

# Youth mental health and substance use during the COVID-19 pandemic

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# Guest Expert Commentary by Stephanie Nairn and Dr Ranmalie Jayasinha



## Stephanie Nairn

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## What are the main risk factors for problematic substance use in youth?

In the field of mental health and addictions research and clinical practice there has been a shift in the way both mental health and addictions are understood. Clinicians and researchers in these fields have taken up the **'bio-psycho-social' paradigm**. This paradigm suggests there are **several interacting factors** that impact a person's mental health and relatedly, their risk for problematic substance use and/or experience of mental health disorders. These factors include **genetic, neurobiological, psychological characteristics** and **social/cultural environments** all of which intersect to influence individual mental health and substance use behaviours. The following is not an exhaustive list of these factors, but is meant to highlight some of the salient factors that may influence youth substance use and mental health outcomes.

## Can you give a few examples of specific risk factors?

At the psychological and neurobiological levels, adolescence has been characterized as a period of **vulnerability**. This vulnerability is attributed in part to **on-going neural and brain development**. There is concern that the structure of the brain can be altered through substance use and it is possible this can lead to cognitive impairment. Frontal lobes are still undergoing maturation during adolescence and early adulthood, which extends the period(s) of potential vulnerability for young people. Compounding this concern is research that indicates an **increasingly earlier age of onset of substance use by youth across North America and Europe**. Furthermore, youth have an increased tendency to engage in **risk-taking, impulsivity, sensation-seeking** and **disregard for negative consequences**, which may lead to greater reliance on risky coping strategies like substance use.

**The experience of stress and trauma including neglect, peer victimization and discrimination can also increase youth risk for substance use.** At a social level, there are several interacting factors that can impact youth substance use. For example, demographic dimensions including **gender, ethnic and cultural background, family environment** (e.g. norms around substance use) and broader social context (e.g. the experience of **poverty, low socio-economic status**) can interact to potentially promote the development of youth substance use. Having **peers who consume substances** is a particularly salient social factor that impacts the likelihood of youth substance use. Youth tend to overestimate the use of substances among their peer groups and these perceived social norms are powerful correlates influencing whether youth will engage in substance use.

## What are some impacts of the current pandemic on problematic substance use in youth?

The COVID-19 pandemic highlights the interacting impacts of some of the aforementioned factors on youth substance use and mental health over the past year and in the present day. Researchers and public health officials are currently trying to understand the various impacts of the pandemic on the general population, however, we argue that a focus on the

experiences of youth during this time continues to be largely absent. As such, the following is not a comprehensive outline of all the impacts on youth, but draws attention to both actual and potential impacts of the on-going pandemic among youth.

It has been demonstrated that there is a [parallel mental health epidemic](#) that coincides and is in part due to the pandemic. Canadian youth have reported [significant deteriorations in their mental health](#) since before the pandemic, including increased **depression** and **anxiety**-related symptoms. Youth have also reported experiencing difficulties acquiring access to mental health supports despite making efforts to seek out these resources. Relatedly, a recent report by pharmacists in Quebec showed a [significant increase in antidepressant use](#) among young people over the period of the pandemic.

There is some preliminary evidence that youth substance use has [remained stable or even decreased](#) in some cases during the pandemic. However, data from young adult populations indicates that **where people report using substances, they are more likely to use alcohol and cannabis, consume substances more heavily** (e.g. binge use), and engage in other **risky substance use behaviours**, including nonmedical prescription opioid use and illicit opioid use. This latter concern has been most clearly demonstrated by the exponential [rise in opioid-related morbidity and mortality during the pandemic](#) across the country. While the opioid crisis precedes the pandemic, popular media has highlighted the impacts of public health measures to slow the spread of the virus on the **increases in deaths and opioid-related morbidities**. Border restrictions have limited access to safe supply, while physical distancing and isolation measures have led to a lack of access to [harm reduction services](#) including supervised injection facilities, outpatient treatments and other psycho-social supports, particularly for youth, leading to heightened risk of relapse and overdose.

## Are there negative impacts of the pandemic in other areas of the youth's lives?

It is also important to note that the consequences of the pandemic for other 'dangerous' consumption behaviours extends beyond alcohol and drug use to an observed increase in **eating disorders** among Canadian young people. Reports from medical professionals seem to point towards [increases in anorexia nervosa](#) due to the on-going pandemic and social distancing measures. Doctors have speculated these increases are due to a lack of social structure in daily life and social support that would typically be derived from friends, teachers and counselors.

Relatedly, [we recently hypothesized](#) that the public health measures to combat the spread of the virus, including physical distancing, social isolation and increased time spent within the home, may contribute to **deteriorations of mental health and increased risky and problematic substance use behaviours** among youth. This could be due to disconnection from protective social networks and activities, including peers, teachers, coaches, counselors and school-based mental health programs.

Physical distancing measures may also lead to increased time spent with family members, which could potentially promote **increased access to substances, exposure to abuse and violence**, as well as more intense socialization with regards to norms around **substance use**. Indeed, research

has shown increased [risk of prescription opioid overdose](#) among youth who have family members with opioid prescriptions. Additionally, in order to follow physical distancing requirements, youth may be forced to **use substances alone** without “buddying-up” with no one present to call emergency services if overdose occurs. Youth and their families may also refrain from going to the hospital to avoid perceived risks of contracting COVID-19, which may contribute to **increased risk of death due to overdose**.

## What about protective factors?

Conversely, it is important to acknowledge that reports of reductions in substance use among some youth also refers to potential salutary effects of the pandemic for some young people. For these youth, **increased time at home with family** may lead to **increased emotional support and mitigate potential substance use risks** that may ordinarily occur due to the influence of peers. It will be vital to understand how youth are coping with the current and on-going restrictions and which practices have led to reduced substance use among young people.

What lessons can we learn from the current pandemic for providing better support to youth with problematic substance use in terms of...

## ...communication strategies with youth?

Public health strategies that involve **individualizing blame for the COVID-19** pandemic and [shaming or blaming youth](#) for their current situations (e.g. substance use and other coping behaviours) are notoriously **ineffective, harmful and are highly unlikely to change individual behaviours or promote positive and/or more healthy coping behaviours**. Youth occupy multiple vectors of vulnerability and these vulnerabilities can be amplified in the event public health officials, researchers and policy makers ignore the unique impacts of the pandemic on young people and simultaneously blame them for COVID-19 transmissions.

## ...mental health service organization for youth?

The COVID-19 pandemic has highlighted the stark and significant gaps in the mental health system for youth. With youth reporting difficulties accessing affordable, efficient, and inclusive mental health care, novel solutions are needed. The scale up and [online delivery](#) of evidence-based psychoeducation, peer-based, and specialist supported modalities, particularly those focused on prevention and early intervention, may provide urgent support to youth, especially where in-person mental health services are not possible due to the pandemic. However, research and evaluation to ensure these adaptations remain appropriate, safe and effective is also vital. Our [research team at the Venture Lab](#), for example, are currently partnering with schools and mental health providers across Canada to rapidly **adapt a targeted mental health and substance use prevention program for youth and simultaneously assess the feasibility, acceptability and impact of the intervention for youth** during this unprecedented time.

On the other hand, youth may also continue to have preference for face-to-face engagements with peers and outreach from mental and other healthcare professionals who have substance-

specific information. Therefore continuing the development and evaluation of these different modalities after the pandemic will be necessary to support youth mental health and reduce substance use beyond this critical time. There are some pragmatic solutions already in place to assist youth struggling with adverse mental health and substance use problems that could be further advertised and adapted. For example, responses from an ongoing pan-Canadian [study of young people who have experience with opioids](#), highlighted youth continued desire for emergency and help phone lines.

## ...substance use?

The aforementioned evidence also seems to demonstrate that **some youth are using less than they did previously**. Youth are a rich source of insight about what kinds or types of activities and behaviours encourage reductions in substance use activity and could be encouraged to share these insights with other youth to empower their peers throughout the coming months. **The importance of procuring safe, pro-social activities to support the social and psychological development of young people cannot be understated.**

## ...intervention with youth?

Ultimately, researchers and youth have highlighted the necessity of [engaging and asking youth what they need](#) and desire during this time. **Involving young people in conversations and creating spaces and platforms for youth engagement throughout mental health resource development is vital to enhance the effectiveness of interventions and public health initiatives.** Continuing to ignore youth and not involve them in public health-related conversations will be a hindrance to addressing any of the aforementioned impacts of the pandemic on young people's substance use and mental health. Developing new evidence-based solutions and bolstering existing approaches, whilst integrating youth perspectives, is needed to address the current mental health system gaps to support youth during and in the aftermath of the pandemic.