

Focus Group Brief: Effects of COVID-19 on Positive Mental Health

March 2021

**From:** USC Student Health - Office for Health Promotion Strategy,

Backbone for the USC Well-being Collective

**Title:** Fall 2020 Focus Group Report: Effects of COVID-19 on Positive Mental Health

#### **PURPOSE OF THE STUDY**

The COVID-19 pandemic has had a dramatic impact on individual wellbeing. Data collected from the USC Student Well-being Index Survey (SWIS) this past spring semester indicated that 51.0% of USC students had positive mental health. This number is higher than a previous estimation of positive mental health from data collected from the Healthy Minds Study in the spring semester of 2018, which found 45.7% of students had positive mental health. It's not fully known which factors are driving differences in spring of 2020 relative to spring 2018, though some campus partners have indicated that these findings are in line with their observations and anecdotally report that some students who have struggled previously are doing better during the pandemic. Regardless, almost half of students did not report positive mental health during this challenging time. The overall goals of the proposed research are to investigate the drivers of positive mental health during the COVID-19 pandemic, and to understand successful strategies for maintaining positive mental health, especially in the context of an online school experience.

### **METHODOLOGY**

The USC Student Health - Office for Health Promotion Strategy, in partnership with student Community Health Organizers (CHOs), conducted focus groups via Zoom during the fall 2020 semester. CHOs are undergraduate and graduate USC students employed by the USC Student Health - Office for Health Promotion Strategy. CHOs receive rigorous training in qualitative research, including study design, recruitment, facilitation, and analysis. These students, with guidance from professional staff in the Office for Health Promotion Strategy, execute community-engaged research projects to investigate students' perceptions and experiences related to wellbeing. Student CHOs facilitate focus groups with no professional staff present to allow for participants to openly discuss lived experiences with their peers.

Community Health Organizers facilitated six hour-long focus groups via Zoom in October 2020. Focus group size ranged from three – eight participants. The CHOs used a variety of online channels to recruit student participants. The recruitment graphic was posted on Slack channels, placed in e-newsletters of student-facing campus offices like residential education and cultural centers, and emailed to student organization leaders and academic advisors, requesting the material be forwarded to students in their group or office. The recruitment graphic included a link and QR code which directed interested students to an online screener questionnaire. Participants were eligible to participate if they met two conditions: first, they had to be currently enrolled in a traditionally in-person/ on-campus degree program at USC (even if currently remote due to the pandemic). Second, they had to indicate positive mental health by scoring a 48 or more out of 56 in the Flourishing Scale (Diener et al., 2010). This threshold for positive mental health is the standard used by the Healthy Minds Network to report national data on college

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student mental health (The Healthy Minds Network, 2020). If students met both conditions, CHOs sent an email confirmation and provided a Zoom link to the online focus group. Two Community Health Organizers were present at each session, with one facilitating and one note-taking. All student participants were asked to use pseudonyms while speaking to protect anonymity. Focus group sessions were audio recorded after CHOs obtained permission from all participants. CHOs used a structured moderator guide to facilitate the conversation and maintain consistency across sessions. Each student received a \$20 Amazon e-gift card for their participation.

Focus group audio was transcribed verbatim via an online transcription service. Two Community Health Organizers performed individual inductive open-coding on each transcript. After an initial round of discussion and comparison, each pair derived category codes from the data and counted frequencies for the associated responses. These category codes were then reviewed and revised by a professional staff member. After category codes were established, one student developed major and minor themes across all six focus groups. Participant quotes were included in all steps of the analysis to provide nuance and illustrate findings.

#### FOCUS GROUP EXECUTIVE SUMMARY REPORT

**Dates:** 9/23/20, 9/25/20, 9/28/20, 9/29/20, 10/02/20, 10/14/20

Focus Group Facilitators: Ayah Bany-Mohammed, Ruben Romeo, Ken Murakami, Yizhen Yang, Erela

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**Number of Participants: 37** 

Participant Description: USC Undergraduate and Graduate Students

### Demographic Breakdown:

		Count	Percent*
Race/Ethnicity	Arab or Arab American	0	0%
	Asian or Asian American	14	38%
	Black or African American	3	8%
	Caucasian or White	8	22%
	Hispanic or Latino/a/x or Chicano/a/x	5	14%
	Middle Eastern	0	0%
	Mixed Race	6	16%
	South Asian or Desi American	1	3%

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Sexual Orientation	Asexual	0	0%
	Bisexual	2	16%
	Gay	2	5%
	Heterosexual	25	68%
	Lesbian	0	0%
	Pansexual	2	5%
	Queer	1	3%
	Questioning	1	3%
Gender Identity	Female	28	76%
	Genderqueer/Gender non-conforming	0	0%
	Male	8	22%
	Non-binary	1	3%
	Trans female/Trans woman	0	0%
	Trans male/Trans man	0	0%
Degree Program	Bachelor's	26	70%
	Master's	9	24%
	PhD	2	5%
International/Domestic	Domestic	31	84%
	International	6	16%
First Generation	Yes	12	32%
	No	25	68%
Registered with DSP	Yes	4	11%
-	No	33	89%

<sup>\*</sup>Sums of category percentages may exceed 100.00% due to participants' ability to select multiple responses

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#### **Research Questions:**

- Investigate the drivers of positive mental health among university students during the COVID-19 pandemic
- Understand successful strategies and coping mechanisms for maintaining positive mental health, especially in the context of an online school experience

In an effort to address the research questions, Community Health Organizers implemented a number of steps, both during the recruitment process and virtual focus groups, to maintain accuracy and consistency across all studies. Following the initial recruitment process, potential participants' levels of positive mental health were screened using the Flourishing Scale (Diener et al., 2010). Participants rated their agreement from (1) strongly disagree to (7) strongly agree for 8 statements such as "I lead a purposeful and meaningful life" and "I am optimistic about my future." Only individuals scoring above a 48 (out of 56) were eligible for this study, as this pool would best represent the experiences of students with positive mental health. Next, when conducting the focus groups, the facilitators provided definitions for "mental health" as a means to establish a consistent understanding of mental health across all focus groups. The definition provided was:

"Mental health includes our emotional, psychological, and social wellbeing. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices."

Participants were then asked to define the term in their own words. Here, students primarily defined positive mental health as a mindset and a skillset. Students described the mindset as an outlook: a sense of optimism, resilience and overall satisfaction with their lives. Internalized satisfaction emerged 9 times in 4 of 6 focus groups, with students describing positive mental health as a sense of contentment and accepting or being at peace with their situation. As Watermelon mentioned, having positive mental health is "being in a mindset where you feel like you have the ability and capacity to just do things in your life and do things for yourself." Other students reported optimism for the future and the ability to navigate difficult situations, as illustrated by Pomegranate, who described positive mental health as the ability "to look into the future and see that you will get through things" and Pear, who described, "the foresight to know this isn't permanent." On the other hand, some students defined positive mental health as a set of skills. These skills include the ability to recognize their needs and feelings and employ healthy coping strategies for stress or negative emotions. Self-awareness and the ability to set boundaries and/or manage one's time emerged 16 times in 5 of 6 focus groups. Kiwi described positive mental health as "being mindful and aware of how you're currently feeling." Therefore, it can be suggested that students defined mental health as a cognitive framework as well as the ability to process/manage novel environments and stressors. However, further evaluation of the factors contributing to their positive mental health is necessary.



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#### FINDINGS:

#### **Drivers of Positive Mental Health**

Assertion #1: Positive mental health among university students during the COVID-19 pandemic is associated with social support and time to practice self-awareness and invest in personally fulfilling activities.

Positive mental health among participants during the COVID-19 pandemic was associated with social support and time to practice self-awareness and invest in personally fulfilling activities. Social connections were mentioned 21 times among 5 of the 6 focus groups. Watermelon shared, "being around family, or immediate family, and yeah, checking in with loved ones via Zoom has been really helpful." As for the overall quality and quantity of social relationships, students reported almost evenly on two themes: 1) a decline in social relationships and 2) a strengthening or maintenance of social connections. A decline in social relationships appeared 22 times in all 6 focus groups. This theme emerged from the concepts of difficulty in maintaining and creating relationships and the experience of loss and loneliness. Limited social interactions emerged 20 times in 6 of 6 focus groups. Raspberry shared, "I also feel it's kind of hard to get to know more new friends....it feels so different because you have never met those people in person. And it's really hard to find common interests like outside of meeting times." This theme of a decline in social relationships is interesting to note since the students in these focus groups screened positive for positive mental health. This could suggest that social connections were not as strong a driver of positive mental health for them, or that other relationships were sustaining them. On the other hand, the theme of maintaining and creating strong social ties appeared 23 times in 5 of 6 focus groups. This theme emerged from the concepts of creating and maintaining social ties and reevaluating friendships. Creating and maintaining social ties emerged 20 times among 4 of 6 focus groups. As Apricot discussed, "We have very meaningful conversations because there's not really much to distract us, especially if our goal is to catch up with each other." Students also shared the growth in relationships with those in their "COVID bubble," for example, those who reside with roommates or family. Pomegranate shared, "[I was] living in my house with my friends, and I spent two months, basically, with the same 10 people, so I feel like the quality of my social relationships were really high." Therefore, it can be inferred that accessible and meaningful social relationships may contribute to positive mental health.

Next, self-awareness and introspection as contributors to positive mental health were mentioned 18 times across all 6 focus groups. Furthermore, during the initial discussion of individual definitions of "mental health," self-awareness and the ability to set boundaries and/or manage one's time emerged 16 times in 5 of 6 focus groups. Kiwi described positive mental health as "being mindful and aware of how you're currently feeling" and Apple highlighted the importance of "good time management, being able to feel like you're on top of everything and not being out of control. Being able to sleep well and getting enough exercise and maintaining a good diet." Additionally, managing emotions emerged 11 times in 4 of 6 focus groups and maintaining physical well-being 4 times. To students, positive mental health is the ability and time to employ healthy coping habits for stress or negative emotions and to invest in their physical health. Moving away from definitions, it is possible that self-awareness and personally meaningful habits can be a significant driver of positive mental health. As Avocado mentioned, "just

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carving out time to really kind of self-reflect and realize that things aren't as bad as they seem, at least on my end, definitely helped my overall mental health." Habits to cope with stress emerged 24 times throughout 5 of 6 focus groups. There was a large variety of strategies mentioned to cope with stress. For Kiwi, one habit was "making time for personal reading" while for Pear, it was "re-watching old TV shows or revisiting stuff like that and just appreciating the small stuff." It is important to note that the most popular habit to cope with stress was spending time outdoors, including physical activity, which comprised half (12 of 24) of the comments in this theme. Other habits mentioned included maintaining a routine, planning, and having a familiar environment. As Strawberry said, "just having a sense of normalcy, a routine, is really important for my positive mental health." Furthermore, some students described the pandemic as offering a new perspective which has led to a clarification of their purpose. Clarification of personal values, including career goals, emerged 25 times in all 6 focus groups. As Peach shared, "I just thought a lot about what I needed to be happy, and how we don't have to be super successful or well-known to be happy." For other students, the pandemic prompted reflection on their career path, as described by Watermelon who stated, "it's made me think about how much I want to go into my future career." The opportunity for reflection seems to have given students a different perspective on what is important to them, and was mostly focused on family, friends, happiness, and career goals. Thus, it can be suggested that social connections, self-awareness, and the pursuit of personally fulfilling habits can be substantial drivers of positive mental health.

### **Strategies for Maintaining Positive Mental Health**

Assertion #2: Students reporting positive mental health employ self-reflective practices, organizational skills, and activities that bring them joy.

Self-reflection was mentioned 16 times in 4 of 6 focus groups. Peach shared, "every night before I go to bed, I think of three things that I was grateful for that day." These students discussed the importance of reflecting on their thoughts and emotions in order to center themselves. To some, reflection meant focusing on appreciation and gratitude while for others, it was focusing on the present and having confidence in a brighter future. As Watermelon stated, "I'm a first gen student, so my parents don't make a lot, so we rely on what we make to kind of get by. And so once when they went back to work, it was kind of me realizing and appreciating what I have." The regular practice of reflecting on current circumstances and finding opportunities for gratitude and hope emerged as a strong driver of optimism for these students.

To stay engaged in day-to-day activities and reach specified goals, students highlighted the use of organizational skills. The theme of time organization and scheduling emerged 18 times in all 6 focus groups. Pomegranate shared, "sometimes [I] even write out a schedule the night before...it just makes me feel more engaged and accountable for my days." Planning one's schedule, maintaining a routine or having to do lists helps students feel productive and accomplished during this difficult time. Setting goals for the short and long term was also reported in 3 of 6 focus groups. Strawberry illustrated this in sharing, "I've been spending a lot more mental energy than before on career goals and perhaps I think for me, what's helped me be optimistic is, instead of focusing on the short-term ...thinking five years from now



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what can I do right now to help me in the future at that time." This time has allowed many students to become more organized and re-orient their perspective in setting their personal goals in life.

Some of the practices and coping mechanisms that students employ to maintain positive mental health include the pursuit of hobbies and physical activity, organization and goal-setting, and cultivating gratitude through self-reflection. These various forms of self-investment emerged 44 times among all 6 focus groups. Hobbies mentioned include cooking, napping, gardening, playing an instrument, reading, and watching shows or movies among others. Incorporating new activities as both a means to spend time and make the most of the challenging circumstances was a common sentiment among students. As Watermelon shared, "I used to make vlogs for myself, basically, like a quarantine diary, and there was an incentive for me to make the videos interesting which means I need to make my life plans a little more interesting." Personal fulfillment took various forms from meditation, to socializing with friends, to going on walks. By incorporating activities they enjoy, students are able to feel refreshed and motivated throughout the day, which could support their mental health. Taken together, these self-reflective practices, organizational skills, and activities that bring students joy appear to be strong drivers for their positive mental health.

#### **Contradictions in Positive Mental Health**

Assertion #3: Students primarily describe positive mental health as an individualistic construct, yet may not fully realize the impact of social interactions and resource availability.

When describing the role of self-care, much of the discussion was centered on individual, rather than communal, practices and activities. However, when asked about drivers of mental health, social connections emerged as a frequently recurring theme. Apple noted, for example, "...I'm very lucky to be close with my parents and have friends that are there for me." This disparity could be indicative of westernized ideas of individualized wellness, and students' understanding of mental health seemed to be reflective of that. Additionally, for those students who mentioned self-care or proactive behaviors (33 times across all 6 focus groups), nearly all referenced the time or the ability to do so, which could be indicative of socioeconomic factors in students' lives, as well as varying levels of access to such resources, and could warrant additional analyses. Students further describe the importance of being aware of their current emotional state and their body's physical needs, and again, the ability and time to care for those needs while balancing other priorities.

Another area of discussion that was brought up by students is the role of faculty and academic resources as tools to help them maintain positive mental health. Students reported that professors demonstrating care and empathy would support their engagement and wellbeing. A desire for empathy and care from professors emerged 9 times in 3 of 6 focus groups. Persimmon shared that their professor "begins with every single lecture and always asks us, I hope everyone is doing well and tells us that it's okay to email if we have questions about homework, or even just concerns or anything." Although these social interactions with professors and peers have shifted to Zoom, they still have a significant impact on students' mental health. Additionally, not all students may be cognizant of the varying levels of accessibility to resources there are for some students over others, nor the inherent privilege of engaging in self-care activities.

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Lastly, students also noted challenges to maintaining positive mental health beyond the COVID-19 pandemic. These additional challenges appeared less often but are still important to note because they present the full picture of the realities of the students. This theme emerged two times in one focus group. Persimmon stated, "public events like the Black Lives movement, RBG and current events" and Banana mentioned "financial security" have a toll on mental health. In addition to the difficulties that the online classroom and the pandemic have posed to the students, other matters like racial inequality and financial difficulty may create unique stressors for certain students that other students do not realize.

#### RECOMMENDATIONS

- 1. Students may be able to strengthen and/or maintain their positive mental health by:
  - a. regularly engaging in self-reflection
  - b. clarifying purpose
  - c. receiving and giving social support
  - d. employing organizational skills to maintain a routine
  - e. investing time in personally-fulfilling activities
- 2. USC administrators can support student development of the identified skill sets and mindsets by investing in and promoting campus resources which foster positive mental health, i.e.:
  - a. Kortschak Center
  - b. Career Center/ Academic School Career Services
  - c. MindfulUSC
  - d. OT 100 Thrive Course
  - e. Counseling and Mental Health Workshops
- 3. Faculty and staff may be able to facilitate positive mental health by incorporating related practices into their curriculum and programs, for example:
  - a. Restorative Practices
  - b. Mindfulness Practices
  - c. Mentoring (i.e., working with students on goal setting, career exploration, providing support)
- 4. All USC community members are encouraged to contextualize discussions of positive mental health by:
  - a. Recognizing the privileges associated with positive mental health practices
  - b. Understanding the barriers to engagement with such practices, with attention toward socioeconomic, cultural, and accessibility factors
  - c. Reflecting on Western individual conceptions of wellbeing vs. communal conceptions

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### **REFERENCES**

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