



# A network of care: the importance of social support for adolescents in the WHO European Region during the COVID-19 pandemic

Impact of the COVID-19 pandemic on young people's health and well-being from the findings of the HBSC survey round 2021/2022

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### **ABSTRACT**

Young people's living conditions and everyday lives have been profoundly affected by the COVID-19 pandemic. Containment measures such as social distancing, school closures and isolation have negatively affected children's and adolescents' mental health and well-being. Social support from families, teachers, classmates and peers can make great differences to adolescents' resilience in a crisis. The information and data presented were collected from the Health Behaviour in School-aged Children survey round 2021/2022. Family support was the most important factor in addressing the impact of the COVID-19 pandemic, followed by support from teachers and classmates. Family support and ease of talking to parents seem to be key aspects of family life linked to the COVID-19 pandemic's impact on adolescents. The weakest source of support was from peers. Adolescents who experienced a positive impact on life as a whole during the pandemic had a high level of social support, while those who experienced a negative impact had the lowest social support. Gender differences linked to impacts of the pandemic were clear, with boys reporting more positive experiences. Enhancing the protective effects of social support sources may have the potential to even-out gender inequalities in COVID-19 pandemic impacts. Adolescents' socioeconomic background was an important factor in determining pandemic impacts. Adolescents from less well-off families are at higher risk of experiencing negative impacts from health crises, so additional support should be supplied to them to minimize the effects of crises. Parents of adolescents should be supported to preserve and strengthen their relationships with their children, as family support has the biggest impact on how young people understand and respond to times of crisis. Teachers should be trained, guided and provided with the tools to offer support to their adolescent students in times of crisis.

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# **KEY FINDINGS**

- Young people's living conditions and everyday lives have been profoundly affected by the COVID-19 pandemic.
- Young people's view of how the COVID-19 pandemic impacted on their lives was dependent on the kind and volume of social support they received from family, teachers, classmates and peers.
- Family support was the most important factor in addressing the impact of the COVID-19 pandemic, followed by support from teachers and classmates.
- The weakest source of support was from peers.
- Links were found between the overall impact of the pandemic and family structure and ease of communication in the family.
- Age, gender and socioeconomic background were important in reducing the impact of the pandemic on adolescents, but not as significant as the four sources of social support.
- Adolescents who experienced a positive impact on life as a whole during the pandemic had a high level of social support.

- Those who experienced a negative impact had the lowest social support.
- Girls experienced more negative impacts from the pandemic.
- Adolescents from less well-off families were more likely to report a negative impact of the pandemic on their lives than those from betteroff families, regardless of the social support they received from family, teachers, classmates or peers.
- Adolescents who reported a positive COVID-19 impact on their lives were more likely to have received high social support across all four sources than those who reported neutral and negative impacts.
- Gender differences and links between support and the pandemic's impact on adolescents' lives varied cross-nationally/regionally.
- Adolescents from less well-off families should be supplied with additional support to minimize the effects of crises.
- Teachers should be trained, guided and provided with the tools to offer support to their adolescent students in times of crisis.

# **SUMMARY**

Young people's living conditions and everyday lives have been profoundly affected by the COVID-19 pandemic. Containment measures such as social distancing, school closures and isolation have negatively affected children's and adolescents' mental health and well-being.

Social support from families, teachers, classmates and peers can make great differences to adolescents' resilience in a crisis. This report explores the links between these four sources of social support and the overall impact of the COVID-19 pandemic on the lives of boys and girls aged 11, 13 and 15 years from 22 countries and regions of the WHO European Region. The information and data presented were collected from the Health Behaviour in Schoolaged Children survey round 2021/2022.

Family support was the most important factor in addressing the impact of the COVID-19 pandemic, followed by support from teachers and classmates. Family support and ease of talking to parents seem to be key aspects of family life linked to the COVID-19 pandemic's impact on adolescents. The weakest source of support was from peers.

Adolescents who experienced a positive impact on life as a whole during the pandemic had a high level of social support, while those who experienced a negative impact had the lowest social support. Gender differences linked to impacts of the pandemic were clear, with boys reporting more positive experiences. Enhancing the protective effects of social support sources may have the potential to even-out gender inequalities in COVID-19 pandemic impacts.

Adolescents' socioeconomic background was an important factor in determining pandemic impacts. Adolescents from less well-off families are at higher risk of experiencing negative impacts from health crises, so additional support should be supplied to them to minimize the effects of crises.

Parents of adolescents should be supported to preserve and strengthen their relationships with their children, as family support has the biggest impact on how young people understand and respond to times of crisis. Teachers should be trained, guided and provided with the tools to offer support to their adolescent students in times of crisis.

### **FINDINGS**

### **COVID-19 pandemic impact on social support**

The four sources of social support – family, teachers, classmates and peers – were linked to the overall COVID-19 pandemic impact on adolescents.

### Family support

Of the four sources of social support, family support had the strongest links with pandemic impacts among all ages and across genders. The link was strongest for 13-year-olds and was lower (but approximately at the same level) for 11- and 15-year-olds.

Family support was more strongly linked to pandemic impacts for girls. It remained linked when age, gender and socioeconomic background were accounted for.

Analysis of the importance of other family factors showed that the number of siblings had no important effect on pandemic impacts for boys or girls, but those in single biological-parent families were affected worse than those with both biological parents. This was the case for boys, and for 11- and 13-year-olds. The easiness with which adolescents could talk with their parents had some influence on the overall pandemic impact. Family support and ease of talking to parents seem to be key aspects of family life linked to the COVID-19 pandemic's impact on adolescents.

Impacts on life in general, whether negative, neutral or positive, were strongly linked to family support. Cross-nationally/regionally, a bigger share of those experiencing negative impacts had low family support (41%), compared to those having neutral (34%) or positive (23%) impacts. The highest family support was reported by those experiencing a positive impact (77%), compared to neutral (66%) and negative (59%).

### **Teacher support**

Teacher support had the second-strongest links with pandemic impacts of the four sources of social support. It nevertheless was lower among older adolescents: the older the adolescent, the less teacher support was associated with the pandemic's impact. Teacher support was more strongly linked to pandemic impacts for girls and remained linked to impacts when age, gender and socioeconomic background were accounted for.

The pandemic's impact on life in general was also linked to teacher support. Cross-nationally/regionally, a higher share of those experiencing negative pandemic

impacts had low teacher support (45%), compared to those having neutral (44%) and positive (33%) impacts. The highest teacher support was reported by those experiencing positive impacts (67%), compared to neutral (56%) and negative (55%).

### Classmate support

Students engaged in distance learning during the pandemic. The experience of learning in a new way raised the importance of classmates in dealing with the consequences of the pandemic and the uncertainty it caused.

Classmate support had the third-strongest links with pandemic impacts of the four sources of social support. The links were strongest among 13-year-olds, followed by 11- and 15-year-olds. When socioeconomic background, grade and classmate support were included in the analysis, classmate support was more strongly linked with COVID-19 pandemic impacts for girls, although the differences with boys were not large.

The pandemic's impact on the lives of adolescents in general was linked to classmate support. Cross-nationally/regionally, 53% of adolescents who experienced negative impacts and 52% of those with neutral impacts reported low classmate support, compared to 39% with positive impacts. The highest classmate support was reported by those experiencing positive impacts (61%), compared to neutral (48%) and negative (48%).

#### Peer support

Peer groups are very important to adolescents, including in times of crisis. The overall COVID-19 pandemic impacts on adolescents were linked to peer support, but it had the least strong links of the four sources of social support among 11- and 13-year-olds. Links for 15-year-olds were the weakest of the three age groups, but not the weakest links of all sources of support for this age group in relation to overall pandemic impacts. When socioeconomic background, grade and classmate support were included in the analysis, peer support was more linked to pandemic impacts for boys, but the differences with girls were very small.

The pandemic's impacts on the lives of adolescents in general was linked to peer support, but to a lesser extent than family support. Cross-nationally/regionally, a bigger share of those experiencing negative impacts had low peer support (46%), compared to those having neutral (43%) and positive (36%) impacts. The highest share of peer support was reported by those experiencing positive impacts (64%), compared to neutral (57%) and negative (55%).

# COVID-19 pandemic impact and social support: gender, socioeconomic background and country/regional differences

#### Gender differences

Gender differences linked to impacts were clear, with boys reporting more positive experiences. While higher family support increased the chances of boys and girls reporting positive overall impacts, this support was slightly more beneficial for girls. Similar patterns were seen with support from teachers.

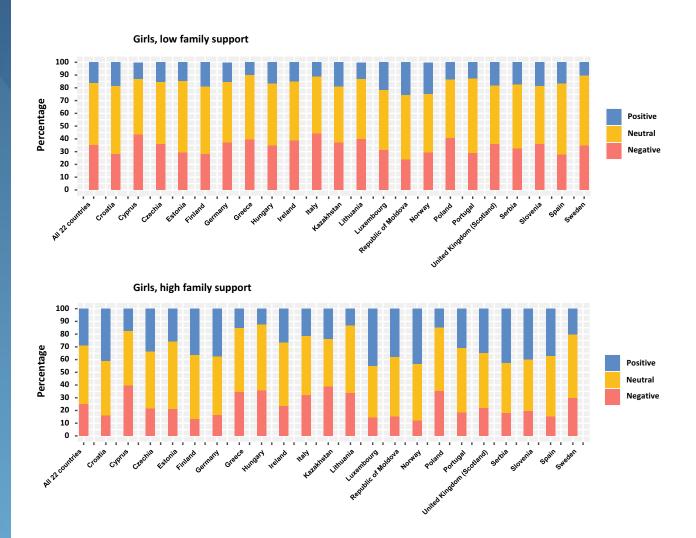
### Socioeconomic background

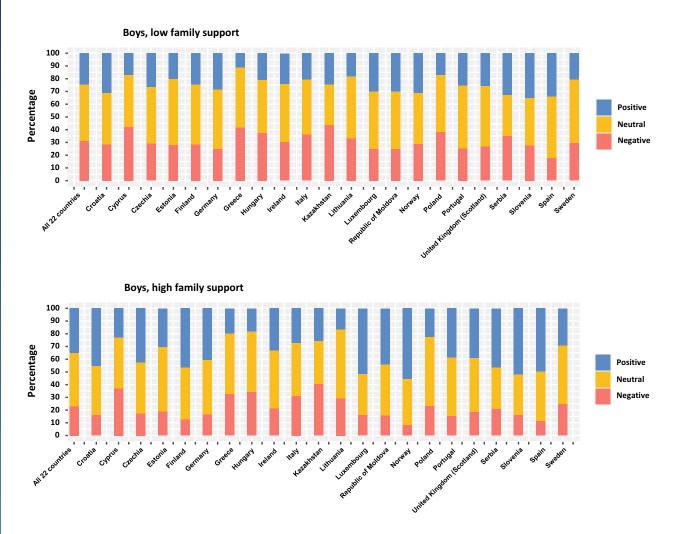
Adolescents' socioeconomic background was an important factor in determining pandemic impacts. Those from better-off families were more likely to report experiencing positive impacts of the pandemic on their lives across all four sources of support. Thirteen-year-olds from better-off families experienced more positive impacts than other age groups. This pattern was not found for adolescents of families that were not well-off.

### **Country/regional differences**

Countries/regions varied in the levels of support received from the four sources. Fig. 1 summarizes the influence of family support on pandemic impacts for girls and boys by country/region.

Fig. 1. Influence of family support on pandemic impacts for girls and boys, by country





In most countries/regions (13 of 22), adolescents experiencing positive impacts were more likely to have high social support across all four areas than the neutral- and negative-impact groups. Positive impacts on adolescents' lives were linked to higher social support across three of the social support areas in three countries/regions, to two sources in two, and to one in two. No differences were seen in adolescents reporting positive, neutral and negative impacts in two countries/regions.

Higher family support was linked to positive COVID-19 pandemic impacts on adolescents' lives for both genders in 14 countries/regions, only for girls in four, only for boys in one, and for neither in three. Similar patterns were seen in other support areas.

For boys, family support had the strongest links with COVID-19 pandemic impacts on life in general in 15 countries/regions. Peer support had the strongest links in four and classmate support in three. For girls, family support had the strongest links in 15 countries/regions, teacher support in four, peer support in two and classmate support in one.

# **POLICY ACTIONS**

Analysis suggests that the following measures would be helpful for countries/regions in preventing negative impacts of the COVID-19 pandemic on adolescents and contributing to supporting the positive impacts of future health crises.

- Gender-sensitive policies and practices build girls' and boys' resilience (through social support) to cope with, bounce back from and thrive during health crises. Global and regional policies are needed to drive equality in gender-sensitive crisis management, but country-/region-specific policies, recommendations and practices can address challenges to ensuring girls' and boys' resilience is supported equitably.
- Parents of adolescents should be supported to preserve and strengthen their relationships with their children, as family support has the biggest impact on how young people understand and respond to times of crisis.
- Teachers should be trained, guided and provided with the tools to offer support to their adolescent students in times of crisis, including during social distancing situations. Guiding teachers on how to create safe, cohesive classroom climates will promote classmate support, providing adolescents with a sense of security and shared destiny.
- Adolescents from less well-off families are at higher risk of experiencing negative impacts from health crises, so additional support should be supplied to them to minimize the effects of crises.

### CONTEXT

Countries and regions across the WHO European Region have been confronted with numerous crises and challenges in recent years, many of which are ongoing. It is important to understand how adolescents view these challenges, identify factors related to negative and positive effects, explore what might protect against negative impacts and develop ways to make adolescents more resilient.

Sources of social support play a vital role in such processes. Adolescents who, for instance, see their peers as being supportive during stressful situations have higher levels of psychological well-being, higher self-esteem and fewer depressive symptoms (1).

Experiencing crises, including traumatic experiences, can have short-term and long-lasting effects on individuals, families, social groups and societies. Social support, especially family support, in times of crisis acts as a coping mechanism (2) and lessens posttraumatic stress symptoms among children and adolescents (3).

Experiencing crisis and trauma can also lead to positive outcomes, such as increasing personal growth and triggering positive developments in societies. Knowledge about effective coping strategies and resilience is therefore crucially important.

The COVID-19 pandemic required a range of measures to reduce the spread of the virus. Although young people are less affected by severe illness and death due to COVID-19 than older age groups, their living conditions and everyday lives have been profoundly affected by the pandemic. Containment measures such as social distancing, school closures and isolation have negatively affected children's and adolescents' mental health and well-being (4).

Although children, adolescents and students seem particularly vulnerable to the negative effects of the pandemic, some studies have found signs of resilience among them, such as the development of effective coping strategies (5). Family time, time connecting with peers and time spent in physical activity were found to be related to lower loneliness during the initial stages of the pandemic (6). Increased use of the Internet and social networks for communication, information and leisure during the pandemic supported adolescents' resilience (7).

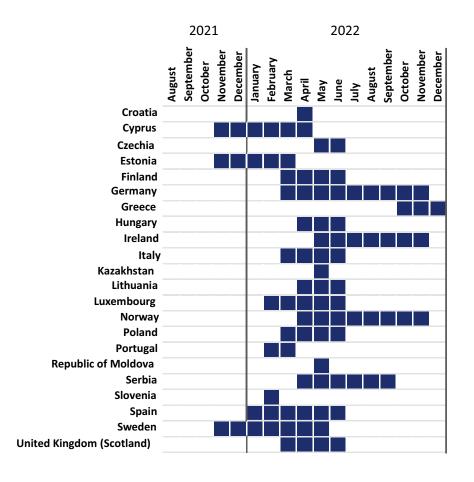
# **HBSC SURVEY ROUND 2021/2022**

The Health Behaviour in School-aged Children (HBSC) study is a large school-based survey carried out every four years in collaboration with the WHO Regional Office for Europe. It tracks, monitors and reports on the self-reported health behaviours, health outcomes and social environments of boys and girls aged 11, 13 and 15 years. The most recent survey (2021/2022) was conducted across 44 countries and regions of the WHO European Region and Canada and included an optional set of questions that measured perceived impacts of the COVID-19 pandemic.

This report presents main findings from the HBSC survey round 2021/2022 on the COVID-19 pandemic's effects on key areas of the lives of adolescents (such as mental health, relationships with family and school performance) from 22 countries and regions of the WHO European Region. It is part of a series of five reports on understanding the impact of the COVID-19 pandemic on young people's health and well-being.

Fig. 2 shows the dates on which the 22 countries conducted the survey.

Fig. 2. Dates on which the 22 countries conducted the survey



### REFERENCES<sup>1</sup>

- 1. Tindle R, Moustafa AA. Psychological distress, social support, and psychological flexibility during COVID-19. In: Moustafa AA (editor). Mental health effects of COVID-19 (pp.). London: Academic Press; 2021:89–101.
- 2. Kurudirek F, Arıkan D, Ekici S. Relationship between adolescents' perceptions of social support and their psychological well-being during COVID-19 pandemic: a case from Turkey. Child Youth Serv Rev. 2022;137:106491. doi:10.1016/j.childyouth.2022.106491.
- 3. Xiong T, Milios A, McGrath PJ, Kaltenbach E. The influence of social support on post-traumatic stress symptoms among children and adolescents: a scoping review and meta-analysis. Eur J Psychotraumatol. 2022;13(1):2011601. doi:10.1080/20008198.2021.2011601.
- 4. Meherali S, Punjani N, Louie-Poon S, Abdul Rahim K, Das JK, Salam RA et al. Mental health of children and adolescents amidst COVID-19 and past pandemics: a rapid systematic review. Int J Environ Res Public Health. 2021;18(7):3432. doi:10.3390/ijerph18073432.
- 5. Manchia M, Gathier AW, Yapici-Eser H, Schmidt MV, de Quervain D, van Amelsvoort T et al. The impact of the prolonged COVID-19 pandemic on stress resilience and mental health: a critical review across waves. Eur Neuropsychopharmacol. 2022;55:22–83. doi:10.1016/j.euroneuro.2021.10.864.
- 6. Ellis WE, Dumas T, Forbes LM. Physically isolated but socially connected: psychological adjustment and stress among adolescents during the initial COVID-19 crisis. Can J Behav Sci. 2020;52(3):177-187. doi:10.1037/cbs0000215.
- 7. Mano R. Social media and resilience in the COVID-19 crisis. Adv Appl Sociol. 2020;10(11):454–64. doi:10.4236/aasoci.2020.1011026.

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