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Young Lives Under Pressure:

Protecting and Promoting Young People's Mental Health at a Time of Global Crises

Young people around the world are experiencing increasing mental health issues at a critical period in their lives as they transition into adulthood, in a time of multiple global crises. The unprecedented combination of COVID-19, conflict and climate change is having a significant impact on young people's lives, particularly those living in low- and middle-income countries, with profound effects on their mental health and well-being.

The World Health Organization estimates that rates of already common mental health conditions, such as anxiety and depression, increased by more than 25 per cent in the first year of the COVID-19 pandemic (WHO 2022). While there is increasing evidence on the scale of mental health issues around the world, there is very little evidence on the long-term impact on young people in developing countries. The evidence that is available may also be under-reported in countries where mental health stigma and discrimination continue to prevent young people from seeking the support they need.

The importance of mental health and well-being in shaping people's lives is reflected in the Sustainable

Development Goals (SDGs),¹ but set against a backdrop of incredibly low investment in mental health care around the world. UNICEF estimates that average government expenditure on mental health is barely 2 per cent of total health expenditure and even lower in the poorest countries, where there is also an acute shortage of trained psychiatrists specialising in children and young people (UNICEF 2021). There is a real risk that underfunded service provisions will struggle to meet the increasing demand for effective mental health care and psychosocial support for young people, and that symptoms of even mild anxiety and depression could worsen if left untreated.

Adolescence and early adulthood are critical periods for building resilience to mental health issues. Half of all mental health conditions are thought to develop during adolescence and up to three-quarters by early adulthood. Global crises are exacerbating many risks known to trigger the onset and persistence of mental health conditions, particularly rising levels of poverty and inequality. The Lancet Commission on Global Mental Health identified poverty as a key risk factor for mental health conditions even before the pandemic (Patel et al. 2018).

¹ SDG 3: Good Health and Well-being includes a specific target to promote mental health and well-being for all at all ages (Target 3.4), see <https://sdgs.un.org/goals/goal3>

Over the last two years, the Young Lives longitudinal study has been collating vital new evidence on mental health as we continue to follow the lives of young people from disadvantaged backgrounds in Ethiopia, India (in the states of Andhra Pradesh and Telangana), Peru and Vietnam. Understanding which young people are most vulnerable to mental health conditions, and country-specific risk and protective factors, is crucial to inform effective policy interventions.

This policy brief summarises our new evidence and sets out key policy recommendations to better address the increasing crisis of mental health among young people. Our evidence shows a worrying picture of worsening anxiety and depression and declining well-being, and that young people's mental health is being affected by multiple factors, with important implications for effective policy responses. Key findings include:

- **Young people's mental health worsened as the pandemic became more severe.**
 - In Peru, 30 per cent of young people reported symptoms of depression and a staggering 40 per cent reported symptoms of anxiety after the first six months of the pandemic.
 - In Vietnam, symptoms of depression among young people doubled from 6 to 12 per cent, alongside increasing anxiety, following the dramatic fourth wave of COVID-19 in 2021.
- **Ongoing conflict in Ethiopia threatens young people's mental health.**
 - Two out of five young people in Tigray experienced mental health issues in the initial months after the start of the conflict; reported symptoms of anxiety (34 per cent) were three times higher than before the conflict, while rates of depression increased significantly, from 16 to 25 per cent.
- **Persistent food insecurity among households has taken a heavy toll on young people's mental health** across all four study countries, exacerbated by the pandemic, but also by conflict and severe drought in Ethiopia.
 - In the drought affected southern region of Ethiopia, over 40 per cent of households ran out of food and 75 per cent were worried about running out of food in 2021; young people living in this area experienced a ten-fold increase in anxiety during the year, alongside a significant increase in depression.
 - In Vietnam, young people who ran out of food at least once during the pandemic were four times more likely to experience symptoms of anxiety and depression than those who did not.

- **Job losses are a major source of anxiety for young people**, with those who lost their jobs among the most likely to report symptoms of anxiety in all four study countries.

- In Ethiopia, 31 per cent of young people who had lost their job in the first year of the pandemic reported symptoms of anxiety, compared to 19 per cent overall; in India, those who had lost their job were twice as likely to report symptoms of anxiety (20 per cent, compared to 11 per cent).
- In Vietnam, pandemic-related job losses in 2021 almost doubled reported symptoms of anxiety, particularly among those who had lost relatively high-paying jobs after setting up their own households.

- **Young women's mental health has been disproportionately affected** by interrupted education and increased domestic work.

- In Ethiopia, 19-year-old girls whose education was interrupted were more than twice as likely to report anxiety and depression than those who were able to continue their education.
- In India, 21 per cent of young women who reported spending more time on childcare during the pandemic also reported symptoms of anxiety, compared to 10 per cent of those who didn't report increased childcare responsibilities.

- **Strong parental relationships and friendships protected** some young people from developing symptoms of anxiety and depression.

- In Peru, young people who did not have a strong relationship with their **parents** before the pandemic reported significantly higher symptoms of depression (36 per cent) than those who had strong parental relationships (28 per cent).
- In Ethiopia, young people who did not have strong **friendships** before the pandemic reported significantly higher symptoms of anxiety (21 per cent) than those who had strong friendships (13 per cent).

Our evidence underlines the urgent need for the global community to step up action to promote, protect and care for young people's mental health, particularly those from disadvantaged backgrounds.

Young Lives' longitudinal evidence informing international policy debates over two decades

Young Lives is a unique longitudinal study that has been following the lives of 12,000 young people in Ethiopia, India (in the states of Andhra Pradesh and Telangana), Peru and Vietnam since 2001. The study is divided into two age groups: 4,000 young people born in 1994 (the Older Cohort) and 8,000 born in 2001 (the Younger Cohort).

Young Lives findings

Young people's mental health worsened as the pandemic became more severe

Evidence from across the four Young Lives study countries shows a significant relationship between the severity of the pandemic and young people's experiences of both anxiety and depression symptoms² and a declining sense of well-being.³

In the first year of the pandemic, Peru had one of the highest death rates from COVID-19 in the world, and implemented an extensive national lockdown amid significant political upheaval. In contrast, Vietnam was remarkably successful at limiting COVID-19 infections throughout 2020, with restrictions having much less economic and social impact.

Six months into the pandemic, the young people in our study were experiencing very different rates of anxiety and depression, mirroring the different trajectory of the pandemic across these two countries.

- In Peru, 30 per cent of young people reported symptoms of depression and a staggering 40 per cent reported symptoms of anxiety after the first six months of the pandemic; compared to a pre-pandemic benchmark of 18 per cent experiencing depression in 2019.⁴

While not as high as in Peru, experiences of poor mental health were still concerning among young people in Ethiopia and India in the first year of the pandemic. In Ethiopia, roughly one in five young people reported symptoms of anxiety and depression, and around one in ten young people in India.

In contrast, in Vietnam, only 5 per cent of young people reported symptoms of anxiety and 6 per cent reported symptoms of depression by the end of 2020, the lowest rates across all four countries.

Experiences of anxiety and depression lessened as the pandemic eased, but remain high

By the end of 2021, nearly two years after the start of the pandemic, our evidence showed an evolving picture of young people's mental health as country circumstances changed (Ford and Freund 2022). In Peru, the number of young people reporting symptoms of anxiety and depression decreased as COVID-19 infection rates fell and lockdowns eased. However, despite some improvement, young people in Peru were still experiencing concerning high rates of anxiety (30 per cent) and depression (24 per cent) by the end of 2021, potentially signalling the pandemic's lasting impact on mental health.

In Vietnam, there was a substantial increase in young people's experiences of both anxiety and depression following the devastating fourth wave of COVID-19 which hit the country in 2021.

- In Vietnam, the number of young people suffering symptoms of depression had doubled from 6 per cent to 12 per cent by the end of 2021.

In India, while reported symptoms of anxiety and depression slightly reduced towards the end of 2020, as the number of COVID-19 cases fell, anxiety and depression again increased in 2021, as infection rates began to rise; by the end of 2021, 10 per cent of young people reported symptoms of anxiety and 11 per cent reported symptoms of depression.

In Ethiopia, although COVID-19 cases fell towards the end of 2020, reported rates of anxiety and depression did not decrease. Alongside the pandemic's impacts, our evidence from Ethiopia reflects unprecedented times, as vulnerable families grapple with the compounding effects of civil conflict, severe drought and crippling inflation.

The ongoing conflict in Ethiopia threatens young people's mental health

Young Lives was the first longitudinal study to quantitatively investigate the impact of the sudden outbreak of civil conflict in November 2020 on the mental health of young people in Tigray, Ethiopia (Favara et al. 2022b).

- Two out of five young people in Tigray experienced mental health issues in the initial months after the start of conflict; reported symptoms of anxiety (34 per cent) were three times higher than before the conflict, while rates of depression had increased significantly, from 16 to 25 per cent.
- During the outbreak of the conflict, young men experienced greater increases in anxiety, while young women were more at risk of increased depression.

While more research is needed, it is likely that the outbreak of the conflict also affected the mental health of the wider population in Ethiopia, not just those in Tigray. Concerns for people's suffering, potential fears of the conflict spreading, and ensuing political and economic instability, including spiralling inflation, are all likely to have had a significant impact on mental health and well-being.

Since the start of the conflict in 2020, Young Lives has not been able to safely interview young people living in conflict-affected areas, but we hope to in our next planned survey round in 2023. Unfortunately, mental health issues are only likely to have worsened as the devastating conflict in Tigray has continued.

² Young Lives measures common symptoms of anxiety using the Generalised Anxiety Disorder Assessment (GAD-7), and common symptoms of depression using the Patient Health Questionnaire (PHQ-8).

³ Young Lives measures self-reported well-being using the Cantril Self-anchoring Scale (also known as the 'Cantril Ladder').

⁴ Pre-pandemic benchmark estimated using the 2019 Peruvian Demographic and Health Survey's average depression levels for young people aged 18 to 27 years.

By the end of 2021, we found an alarming increase in food insecurity in the south-western region and in urban areas hardest hit by inflation rates of up to 30%. While we have not yet been able to investigate the direct impact of the most recent drought on young people's mental health in Ethiopia, our evidence shows a clear link between food insecurity and worsening anxiety and depression.

With increasing extreme weather events continuing to affect those from the poorest households the most, we can expect young people's mental health to also be under increasing pressure from the realities of climate change.

Persistent food insecurity among households has taken a heavy toll on young people's mental health

Our evidence showed a substantial increase in Young Lives households worrying about running out of food (mild food insecurity) during 2021, with those from poorer households and marginalised groups most affected. We also saw increasing worries about adequate food supplies among better-off households in Peru, and urban areas in Ethiopia.

In all four study countries, young people living in households that had run out of food during the pandemic experienced higher rates of anxiety and depression than those living in food-secure households (Porter et al. 2022).

While the overall number of Young Lives households who actually ran out of food (severe food insecurity) declined in 2021 as the pandemic began to ease (compared to 2020), a worrying number of vulnerable young people continued to experience increasing severe food insecurity, notably among minority ethnic groups in Vietnam and in the Southern Nations, Nationalities, and Peoples' Region in Ethiopia.

The alarming levels of severe food insecurity in southern Ethiopia in 2021 (and continuing into early 2022) have been caused by severe drought following three consecutive failed rainy seasons, exacerbated by high inflation and locust swarms. Considered alongside the immediate risks of food insecurity, our evidence shows that young people's experience of anxiety increased ten-fold during 2021, alongside significant increases in depression.

- In the drought-affected southern region of Ethiopia, over 40 per cent of households ran out of food and 75 per cent were worried about running out of food in 2021, a near 100 per cent increase compared to 2020; young people living in this area experienced a ten-fold increase in anxiety during this period, alongside a significant increase in depression.
- In Peru, 46 per cent of young people who were worried about running out of food in the first year of the pandemic reported symptoms of anxiety and 39 per cent reported symptoms of depression by the end of 2020 (compared to country averages of 30 per cent and 24 per cent, respectively).
- In Vietnam, young people who ran out of food at least once during the first year of the pandemic were four times more likely to experience anxiety (17 per cent) and depression (24 per cent) than those who did not.

Financial worries were also closely linked to increasing rates of anxiety. In Ethiopia, Peru and Vietnam, young people who experienced economic hardships, such as fewer customers in family businesses or increased food prices, were more likely to experience anxiety. In Peru, increased health care costs were another significant risk factor of increased anxiety; over half (52 per cent) of young people who faced additional health expenses during the pandemic reported anxiety. Similarly, young people reporting long-health health problems, such as chronic respiratory problems, were over twice as likely to suffer from anxiety during the pandemic compared to those without such problems.

Young people's sense of well-being has declined

Before the pandemic, our longitudinal data showed very encouraging trends in young people's well-being across all four study countries. Not only were young people feeling more positive about their life as they grew up, but we had also seen consistently higher self-reported well-being when comparing our Younger Cohort to our Older Cohort, measured at the same age but seven years apart.

In the first year of the pandemic, however, young people were feeling much less positive about their lives. Our evidence shows a marked decrease in subjective well-being for our Younger Cohort who were then aged 18-19, compared to when they were aged 15 in 2016, and compared to our Older Cohort at the same age, reversing previous positive trends in all our study countries, except Vietnam (Favara et al. 2022a).

By the end of 2021, young people's subjective well-being had failed to improve in Ethiopia, Peru and India and, for the first time in our study, had significantly decreased in Vietnam. A decline in well-being may also have long-term mental health consequences. Young Lives research has shown a strong correlation between reduced self-reported well-being and symptoms of anxiety and depression among young people (Porter et al. 2021).

Recent Young Lives interviews in Peru highlighted the specific impact of prolonged school and university closures on young people's well-being (Rojas et al. 2022). Young people frequently reported feelings of anxiety, stress and loneliness throughout the first two years of the pandemic when their education relied primarily on virtual and distance learning. In 2020, many young people described feelings of anxiety in relation to lockdown confinement and uncertainty surrounding the COVID-19 virus. A year later, they spoke of increasing stress and a sense of loneliness, exacerbated by excessive time spent alone in front of their computers, with limited opportunities for social interaction affecting their motivation to study and ability to learn.

“I do not want it to be virtual anymore ... It is very stressful because being with classmates is a very nice stage of being a student ... You learn more [in person] because there is interaction with other people, even with the questions that come of the moment, those things. (Carmen, female university student from rural Peru, 2021)”

Young women's mental health has been disproportionately affected by interrupted education and increased domestic work

In the first year of the pandemic, our evidence showed that young women were disproportionately affected by mental health issues (Porter et al. 2021). Even controlling for other factors, we found that young women were significantly more vulnerable to anxiety during the pandemic in India, Peru and Vietnam, and more vulnerable to depression in Peru and Vietnam.

- In Peru, almost half (48 per cent) of young women had experienced symptoms of anxiety by the end of 2020, compared to just over a third (34 per cent) of young men.
- The extended closure of schools and universities during the pandemic had a particularly acute impact on the mental health of young women in Ethiopia, especially those from the poorest households, many of whom are still studying at a relatively low level and may find it hard to restart their education; for example, more than a third of 19-year-old girls in the Young Lives sample are still at primary school, with only 15 per cent in higher education.
- In Ethiopia, 19-year-old girls whose education was interrupted – not being able to access online classes or able to complete homework – were more than twice as likely to experience anxiety and to report symptoms of depression, compared to those who were able to continue their studies.

Young people in India, Peru and Vietnam who spent additional time on childcare responsibilities during lockdowns were significantly more likely to report anxiety. This disproportionately affected the mental health of adolescent girls and young women, who continue to bear the greatest burden of domestic work across all our study countries.

- In India, 67 per cent of young women spent increased time on childcare and household duties during lockdown, compared to only 37 per cent of young men. Among young people who spent more time on childcare, 20 per cent reported symptoms of anxiety, compared to 9 per cent among those who did not.

Our interviews with young women in Peru illustrate how the combined pressures of interrupted education and increased responsibilities at home have had a significant impact on mental health. We also heard how related feelings of anxiety

have had an impact on young women's physical health, including through changes in eating habits, potentially leading to increased risk of eating disorders and being overweight.

“ I feel very stressed when I am at home ... I mean, for virtual classes and all that. As I am in my house, I feel like eating every so often ... I have anxiety when I am at home. But I think it would be another reality if we had face-to-face classes ... because whenever I go out, I do not have that anxiety ... Yes, I asked for help, because alone, I mean, I couldn't do it, I felt that I couldn't control it. (Daniela, female university student from rural Peru, 2021) ”

Job losses are a major source of anxiety for young people

During the first year of the pandemic, young people who lost their jobs were among the most likely to report symptoms of anxiety in all four study countries.

In 2021, job losses following the fourth wave of COVID-19 in Vietnam had a significantly negative impact on young people's experience of anxiety, almost doubling pre-wave levels of anxiety (Freund et al. 2022). Young people who had lost their job in the top earnings bracket and those who no longer lived with their parents (likely to be the primary earners in their household) were particularly at risk of anxiety.

- In Ethiopia, 31 per cent of young people who had lost their job in the first year of the pandemic reported symptoms of anxiety, compared to 19 per cent overall; in India, those who had lost their job were twice as likely to report symptoms of anxiety (20 per cent, compared to 11 per cent).
- In Vietnam, job losses in 2021 almost doubled the rates of reported anxiety, particularly among those who had lost relatively high-paying jobs after setting up their own households.

While concerns about reduced household wealth and food insecurity were important factors in explaining why young people who had lost their job were experiencing increased anxiety, these are only part of the story. Our findings suggest that other concerns beyond immediate financial strain are also likely to contribute to worsening mental health. These could include the loss of structured time, valued relationships, and a diminished sense of identity and self-worth. Further research to enable better understanding of the underlying concerns of young people which contribute to mental health issues is vital if policymakers are to deliver effective support.

Strong parental relationships and friendships protected some young people from developing symptoms of anxiety and depression

Using Young Lives longitudinal data, our evidence shows that strong parent and peer relations during adolescence, measured *before the pandemic*, appear to have protected some young people from mental health conditions during the pandemic, although the relative importance of these differ across the four countries.

Positive parent–child relationships were found to be a significant protective factor in India and Peru, whereas friendships with peers were found to be more important in Ethiopia and Vietnam.

- In Peru, young people who did not have a strong relationship with their parents before the pandemic reported significantly higher symptoms of depression (36 per cent) than those who had a strong relationship with their parents (28 per cent).
- In Ethiopia, young people who did not have strong friendships before the pandemic reported significantly higher symptoms of anxiety (21 per cent) than those who had strong friendships (13 per cent).

While further research is needed to better understand how supportive environments in adolescence through healthy relationships with parents, caregivers and friends can help protect young people from mental health issues later in life, these findings underline the importance of understanding how early life experiences affect later life outcomes.

Policy implications

Our longitudinal findings show that context matters; experiences of mental health issues are closely related to country contexts and individual circumstances, with different risk and protective factors impacting young people in different ways. **These findings have significant implications for policy responses.**

While policy should always be tailored to specific country contexts, the following recommendations set out broad actions to better **promote, protect and care for young people's mental health, particularly those from disadvantaged backgrounds.**

Policy recommendations to promote, protect and care for young people's mental health

- 1 **Young people's mental health worsened as the pandemic became more severe, resulting in high rates of reported anxiety and depression and a significant decline in self-reported well-being.**
 - **It is vital to prioritise and expand urgently needed community-based mental health services and psychosocial support for young people.** This requires both increased investment in the numbers of available mental health professionals (expanding the workforce), and improving mental health training for existing social workers and health professionals.
 - **Mental health support services need to be fully accessible**, especially to young people from the poorest and most vulnerable households, in both urban and rural communities.
 - **Integrating mental health into existing services**, such as primary health care, social services, and community-based services to train health professionals in basic counselling, could help to deliver vital new services in resource-constrained settings.
 - **New technologies could help provide a cost-effective way to expand access to mental health services**, in areas where mobile phone coverage is high. Digital care options through dedicated phone apps have seen explosive growth during the pandemic. However, more research is required to evaluate their long-term impact and virtual services should not replace in-person support where this is more appropriate for individual needs.
- 2 **The ongoing conflict in Ethiopia threatens young people's mental health.**
 - **In addition to emergency relief, urgent assistance is required to support those experiencing widespread psychological trauma in conflict-affected areas in Ethiopia;** with virtually no mental health services currently able to respond, post-conflict reconstruction policies and processes should also prioritise mental health care and psychosocial support.
- 3 **Persistent food insecurity is taking a toll on young people's mental health, exacerbated by the pandemic, but also by conflict, and climate-related shocks such as severe drought in Ethiopia.**
 - **Targeted social protection programmes**, including emergency cash transfers, direct and/or subsidised food provisions, and providing seeds and fertilisers to vulnerable farmers, can be effective ways to boost food security in times of significant stress, indirectly supporting young people's mental health.
 - **Support for mental health as part of emergency schemes and social protection programmes** could provide an effective way to target services to vulnerable young people in times of humanitarian and economic stress.

Policy recommendations to promote, protect and care for young people's mental health

4 Young women's mental health was disproportionately affected by interrupted education and increased domestic work.

- **Practical measures to relieve women's burdens of childcare responsibilities**, such as childcare support,⁵ cash benefits for families, and the expansion of affordable and accessible crèches and preschools could contribute to better long-term mental health outcomes, particularly for adolescent girls and young women.
- **Challenging discriminatory gender stereotypes, which are often reinforced in times of crises**, should be prioritised through targeted initiatives to engage whole communities: it is crucial to engage men and boys to challenge patriarchal norms and the discrimination faced by girls and young women.
- **Schools and higher education institutions can play an important role in supporting young people's mental health**, now that they have reopened following the easing of the pandemic. Investing in trained mental health counsellors at schools and colleges could significantly improve access to support for young people. Providing regular mental health training to teachers and other personnel can also help to identify at-risk students and promote positive mental health (e.g. reducing bullying and excessive exam pressure).

5 Job losses are a major source of anxiety for young people, with those who lost their jobs among the most likely to report symptoms of anxiety in all four study countries.

- **Including mental health support in active labour market initiatives** may help target support to vulnerable young people who are seeking employment.
- **Introducing mental health training and counselling initiatives in the workplace** may help young people when they re-enter the labour market and avoid adverse long-term impacts.

6 Strong parental relationships and friendships protected some young people from mental health issues during the pandemic.

- **Investing in programmes that prioritise early positive parenting and socialisation** may have a long-term benefit in protecting young people from mental health conditions later in life; this could include providing parents with information and guidance, as well as financial and psychosocial support.
- **Promoting peer group support networks in schools and community groups, as well as youth clubs**, could also contribute to better mental health outcomes for young people.

7 Without urgent action, the compounding effects of COVID-19, climate change and conflict will put young people's mental health at further risk.

- **A significant increase in the global investment in young people's mental health is critical** to support developing countries to effectively respond to increasing needs and demand. This will require strong leadership and political will across the global community.
- **Mainstreaming mental health objectives across government sector ministries** including education, labour and social welfare, women and youth, alongside health, is particularly important to help to break down siloed working and deliver a more integrated response.
- **Improved data collection and targeted research to identify young people's needs in the provision of mental health care is vital.** This should include understanding underlying causes and risk factors, and working towards a joined-up approach in addressing mental health issues (including primary health care, social protection, childcare, job losses, and interrupted education).
- **Targeted awareness-raising campaigns to raise the visibility of mental health issues is also essential.** This is important not only to encourage young people to seek support, but also to challenge related stigma and discrimination among communities, breaking the silence around mental health.

5 For example, a pilot initiative to extend childcare services through the Ethiopia Productive Safety Nets Program (PSNP) could lead to wider benefits for young women's mental health – see <https://documents1.worldbank.org/curated/en/099540009262262985/pdf/IDU0cf293619096770469d08f790337cb26ab538.pdf>

Continuing to follow Young Lives

Young Lives plans to return to the field in 2023 to conduct our next comprehensive in-person survey across our four study countries, and a further round of qualitative interviews in Peru.⁶ This data will enable us to generate important new insights into the medium-term effects of the pandemic on young people's mental health and well-being, alongside the compounding effects of increasing food insecurity and the ongoing conflict in Ethiopia.

Scaling up international efforts to build a robust longitudinal evidence base is critical for **the global community to step up action to promote, protect and care for young people's mental health, particularly those from disadvantaged backgrounds.**

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6 Young Lives is working to secure additional funding to also conduct further qualitative interviews in 2023 in Ethiopia, Peru and Vietnam.

