sanctuary” (male focus group participant, 15 years old).

One of the most common topics that participants discussed, across age groups and in interviews and focus groups, involved going for walks and spending time outdoors. Participants discussed going on walks

with family: “before the pandemic, my family would never seize the chance to go outside, but now that we’re in the pandemic it’s like, oh let’s go outside” (male interview participant, 11 years old). They also used it as a time to get some space from the house and people living in it. It helped them clear their minds and feel “less alone in the world” (male focus group participant, 17 years old).

3.5 Education

School challenges, including difficulties with online school, hybrid learning or new school schedules and structures

At the beginning of the pandemic, many students had a break and/or were shifted to learning at home. Some were excited and relieved for the break. However, several reported that in the next school year, this created a learning gap: “it was a little bit more difficult to catch up what you had missed” and “it was hard for me to understand stuff ... to understand the work we were doing” (male interview participant, 12 years old). Some reported that it was “harder to understand school concepts online” (female focus group participant, 16 years old), or that they expended less effort on some tasks, because there was no need to memorize information, when they could “just open your book and check” (female interview participant, 16 years old). Many also reported feeling “overwhelmed”, feeling like they had “to learn by themselves” (female interview participant, 18 years old), and having more work online than they would in person. At some schools, courses were taught in more intensive, shorter duration periods than they were previously (known as “quadmesters”). Some reported that this was too much in a short period of time, which added to their stress. Some students nearing the end of high school also reported that they had trouble accessing the courses they needed, because they were not offered online or were full.

Inequitable access to devices and the internet

Across multiple provinces and groups, some participants reported challenges with devices. For example, youth in Nunavut reported that online school was available only in a limited way because of a lack of internet access. Other young people reported using

devices from school, but that these were often slow and of very poor quality, and limited students’ ability to participate fully. As one young person reported, “online school sucks, it just sucks”, because of the constant lags and the tendency of the device to erase assignments while he was working on them (male interview participant, 11 years old).

Less connected relationships with teachers

Participants tended to report feeling less connected with teachers. Some participants reported missing their teachers when school went online during the pandemic. During the course of the pandemic, youth also changed grades and terms, and therefore teachers. Depending on the scheduling (e.g., in quadmester situations), teachers changed more frequently, making it even more challenging to build relationships. Also, some more spontaneous, informal connection seemed to be lost, whether school was taught online or in person: “usually the teachers, they were allowed to take you aside and talk to you and see what’s wrong when they can’t do that because they have to stay a two-metre distance” (male focus group participant, 12 years old).

3.6 Agency, decision-making and the larger world

Lack of transparent information from government

Most young people reported feeling that they were informed enough about the information that was available to the general public regarding the pandemic. A number of participants noted that the government, in general, does not inform the public about their decision-making and rationale, and in particular participants noted that decisions regarding moves to online or in-person schooling happened without full transparency or notice given to the public. They indicated, however, that this issue was not specific to young people.

Influence over some others

When asked who they influenced in life, young people identified their peers and sometimes family members. A number of participants reported that the government

and policymakers do not listen to young people, “because I’m 15” (male interview participant, 15 years old) or because “everyone just thinks teenagers are stupid” (female interview participant, 16 years old); and that “adults don’t really have conversations that intense with children ... I only get ‘Okay, you are not going back to school or you’re not allowed to go out this week.’ ... Usually they don’t find it important for kids to know” (male interview participant, 11 years old). Some young people, however, discussed having influence – for example, reporting that they “have a bit of a following on social media” (female interview participant, 15 years old) and that young people can make the world a better place through social media.

The pandemic’s implications for Canada and the world

Young people expressed that the pandemic had implications for Canada and the larger world. They said that the world had learned that “anything can

happen ... This was all just like a bomb exploded” (female interview participant, 16 years old) and that “we’re severely underprepared for any kind of global disaster” (agender/gender-fluid interview participant, 17 years old). They suggested that the world was learning to be prepared, and needed to be patient in trying to find solutions to world challenges. They also noted that people had learned that working from home was possible, and that providing people with options for work and other aspects of life provided “an accessibility need” that “people have been denied” (third-gender interview participant, 18 years old). They described people learning to be grateful for simple things and gaining a heightened awareness of the experiences of others in Canada and internationally, and they also highlighted the need to attend to “structural things” to strengthen human rights and ensure that disparities were addressed. Some had participated in protests about world events during the pandemic, or other larger initiatives.

BOX 1:

LGBTQ+ YOUTH

DIFFICULTIES IN ACCESSING BINDERS, SURGERIES (E.G., TOP SURGERIES) AND NAME CHANGES. Some trans youth reported challenges with access to services, such as surgeries and name changes, and long wait lists. For example, one young person, on the waiting list for top surgery, reported that public healthcare covers the cost of top surgery if a doctor has requested it, within two years of the request/approval. They further reported, however, that the provincial government had temporarily paused the approval process, and at the time of data collection the waiting list was longer than two years, so that re-approval might be necessary.

BEING AT HOME, WHERE IT MIGHT NOT BE SAFE. Being at home was described as less safe, because of the intensity of day-to-day interactions, as well as in the longer delays in the ability to move out. As one youth stated, “the percentage of people

who are LGBTQ who have rough home lives is very high, and a lot of people that I know personally who have turned 18, or are trying to move out, and then because of COVID haven’t been able to. So those are my concerns” (third-gender interview participant, 18 years old). Young people discussed “transphobic microaggressions” from parents, and that “if there weren’t a pandemic, I could avoid him. But now that we’re all stuck at home ...” (agender interview participant, 17 years old). Youth reported that home challenges could usually be alleviated by leaving the home and spending time with supportive friends, but because of the pandemic this option was not available to them. Similarly, being kicked out was a fear for some young people, because “if I got kicked out, I have no way of supporting myself” (agender interview participant, 17 years old) but that child protective services would be unlikely to provide any support.

BOX 2:

RACIALIZED YOUTH

CONCERN FOR OTHER RACIALIZED PERSONS, WITHIN CANADA AND INTERNATIONALLY. Several racialized youth, in particular, mentioned concerns about larger world events and conditions. Sometimes this was regarding their own or their family’s country of origin, or other countries where they had ties. Other concerns that were mentioned were the need to have vaccines in racialized communities that were hotspots, and the need to have diversity training in schools, because sometimes teachers only saw their names on the screen, and participants felt that assumptions were made about students that might have been mitigated if there had been more opportunity for in-person contact.

DEEPER ENGAGEMENT WITH FAITH AND RELIGION.

A number of racialized young people in the study identified themselves as Islamic, and discussed their experiences as Muslim youth during the pandemic. One significant problem during the pandemic was that, in the month of Ramadan, they were unable to go to night prayers at the mosque.

Some youth, however, discussed deepening their religious knowledge, and valuing it more. For example, two participants mentioned beginning to wear the hijab during the pandemic, and several mentioned prayers – for example, creating their “own little space in my room to pray” (female interview participant, 15 years old) or doing daily prayers more regularly. Participants reported similar reasons for the change: “I think it would be two things, the pandemic, and things happening in the world. Because I see a lot of my brothers and sisters, Palestine, China, France, the London, Ontario situation that just happened. It’s just bringing you back to reality, it’s just a slap in the face telling me, you can die and your life could be taken, whether it be in a car accident, whether it be in a sickness, you never know, a heart attack, anything could happen to you. So you might as well go out bettering yourself rather than going down the same dark path” (male interview participant, 17 years old).



PHOTO: SHUTTERSTOCK

I actually thought of a clock, because at the beginning of quarantine, time felt endless with ... the new terms of lockdown ... so when school was completely shut for two weeks, it was a shocker for everyone. But now it felt like time just flew ... it’s almost been a year of COVID with the lockdown and everything. So that’s why I would use a clock to kind of represent COVID.

– 17-YEAR-OLD FOCUS GROUP PARTICIPANT

BOX 3:

CHILDREN AND YOUTH IN CARE AND RESIDENTIAL SETTINGS

LIMITED CONTACT WITH FAMILY MEMBERS, INCLUDING NON-RESIDENTIAL SIBLINGS AND PARENTS. In focus groups and interviews, some participants mentioned already having limited contact with a parent, but that becoming worse during the pandemic: “people I spend less time with was family. I barely see my parents ... we just text each other or FaceTime ... It’s really shitty. Because, I miss my mom a lot. And I, I just really want her in my life. And I can’t because of COVID” (female interview participant, 17 years old). Whether they were in foster homes or residential care settings, young people mentioned the challenges of needing to problem-solve the involvement of multiple external households or immediate family members. For some young people, that involved having multiple contact points and therefore

greater risk, and almost all of the young people in care or residential settings mentioned not seeing some family members (e.g., siblings, parents) for extended periods of time. “My brothers and sisters obviously aren’t in the same household as me, so ... I will be able to see them when things get better but sometimes it’s been like months at a time that I haven’t seen them or interacted with them” (gender-fluid interview participant, 19 years old).

THE IMPORTANCE OF HAVING A CONNECTION WITH STAFF AND CAREGIVERS. Some young people in care also discussed the importance of their connection with their youth workers or other caregivers. A young person in residential care expressed how important it was that staff would “say how’s your day and how’s your morning” every day (male interview participant, 15 years old).

BOX 4:

CHILDREN AND YOUTH WITH DISABILITIES

CHALLENGES FROM NEW REQUIREMENTS AND REPEATED CHANGES TO ROUTINE. Some young people with disabilities reported that the changes and requirements that occurred were “confusing” (male interview participant, 10 years old). Structure and routines were changed, often repeatedly, making it more difficult to navigate daily activities. For some, this included taking the bus, where new rules were put in place about where to sit and how to pay. Some youth with disabilities stopped attending school altogether, or moved to online learning if that was an option. As with other aspects of life, there were changes specific to school that youth reported finding difficult to manage – such as taking classes with new groups of students, experiencing

staffing changes, the restructuring of the school year, and course changes, with some classes becoming unavailable. Some youth also reported that they were not provided with staff support when teaching shifted online. Two interview participants with disabilities reported that changes to schooling led to delayed high school completion.

IMPORTANCE OF IN-PERSON ACTIVITIES. Some young people with disabilities reported being part of some in-person activities for part of the pandemic, and indicated that these were very important for them, providing a small, fun opportunity to connect with others and participate in activities, and being one of very few options for this that they had in their lives at the time.

Discussion

In this research project, we sought to learn about children's and youth's perspectives on their lives during the COVID-19 pandemic. We used a child- and youth-centred lens as much as possible, exploring a broad range of positive and negative possible experiences across the contexts of young people's lives.

Our findings connect to research literature on children's and youth's developmental needs. Many young people described an increased closeness with their parents, engaging in more activities together. Other studies (Coppens et al., 2014; Rogoff, 2014) have also described similar children's and youth's participation in their families and communities, across cultures and countries. Rogoff (2014) refers to this as "learning by observing and pitching in", and themes in the current study suggest that many Canadian children and youth may have gained new developmental experiences through greater time and skills-based learning at home.

Adolescence is a time when young people are developing their sense of self and identity, and the context of the pandemic clearly shifted that for the participants in the study. Older youth tended to express a need for more alone time and autonomy from parents than they were able to find, while younger participants did not describe this problem. This desire, along with other needs and challenges (e.g., focus, new values) that the older participants expressed, is consistent with the developmental tasks

of late adolescence and emerging adulthood (Arnett and Mitra, 2020; Oliveira et al., 2020), and might suggest that these were constrained for some young people, but strengthened for others.

Young people's discussion of lost and altered friendships also links to research on children's development. The discussion about being able to choose the friends they interacted with, rather than experience forced social interaction, links to Vaillancourt et al.'s (2021) findings that young people experienced lower levels of bullying during the pandemic. As noted by some participants, however, it is also unknown to what degree the losses of friendships and social experiences, which are so context-dependent (Junge et al., 2020), may lead to lost social competencies or other developmental losses.

The loss of activities that our participants reported has been found across Canada. For example, in a recent study involving over 5,000 Canadian girls aged 6–18 years, researchers found that one-quarter of girls who participated in sports before the pandemic are not committed to returning to sports (Canadian Women & Sport and E-Alliance, 2021). Consistent with our own findings, most young people experienced a decrease or complete halt in their sports participation. This means that the potential gains that sports bring to young people's lives, including physical health, social connections, better mental health and fun (Murray et al., 2021), will also be lost for those young people.



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4.1 Child and youth advisory groups

The three children and youth advisory groups were a particular strength in this study. One clear concern young people expressed in the current study was the lack of input they could provide into policies and political decisions. In the recent UNICEF Report Card 16 (UNICEF Canada, 2020), UNICEF made three major recommendations to improve child and youth well-being. One of these was to listen to children and youth, to dialogue with children and youth to understand their lives, worries and aspirations, to involve them in decision-making and to co-design solutions. This is in line with recommendations from researchers (e.g., Efuribe et al., 2020), who have suggested that direction from young people is necessary both for meaningful research into young people's experiences of the COVID-19 pandemic, and for designing positive steps forward.

In this project, the child and youth advisory groups provided suggestions and input on all aspects of the project. For example, the younger advisory group allowed us to pilot some aspects of the study, and advised us in certain areas, such as flow of the



PHOTO: SHUTTERSTOCK

I chose a mask because ... through COVID we all had to wear masks and it's very frustrating because I don't like wearing masks.

– 10-YEAR-OLD FOCUS GROUP PARTICIPANT

focus group and language. Advisory groups also provided suggestions on interpretation of themes, and discussion on how they link to policy. They also reinforced many of the themes. One member of the younger advisory group noted that, of course, they felt angry, because it is "like you're locked up". Beyond the current study, the advisory groups discussed the need for policies that impact on younger children, and the need to ensure that children and youth of all ages could access pandemic-related information.

Conclusions and recommendations

Policy recommendations pertained to federal, provincial/territorial and local governments, as well as to school districts, and child and youth service sectors. We recommend that all policymakers consider their potential roles in addressing each recommendation.

POLICY CHALLENGE 1.

Understanding the developmental needs of children

Many young people expressed the need for government, policymakers and other decision-makers to understand the specific needs of children and youth. “The government should really think about us before making these big changes and decisions” (female interview participant, 16 years old) and “it’s really important to get the feedback of the people who are going to be impacted” (female interview participant, 16 years old). One example of this was the restructuring of school days in some places, with no apparent consultation with youth or monitoring of their experiences, and there were problems reported as a result of these shifting schedules.

- **POLICY RECOMMENDATION 1.1. ESTABLISH THE PRINCIPLE THAT THE BEST INTERESTS OF CHILDREN AND YOUTH ARE A PRIORITY IN ALL CRISIS STRATEGIES AND PLANS, AND TRACK THEIR ONGOING WELL-BEING.** Track the ongoing, evolving, multi-dimensional well-being of young people with both quantitative and qualitative data, providing robust opportunities for young people to interpret data and participate in related actions.

- **POLICY RECOMMENDATION 1.2. WHEN DEVISING POLICIES THAT WILL AFFECT CHILDREN AND YOUTH, SEEK REGULAR INPUT AND FEEDBACK FROM LARGE NUMBERS OF DIVERSE YOUNG PEOPLE.** This feedback process should happen regularly, and involve input from large numbers of children and youth, with various needs.
- **POLICY RECOMMENDATION 1.3. ESTABLISH NEW OR EXPANDED, EASILY ACCESSIBLE SUPPORT FOR TRANSITION-AGED YOUTH.**
- **POLICY RECOMMENDATION 1.4. ENSURE THAT CHILDREN AND YOUTH HAVE OPPORTUNITIES TO ENGAGE IN RELATIONSHIPS AND ACTIVITIES THAT ARE MEANINGFULLY AND DEVELOPMENTALLY RELEVANT TO THEM.** Recognize that social connections and activities are central to children’s development, and find safe ways to ensure that they are available. That could be through relationships, non-profit or extracurricular activities, religion, or through other means.

POLICY CHALLENGE 2.

Lack of clear, evidence-based pandemic restrictions

Almost all the participants expressed the need for strong pandemic restrictions, including masks and lockdowns. They also indicated that they perceived vaccines to be key to short- and long-term protection. Some racialized youth, in particular, noted the need for vaccines to be targeted in hotspots or where they would have the most impact. Young people indicated that they often felt that more restrictions should have been in place at an earlier time, and they should have

remained in place long enough to ensure that they were working: “when you’re making the big important decisions be decisive and be quick, because a lot of times a wave is emerging” (male focus group participant, 17 years old).

Young people expressed frustration that “we just fluctuate between lockdown and things being open again, sometimes without changes” (male focus group participant, 17 years old). They also expressed feeling that pandemic restrictions and rules were made for political reasons and “potential run for re-election”, or the economy, rather than “the well-being and safety of the people” (male focus group participant, 17 years old). Young people argued that many rules did not seem to make sense or were inconsistent, that the experts in a particular subject (e.g., medical experts) should be making decisions, and decisions should be made based on statistics and with transparency. For example, they described play areas being shut down or lacking equipment, when they felt that these were important for young people, and could be provided safely and even expanded. They also suggested that some steps could have been taken to maintain some organized sports, rather than close them down entirely. The opening and closing of businesses was another area where they pointed to the need for clearer rationale. Participants also pointed to the health risks of having elective surgeries cancelled in some places.

Educating and informing the public was noted as particularly important because many steps were felt to be out of government hands and “come down to people” (male focus group participant, 17 years old).

Several young people suggested creating a single, visible website on the pandemic that is targeted at young people, or doing more to ensure that such a resource is visible to children and youth.

- **POLICY RECOMMENDATION 2.1. BECOME MORE FUTURE READY, WITH RESILIENT POLICY INFRASTRUCTURE THAT IS CAPABLE OF RESPONDING TO WORLD CRISES, SUCH AS PANDEMICS, AND ALSO, WHEN CRISES OCCUR, ACT MORE QUICKLY AND DECISIVELY AND AVOID RAPID FLUCTUATIONS IN RULES.** Those fluctuations include opening and closing schools, or shifts between different formats of schooling. Preparations for future world crises must include flexible plans that take into account learnings from the COVID-19 pandemic.
- **POLICY RECOMMENDATION 2.2. ACCOMPANY DECISION-MAKING WITH TRANSPARENT RATIONALE, BASED ON INPUT FROM EXPERTS (E.G., RESEARCHERS, MEDICAL PROFESSIONALS) AND THOSE WITH LIVED EXPERIENCE.**
- **POLICY RECOMMENDATION 2.3. EDUCATE AND INFORM CHILDREN AND YOUTH THROUGH VISIBLE AND ACCESSIBLE WEBSITES THAT ARE TARGETED AT YOUNG PEOPLE, AND THROUGH SUSTAINED SOCIAL MEDIA CAMPAIGNS.** During crises, implement a sustained social messaging campaign reaching affected youth to help young people understand and cope with sudden-onset, rapidly evolving crises, and to share their self-developed coping mechanisms.



Young people argued that many rules did not seem to make sense or were inconsistent, that the experts in a particular subject (e.g., medical experts) should be making decisions, and decisions should be made based on statistics and with transparency.



POLICY CHALLENGE 3.

Barriers in educational experiences

Participants spent a lot of time discussing engagement or lack of engagement with school. Some participants reported being engaged through one-to-one meetings with teachers, and mentoring. Others suggested that these would be helpful for engagement and future career planning.

- POLICY RECOMMENDATION 3.1. PUT IN PLACE POLICIES, PRACTICES AND PEOPLE TO ENSURE THAT EVERY YOUNG PERSON CAN RETURN TO IN-PERSON SCHOOLING AND RECONNECT WITH SOCIAL AND ACADEMIC LEARNING JOURNEYS.** These policies, practices and people must balance social, emotional, mental, physical and academic needs and rights.
- POLICY RECOMMENDATION 3.2. PROVIDE MORE OPPORTUNITIES FOR RELATIONSHIP-BUILDING WITH TEACHERS, GUIDANCE COUNSELLORS AND MENTORS, AND PROVIDE THE EDUCATIONAL OPPORTUNITIES YOUTH NEED TO PURSUE FUTURE CAREER GOALS.** Put in place better, more equitable school support systems, which can engage all students. Provide flexible access to guidance counselling and mentoring, so that young people feel able to plan for career options. Provide opportunities for informal and/or one-to-one meetings with teachers, to engage young people in their education and provide opportunities for relationship-building. Provide students with the courses they need for their career goals, and for entry into education and work opportunities.
- POLICY RECOMMENDATION 3.3. ENSURE ACCESS TO DEVICES, DATA AND DIGITAL INFRASTRUCTURE THAT ARE OF SUFFICIENT QUALITY FOR THE FULL PARTICIPATION OF ALL STUDENTS.** Where school is provided online in whole or in part, ensure access to devices and data that are of sufficient quality for full participation, for greater equity.

I chose this because
I could get my
anger out if I am mad.

– 12-YEAR-OLD FOCUS GROUP PARTICIPANT

POLICY CHALLENGE 4.

Ensuring support for basic needs, including mental health support

Participants frequently mentioned the Government of Canada's Emergency Response Benefit (CERB) financial support as critical to ensuring young people and families had basic needs met. Some young people mentioned new availability and flexibility in getting support (e.g., telephone and online medical appointments, ongoing and newly accessible mental health support with no waiting lists, and some support for homelessness), and expressed hopes that these would continue. Young people also mentioned new problems, such as threatened closures of homeless shelters. Young people reported feeling that there was less stigma around mental health concerns and needs, but also a much larger need for support and prevention – for example, for emergency workers, those who lost their jobs, and people who had lost friends and relatives.

In other areas, participants reported that “they advertise the mental health hotlines and stuff, but I know people who’ve called those and they just end up on hold for like 45 minutes. And it’s like, if there’s resources like that available, but they’re not really available, it’s less than nothing, because you’re at a point where you’re expecting some sort of support and then you don’t get any” (male focus group participant, 17 years old). Further, they noted that some services available during

the pandemic were offered virtually, and therefore required data, or were in person only, and if adaptations existed, youth were not aware of them.

Further, participants highlighted the need to provide services for particular groups of young people. Two specific examples mentioned were services for eating disorders that needed to provide information specific to LGBTQ+ – specifically trans – youth, and programmes in the far north involving going out on the land that needed to have alternatives that could be implemented during the pandemic.

- **POLICY RECOMMENDATION 4.1. PROVIDE CULTURALLY APPROPRIATE, EASILY ACCESSIBLE, RAPIDLY AVAILABLE SERVICES (E.G., MEDICAL, MENTAL HEALTH), WHICH MEET THE NEEDS OF SPECIFIC POPULATIONS (E.G., LGBTQ+ OR INDIGENOUS YOUTH), WITH MENTAL HEALTH SERVICES THAT PRIORITIZE FACE-TO-FACE INTERACTIONS.** Continue and expand the positive support systems that have been put in place, increasing the availability of clinical mental health services, based on direct interactions with care providers. This includes in-person interactions, but it is also important to continue to provide the new flexibility that has been available during the pandemic, through new access to virtual services.
- **POLICY RECOMMENDATION 4.2. PROVIDE SUPPORT FOR SAFE HOUSING, INCLUDING SHELTERS, AND**

OTHER SUPPORT FOR INDEPENDENT LIVING. This goes beyond shelters, although participants identified that emergency housing should be consistently provided through the pandemic or other crises. In addition, however, young people need support to plan for and move into independent living situations (e.g., finding work, locating an apartment, planning a budget). This was identified as especially important for LGBTQ+ youth, who might be at higher risk of unsafe living conditions than non-LGBTQ+ youth. Establish new or expanded, easily accessible support for transition-aged youth, with special attention to young people who may be particularly at risk or who may need targeted support (e.g., LGBTQ+ youth or youth with disabilities). This support should include assistance with transitioning into independent living, careers and education planning.

In sum, we found that the challenges and recommendations that came from the young people in our sample were important, insightful and achievable. In this case, the qualitative approach might have allowed for rich and nuanced feedback. Moreover, ensuring a diversity of lived experience and connecting to young people further from opportunity allowed for recommendations that might otherwise not have been considered. All of this points to how our policies are strengthened when we include the voice of youth in the process.

 COVID has changed everything globally. Ever since quad 2 of school, I have felt like I have been living in a box. It's nice to stay home and not do anything but it felt suffocating for me. I wasn't allowed to go buy takeout or hang out with friends anymore. I focused more on studies because of this, and achieved impressive grades. However, I'm a teenager in high school, it's sad when all your school events are cancelled and can't have the same opportunities anymore. Therefore, even though a lot of opportunities closed for me, many other opportunities opened for me as well. I won't complain about this pandemic, because people all over the world are giving it their all to stop the spread. I just hope that I'm able to go out more. 

– 15-YEAR-OLD FOCUS GROUP PARTICIPANT

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Appendix 1: Focus group discussions – Facilitator’s guide Canada

Introduction and consent (5 minutes)

Thank you for talking to us today. As you know, we are from _____. We work with UNICEF and other organizations and we are conducting research to understand children’s experiences of COVID-19. We got in touch with you through_____.

We are talking with children/adolescents aged _____ to _____. We are trying to learn more about children’s experiences and opinions about the COVID-19 pandemic through some activities in this group. We will not ask you to directly share your personal experiences, so do not feel like you have to share anything you don’t feel comfortable sharing. We appreciate that you are talking with us and we are hoping to learn a lot from you.

Put consent on screen and walk participants through it, without reading it, in plain language.

If you agree, please type your name in the chat, and with your name please also type the email address where we can send your e-transfer.

Before we start, is there anything else you’d like to ask about our research study that we haven’t mentioned, and you want to know?

Turn on screen recording

Check in: Let’s get to know each other (5 minutes)

Would you like to share your name, age, the place where you live?

On Mentimeter (*Mentimeter, Slide 1, put link in chat*), put a rule that in your opinion is important to ensure that all of us feel good and respected (e.g., take turns, make space for each other, feel free to pass).

One researcher repeats the rules mentioned. And then asks:

1. Do we all agree with the rules?
2. Is there anything missing?

Icebreaker – rank your favourite ice cream flavours (*Mentimeter, Slide 2*)

Activity 1: Object of the pandemic (15 minutes) and poll

We asked you to bring with you today an object that symbolizes and defines how you have perceived and experienced the COVID-19 period so far. Please describe the object you have chosen and let us know why you selected it. If you didn’t bring anything, but you can think of something and want to describe it, that will work great, too.

Using the Mentimeter (*Mentimeter, Slide 3*), write three words that complete the following sentence: “COVID makes me feel ...”. *The researcher can show the word cloud to participants (anonymity will be respected as the clouds will contain all words).*

Question for group: Are you surprised about what you see?

Activity 2: Imaginative story of a child/adolescent during COVID (40 minutes)

This activity could be carried out in two breakout rooms with one facilitator per group.

As a group (rather than individually), create the story of a child/adolescent whose life is similar to yours and who has lived throughout the various stages of the pandemic. Your story creation will be supported by a series of guiding questions. Feel free to add details and imagine additional areas that may be important for your character's life. Discuss in group and share ideas.

DEFINE MAIN CHARACTER AND TIMELINE FOR YOUR STORY

- Draw the main character of your story and determine name, age, sex, where they live, if they live with parents or not, if they go regularly to school, etc. (*Mentimeter, Slide 4*).
- Draw a timeline with the key moments in the pandemic for children/adolescents whose life is similar to yours in this country. Think about some of the measures that you are aware of which were taken by your country to minimize the spread of COVID-19. E.g.:
 - Initial national lockdown ----- easing of restrictions (summer) ----- reopening of schools ----- re-tightening of restrictions (at regional level).

For the following questions you can use the timeline to help create [NAME]'s experiences and feelings.

THEME 1: DAILY LIFE/ACTIVITIES DURING THE PANDEMIC

- What has [NAME] usually done in their daily life since (or before?) the pandemic started?
- How have their daily activities changed compared to before the pandemic?
- How have the key events/moments in the timeline impacted their daily life? *Probe:* schooling, food, access to healthcare, peer networks, play, leisure (activities they had to stop or new activities they started), etc.
- What were the positive changes? What have they enjoyed? Why?
- What were the negative changes/challenges? Why?
- Thinking about these key events/moments in the timeline, how did they make [NAME] feel? *Probe:* Fear, anxiety, concern, confusion / surprise, amusement, rest.

THEME 2: RELATIONSHIPS DURING THE PANDEMIC

- How have [NAME]'s key relationships changed during the pandemic? I am referring to relationships with friends, teachers, siblings, parents/cohabitants, relatives and other important persons in [NAME]'s life, including new persons they may have met since the beginning of the pandemic. *Probe:* Who did they lose contact with because of the pandemic?
- Were some changes for the better? Were some changes for the worse? Why? How did they cope with these changes?
- How did these changes make them feel?
- What are some positive effects that [NAME] has seen on themselves after living through the pandemic? Please elaborate.
- What could have gone better for [NAME]? What could have been done to improve their situation(s)? *Probe:* How about important relations? How about key activities?

THEME 3: PHYSICAL AND VIRTUAL SPACES

- What were the important physical spaces [NAME] occupied during the various stages of the pandemic? How did they change compared to before the pandemic? Draw a map of these spaces.
- With which emotion would [NAME] typically associate those spaces (e.g., boredom, fear, comfort, happiness, joy, calm, uncertainty, etc.)?

Additional question:

- How about the virtual environment?

After this question, if Activity 2 has been carried out in break-out room, move all children back together and continue with the rest of activities.

Before moving to the break, ask children to share a high-quality picture of the drawings they made (story's characters, timelines, maps) – they can do that immediately or after the FGD by email.

BREAK (IF IT SEEMS APPROPRIATE – 5 MINUTES):

Let's all together stand up and have a stretch! You can imitate our movements (researchers on camera do some jumps, stretch your arms, your face, etc. – try to keep the exercise amusing) and give participants the possibility of moving to another room (grab a glass of water, go to the washroom, quickly look at their mobile phones, etc.).

Activity 3: Attitudes vis-à-vis the COVID-19 pandemic

Mentimeter, Slide 5. Alternatively, screen share and/or put list below in chat.

In group, choose one or two sentences from the list below that you would be most interested in discussing. (Also state to group: You can agree or disagree with them; you can also mention how they make you feel.)

- COVID-19 has had a big impact on our community and my family
- COVID-19 is a serious health problem
- COVID-19 is not a serious health problem
- COVID-19 has seriously affected people financially and in their jobs
- COVID-19 is a monster
- Around COVID-19 there is a lot of fake news
- Wearing masks in public is important
- Wearing masks in public is not important
- Wearing masks in public makes me look silly
- Lockdowns are unnecessary
- Lockdowns are necessary
- Lockdowns limit my freedom
- School closures and distant learning are great
- School closures and distant learning are terrible
- The COVID-19 vaccine will save us
- COVID-19 has changed my plans and aspirations for the future
- COVID made us all crazy

*Mentimeter poll, Slides 6 to 8. **Individually**, reply to the quick following poll:*

1. Pick the sentence from the list that most resonates with you:
 - a. COVID-19 has had a big impact on our community

- b. COVID-19 has had a big impact on my family
 - c. COVID-19 is a serious health problem
 - d. COVID-19 is not a serious health problem
 - e. COVID-19 has seriously affected people financially and in their jobs
 - f. COVID-19 is a monster
2. Pick the sentence from the list that you agree with most:
- a. Wearing masks in public is important
 - b. Wearing masks in public is not important
 - c. Wearing masks in public makes me look silly
3. Pick the sentence from the list that most resonates with you:
- a. Lockdowns are unnecessary
 - b. Lockdowns are necessary
 - c. Lockdowns limit my freedom
 - d. School closures and distant learning are great
 - e. School closures and distant learning are terrible

Activity 4: Recommendations for the future (30 minutes)

Watch the video clip of the Prime Minister’s speech about the next set of measures to deal with COVID-19 (first 45 seconds). Imagine that you can assist and recommend to the government on how to best deal with the situation. What decisions would you suggest he take to reduce the spread of COVID-19 as well as protect the well-being of adolescents like you? – *Think about the lives of your character, yours and those of other adolescents.*

Having experienced the pandemic, what would you say is your hope for your future as children/ adolescents in this country? Why?

And your worries? Why?

Imagine the COVID-19 period as a portal to a new world. How do you think the new world should look like?

Do you have any other suggestions or comments about children’s experiences of COVID-19 in your city/country?

CONCLUDING REMARKS (<5 MINUTES)

Thank you very much for having taken part in this focus group discussion. Your ideas, thoughts and recommendations will be extremely useful to inform programmes and policies and ensure that your views are taken into account.

Appendix 2: In-depth interview – Facilitator’s semi-structured guide

INSTRUCTIONS FOR THE INTERVIEWER

These interview guides will be used with adolescents (i) who have already been part of a focus group discussion (FGD) with the research team, or (ii) who are new to the research. Therefore, the facilitator should adapt the questions based on this information.

If the interviewee was part of an FGD, the facilitator should look at the participants’ contributions in the FGD and note down some key points that would be worth exploring more in depth. The list of the interviewee’s contributions during the FGD should inform the way these semi-structured guidelines are used.

Moreover, the facilitator could further tailor these semi-structured guidelines based on the specific circumstances of the participant interviewed (which may depend on their socio-demographic characteristics). The facilitator will do that using specific and adapted probes.

Introduction

Dear _____, welcome back. How are you?

Thank you for talking to us today. As you know, I work with the _____ office and we are conducting research to understand children’s experiences of COVID-19. We already had a discussion together in the focus group. We appreciate you agreeing to talk with us again to share your personal experience and we hope to learn much from you.

Today I will ask you questions about your personal experience during the pandemic. Remember that you can always tell me that you prefer not to answer any

given question. You can also ask for a break, or to abandon the call before the end of the interview.

Before we start, is there anything else you’d like to ask about this research study?

Introductory questions [Ice breaker 1]

- **What have you been doing today? How did you spend your day? What is your plan for the day?**
- **If child participated in FGDs:** Do you remember what you discussed with your peers during the FGD? *Probe:* Would you like to discuss any particular theme that was discussed then? Please elaborate. Would you like to share anything that came into your mind after your participation at the FGD? Please elaborate.
- **If new child:** Why have you decided to take part in this one-on-one interview?

Your relationships during the pandemic [OPTIONAL: Ice breaker 2]

ACTIVITY: Quadrant of relations

I am interested in understanding a bit more about your experiences in terms of relations since the pandemic arrived in the country. To do that I am going to ask you to take a paper and a pen/pencil to do a short activity.

Please divide the page into 4 quarters and each quarter in half. Draw yourself in the middle. In the left part of the quadrant I would like you to list people, answering these questions:

1. Who are the people I spent most time with since the pandemic arrived?

2. Who are the people I spent less time with?
3. Who are the people I do not talk to anymore?
4. Are there new people I met (since the pandemic arrived)?

In the right part of the quadrant, for each person you listed, I would like you to answer the following questions, drawing symbols:

1. Do I live with them? Or used to live with them? 
2. During the pandemic, did the relations with these people evolve for the better or for the worse?  
3. With whom did you enjoy spending time the most, especially during the restrictions? 
4. Do you spend time with these people mainly online or offline?  

Your page should look more or less like this (*the researcher shares their screen*):

People I have been spending more time with	  
People I have been spending less time with	 
People I do not talk to anymore	 
New people I met	  

I will leave you for 5 minutes so you can do that on your own (you can switch off the video and the audio if you want, I will switch off mine).

After 5 minutes:

Now I would like you to describe the quadrant to me.
Probe:

- What are the activities you do together? What are the activities you do not do anymore or you interrupted/changed because of the pandemic? How do you feel about that?

- Why do you think the relations changed for the better? And for the worse?
- How did you meet? Why are you not talking anymore?
- [If applicable: After the restrictions lifted, who were the people you could not wait to spend time with? What did you want to do with them?]

Well-being

I would now like to talk about your assessment of the overall impacts of the crisis on your well-being.

- How are you? **How do you feel today?** [If applicable: How have things been going since the last time we met?]
- **How have you felt in the last year?**
- **How has your life changed with respect to before the pandemic started?** Has your daily life changed? Has the way you spend your time changed? How are you feeling about these changes? *Probe:* Think about your home environment, your health, your relationships, your education, your work, your leisure activities/passions, your access to services. *Specific probes depending on the circumstances of the interviewee.*
- **What were the negative experiences you lived through in the past year, in relation to the COVID-19 pandemic?** *Probe:* What are some of the negative effects that you have seen on yourself after living through the COVID-19 pandemic? What were some negative situations you lived through because of the pandemic? Please elaborate.
- This can be a stressful time for many people – **Would you say it has been stressful for you as well? Why? In which ways?**
- **How do you deal with your stress or when you are feeling sad? Is there anyone you can talk to in confidence?**

- **What were the positive experiences you lived through in the past year in relation to the COVID-19 pandemic?** *Probe:* What have you learned about yourself from the crisis? What are some positive effects that you have seen on yourself after living through the COVID-19 pandemic? What were some positive situations you lived through because of the pandemic? Please elaborate.

Apart from the impact on yourself, are there other things you have been concerned about in the last year? Do you think other people experienced the COVID-19 pandemic as you did or in a different way? How?

ASPIRATIONS FOR THE FUTURE

- **How do you imagine your life in the future?**
- **How have your plans and aspirations for the future changed because of COVID-19?**
- Having experienced the pandemic, **what would you say is your hope for your future as an adolescent in this country?** How so? *Probe:* reflect on the specificity of the interviewee's circumstances (UASC, LGB, trans person, boy, girl, etc.).
- **What are some worries for your future?** How so?

ATTITUDES AND OPINIONS TOWARDS THE PANDEMIC

- **If you had to explain the COVID-19 pandemic and its consequences on adolescents like you to an older person, what would you tell them?**
- In general, what do you think about COVID-19? **What do you think the COVID-19 experience is teaching the world?**

AGENCY

- **Do you talk about these things (governmental measures, policies at national/international level in response to COVID-19) with other people? With whom? Do you feel they listen to you?**

- **Do you feel informed enough?**
- During the pandemic, what things have you been able to decide for yourself? What things have been decided for you by other people? How has it changed with respect to prior to the pandemic? *Probe:* Have you faced any conflict with family members/community/peers/teachers/school in the past year? **Have you ever heard of or participated in initiatives in the framework of the COVID-19 pandemic organized within your school, community, association, or at municipal, regional and national level?**

CLOSING QUESTIONS

Think about your life. What could enhance your situation – and the situation of your family/ community – if the pandemic was to continue?

Do you have any other experience, suggestion or comment you would like to add concerning your life in your city/country during the COVID-19 pandemic?

Of all the things we talked about, what to you is the most important thing that was said?

CONCLUDING REMARKS

Thank you very much for having taken part in this in-depth interview. It has been a great pleasure working with you and learning from you in these months. We will use your ideas, thoughts and recommendations to inform policymakers in this country and ensure that your views are taken into account. We hope to be able to talk to you again in the future, maybe in a year from now. Would you be interested?

Do you have any question for us before we close?

Thank you very much again, we really enjoyed listening to you, and we hope you enjoyed spending this time with us. We will of course be in touch with you via email or via your school when the research report will be published, so you can read it yourself.

for every child, answers

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