

Differences in the impact of COVID-19 on mental health and help-seeking behavior across young people accessing Foundry services throughout the pandemic

Alayna Ewert, Emilie Mallia, Gillian Venman, Josephine Lam, Julia Gray, Brooke MacNab, Skye Barbic, Steve Mathias, Karen Tee

Introduction

Foundry is a network of integrated youth services (IYS) centres in the province of British Columbia, Canada, that is transforming how young people (12-24 years old) access health and social services. With the declaration of a pandemic in March 2020 due to COVID-19, Foundry quickly adapted to offer virtual services in two ways: (1) through physical Foundry centres and (2) through the launch of a provincial service platform, Foundry Virtual BC. While studies have found significant negative impacts of COVID-19 on youth mental health, there was limited information about if youth were delaying seeking support at IYS because of it; specifically, when both virtual and in-person services are available.

Objectives

This study aims to (1) understand the differences between youth who sought services virtually compared to in-person during the COVID-19 pandemic, (2) examine demographic differences in the impact of COVID-19 on mental health and help-seeking behaviours, and (3) explore changes in the impact of COVID-19 on self-reported youth mental health over time.

Approach/Methods

Two cross-sectional, anonymous surveys were administered to youth who accessed IYS through Foundry (in-person or virtual) during separate time periods. Sample 1 (S1) included n=201 youth and was collected from March-June 2021. Sample 2 (S2) included n=554 youth and was collected from November 2021-January 2022. All data were stratified and analyzed by time period; access modality (in-person or virtual); and age, gender, and ethnicity. T-tests were used for continuous variables and Fisher's exact test (FET) was used for comparisons between strata.

Results or Practice/Policy Implications

The demographic profile of youth accessing virtual services was similar to those accessing services in-person except for age, where those accessing virtual services (mean age = 19.43, SD = 3.35) were slightly older than those accessing services in-person (mean age = 18.55, SD = 3.32; $t(753)=-2.48$, $p=0.013$). More Indigenous youth (two-sided FET $p=0.011$) accessed in-person services than virtual, but this difference may be due to sample limitations.

Initial analyses suggested that youth who accessed virtual services had worse mental health since COVID-19 than youth who accessed service in person (two-sided FET $p=0.015$), but significance was not sustained after demographic stratification. For help-seeking, those who accessed services in-person reported delaying help-seeking due to COVID-19 more often (two-sided FET $p=0.038$) than those who accessed virtual services, but again this was not sustained after stratification. Further analyses were conducted to assess a possible time effect and more youth in S1 reported worse mental health (two-sided FET $p=0.001$) and delayed help-seeking (two-sided FET $p<0.001$) than those in S2. These differences remained significant when stratifying by age and gender.

Conclusion

These findings are critical to inform how IYS are offered amidst the changing landscape of the pandemic. Differences in the demographic profile of youth seeking virtual versus in-person services helps Foundry and other IYS programs adapt and tailor approaches to better meet the needs of youth. As well, accounting for significant improvements in youth mental health and help seeking for in-person and virtual services will have important implications for program planning as COVID-19 becomes endemic.

