



FOCUS
For Our Community Unity &
Support Addiction Prevention
Coalition

Focus Group and
Key Informant Interview
Combined Report

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I. Executive Summary

In spring 2022, For Our Community Unity & Support Addiction Prevention Coalition (FOCUS) conducted a series of key informant interviews and focus groups to explore the effects of the COVID-19 pandemic on Lancaster/Depew youth. These analyses were conducted to further understand the mental health needs of Lancaster/Depew youth.

In all, thirteen community residents participated in the qualitative data collection exercises. Participants for key informant interviews and focus groups were chosen based on their knowledge of the community and local youth trends. FOCUS developed formal questions and protocols for administering the qualitative data collection sessions to ensure quality, actionable results.

Areas explored by FOCUS during the sessions included how COVID-19 affected substance use rates and access to substances among youth; how COVID-19 and the associated societal changes (e.g., hybrid education) affected youth mental health; how youth and adults see COVID-19 affecting their lives in the long term; and how the community can support youth dealing with mental health struggles. Answers to these questions are critical to developing both targeted and community-wide supports and interventions for youth mental health and substance use.

Key Findings



COVID-19 radically changed daily life for Lancaster/Depew youth. Common responses include the creation of new social circles through hybrid instruction or being at home more; new and/or changing norms related to substance use; increases in mental stressors outside of youth control; and peer pressure resulting from differences in opinion about pandemic restrictions.



Students are feeling high levels of anxiety and stress due to rapid changes in society. While COVID-19 and its associated restrictions and uncertainty were the primary drivers of this stress, other societal changes are also affecting youth. These changes include the legalization/normalization of marijuana, the increasing prevalence of vaporizers/e-cigarettes, and increased mental health concerns such as social anxiety.



There is a need for community wide education on the effects of COVID-19 on youth. Youth and adults made clear that the effects of COVID-19 will have both short- and long-term effects on youth. These effects range from an increased reliance on social media to major issues with social anxiety and other mental health issues.



Regardless of COVID-19, there is a need for youth supports across all segments of the Lancaster/Depew community. This was perhaps the clearest theme that emerged from the data collected from both youth and adults. Youth have a strong desire for an expanded support system that removes stigma and provides help without judgment, whether it be for generalized anxiety or substance use.

II. Findings

In this section, major themes identified during key informant interview and focus group analysis are discussed. Select respondent quotes are provided for context.

Theme 1: COVID-19 radically changed daily life for Lancaster/Depew youth.

Over the past two years, there has been copious anecdotal, observational, and experiential evidence that the daily lives of everyone – from the very young to the very old – were radically changed by the COVID-19 pandemic. While some experienced much greater hardships than others, everyone was and is affected by the COVID-19 pandemic in some way.

Researchers have been working systematically to better understand the ways different populations have struggled during the pandemic, and data for youth are becoming available. A study released in March 2022 by the Centers for Disease Control and Prevention (CDC) shows how much COVID-19 affected high school youth.¹ Through a nationally representative survey of youth, the CDC learned the following about high school youth during the pandemic:

- More than half (55%) reported they experienced emotional abuse by a parent or other adult in the home, including swearing at, insulting, or putting down the student.
- 11% experienced physical abuse by a parent or other adult in the home, including hitting, beating, kicking, or physically hurting the student.
- More than a quarter (29%) reported a parent or other adult in their home lost a job.

As CDC Acting Principal Deputy Director Debra Houry put it, “These data echo a cry for help.” The CDC’s national findings align in many ways with local findings through focus groups and key informant interviews, including:

- Major uncertainty about school
- Changing friend groups due to restrictions
- Increased depression and anxiety among youth
- Boredom among many youth leading to new or more frequent negative behaviors (e.g., substance use)
- Self-medication using substances such as marijuana
- Increased reliance on social media for connectedness

Adults interviewed for this analysis echoed statements from youth:

- Isolation created or exacerbated mental health issues
- A subset of youth “went MIA” during remote school
- Vulnerable students lost essential supports at school and in the community

“[More] stress with virtual school, no more one on one with teachers for help, lack of social interaction between teachers and students.”

**-Anonymous
Lancaster/Depew student**

All 13 respondents to the focus groups and key informant interviews agreed that COVID affected daily life in ways that will have long-lasting impacts. In nearly all cases, these changes are negative in nature.

¹ <https://www.cdc.gov/media/releases/2022/p0331-youth-mental-health-covid-19.html>

Theme 2: Students are feeling high levels of anxiety and stress due to rapid changes in society.

Respondents universally agreed that youth faced – and continue to face – high levels of stress and anxiety associated with the COVID-19 pandemic. Some students developed new mental health issues, while others saw their existing issues increase or return. When considering the delicate nature of youth development under “normal” circumstances, the stresses associated with COVID-19 added another layer of difficulty for youth attempting to develop into mentally and physically healthy young adults.

All eleven students who participated in focus groups for this project indicated that anxiety and stress are major issues associated with COVID-19:

- Anxiety went up on self-image or social interaction
- Honor roll students stress level for academic help
- Introverts excelled during isolation, anxiety skyrocketed having to go back
- Kids got very stressed out, struggling (ability to handle school tasks, academic and socially)
- More [stress] with virtual school, no more one on one with teachers for help, lack of social interaction between teachers and students
- Social development opportunities were down so anxiety was up
- Stress levels spiked when having to go back to school full time
- The internet became a big problem, created more anxiety comparing yourself to others

The two key informants interviewed for this project echoed the student sentiments about anxiety and stress, tying these issues to root causes of not being able to exert control over their own lives, rapidly changing rules and regulations, and severed or impaired social connections.

Theme 3: There is a need for community wide education on the effects of COVID-19 on youth.

One important theme that resulted from the analysis of focus group and key informant data was the need for community education on how COVID-19 has affected youth. There is a common thread in student feedback of equipping parents, youth, their peers, and school staff with the knowledge needed to help youth through this difficult time.

Youth responses related to community education on COVID-19 include:

- [Educate] kids in general, and give them resources to help
- Adults needs to be educated on the mental health stressors young people are facing these days
- Equip the peers, support peer-to-peer support
- Parents need to be educated on youth mental health and normalizing their needs for mental health resources, have a parent meeting on how to detect signs of mental health issues or how to approach them with your kids

Adult key informant interviews supported youth requests for more education on how to support each other as COVID-19 continues to affect daily life for youth.

“Adults needs to be educated on the mental health stressors young people are facing these days.”

“Parents need to be educated on youth mental health and normalizing their needs for mental health resources.”

**-Anonymous
Lancaster/Depew students**

Theme 4: Regardless of COVID-19, there is a need for youth supports across all segments of the Lancaster/Depew community

Perhaps the strongest sentiment to come from both youth focus groups and adult key informant interviews is the need for social support across all segments of the community. While this analysis deals mainly with effects of COVID-19 on youth, there is growing evidence that people of all ages, races, ethnicities, and backgrounds could benefit from increased social supports during and after COVID-19.²

Within the context of providing support, these general themes emerged:

- There is a need to minimize stigma associated with mental health issues, substance use disorders, and individual choices made during COVID-19
- Support should be a primary way to address issues youth are facing; according to youth respondents, discipline and punishment have mixed effects on students
- Effects – especially mental health and social effects – of COVID-19 will be long lasting

For this theme, the suggested supports cited by respondents are categorized into four domains – community, school, family, and peer/individual. These domains align with quantitative risk and protective factor data collected through the Community Level Youth Development Evaluation Survey students complete every two years. In Section III of this report, multiple data sources will triangulate needs and tie them to potential interventions for FOCUS.

Suggested Community Supports

- Create a free and anonymous crisis line specifically for teens
- Give adults tools and resources to help youth
- Provide resources in the community for those who are addicted to substances
- Select adults who connect with youth to help implement any supports – “Adults need to be a specific kind of person to help youth”
- Select adults who have been through these struggles to share tips and experiences
- Take youth concerns seriously

“We need to provide them support, help them with whatever addictions they developed...teach them how to cope, talk about their stressors, educate them on dangers of addictions, and educate on ways to wean off and stop those behaviors.”

-Anonymous key informant interview respondent

² <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/>

Suggested School Supports

- Access to more mental health counselors in school or out of school with more flexible hours
- Adults need to come up with a method to help youth who are addicted within the school anonymously
- Half days for check ins and access to mental health services
- Have check in days at school, allow kids to talk about what's stressing them out
- Rethink certain policies such as out-of-school suspension – these policies may end up connecting youth who are self-medicating or are having extreme physical, mental, or emotional difficulty
- Safe-place teachers to go to
- Teachers need to be more understandable, more accessible for schoolwork and needs

Suggested Family Supports

- Consider support instead of punishment as the initial response to undesirable behavior
- Educate parents on signs and of mental health issues and prepare them on how to discuss these issues if they are noticed
- Increased education for parents specifically on ways to help youth who are struggling
- Need to remove stigma of needing and/or asking for help
- Normalize talking to youth about the dangers of substance use and COVID-19 in general

Suggested Peer/Individual Supports

- Countering new norms and messaging found on social media
- Education to normalize help seeking and remove stigma
- Equip peers with skills for coping
- Peer-to-peer networks of support

III. Recommendations - Connecting Findings to Action

In this section, data from other sources will be analyzed in conjunction with the themes and findings presented earlier in this report. This will show areas where quantitative and qualitative data overlap and provide the coalition with specific topics and strategies to explore for implementation.

Risk and Protective Factors

The Community Level Youth Development Evaluation (CLYDE) Survey is a survey completed by youth in Lancaster and Depew once every two years. In addition to questions about topics such as substance use, home life, and mental health, CLYDE collects data on risk and protective factors. These risk and protective factors have been extensively researched, and each risk and protective factor has been correlated with problem behaviors in youth.³

Risk and protective factor trend data for the Lancaster/Depew community are presented below. The following table includes the type of factor (risk or protection), the domain for that factor (community, school, family, or individual/peer), the factor itself, and data from 2010 to 2021. The last column of the table contains the percentage point change from 2019 to 2021.

Table 1. Risk and Protective Factor Trends, FOCUS, 2010-2021 (Risk – Lower is Better; Protection – Higher is Better)

Type	Domain	Factor	Percent of Students Demonstrating Risk or Protection				Change 2019 - 2021
			2010	2014	2019	2021	
Risk	Community	Laws and Norms Favorable Toward Drug Use	36.7	35.9	28.0	18.0	-10.0
Risk	Community	Perceived Availability of Drugs	35.6	31.8	20.5	9.4	-11.1
Risk	Family	Poor Family Management	40.6	35.8	22.7	18.1	-4.6
Risk	Family	Family Conflict	37.9	36.3	37.0	36.5	-0.5
Risk	Family	Parental Attitudes Favorable Towards Drug Use	35.9	30.6	31.8	41.8	10.0
Risk	School	Low Commitment to School	39.0	43.3	42.8	48.9	6.1
Risk	Individual/Peer	Early Initiation of Drug Use	31.0	25.6	14.5	5.9	-8.6
Risk	Individual/Peer	Attitudes Favorable Toward Drug Use	39.0	33.6	29.7	15.9	-13.8
Risk	Individual/Peer	Attitudes Favorable Toward Antisocial Behavior	36.8	29.5	28.7	30.8	2.1
Risk	Individual/Peer	Friends' Use of Drugs	33.5	27.9	20.7	11.6	-9.1
Protection	Family	Family Attachment	62.5	62.2	70.1	59.7	-10.4
Protection	Family	Opportunities for Prosocial Involvement	63.2	60.6	68.0	66.2	-1.8

³ Abigail A. Fagan, J. David Hawkins, David P. Farrington, and Richard F. Catalano. Communities that Care: Building Community Engagement and Capacity to Prevent Youth Behavior Problems (Oxford University Press, 2019).

Type	Domain	Factor	Percent of Students Demonstrating Risk or Protection				Change 2019 - 2021
			2010	2014	2019	2021	
Protection	Family	Rewards for Prosocial Involvement	62.4	51.4	59.0	62.4	3.4
Protection	School	Opportunities for Prosocial Involvement	70.1	71.5	80.1	80.8	0.7
Protection	School	Rewards for Prosocial Involvement	65.5	60.1	67.3	61.0	-6.3
Protection	Individual/Peer	Belief in the Moral Order	62.6	70.2	66.4	68.1	1.7
Protection	Individual/Peer	Prosocial Involvement	70.8	70.3	72.1	49.1	-23.0

Four areas where students indicated increased risk or decreased protection from 2019 to 2021 are:

- Risk Factor – Parental Attitudes Favorable Towards Drug Use – increased 10 percentage points
- Risk Factor – Low Commitment to School – increased 6.1 percentage points
- Protective Factor – Family Attachment – decreased 10.4 percentage points
- Protective Factor – Individual/Peer Prosocial Involvement – decreased 23 percentage points

The increases in risk factors and decreases in protective factors found in the CLYDE data align closely with the findings from the focus groups and key informant interviews. Namely, youth are indicating less social support, less commitment to school (perhaps due to the uncertain nature of schooling during the pandemic), less prosocial involvement with peers, and decreased family attachment. Recommendations are provided below in order to help fill the need for youth supports in these areas:

1. Create a youth support team or subcommittee on the FOCUS coalition

Strategic Prevention Framework focus area(s): Capacity

Seven Strategies for Community Change focus area(s): Providing Support

It is advisable to create a support team or subcommittee dedicated to *building capacity* for helping Lancaster/Depew youth with mental health concerns. Recommended community partners include youth, parents, schools, youth-serving organizations, law enforcement, and government officials.

2. Research and implement evidence-based programs to support youth mental health, especially as they relate to substance use

Strategic Prevention Framework focus area(s): Assessment, Capacity, Planning, Implementation

Seven Strategies for Community Change focus area(s): Providing Support, Enhancing Skills, Enhancing Access/Reducing Barriers

The charge of the youth support subcommittee could be the research and implementation of evidence-based programs related to mental health, social skills, and substance use prevention.

SAMHSA has created a primer⁴ for programs aimed at college-age students, and many of these programs could be adapted for younger audiences. They include:

- Creation of a teen-specific crisis line – aimed at providing anonymous, timely help to youth who are facing acute struggles
- Creation of a drop-in center for youth – while not addressed in the CADCA primer, youth drop-in centers can provide an accessible, friendly environment for youth to share their concerns
- Gatekeeper Trainings – aimed at training those who work closely with youth (e.g., counselors, teachers, therapists) to identify and act on signs of stress and anxiety
- Mindfulness-Based Stress Reduction – a program designed to use mindfulness meditation to reduce stress and anxiety while managing other emotions. While this is seen as a treatment by SAMSHA, it is an activity that could be used as a prevention activity for delayed onset or reduction of substance use

3. Work closely with schools to address student concerns

Strategic Prevention Framework focus area(s): Assessment, Capacity, Planning, Implementation
Seven Strategies for Community Change focus area(s): Providing Support, Enhancing Skills, Enhancing Access/Reducing Barriers, Educating/Informing about Modifying/Changing Policies or Laws

Students and key informants both noted the need for more extensive youth support in schools. Specific, actionable ideas provided by youth include:

- Improving access to adults at school through flexible and/or extended hours
- Allowing for anonymous requests for help and/or guidance
- Regular mental health check-ins for youth – open discussions where youth can share their worries and adults can provide appropriate support
- Rethink certain policies such as out-of-school suspension – these policies may end up connecting youth who are self-medicating or are having extreme physical, mental, or emotional difficulty
- Using support instead of punishment whenever possible to address underlying issues and reduce the stigma of help-seeking behavior

4. Continue to collect data and evaluate the health of the community and its youth

Strategic Prevention Framework focus area(s): Evaluation

Seven Strategies for Community Change focus area(s): Providing Information, Enhancing Skills

It is recommended that the coalition follow up on this data collection effort in fall 2022 to track how youth opinions and feelings have changed over time. In addition to focus groups and key informant interviews, it is recommended that FOCUS continue to administer the CLYDE Survey, consider conducting a community resource assessment of youth mental health supports, and create goals and objectives for any interventions created and implemented to help the youth of the Lancaster/Depew Community.

⁴ <https://www.samhsa.gov/resource/ebp/prevention-treatment-anxiety-college-students>