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COVID-19 and the class of 2020: a national study of the mental health and wellbeing of Leaving Certificate students in Ireland

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The coronavirus pandemic continues to disrupt education in unprecedented ways. The first school closures in Ireland took place in March 2020, affecting many students, but especially those who were preparing for their end-of-school Leaving Certificate (LC) examinations. The aim of this study was to assess the extent to which COVID-19 had impacted the health and wellbeing of the ‘class of 2020’. Some comparisons were also made with a 2015 health and wellbeing survey undertaken in Ireland. A total of 959 LC students completed an online survey. The findings demonstrated substantial negative impacts of COVID-19 on overall health and wellbeing. The comparison with the ‘pre-COVID’ (2015) sample of LC students also showed that the current cohort was faring statistically significantly worse across several domains. This is the only study to investigate the health and wellbeing of this cohort in the context of COVID-19. The findings provide important insights into impacts on student mental health and wellbeing; they also raise questions about how those who went on to Third Level, are faring, in light of continuing disruption to their studies and in the context of the already large numbers of Third Level students presenting with mental health problems in Ireland (and elsewhere).

Keywords: Leaving Certificate; class of 2020; mental health; wellbeing; third-level

Research background and rationale

The emergence of the COVID-19 pandemic in early 2020 resulted in schools across the globe closing their doors in an attempt to slow the virus transmission and ease the burden on health systems (Van Lancker and Parolin 2020). These unprecedented school closures impacted 1.6 billion students worldwide across almost 200 countries (UN 2020). The first wave of the pandemic in Ireland led to widespread school closures for an approximate 7-month period (March to September 2020), during which time students (and teachers) had to embrace new methods of remote teaching and learning (Burke and Dempsey 2020; Cullinane and Montacute 2020; Mohan et al. 2020).

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While this undoubtedly affected many children and young people, the students who were preparing for their end-of-school Leaving Certificate exams in 2020, were arguably amongst those most impacted. Following the coronavirus outbreak in Ireland, the traditional-style Leaving Certificate (LC) examinations due to take place in June 2020 had to be postponed, although this decision was delayed until 8th May 2020. Thus, the class of 2020 faced considerable uncertainty for several months and subsequently, for the very first time in Ireland, over 60,000 of these students received a ‘State Certificate of Calculated Grades’, with the option to sit the traditional examinations later in the year (November).

The global impact of COVID-19 on mental health and wellbeing is anticipated to be profound and long lasting (Holmes et al. 2020). Furthermore, the current third-wave of the coronavirus continues to impact our daily lives (e.g. in terms of ongoing and protracted restrictions) with potential longer term damage to the wellbeing of the general population (Brodeur et al. 2021). Nationally, the mental health burden associated with the pandemic is expected to surpass anything previously experienced, in what has been called the ‘fourth wave’ (O’Connor et al. 2020), and concerns have been raised around significant challenges to mental health and wellbeing in schools in the aftermath of COVID-19 (Lee 2020). Since the COVID-19 crisis began, a number of studies have been undertaken with school leaders, teachers and parents in Ireland and elsewhere, to assess its overall impact (Dempsey and Burke 2020; O’Sullivan et al. 2021; Patrick et al. 2020), but the voice of the students themselves has been absent. This study was carried out to address this gap and to: (1) assess the extent to which the current pandemic had impacted the health and wellbeing of the ‘class of 2020’; and (2) to undertake some comparisons with a previous health and wellbeing study of LC students (of comparable age) undertaken in 2015 (Burke and Minton 2019).

Methodology and theoretical perspective

This study involved a once-off, online, cross-sectional survey conducted in Ireland in June 2020. The survey was distributed to all LC students aged 18 years or older with the help and support of the National Association of Principals and Deputy Principals (NAPD) and the Irish Second-Level Students’ Union (ISSU). The study received ethical approval from Maynooth University’s Social Research Ethics Sub-Committee.

Participants

A total of 959 LC students, aged 18 or over, participated in the survey. Respondents were predominantly female (74%), Caucasian (95%), and resided mainly in the east or south of the country (Leinster 59%; Munster 27%) with the remainder living elsewhere (Connacht 10%; Ulster 4%). Most were attending a Secondary School (67%), although fee-paying, Community and other types of schools (e.g. Comprehensive, Gael Colaiste, and Vocational schools) were also represented. The 2015 ‘comparison sample’ participants ($n = 212$) had a similar age and gender profile (69% female) and, likewise, lived mainly in the east or south of the country (92%) and were attending Secondary schools (67%).

Measures

The survey comprised an 18-item Student Profile Questionnaire (SPQ) designed for purposes of the study to elicit demographic and background information, including a number of open-ended questions about the impact of the ongoing pandemic on overall health and wellbeing (with particular reference to school closures). Six psychometrically robust and easy-to-complete measures were also included to assess aspects of health and wellbeing (including resilience) as well as academic motivation; all measures demonstrated moderate to high levels of reliability. Higher scores indicate better functioning.

The *WHO-Five Wellbeing Index* (WHO 1998) is a 5-item measure used to assess overall wellbeing during the previous two weeks ($\alpha = .83$). The 7-item *Short Warwick Edinburgh Mental Wellbeing Scale* (SWEMW-S; Tennant et al. 2007) was used to measure positive aspects of wellbeing ($\alpha = .78$). The *Perceived Stress Scale* (PSS; Cohen 1988) comprises four items which measure the perception of stress ($\alpha = .73$). Twelve items from the 23-item *PERMA-Profilier* (Butler and Kern 2016) were used to assess six aspects of wellbeing including: (a) positive emotions (3 items); (b) negative emotions (3 items); (c) physical health (2 items); (d) social support (1 item); (e) happiness (1 item); and (f) loneliness (1 item) ($\alpha = .72$ to $.88$). Levels of adaptive coping were measured using the 4-item *Brief Resilient Coping Scale* (BRCS; Sinclair and Wallston 2004) ($\alpha = .59$). Lastly, the 5-item *Adolescent Academic Motivation Scale* (AAMS; Plunkett and Bamaca-Gomez 2003) was used to investigate levels of academic motivation and to determine the extent of any association between this construct and overall health and wellbeing.

Theoretical context

Bronfenbrenner and Morris's (1998) bio-ecological theory of human development provided the theoretical framework for this study. Its ecological and holistic perspective recognises health and well-being as arising from the interaction of the individual – in this case LC students – with aspects of their environment, including immediate social settings such as schools, and wider societal influences such as government actions and policies. For instance, government decision making was a key factor in the context of the changes to the LC exam, whilst the sudden shift to remote learning coupled with the need for social distancing, led to important, unexpected and protracted changes in students' environments, learning and social experiences (or lack thereof), all of which may combine to potentially affect health and wellbeing.

Findings/results

Sixty-one per cent of students reported low/poor levels of overall wellbeing on the WHO-5 while more than four in 10 obtained lower-than-norm scores on all other measures, including positive aspects of wellbeing, perceived stress and adaptive coping. Conversely, the largest proportion of students (by far), reported high levels of academic motivation (Table 1).

A standard multiple regression was used to assess the ability of five measures (AAMS, BRCS, SWEMW-S, PSS, and PERMA) to predict overall levels of wellbeing as measured by the WHO-5 scale. Preliminary analyses were conducted to ensure no violation of the assumptions of normality, linearity, multicollinearity and

Table 1. Summary statistics on study measures ($N=902$).

Measure	Low	Moderate	High	M	SD
WHO-5	61%	36%	3%	10.98	5.04
Academic Motivation	3%	29%	68%	16.50	2.66
Brief Resilient Coping	44%	44%	12%	13.63	2.63
SWEMW-S	46%	50%	3%	21.75	4.56
Perceived Stress Scale	42%	46%	12%	9.08	2.86

homoscedasticity. Three of the variables – ‘SWEMW-S’, ‘PERMA’, and ‘Perceived Stress’ – were found to be statistically significant and explained (respectively) 47% of the variance ($R^2 = .47$, $F(5,944) = 166.315$, $p < .001$) in overall wellbeing scores (Table 2).

An independent-samples t-test was also conducted to compare the PERMA wellbeing scores (i.e. PERMA components) for the LC students in 2020 versus those in the 2015 comparison sample ($N = 212$). The latter reported significantly higher levels of positive affect than their 2020 counterparts ($t(373) = 2.80$, $p < .05$, $d = .008$) as well as greater happiness ($t(956) = 2.56$, $p < .05$, $d = .006$) and higher levels of physical health ($t(955) = 2.76$, $p < .05$, $d = .007$). However, the magnitude of the differences in the means was very small. There were no statistically significant differences between the two groups in terms of negative affect, support, or loneliness (Table 3).

Responses to the SPQ showed that most students expressed general concerns in relation to COVID-19 ($n = 738$), over half of which were health-related. One third (246/738) reported health-related concerns about themselves and/or their family members contracting COVID-19, or of loved ones dying, as well as fears about the vulnerability of older people in the general population. However, most of the students (95%) had no exposure to COVID-19 at the time of the study, although 15% had family members who had tested positive, including grandparents (3%), parents/guardians (2%), siblings (1%) and others (e.g. extended family members). Almost one in ten alluded to the impact of the virus on their mental health, both their own and that of their friends and/or on ‘friendships and isolation’. For example, the ‘*loss of social interaction*’ and feeling ‘*isolated from friends*’ was frequently mentioned in their responses, as well as references to mental health impacts such as ‘*mental health being seriously compromised by all this isolation and gloom*’. A selection of illustrative quotes is provided in Box 1.

Table 2. Results of a multiple regression model predicting WHO-5 wellbeing.

Variable	B	B (SE)	β
Academic Motivation	-.35	.18	-.05
Brief Resilient Coping Scale	-.01	.05	.00
SWEMW-S	.38	.04	.34*
Perceived Stress Scale	-.30	.06	-.17*
PERMA Profiler	.84	.10	.27*
R^2	.47		
F for change in R^2	166.315		

* $p < .001$.

Table 3. T-test results comparing the PERMA wellbeing scores of 2015 versus 2020 students.

Wellbeing component	2015			2020			<i>t</i>	Cohen's <i>d</i>
	<i>n</i>	M	SD	<i>n</i>	M	SD		
Positive Affect	212	6.29	1.63	745	5.93	1.82	2.80*	.008
Negative Affect	212	5.25	1.77	741	5.52	1.81	-1.88	.003
Physical Health	212	6.86	1.82	745	6.46	2.01	2.76*	.007
Support	212	6.27	2.68	744	6.01	2.68	1.25	.001
Happiness	212	6.50	1.88	746	6.09	2.10	2.56*	.006
Loneliness	212	5.03	2.88	745	5.41	2.77	-1.78	.003

* $p < .05$

Box 1. A selection of student quotes describing the impact of COVID-19 on their mental health and wellbeing

“My friends with mental illnesses and difficult home life situations are struggling greatly at the moment and they can't lean on their friends or find an escape as they could before. On top of that, I can't push myself to support them like I did since the weight of their problems more easily pulls me down and manifests in my mind when I'm isolated. I've had to distance myself to maintain my mental health which is a more monolithic task in the current circumstances. So, I feel like a crap friend and I'm terrified that my friends are struggling so much.”

“Isolation and loneliness, even during a regular 3-month summer break triggers my anxiety every year and everything else going on at the moment also piles on top of this anxiety, I'm doing everything I can to connect with people (like phone calls and video games with my friends) but some days I can't help but feel extremely alone.”

“The thing that has affected my mental health the most during this period is the fact that the 'class of 2020' hasn't gotten closure on our school years. It feels like six years went to nothing really.”

“Very tough not meeting any friends for months. Even as we are coming back to normal, there will be many friends who I will not see for a while. This is difficult and texting them is not the same.”

“Feeling isolated from friends because they disregard social distancing and precautions while I try to abide by them. I am being judged for following the rules.”

“The health of the most vulnerable people, in terms of physical and mental health. I do not want people to feel isolated and unhappy. I also do not want people to continue to contract and suffer from COVID-19.”

Nine out of 10 students reported that social distancing and, in particular, school closures, and staying at home, had all impacted their wellbeing to a greater or lesser extent. For example, approximately half reported that school closures had a 'significant impact' on their wellbeing whilst 43% indicated that their wellbeing had been impacted to a significant degree from having to remain at home during the lock down.

Discussion

This study provided a unique opportunity to obtain insights into the health and wellbeing of a broadly representative sample of students who, for the first time in the

history of the Leaving Certificate, were unable to sit their exams for public health reasons. Overall, the findings demonstrate that the ongoing pandemic had affected many aspects of the lives of the LC students including, in particular, their overall health and wellbeing which was the focus of this study. Other impacts are reported elsewhere (Quinn, McGilloway, and Burke, 2020).

Reassuringly, only a very small number (5%) of students had contracted COVID-19 at the time of survey completion, although a relatively large proportion (15%) had immediate or extended family members who had tested positive. Student scores on the health and wellbeing measures indicate low or sub-optimal levels of health and wellbeing and significant proportions, in particular, reported high levels of depression, anxiety and stress during the previous weeks. Most also reported that they were not coping well as shown by their mean levels of resilience. All of these findings were supported and amplified by many of the students' own responses in the 2020 survey.

The 2020 versus 2015 comparison (based on the PERMA-Profiler) indicated further that the class of 2020 was faring less well with regard to their levels of happiness, experience of positive emotions and physical health, although these differences, whilst statistically significant, were not marked. This may be due, at least in part, to the fact that the PERMA profiler assesses broader aspects of wellbeing (across five domains) as opposed to the more specific and granular aspects of mental health and wellbeing which were assessed in the current study and on which substantial proportions of students were obtaining low (sub-optimal) scores.

It is difficult to know, in the absence of available data, to what extent Irish students in their final year of school would compare to similar cohorts from other countries. A comparison of the mean scores reported here, with those obtained by students in recent studies conducted elsewhere (i.e. pre-COVID-19) and using comparable or identical measures – suggest generally lower levels of wellbeing in the current cohort of students. For example, the current sample obtained worse wellbeing scores than an equivalent sample from N. Ireland (McKay and Andretta 2017), whilst also comparing poorly in terms of resilience levels (BRCS) reported by a Spanish sample of 18-22-year-olds (Limonero et al. 2014). The LC cohort in this study also reported lower levels of stress compared to a German sample of students aged 14–19 (Klein et al. 2016). It is important to note, though, that we are not comparing like-with-like given that these other European studies were conducted in 'pre-COVID' times.

In many European countries, adolescents report a small decline in their wellbeing as they progress through their post-primary education due to growing pressures associated with their schoolwork (Cosma et al. 2020). Similar trends have been reported amongst Irish students, with females reporting lower scores than males with regard to many aspects of their wellbeing (Burke and Minton 2019), whilst also experiencing more health problems and suicidal ideation (Leavey et al. 2020). The period in the run-up to the LC exams would be a particularly stressful time for most students (Banks and Smyth 2015), but our findings suggest that this was exacerbated by, amongst other things, uncertainty about the future exam arrangements, sudden school closures and having to adjust rapidly to distance learning.

The vast majority of the students (82%) in the current study expressed concerns in relation to COVID-19, over half of which were health concerns/fears

for both their own health and that of their family and friends. Almost one in ten of the responses here alluded to the impact of the coronavirus on mental health, both to self and others. Substantial proportions of students were also significantly impacted by having to remain at home during lock down. Arguably, social distancing may be more challenging for teenagers than other age groups as their lives tend to be characterised by high levels of socialising and multiple friendships.

Future-facing recommendations

Ireland is currently in the third-wave of the pandemic and many of this cohort (class of 2020) have now transitioned to Third-Level institutions – at an already challenging time in their lives (Darmody, Smyth, and Russell 2020). It is imperative, therefore, to support their psychological and emotional wellbeing needs, not to mention the needs of existing students. Reassuringly, the Irish government provided additional financial supports for further and higher education (in August 2020) in recognition of the likely increased demands for mental health supports across the Third- Level sector. Whilst welcome, this top-up funding is, arguably, far from sufficient in view of the historical chronic under-funding of mental health services in Higher Education Institutions and indeed, in the wider community (O'Connor et al. 2020). It will be crucial to monitor and keep under review, the extent to which this will be sufficient for support services going forward and especially in the context of prolonged restrictions and already high and increasing proportions of Third-Level students presenting with mental health problems both in Ireland and elsewhere (e.g. Price, Smith, and Kavalidou 2020).

Arguably, the current changes in Third- Level teaching provision and the shift to 'blended' methods of teaching and learning may, in itself, cause or exacerbate wellbeing issues amongst the student population. For example, concerns have been expressed that 'the twin effects' of the COVID-19 pandemic and the alienation that could arise with primarily online college experience, may result in higher levels of stress and drop-out rates in Third-Level institutions (McGrath 2020). At the same time, anecdotal evidence (e.g. from mental health and disability experts in the field) suggests some positive experiences, in that some students with existing mental health problems, have found, perhaps paradoxically, that their mental health has improved during the pandemic for several reasons, but mainly because they were freed up temporarily from the 'stresses and strains' of normal day-to-day living, such as commuting or living in substandard rental accommodation.

Strengths and limitations of the study

This study involved a national survey completed by a large and broadly representative sample of LC students in Ireland. This is the first study of its kind to focus on the health and wellbeing of the 'Class of 2020' in the context of the current pandemic. The survey generated rich and informative data based on objective assessments of (self-reported) health and wellbeing as well as students' own detailed written responses. However, the study was also limited in several ways. Respondents were typically female, white, and from Secondary Schools located mainly in the east of Ireland. The distribution of this online survey was restricted to the NAPD and the ISSU for ethical reasons and sent to students' school email accounts. We were unable, therefore, to use other channels of distribution (i.e. social media platforms)

which is likely to have reduced the response rate. It is also possible that students who were most affected by the pandemic were those most likely to have taken part in the survey.

Overall, the key findings demonstrate that the ongoing pandemic has significantly impacted the lives of LC students including, in particular, their health and wellbeing. This has important implications in terms of the support these young people may require going forward and especially as they enter Third-Level education. Careful consideration should be given to reviewing traditional school-based methods of learning and assessment, in order to potentially accommodate new ‘hybrid’ or blended learning styles into the future. As the coronavirus crisis continues to impact traditional education practices both nationally and internationally, assessing and understanding its impact through a student lens, becomes even more relevant and important.

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Notes on contributors

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Professor Sinéad McGilloway is Founder Director of the Centre for Mental Health and Community Research, Department of Psychology and Social Sciences Institute at Maynooth University (www.cmhcr.eu). She is a Chartered Psychologist and Chartered Scientist with the British Psychological Society (BPS) and an Associate Fellow of the BPS. Professor McGilloway has extensive experience in undertaking engaged policy- and practice-relevant research in the field of health and community care, with a particular focus on child and adult mental health and wellbeing in the community, and service evaluation. She is widely published, has won significant funding to date, and is currently leading/supervising a large number of interdisciplinary engaged research programmes and projects, including several which focus on wellbeing in schools.

Dr. Jolanta Burke is a Chartered Psychologist, specialising in positive psychology applied in education, Assistant Professor and Researcher, Maynooth University Department of Education. She is the author of “The Ultimate Guide to Implementing Wellbeing Programmes for School” and “Undertaking Capstone Projects in Education: A Practical Guide for Students”, which will be published later this year by Routledge. For more information, please go to: www.jolantaburke.com

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