

COVISION in Australia

Facilitating the resilience and mental wellbeing of young people in pandemics

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What is COVISION?

Internationally, the COVISION project aimed to learn more about how young people have creatively found ways to manage the challenges faced during the COVID-19 pandemic.

Funded by the Health Research Board and the Irish Research Council, the Australian project explored the challenges faced by young people during the

pandemic and in its recovery, gather inspiration from their resilience and find ways to facilitate youth wellbeing from a systems-level in future pandemics. This would then codesign a pitch presentation to policy makers and service designers to be delivered by a young person (1).

How did we involve young people?

We ran this project on the belief that people affected by an issue should be involved in all aspects of work to help them (2). Here is how we involved young people in our study:

53

young people participated in two co-design workshops

4

members of the Maribyrnong Youth Advisory Committee were consulted

1

young person delivered a pitch presentation to policymakers and service designers

1

young person was employed by the University of Melbourne for this project

HOW WE DID IT, AND LEARNINGS ALONG THE WAY

Project Planning

A young person (SN) joined the research team at the Melbourne School of Population and Global Health to lead this codesign project. SN was 20 years old at the time, with experience in the healthcare sector, research, and community engagement. This elevated the level of youth participation for this study and provided fair remuneration for the young researcher.

Co-design Workshop 1

Young codesigners (n = 3), aged 13-16 years were engaged when an opportunity to do something new and different was presented. This was achieved through integrating principles and tools of design thinking facilitated through Miro. The research team partnered with Maribyrnong City Councils Youth Services team to deliver this workshop. Doing so allowed a large convenience sample of young participants, but a limited reach and closed access to the study.

Consultation with the Maribyrnong Youth Advisory Committee

Findings from workshop 1 (including challenges faced by young people, and their proposed solutions to these issues) were brought to the Maribyrnong Youth Advisory Committee (MYAC) for advisory. At the time, MYAC consisted of 4 young people (aged between 19-24, with some having professional working experience). They provided advice based on their working experience and their experience as young people in the pandemic.

Co-design Workshop 2

Another group of young codesigners (n = 22, aged 13-16 years) were consulted on their experiences in accessing public sector services during the pandemic. The findings from this workshop contributed the most to the pitch presentation. In line with prioritising the research's impact for young people over research agendas, we decided not to submit a HREC application and hence, findings disseminated here will consist only of those presented in the pitch. This was necessary to collaborate with young codesigners within project constraints and achieve reported impacts.

The Final Pitch Event

A pitch event was held with 15 researchers, policymakers and service providers. We enabled a safe working environment by inviting select service providers and policy makers we knew would enhance youth voice. By allowing space for a panel discussion and a MYAC presentation, we facilitated an environment that welcomed policy makers and service providers to talk about increasing accessibility and inclusion for young people. The pitch event allowed policy makers and service providers from different organisations to future collaborations to benefit young people.



COVISION
Children As Innovators

THE STORY OF YOUNG PEOPLE'S EXPERIENCES

We asked young people what challenges they faced during the pandemic



To cope, they showed resilience in self-care and wellbeing by:



They feel that these could also help them:



But they feel that there were many barriers to accessing support...



Therefore, we concluded that the issues were:

- Disruption of healthy habits (eating, sleeping, exercise).
- Decrease in mental health (social anxiety, lower attention span, burnout).
- Impacts on academic performance.
- Financial insecurity (cost of living, food security).
- Impacts on social connections: family tensions and domestic violence, separation from pets, restrictions for travel and funerals, having to rely on mobile technology.

Coping strategies included exercise, spending time outdoors, gratitude, meditation, talking to family and friends, reducing screen time, taking up new hobbies and participating in social activities (without forcing oneself to socialise).

- Support groups.
- Professional services.
- Social media to connect and find work.
- Academic courses.
- Welfare.
- Financial literacy.
- Jobs for students and family.

- Stigma of accessing services.
- Feeling forced into school-based programs that on memorising content or made intrusive questions.
- Hotlines with long waiting times or lack of empathy.
- Difficulty getting diagnosed, multiple referrals and long waiting times.
- Reluctancy to engage with school programs because parents will get involved.
- Many young people cannot drive themselves to services or are occupied with school.
- Formal approaches are less likely to resonate with young people.

- There was a lot of funding for support services during the COVID-19 pandemic within Melbourne, Australia. An issue was that due to the widespread, general nature of the virus's impact, the **majority of support services were not tailored or targeted towards young people**
- This gave rise to another issue in accessibility: the promotion of these services was ineffective in reaching young people. Therefore, **young people were unable to navigate the support systems in place.**

Reflections from the project

The COVISION project highlighted the need for intentional planning for young people by policymakers and service providers. We highlight the benefits of a youth-led participatory design, and discussions within the pitch event showed potential for interdisciplinary collaboration between services, including with services that are not youth-specific. Whilst the pitch delivered did not offer an implementable solution, it provided a set of considerations for inclusive, friendly and equitable interventions for young people. Future studies with young people within Melbourne should therefore move towards integrating youth participation into planning.

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