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Facilitators for coping with the COVID-19 pandemic: Online qualitative interviews comparing youth with and without disabilities

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ABSTRACT

Background: The Coronavirus Disease (COVID-19) pandemic has greatly impacted people's mental health. Youth with disabilities are at particular risk for the psychological implications of the pandemic. Although much attention has been given to pandemic-related mental health challenges that youth have encountered, little is known about the facilitators for coping with the stresses of the pandemic and how this varies for youth with and without disabilities.

Objective: The purpose of this study was to understand facilitators for helping youth and young adults with and without disabilities to cope and maintain mental health during the COVID-19 pandemic.

Methods: This qualitative study involved in-depth interviews with 34 youth and young adults (17 with a disability; 17 without), aged 16–29 (mean age 23.2). A narrative, thematic analysis of the transcripts was performed.

Results: Our findings revealed several similarities and some differences between youth and young adults with and without disabilities regarding facilitators for maintaining mental health during the pandemic. Enablers of coping included: (1) social support; (2) financial support, (3) keeping busy (i.e., having a daily routine, working to keep the mind occupied, volunteering to boost mental health, focusing on school work), and (4) work-life balance (i.e., reduced commute, more time for exercising, going outdoors, cooking, sleeping better, and reflection on life's purpose).

Conclusions: Our findings highlight how having coping strategies could help to youth and young adults deal with pandemic-related stress. Youth with disabilities may need some additional support in accessing resources, exercising and going outdoors to help enhance their coping strategies.

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The World Health Organization declared Coronavirus Disease (COVID-19) as a pandemic on March 11, 2020.¹ As of March 22, 2021 the COVID-19 virus has resulted in over 123.3 million cases and 2.7 million deaths across 221 countries.² Most countries implemented public health precautions including physical distancing, screening, and closing non-essential businesses. Applying such precautionary measures can lead to psychosocial distress, anxiety and depression,³ a fear of infection or dying, grief,⁴ and anger.^{5,6}

Youth and young adults' mental health during the pandemic

Studies show that the psychosocial impact of COVID-19

disproportionately affects adolescents and young adults^{6–10} because they have encountered many changes during this period including limited face-to-face interaction, extracurricular and physical activities, disruptions to routine, remote schooling, and employment instability.^{3,11,12} Focusing on youths' coping strategies is important because adolescence is a period of life characterized by heightened sensitivity to social stimuli and an increased need for peer interaction.^{12,13}

The impact of pandemic-related measures could be even greater for youth with disabilities where supports and resources were reduced or cancelled.¹¹ For example, reliance on caregivers puts young people with disabilities at an increased risk for exposure to

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COVID-19.¹⁴ Additionally, research shows that youth with a physical health condition were less likely to report excellent or very good mental health during the early stages of the pandemic.¹⁵ Therefore, understanding enablers to maintaining mental health during the pandemic could help inform coping strategies for youth who may need additional support.³

Coping and resilience during pandemic

Understanding facilitators of coping among youth is important because those who demonstrate resiliency during stressful times often have lower levels of depression and anxiety.¹⁶ In one study, Waselewski et al.¹⁷ explored the needs and coping behaviors of youth without disabilities in the US during the pandemic and found that 69.8% had coping strategies. Of the limited research focusing on pandemic-related coping among youth included: positive reframing, physical activity,¹⁸ a supportive network,⁷ and staying connected with others. Some recent pandemic-related research focusing on youth has explored the predictors of mental health,¹⁹ the incidence or likelihood of having anxiety/depression^{10,20,21}; or the negative impacts of the pandemic^{3,22}; however, no studies have focused on facilitators for coping among youth with disabilities during the pandemic. Understanding youth's experiences is critical because adverse childhood experiences are associated with mental health problems, obesity and cardiovascular disease in later life.^{23,24}

Methods

Objective and design

The objective of this study was to understand the facilitators for coping and maintaining mental health during the COVID-19 pandemic among youth and young adults with and without a disability. We used a qualitative design to conduct in-depth, semi-structured interviews. We applied an interpretive descriptive methodology to guide the data collection and analysis.²⁵ We chose this method because it goes further than describing a phenomenon by exploring the importance of the findings and clinical implications.^{26,25} A research ethics board at a pediatric hospital approved this study.

Sample and recruitment

We used a purposive sampling strategy with the aim of having representation from youth with and without disabilities, approximately 15–20 participants per group until code saturation was reached. We recruited through flyers, advertisements and social media explaining the goals of the study. Those who were interested in taking part were sent an information package. Participants had to meet the following inclusion criteria: aged between 15 and 29, with a disability i.e., defined as impairments of the body or mind making it difficult for a person with the condition to do certain activities and interact with the world around them (e.g., vision, movement, thinking, remembering, learning, communication, hearing, mental health, social relationships); or without a disability, who are currently employed or have work experience.^{27,28} We included those aged 15–29 because this is aligned with Statistics Canada's²⁹ definition of youth, and also emerging adulthood, a distinct period where youth often encounter instability.³⁰ After obtaining written consent, two researchers (with backgrounds in public health) conducted one-to-one interviews (split evenly between them) over the phone or video call. The researchers had no prior relationship with the participants.

Data collection and analysis

Interviews were conducted remotely (i.e., Zoom (n = 29) or phone (n = 5)), from July–November 2020. The majority of participants were recruited from the Greater Toronto Area, Ontario, Canada which is considered a “hot zone” for COVID-19 cases and deaths.^{31,32} Our interview guide (Table 2) was pilot tested with a youth who has a disability to ensure comprehensiveness and feasibility. Participant interviews lasted up to 53 min. This study drew on a larger project focusing on youth's experiences of employment and volunteering during the pandemic.³³ Here we focus only on the data where youth were asked to describe the facilitators related to coping during the pandemic.

The interviews were audio recorded and transcribed verbatim, checked for accuracy and anonymized. Our research question guided the analysis where all data was first analyzed together then separately by group (i.e., youth with and without a disability).³⁴ We used a narrative, thematic analysis to understand the facilitators of maintaining mental health during the pandemic.³⁴ The first step in the analysis involved three researchers independently reading the transcripts while generating initial codes, revising them and defining the themes.³⁵ Then, we compared and contrasted the codes within and between the groups.³⁴ We discussed and compared our codes while grouping them under higher order headings then generated categories.³⁴ We developed a coding tree describing the codes before applying them to all of the transcripts.

The strategies we used to support the trustworthiness of the findings included having a rich variation in participants' perspectives. Further, we assessed code and thematic saturation and agreed this was reached within the study³⁶ because no new codes were identified after the 15th interview (for youth with disabilities) and 12th for youth without. We verified saturation was reached by conducting a few additional interviews for each group. For the dependability of the analysis we kept an audit trail of decisions made and had a consistent interview guide.³⁶ Credibility was addressed by having multiple coders in addition to regular meetings to discuss our findings. In regards to confirmability we drew on participants' verbatim quotes while reflecting on the potential influence of our roles on interpretation of the data. To address transferability of the findings we had representation from two different groups of youth (i.e., a comparison group), which can help address bias and subjectivity while enhancing rigour.^{34,36,37}

Results

Our sample consisted of 34 youth and young adults aged 16–29 (mean age 23.2), (17 with disabilities (mean age 24.7)), 17 without disabilities (mean age 21.7 years) (see Table 1). Eleven youth had a physical disability and three had a mental health condition (e.g., anxiety, depression), two had a learning disability and one with both a physical and mental health condition. Thirteen youth were working (6 with a disability, 7 without) and 18 were in school (5 with disabilities, 13 without).

Our findings revealed several similarities and some differences between youth with and without disabilities regarding the facilitators of maintaining mental health during the pandemic. Enablers of coping included: (1) social support; (2) financial support, (3) keeping busy (i.e., having a daily routine, working to keep the mind occupied, volunteering to boost mental health, focusing on school work), and (4) work-life balance (i.e., reduced commute, time for exercise and going outdoors, sleeping better, cooking, and reflection on life's purpose).

Table 1
Overview of participants.

| Participant ID | Age | Gender | Disability ^a | Themes |
|----------------|-----|--------|---|---|
| 1 | 24 | Man | Physical disability (wears prosthetic) | Financial support (working/had CERB); keeping busy (work prevented boredom); work-life balance (working from home) |
| 2 | 29 | Woman | Physical disability (uses walker) | None reported |
| 3 | 25 | Woman | Learning disability | Social support (connecting with family); keeping busy (working); work-life balance (working from home) |
| 4 | 22 | Woman | Mental health condition | Financial support (CERB); keeping busy (school) |
| 5 | 19 | Woman | Learning disability | Financial support (CERB); work-life balance (no commute) |
| 6 | 25 | Woman | Mental health condition (Depression, anxiety, panic) | Financial support (CERB); keeping a busy/routine (working); work-life balance (cooking and hobbies) |
| 7 | 22 | Woman | Physical disability | Social support (friends); keeping busy (school); work-life balance (no commute) |
| 8 | 28 | Woman | Physical disability (Friedreich ataxia; uses a walker) | Financial support (working); keeping busy (work) |
| 9 | 23 | Woman | Physical disability (uses wheelchair and walker) | Work-life balance (no commuting) |
| 10 | 20 | Woman | Mental health condition and chronic illness (lupus) | Social support (family), financial support (government support) |
| 11 | 27 | Man | Cerebral Palsy (uses walker) | Keeping busy (working); work-life balance (no commuting) |
| 12 | 25 | Man | Cerebral palsy (uses a walker) | Social support (family) |
| 13 | 27 | Woman | Cerebral Palsy (uses walker and power chair) | Social support (family); keeping busy (volunteering); work-life balance (no commuting) |
| 14 | 29 | Woman | Physical disability (multiple conditions) | Financial support; work-life balance |
| 15 | 23 | Man | Muscular dystrophy | None reported |
| 16 | 27 | Woman | Mental health condition | Keeping busy (working); Financial support |
| 17 | 26 | Man | Physical disability & mental health condition (anxiety) | Financial support (home office set-up), keeping busy (work); work-life balance (no commute; cooking) |
| Participant ID | Age | Gender | Youth without disabilities | Themes |
| 18 | 20 | Woman | | Keeping busy (working); financial support (job because of pandemic; pandemic pay) |
| 19 | 18 | Woman | | Keeping busy (school, work and volunteering); financial support (CESB/job because of pandemic); social support (friends and network); work-life balance (more time for hobbies) |
| 20 | 16 | Woman | | Social support (family and friends); keeping busy (school); financial support (CERB); work-life balance (online school; flexible schedule) |
| 21 | 26 | Man | | Financial support (working); keeping busy (exercise); daily routine; work-life balance (no commute) |
| 22 | 23 | Woman | | Social support (family); keeping busy (volunteering); work-life balance (exercise/flexible schedule) |
| 23 | 25 | Woman | | Social support (network, friends); keeping busy (volunteering); work-life balance (flexible schedule; exercise) |
| 24 | 18 | Woman | | Keeping busy (routine; volunteering); work-life balance |
| 25 | 25 | Woman | | Financial support (CESB); Keeping busy (volunteering, school); work-life balance (exercise; flexible schedule) |
| 26 | 20 | Woman | | Financial support (CERB); Keeping busy (volunteering); work-life balance (flexible schedule) |
| 27 | 19 | Woman | | Financial support (CESB); keeping busy (volunteering; school); work-life balance (flexible schedule, exercise) |
| 28 | 17 | Woman | | Keeping busy (school) |
| 29 | 24 | Woman | | Keeping busy (school); work-life balance (flexible schedule; sense of purpose) |
| 30 | 16 | Woman | | Keeping busy (school); Sense of purpose; work-life balance (flexible schedule) |
| 31 | 24 | Woman | | Keeping busy (working, school); work-life balance (flexible schedule); financial support (CESB; working); social support (networks) |
| 32 | 25 | Woman | | Financial support (working); work-life balance (flexible schedule; no commute) |
| 33 | 23 | Woman | | Financial support (CERB); work-life balance (flexible schedule); keeping busy (working, school), social support (network, family) |
| 34 | 29 | Woman | | Social support (family, network), financial support (working); keeping busy (working, volunteering); work-life balance (flexible schedule; exercise) |

^a Note: We provide the condition that was self-reported by the participant.

Social supports

Some youth, 5/17 with disabilities and 7/17 without, described how social support facilitated their mental health. Youth with disabilities more commonly mentioned family as a support whereas youth without disabilities described more sources of support including friends, work colleagues and extended network. For example, a youth shared: how their family helped them realize their shared experience. Specifically, “I’m fortunate enough to be living with my family still; So, mentally I have been okay for the most part ... We’re all going through the same things and emotions” (#10-disability). Youth, mostly those without disabilities, expressed that social supports from both work and family was important for their mental health. To illustrate, “Colleagues in my department were big on support because we were all going

through the same thing ... that was a nice support system. As well, I moved back home for a little bit to be with family and having your family around changes things too” (#34-no disability).

Financial supports

Having financial support facilitated youth’s mental health (8/17 with disabilities; 11/17 without a disability). Specifically, more youth with disabilities received government supports (e.g., Canadian emergency response benefit (CERB)), whereas youth without disabilities had several sources of financial supports (e.g., employment, family, government). Youth mentioned that financial supports helped to take the pressure off of finding employment. For example, a youth shared, “Making more money has helped. I was getting more money from CERB than I was making working; So,

Table 2

Interview guide. Thank you for taking part in this study. Please let us know if you have any questions before we start. Feel free to let us know if you would like to take a break at any time or if there are any questions that you would like to skip or do not feel comfortable with.

1. What is your employment status?
 - employed (part/full time);/volunteering (including internship, co-op placement) if yes, probe for the following:
 - (type and size of company and location)
 - How long have you been working for this company?
 - How did you find the job?
 - How do you get to work? (i.e. transit, own car, etc.)
 - Please tell me about any accommodations that you asked for (e.g., flexible time, accessible workspace etc.)?
 - How did you ask for them and when?
 - Can you describe what you do on a typical day?
 - What do you like most about working/volunteering here? (probe for inclusion)
 - Do you have any opportunities for professional development or advancement? (probe for type of opportunities; or why lack of opportunities)
 - Do you feel included, respected and valued by your employer and co-workers? (if no, probe why not).
2. Tell us about what your hopes and plans were for employment/volunteering before covid-19? (e.g., short term/summer employment; longer-term goals)
 - a. Probe for how COVID-19 affected these plans. (e.g., was job secured before or after covid-19)
3. Have you experienced any challenges in finding or maintaining employment or a volunteer position during the pandemic? Please tell us about that.
 - a. (probe for accessibility, accommodations, discrimination, disability disclosure, reduced hours or lay-offs during the pandemic, limited opportunities during the pandemic)
 - b. Did you use any strategies to address these challenges?
 - c. Probe for working remotely
4. If you have a health condition or disability, did you disclose your disability to your employer/potential employers?
 - a. Do you feel this impacted your ability to work/volunteer during the pandemic (if so, how and when did you do this)?
 - b. How and why did you decide to disclose? (probe for working remotely)
 - i. Are you happy with your decision and outcome?
 - c. What accommodations did you ask for?
5. Tell us about your experiences regarding health and safety in the workplace.
 - a. Probe for access to and use of PPE, training, communication, workplace health and safety, compliance with infection control protocols etc.
 - b. Do you have any suggestions for how your employer could have improved their response to the pandemic?
6. Have you experienced any benefits or facilitators regarding employment or volunteering during the pandemic? Please tell us some examples.
 - a. How did you adjust to this new situation?
 - i. Probe for coping, psychological well being (self-confidence, quality of life, inclusion etc.)
 - b. Can you tell us about any benefits or facilitators of working remotely (if relevant?)
7. What advice do you have for employers and/or other youth who are working or looking for work or volunteer position during a pandemic?
8. Have you applied/received CERB or CESB?
 - a. Please tell us about how this affected your decision/ability to work during the pandemic.
9. Is there anything else that you would like to mention about employment, unemployment, volunteering during the pandemic that we did not get a chance to talk about?

that definitely helped my psychological well-being" (#14-disability).

Some youth, mainly those without disabilities, told us how they relied on their parents for financial support, which helped ease some of their worries. For example, a youth said, "I'm going to be moving back home this September; So, I'll be saving on rent" (#32-no disability). Another had a similar experience: "I don't think I'm in such an urgent position to be hired right now as I'm still a student, and I'm living with my parents. I don't have to worry about rent or groceries" (#33-no disability). For those receiving supports, they reported less concern about finding a summer job to save money to return to university.

Keeping busy during the pandemic

Most youth explained how keeping busy prevented boredom, which was important for their mental health. Specific strategies included having a daily routine, keeping busy with school, volunteer and/or school work.

Having a daily routine. A critical part of keeping busy during the pandemic to fend off boredom involved having a daily routine. For example, youth (10/17 with disabilities; 16/17 without) described keeping a routine through the pandemic. For youth with disabilities this was often through school or work, whereas for youth without disabilities it involved a greater variety of activities (i.e., work, volunteering, school, hobbies). A youth without a disability who worked full-time described: "I just forced myself in the beginning to have that regular timetable, like I'm going to work ... I would take a shower in the morning. I'd have my regular routine ... I found that helpful" (#21). Meanwhile, a youth with a disability working part-time and also in school explained: "Having

somewhere to go and something to plan for was helpful for me ... just to get out of the house and have that routine" (#6-disability). Meanwhile, some youth created a new routine during the pandemic. To illustrate,

"Nothing like this has ever happened before; So, just trying to get used to the idea of okay, this was my routine and now I have to make a new routine. With school, that's how I adjusted was just getting used to the new online platform and just setting a daily routine for myself at home." (#24-no disability)

Working kept the mind occupied. Of youth who were employed (6/17 with a disability, 7/17 without), most described how their job kept their mind engaged while reducing boredom. For example, a youth who worked full-time from home explained, "working helped in terms of having something to do ... I didn't have to enter that space, like, I have all this time on my hands ... There's always still something to look forward to" (#3-disability).

Others shared similar examples of how staying busy through their job helped reduce boredom. For instance, a youth shared, "work definitely helped with coping with the pandemic because I have something else to think about. I'm a person who likes to keep busy and work kept me busy" (#18-no disability). Another youth explained, "I'm so grateful I was employed. I can't imagine being home 24/7 everyday watching *Netflix* ... I was lucky I was coming to work ... Days were passing by. It didn't feel like I was stuck with my thoughts" (#23-no disability).

Volunteering boosted mental health. Youth who were involved in volunteer work during the pandemic (1/17 with disabilities, 8/17 without) explained how it helped their mental health. Although many in-person volunteer positions were

cancelled during the pandemic, some youth purposively sought out roles that could be done remotely. For example, a youth shared the impact of their work: “The amount of gratitude ... it makes me realize how much of a difference it can make ... In terms of volunteering I think it helped my mental health and well-being” (#22-no disability). Another youth explained how volunteering influenced their mental health:

“Every single time I volunteer, I always finish the day feeling even happier and better than I did before I started because it's just a great opportunity to help other people and to be able to interact with others ... Being able to volunteer almost allows you to forget a little bit about what's happening outside in the world.” (#24-no disability)

Focusing on school work. Similarly, for youth who were in school (5/17 with disabilities, 13/17 without), it helped them to have something to concentrate on. To illustrate, a youth with a disability shared, “If I have certain things to do even on a weekly basis, it helps me to keep track of time, but also for me to have a schedule ... Having classes occupied my time rather not having anything to do at all” (#4-disability). Youth kept busy with school, either spending more time focusing on their schoolwork, or taking additional courses, to help their mental well-being during the pandemic. For instance a youth described: “In the winter I was busy with school ... So, I couldn't really stop and think about it too much. In a way, school was a nice distraction and kept me busy” (#24-no disability).

Others explained how focusing on school during the pandemic helped their mental health: “School helped balance that out since I did the two courses. It has kept me busy. So, I wasn't always at home depressed. I was doing other things so that helped with the stress level” (#27-no disability). Additionally, engaging in school internships helped some youth. A youth shared, “I had something to do. I felt more productive especially with the internship I had something to look forward to ... It has definitely has given some more fulfillment” (#30-no disability). Another youth had a similar experience: “If it wasn't for my (school) placement, I would be waking up 10, 11 but now I am up at 9 ... I have so much work to do and I am the person who likes to keep myself busy ... Working keeps my mind fresh” (#20-no disability). A youth with a disability explained, “having classes occupied my time rather not knowing or not having anything to do at all” (#4).

Work-life balance. The majority of youth (10/17 with a disability, 15/17 without) described how they had more time to focus on their well-being during the pandemic. Both groups of youth enjoyed the flexible schedule of being home. A main contributor to an enhanced work-life balance was not having to commute to work or school. A youth with a disability shared: “Overall, COVID has been a positive thing for me because there is less work, and demands and stress” (#14-disability). Meanwhile, youth with disabilities especially appreciated not having to travel because accessible transit is often difficult to organize. To illustrate, a youth with a disability explained:

“I benefited from it being online and at home because transportation is a big barrier for me because I can't drive. I'd either have to get a ride or use (accessible) transit ... Even with my family I hate having to schedule rides ... I always feel I have to rely on someone. Being able to do it at home meant I didn't have to worry about that.” (#9)

A youth without a disability shared a similar example: “Now that I'm home I do have more time available because I'm not tired

from commuting ... Saving time means I can do more things like, I'm a lot more physically healthier now, being able to find the time to exercise” (#22).

Many youth, notably those without disabilities, reported increasing the time they spent exercising and/or the time spent outdoors during the pandemic, which helped them deal with COVID-19-related stresses. For instance a youth shared, “Physically speaking, the pandemic has helped a lot and then as a result, being active and exercising has had a positive experience on my mental health” (#24-no disability). Another youth explained, “I exercised every day and went for walks ... We would do a round or we did little picnics just to get my mind off everything going on in the world and that was our coping mechanism” (#27-no disability). Others described how spending time outdoors helped their mental health:

“I've been trying to be in the backyard a little more or take more walks ... It's shown me what's important ... We've been growing food in the back in our garden. So, that's been an interesting project to have on during this time because it's given me something to do and it's made me feel I have a sense a purpose.” (#29-no disability)

Part of having an improved work-life balance meant more time for an adequate night's sleep, which several participants without disabilities reported. For example, one said, “There's actually a lot of benefits. One is definitely being able to sleep better” (#22-no disability).

Meanwhile, some youth, particularly those with disabilities, mentioned how they engaged in more cooking during the pandemic due to having more time, which they reported helped to improve their mood. To illustrate, one said, “Most of the times I kept myself occupied because I do most of the cooking at home now and most of the research for how certain foods in nutrition are good for either myself or my parents” (#17-disability). Another youth with a disability explained, “I cooked a lot more ... I very rarely ate out” (#6-disability).

Another important aspect of an enhanced work-life balance during the pandemic was that it allowed time to reflect on life's purpose. This trend was noted among some youth without disabilities. For example, a youth shared: “I feel like everyone got to take a physical and mental break from life. Even though a pandemic was happening and a virus was spreading, we all got a break from our everyday lives ... We all learned to appreciate our life and being able to go outside” (#26-no disability).

Discussion

This study explored the facilitators for maintaining mental health during the pandemic among youth and young adults with and without disabilities. Understanding youths' coping strategies is important because the impact of the pandemic could have longer-term negative health effects.³⁸ Thus, the successful management of stress could lead to personal growth, which can reinforce sense of competence and become a protective factor for coping with future stressors.³⁸

Our findings indicate that enablers of coping for youth with and without disabilities included: social and financial support, keeping busy and work-life balance. Consistent with other research, our results revealed that social and financial supports can facilitate pandemic-related coping. Past studies on coping with stress highlighted the importance of social supports for youth.^{39,40} Our findings showed that youth without disabilities described more of a variety of social and financial supports compared to youth with disabilities. Although social support is critical to addressing vulnerability to

stress and enhancing coping strategies, people with disabilities may need more guidance on accessing appropriate social and financial supports and resources during the pandemic.^{41,39}

Another key finding involved keeping busy through employment, volunteer, or school work, which helped youth to prevent boredom and depression. Youth without disabilities often described a greater variety of sources of activities they were involved in compared to youth without disabilities. Additionally, fewer youth with disabilities volunteered or were in school. Thus, youth with disabilities may need additional support with connecting to opportunities that align with their interests and abilities to engage in meaningful and accessible activities. These findings were consistent with other research on the impact of the pandemic highlighting strategies such as active coping and planning, improving skills, and self-distraction.^{6,42} Our results showed consistency with research on the benefits of volunteering among youth, which is linked to the development of self-determination and coping.⁴³

Our findings indicate that many youth with and without disabilities had more time for work-life balance, which acted as a pandemic-related coping strategy allowing them to spend time on their interests. Such activities varied somewhat for youth with and without disabilities. Being able to work from home and not having to commute to work or school helped to alleviate stress. Our findings are similar to research on adults highlighting that working from home had a positive and significant effect on work-life balance.⁴⁴ Specifically, our results showed that youth without disabilities reported exercising and going outdoors. These findings align with other research showing a positive relationship between perceived health, physical activity and being outdoors.⁴⁵ Past studies demonstrate that emotional well-being has a positive connection to physical activity in nature.⁴⁵ In particular, exposure to greenspace is associated with numerous health benefits.⁴⁶ In our sample, fewer youth with disabilities reported spending time outside or exercising as a coping strategy. This finding could be a result of them having fewer opportunities to do so^{45,47} because they often encounter challenges including physical barriers, social and spatial exclusion, and health/safety concerns⁴⁷ in going outside. Clinicians, practitioners, and policymakers should consider how they can help to enable better access to such outdoor spaces, and other accessible activities, for people with disabilities so they can benefit from this as a potential coping strategy.

With more time for work-life balance, our findings highlighted that some youth with disabilities had more time to engage in cooking during the pandemic, which they reported was a coping strategy. Previous research emphasizes the benefits of cooking, beyond nutritional, including its positive link with psychosocial outcomes such as improved self-esteem, psychological well-being, and quality of life.⁴⁸ Clinicians should continue to encourage youth's development of cooking skills and engagement in cooking classes.

Limitations. A limitation of our study included that we had a higher proportion of female participants who may have different coping strategies than males. Additionally, there were more males in the group with disabilities compared to without and therefore the findings should be interpreted with caution. Future research should consider the role of gender in pandemic-related coping strategies. It is important to recognize that socio-demographic factors, and individual supports can affect how people cope with stressors, such as a pandemic. The supports available to people may be unequal³⁸ and future research should explore the longer-term implications of the pandemic, especially for marginalized individuals. Additionally, our study included various disability types and it is difficult to tell whether differences in coping strategies were related to their particular condition. Further studies should

consider exploring this in greater depth. Additionally, this study is limited in that it was part of a larger project where mental health was only one component. Nevertheless, our data included a range of youths' perspectives and insight into this topic. The interviews were conducted in different modes (e.g., video or phone call), which may have affected the development of rapport. Finally, it is important to recognize this data was collected over several months during the pandemic and coping strategies likely varied throughout this period. Future studies should consider how coping strategy may have evolved over time.

Conclusions

Our study explored the facilitators for helping youth and young adults with and without disabilities to cope with and maintain mental health during the COVID-19 pandemic. The findings highlighted several similarities and some differences between youth with and without disabilities regarding facilitators for maintaining mental health during the pandemic. Enablers of coping included: social support; financial support, keeping busy and work-life balance. Our findings highlight how having coping strategies can help youth to deal with pandemic-related stress. Youth with disabilities may need some additional help with accessing social and financial supports, exercising and going outdoors to help enhance their coping strategies.

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Conflicts of interest

None declared.

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