



TINY CHANGES

Tiny Changes: Mental Health in Black African and Caribbean Creatives



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This report
presents findings from
research **funded by Tiny
Changes** and **commissioned by BE
United**. It examines the **effect of the
COVID-19 pandemic on the mental health
of Black African and Caribbean creatives
aged 16-24 in Scotland**.

The research objectives of this project are;

- **To understand how the pandemic has affected young creatives, beyond their work with a focus on their mental health and day to day lives.**
- **To provide a platform for the voices of this target group to share their experience.**

A group whose mental health was identified as most impacted by the COVID-19 pandemic and one of the least engaged on the topic of mental health. Following the findings from this research, we have provided recommendations for specialised mental health support for this target group.

The report begins by describing the background and context of the research, followed by the methodology, and then the findings are presented.

INTRODUCTION

BACKGROUND & CONTEXT

The COVID-19 pandemic took the world by storm and led to the enforcement of intense social interventions like quarantine, stay at home orders, social distancing, mandatory wearing of face masks and hand sanitising, and major restrictions on travel globally. These measures have had a significant negative impact on the social, emotional, financial, mental and physical lives of people of all ages across the globe.

One of the key concerns expressed by numerous stakeholders through various media platforms and research, was the negative impact the COVID-19 pandemic will have on the mental health of people. Particularly the concern that it will increase people's propensity to mental health disorders like severe anxiety, depression, suicide ideation, post traumatic disorder or further exacerbate pre-existing mental health conditions for others (UN News, 2022; CDC Newsroom, 2022; Hawke et al., 2020; Mental Health Foundation, 2021).

Approximately

1 billion

people suffer from some form of mental health disorder across the globe, with

1 in 7

reported to be **teenagers** (UN News b, 2022).

Anxiety and depression were among the main mental health outcomes experienced by people during the COVID-19 pandemic (Mental Health Foundation, 2021; GOV.UK, 2022; Shevlin et al., 2020).

According to the World Mental Health Report (WHO, 2022), globally, the rates of depression and anxiety increased by

more than 25%

in the first year of the COVID-19 pandemic.

Furthermore, the report indicates that women and young peoples, particularly those aged 20-24, mental health were more affected by the COVID-19 pandemic than older adults. This increase was attributed to the astronomical levels of stress experienced by people due to social isolation and loneliness, death of family members and financial concerns. Similarly, in the UK, women and young people, aged between 18-34, and adults with pre-existing mental and physical health conditions, mental health were more affected by the pandemic. With loneliness, feelings of a lack of control over their lives, fear of infection, death and financial challenges identified as the main cause of this outcome (GOV.UK, 2022).

Globally, young people were consistently identified as one of the groups whose mental health was most affected by the COVID-19 pandemic (UN News a, 2022; GOV.UK, 2022; Daly and Robinson, 2021; Jia et al., 2020). Furthermore, young people were reported to be at a disproportionately higher risk of suicide ideation and self-harming behaviour than older adults (WHO, 2022). Likewise, In the UK, young people aged between 18-25 are one of the groups whose mental health has been the most impacted by the COVID-19 pandemic, with high levels of suicide ideation being commonly reported within this group during the pandemic (Mental Health Foundation, 2021; GOV.UK, 2022).

Data from the UKLS show that the young people whose mental health had deteriorated due to the COVID-19 pandemic were those who either had longstanding mental or physical conditions or had substance abuse issues or were unemployed or not in formal education or are from lower income households (Hu and Gutman, 2021; GOV.UK, 2022)

Young people are a particularly vulnerable group during public health crises due to the period of development they are in that is often the onset of many behaviours like substance abuse or conditions like severe anxiety or depression that are often perpetuated during a pandemic and can persist throughout their life thereafter (CDC, 2022; Hawke et al., 2020).

Thus, post pandemic it is important to mitigate the negative effects of the COVID-19 pandemic by engaging with Black African and Caribbean Creatives aged 16-24, to understand the impact of the COVID-19 pandemic on their mental health and proffer recommendations for specialised mental health support that will help this target group thrive post pandemic. This research focuses on the Black African and Caribbean Creative community as it is the target population of the organisation. Furthermore, there is a dearth of research on the impact of the COVID-19 pandemic on the mental health experiences of Black African and Caribbean Creatives in Scotland.

As the COVID-19 pandemic progressed, it became evident that the risks of the COVID-19 pandemic, in terms of infection rates and severity of COVID-19 complications were disproportionate It was suggested that people from the ethnic minority groups have a disproportionate risk of being infected, making up a large number of critical care admissions and deaths in the USA and UK (Proto and Quintana-Domeque ,2021; Public Health England, 2020; GOV.UK, 2022). Similarly, with regards to the impact of the COVID-19 pandemic on mental health, it is argued that people from minority ethnic backgrounds may have experienced greater mental health distress due to difference in infection and mortality risk, unemployment and lack of financial security (Smith, Bhui and Cipriani, 2022; Proto and Quintana-Domeque, 2021).

Even prior to the COVID-19 pandemic, people from minority ethnic backgrounds experienced severe mental health inequalities. From inadequate access to mental health support to unequal prevalence of mental health sectioning. Research suggests that patients from racialised groups are disproportionately at risk of involuntary psychiatric detention in the UK (Barnett et al, 2019). The COVID-19 pandemic has compounded pre-existing inequalities to mental health support for minority ethnic people and will no doubt, push people from these communities further down the treatment line post COVID-19 pandemic. As a result, this research is focused on the mental health experiences of Black African and Caribbean Creatives during the COVID-19 pandemic. Is important as it address a gap in research and will help to ensure that the experiences of the target group are accurately documented. The findings will be used to advocate for the prioritisation of specialised mental health support for this target group.

RESEARCH METHODOLOGY

This research employed a mixed methodology. **An online survey was administered.** The survey consisted of 10 questions that sought to understand the state of the mental health of respondents pre and post COVID-19 pandemic, and to identify the kind of mental health support respondents received during this period. As well as their view on the effectiveness of these.

At the end of the survey, respondents were given the opportunity to provide recommendations on how mental health support may be improved post COVID-19 pandemic. The BE United database of creatives and creative organisations in Edinburgh, Glasgow and Aberdeen was used as a pool to recruit survey Black African and Caribbean respondents aged 16-24years. A call for participants was also disseminated through community groups. Respondents were invited to participate in the survey via email and through the organisation's social media platforms. An information participation sheet and link to the survey was shared via email to invite participants and the link to the survey and research information was shared via social media. All survey responses were anonymised. The survey was open for responses from individuals and organisations working in the arts, screen, and creative industries, including creative businesses. The survey was live for a month and a half, from mid-June 2022 - beginning of August 2022. A total of 29 survey responses were received and included in this report. Survey responses were analysed and reported by graphs and charts using Microsoft Forms.

Furthermore, **one to one interviews** were conducted with Black African and Caribbean creatives aged 16-24. The interviews were key in obtaining in-depth knowledge into the impact of the COVID-19 pandemic on the mental health of the target group and their experiences acquiring mental health support during the COVID-19 pandemic.

Furthermore, the one-to-one interviews allowed for detailed recommendations on strengthening mental health support for this target group to be acquired. A participant information sheet and consent form were given to each participant. Informed consent from each participant was received prior to the interviews. A total of 6 interviews were conducted. The interviews were conducted online via Microsoft teams and were 25-30 minutes long. Interviews were conducted over two and a half weeks, from end of July to mid-August. All of the participants' information and responses were anonymised. Interview participants who also participated in the survey were given a thank you gesture of a £50 amazon gift voucher. Interview responses were analysis manually and reported thematically as laid out in the report.

EXPERIENCES WORKING DURING THE COVID-19 PANDEMIC

The ways of working changed for all industries during the COVID-19 pandemic. With many industries switching to remote and online working, to health practitioners conducting consultations with patients virtually. Globally, the creative industry was one of the worst hit by the COVID-19 pandemic. In the UK in 2020, a £77 billion loss in turnover generated by the creative industries was projected in the country (Ismail and Gambarin, 2020). In Scotland, it is estimated that creative workers have lost over £15,000 of their projected income due to the cancellation of events, and over 7000 creative workers applied to Creative Scotland's Hardship fund for financial assistance (Creative Scotland, 2021).

Engagement through individual interviews highlighted that two participants felt that the COVID-19 pandemic and all the restrictions that came with it, robbed them of a chance to fully explore a career in the creative industry, because the COVID-19 pandemic began at the same time they were due to commence work in the industry. Engagement through individual interviews found that two participants who are musicians, felt that the COVID-19 pandemic has set their careers behind by 1-2 years, in addition to the time spent in lockdown. Due to the inability to promote their work through collaborations and live events.

Participant 2 stated
"I feel like I need to start my career all over again. This pandemic is a huge setback for me honestly."

All interview participants appreciated the option of working online. However, all participants found it incredibly difficult to make an income through online working. As a result, participants reported feeling discouraged to try and adjust to the new ways of working as a creative as their main source of income. Batman (2022) suggests that the feelings of discouragement have been echoed by creatives globally, who felt discouraged because the revenue they generate online does not make up for the revenue they would earn from live events.

Participant 1 who is a musician and producer reported that his main source of income during the pandemic was through promoting and selling his beats online through YouTube and Spotify. However, he reported that the effort does not equal the income:

"Income from online platforms is not a lot. It takes a lot of effort and it does not translate financially all the time. You have to get something like 1million views to make about £1000, for many of us that's not even half the money needed to cover our bills." - Participant 1



Engagement through individual interviews found that two participants reported that the feeling of discouragement made them consider abandoning their careers as creatives.

Participant 5 stated **“Honestly at some stage during the pandemic, I felt like just giving up. All my efforts seemed to be in vain. I started to think being an artist wasn’t meant to be.”**

Three interview participants reported finding jobs in admin, social care and procurement to earn an income because the creative work they were doing online did not make any income.

During the pandemic, people’s reliance on creative and cultural content increased as they sought avenues to remain engaged with the outside world. However, some creatives found it increasingly difficult to produce content to fulfil this need. Three participants reported finding it tough to produce content for online events they were booked for. Engagement through individual interviews found that participants reported being extremely grateful for the paid opportunities, however, they report feeling a lack of motivation after a few online events because it limited their creativity

“At first I was really excited about doing things online and exploring my work and creativity through that lens, and I enjoyed the convenience but to be honest I lost interest quite quickly because it felt a bit repetitive.”

- Participant 5.

Another participant echoed the same feelings **“I was so thrilled to be involved in some events online and most of them will be my highlights from the pandemic. However, some of the events I did were scheduled for a couple of months, so it just felt repetitive. We ran out of ways of making it exciting and fresh. There were only so many things we could do online to keep the excitement.”** - Participant 3.

COVID-19 IMPACT ON HIGHER EDUCATION EXPERIENCES

Globally, the COVID-19 restrictions have disrupted the education of millions of students and forced education institutions to move their classes online. For students new to university, the new way of learning deprived them of the opportunity to experience the dynamic nature of on-site university learning. Students' university experience often impacts their mental health or is an environment that students use to cope or receive support for any mental health distress they are experiencing. As a result, it is important to consider the impact of the COVID-19 pandemic on the higher education experiences of the research target group.

Engagement through individual interviews found that two participants reported that their university experience was negatively impacted by the COVID-19 pandemic. Participant 5 reported

“It is sad to think that the majority of my university experience was spent in lockdown, I feel like I am still in high school even though I am almost in my last year. COVID-19 robbed me of enjoying the social aspect of being at uni.”

Participant 3 echoed the same response and stated;

“

I honestly felt so depressed throughout my first year of uni, I didn't get to attend all the social activities that one looks forward to when starting university. I can say not being able to go on campus, meet people and make friends definitely made me depressed. On top of everything else.

”

While moving to online learning may have been an easy adjustment for some students across the globe, for other students it was extremely difficult. A survey of 14,000 students on the impact of the coronavirus on students' progress and college plans found that most students prefer in person learning. Stating that online classes are not as effective as in person instruction (Patch, 2020). Similarly, engagement through individual interviews found that participant 3 felt that in person classes are more effective than online classes by stating **“My whole university experience was impacted by the pandemic, not to mention my performance. Prior to the pandemic I made my mind up about taking certain subjects that would enhance my degree. However, I ended up dropping all of them because I was failing. I know that online learning and lack of in person practical experience is a huge reason for this.”** Two participants did prefer the shift to online learning because it offered them flexibility of completing their course work in their own time and the space to build their creative presence online.

COVID-19 IMPACT ON MENTAL HEALTH OUTCOMES

The mental health of people across the globe was negatively impacted by the COVID-19 pandemic. It caused widespread anxiety, depression and post traumatic disorder in people. This is largely attributed to the fear and worry of contracting the virus, death of family members, financial challenges and social isolation. Globally, anxiety and depression were the most common mental health outcomes experienced by people during the pandemic (Mental Health Foundation, 2021; UN News, 2022). Similarly, in the UK, the UK Household Longitudinal Study (UKHLS) suggests that adults aged 18 and over reporting clinically significant levels of anxiety and depression has increased significantly during the COVID-19 pandemic (UK Government, 2022). In Scotland, a survey from the Edinburgh Evening News and the Scotsman revealed that approximately 70% of people reported that their mental health was affected by the COVID-19 pandemic, with anxiety and depression reported as the main mental health outcomes they experience (Maishman, 2020).

Engagement through individual interviews found that all participants' mental health was negatively affected by the COVID-19 pandemic. Participants reported experiencing various levels of anxiety and depression throughout the pandemic due to the uncertainty of their future post pandemic, social isolation, death of family members, fear of contracting the virus and financial instability. All participants reported that there was a feeling of hopelessness attached to the pandemic that led to them experiencing high levels of anxiety and depression. Two participants reported feeling hopeless because their close family and friends who seemed to follow all the COVID-19 guidelines still contracted the virus and others even died. For instance, Participant 1 reported that;

“I felt so anxious during the brief period where the COVID restrictions were lifted and we were allowed to meet in bubbles of 6. I decided to seize the opportunity and meet with my friends. After that meeting one of my friends let us know that he tested positive for COVID. As a result we all needed to self-isolate. I felt so much anxiety for that week, I had anxiety that I have never experienced before. Just anxious about testing positive even though I know I did everything I could to stay safe. Wore a mask, sanitised and stayed socially distanced, at two metres apart from everyone, but it still feels as if it's not enough to stay safe.”

A similar trend was seen through the survey responses where 52% participants reported that their mental health was impacted by the COVID-19 pandemic, with 21% of respondents rating their mental health between extremely poor and poor due to the COVID-19 pandemic. Prior to the COVID-19 pandemic 79% of survey respondents reported having no mental health issues and rated their mental health between good and extremely good. Likewise, engagement through individual interviews suggested that 4 of the participants who reported that their mental health was negatively affected by the COVID-19 pandemic had no mental health issues prior to the COVID-19 pandemic. Participant 1 stated,

“Yes, before the pandemic I can say that when I was working on things, I would get a little bit anxious. But it was always very brief. Not the level of anxiety I felt due to the uncertainty I felt because of the COVID-19 pandemic.”

Globally, suicide ideation and self-harm behaviours were commonly reported amongst the 18-25 age group during the COVID-19 pandemic. In the UK, during wave 13 from November 2021, a survey of over 4000 adults found that 34% of adults aged 18-24 reported having suicide ideation (Mental Health Foundation, 2021). None of the participants in this research reported having suicide ideation or self-harm behaviour during the pandemic.

Engagement through individual interviews found that loneliness during lockdown was experienced by all participants. Two of the participants had no immediate family living in Scotland. As a result, they spent all of lockdown alone which resulted in them feeling extremely lonely and depressed. Both participants reported that in-person familial support would have made lockdown bearable.

Participant 1 stated,

“I think some days of isolation during the pandemic were harder than others and mainly because I was all alone. The closest family member I have lives in England. So, it was hard and lonely.” Participant 4 echoed the same response, **“I think some of my friend had an easier time coping during the lockdown because they were locked down with their families. I was all alone so it was very depressing.”**

All participants reported missing social gatherings with their friends. As a way to engage with their peers, participants reported hosting virtual Netflix parties, conference calls using Microsoft Teams and Zoom, and hosting online game competitions. Although participants found these tools helpful to connect with their peers and cope with the social isolation. All participants felt the novelty of these outlets wore off quickly. Furthermore, all participants felt that these outlets still did not replace their urge to meet in-person:

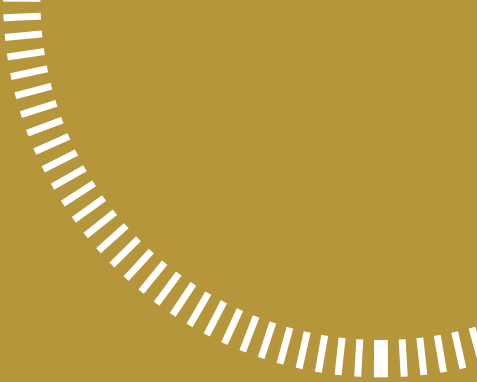
“Even having all the gadgets and technology in the world, it still did not take away that desire to go outside and meet people, reconnect with my friends. It just wasn’t the same. Especially when you have connection issues, having the technology doesn’t matter. It gets boring really quickly and it definitely does not replace the feelings of loneliness.”

- Participant 6

MENTAL HEALTH STIGMA

The lack of knowledge and openness around mental health issues within the Black African and Caribbean community was identified as a barrier to participants acknowledging any mental health distress they experienced. Four participants mentioned not acknowledging their mental health distress out of fear of being stigmatised by their family. This is consistent with existing research that suggests that the lack of knowledge of mental health issues in ethnic minority communities has led to a worsening in mental health and increased the rate of suicide completion within these communities (Hamilton & Rolf, 2010; Adedoyin & Salter, 2013; Armstrong, 2019; Gunson, et al., 2019; Bowden, et al., 2020). **Participant 6 stated, “As a man and especially as an African man, we don’t believe in mental health”.** Another participant echoed the same feelings and stated, **“Culturally we don’t really talk about mental health where I am from. Especially as a Black male. We were taught to just roll with the challenges. So I think I took all the changes that came with lockdown a bit easier because I told myself that everyone is going through the same thing. Also I think it would have affected my mental health more if it was just me who was affected.”** Participant 1.

All participants report that culture and ethnicity played a significant role in their perception of mental health issues. Growing up, the male participants report having the perception that only females experience mental health issues. Participants state that they were never taught that mental health is gendered, however, growing up being taught things like **“men don't cry”**- Participant 6 and **“men are tough and not touchy feely”** -Participant 1, made them subconsciously associate mental health issues with females. As a result, these participants expressed the difficulty they had acknowledging or speaking out about any mental health distress they experienced before and during the COVID-19 pandemic. This is consistent with research that suggests that stigma towards mental health issues has created a reluctance in individuals from ethnic minority groups to seek mental health support (Memon et al, 2016). Dr Asif Khan, a GP in West Scotland, reported to BBC Scotland, that over a fifth of his workload is mental health related, and patients he supports from ethnic minority groups always show an initial reluctance to speak about their mental health and seek mental health support (BBC Scotland, 2018).



“I think one of the main reasons Black youth struggle with mental health issues is because our mental health distress has never been validated by our parents, family and cultures. So we find it difficult to talk or admit that we may be having mental health difficulties.”

- Participant 3.

Culture and mental health stigma played a significant role in how all participants during individual interviews viewed and approached their mental health. All participants mention that mental health was seldom spoken about in their homes or within their communities. **“In fact, mental health issues are often ignored or perceived as socially unacceptable in our communities.”**-Participant 3. Two interview participants mention that the rare occasion where mental health was discussed is often after a tragedy where an individual is severely depressed or has attempted suicide completion. Moreover, the two participants explained that the affected families rarely open up about cases where a family member has attempted suicide completion out of fear of stigmatisation. Participant 2 stated **“To be honest conversations about mental health sounded stupid to me until over a year ago. Until then I thought that only if you had severe depression it counts as a mental health issue, and that is only because that was when mental health was discussed in my home.”** Another participant states:

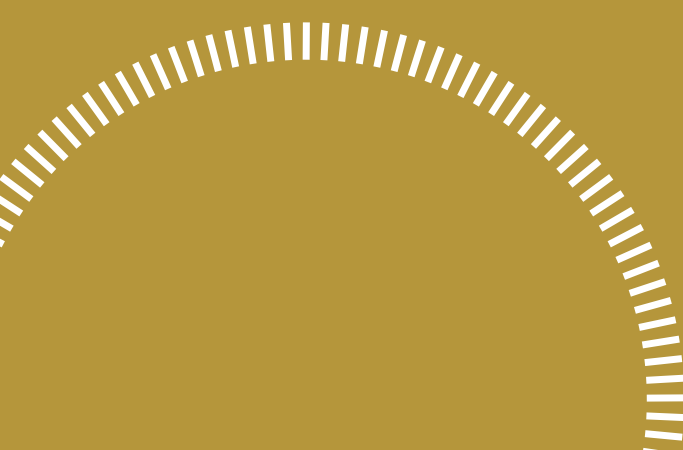
“I grew up being taught that if you find yourself in a situation that is challenging, you tough it out and deal with it, things like depression and anxiety are excuses.”

- Participant 4.

As a result, all participants reported being apprehensive to talk about any mental health challenges they faced during the individual interviews. Furthermore, all participants felt that having more discussions on mental health within the Black African and Caribbean community is important in order to change mental health perceptions among youth and their help seeking behaviours.

Participant 6 stated, **“I feel we need to speak more openly about mental health as Black African people. It is the only way to normalise it and help people.”**

Participant 3 stated, **“Doing research like this is important because it gets the community speaking about issues like mental health. It is important.”**





Engagement through individual interviews found that two participants sought mental health support in the form of counselling during the COVID-19 pandemic. 12 of the 29 survey respondents reported that although their mental health was affected by the COVID-19 pandemic they did not seek mental health support. In individual interviews two participants reported that sharing their mental health experiences with their Black peers validated the mental health distress they experienced and encouraged them to seek support. Participant 3 stated;

“Hearing from other Black people made me feel like I am not silly for thinking mental health is a big deal and it made me feel validated because if my peers, especially someone who is like me, is openly discussing their mental health issues. It gives me an opportunity to discuss any mental health challenges I experienced in a safe space and seek support.”


Participants identified the lack of diversity and cultural competency among mental health practitioners as factors that negatively impact their help seeking behaviours. One participant who sought counselling during the COVID-19 pandemic stated;

“The counsellors are always White. I have nothing against White counsellors. But they simply don’t understand me culturally, no matter how much I try to explain. They don’t understand how certain things are perceived in my culture. So it all feels pointless.”

- Participant 2.

This supports prior research that found that adverse experiences with mental health services due to a lack of cultural competency are consistently reported by people from ethnic minority backgrounds in Scotland (BBC Scotland, 2018; Memon et al, 2016).





The lack of cultural competency has led to participants having mistrust towards the mental health system in Scotland. Participants report fearing mental health sectioning or social worker intervention as a result of seeking mental health support. Evidence suggests that mental health patients from ethnic minority backgrounds are at risk of being given harsher psychiatric diagnosis and are more likely to be sectioned (Barnett et al, 2019). Professor Sashi Sashidharan, a consultant psychiatrist in Scotland, reported to BBC Scotland that ethnic minority groups have the worst experiences with mental health services in Scotland. Furthermore, service providers either do not take the challenges of these groups seriously or section individuals or over prescribe treatment (BBC Scotland, 2018). Participant 3 stated;

“I can’t go for therapy or counselling. White counsellors will just call the police or social workers because they don’t understand how things are done in my culture. It seems like involving them will do more harm than good for my family and I can’t have that. I rather deal with things on my own.”

Virtual workshops on mental health were the main form of support participants received. Three participants attended virtual mental health workshops targeted at youth in Scotland. These were coordinated by two organisations, Tiny Changes and Intercultural Youth Scotland. Although these workshops were not exclusively for Black African and Caribbean youth, participants found these sessions extremely helpful because they were able to connect with their peers and engage on the topic of mental health in a way they could relate to. Participant 6 stated;

“I really enjoyed the mental health workshops. I would have preferred it if the workshops were in person, but even virtually, the workshops were great! It really provided me with a safe space to talk about my mental health experiences during the pandemic and learn a lot more about mental health.”

Another participant echoed the same feeling,

“I enjoyed the workshops, they really helped me cope with the COVID-19 pandemic, COVID itself and all the other feelings that were triggered in me during this period. My biggest take away from those was that if you take care of your mental health it doesn’t make you weak or bad, it means you are okay with yourself and want the best for your life.”

- Participant 5.

TRANSITIONING TO LIFE POST COVID-19 PANDEMIC

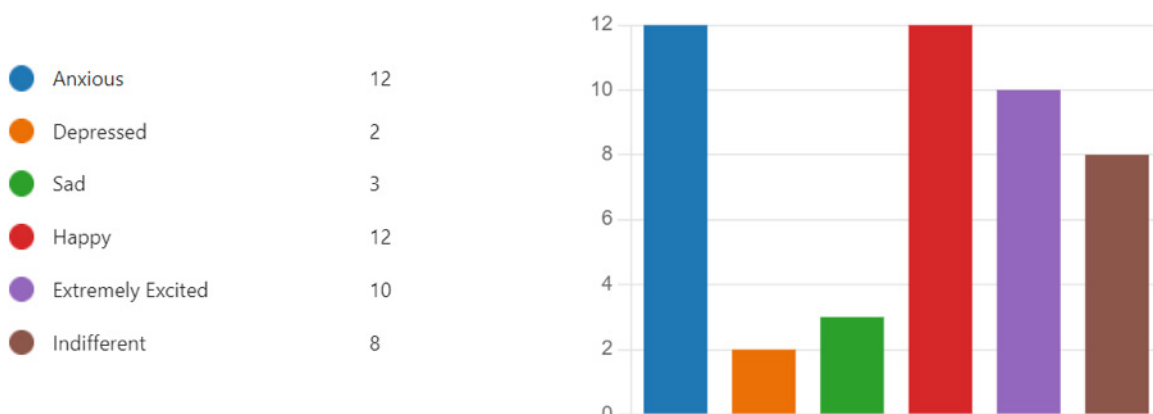
All participants were excited about the gradual ease of lockdown restrictions and things opening up post COVID-19 pandemic. Participant 2 stated **“I am grateful to be out of lockdown, I am happy to see family and visit family abroad. It feels like I am taking back lost time and lost experiences.”** Another participant stated, **“As a creative, the COVID-19 pandemic really took a lot away from me and my opportunities to grow in the sector, so I couldn’t be more glad that this is over.”** Participant 3.

Three participants were excited to resume in person creative work like photography and performances at concerts or clubs. However, participants feared that they would be unemployed for a long time post pandemic due to the slow return of large scale in person events. Participant 6 stated **“I am extremely happy that lockdown is over and I don’t have to live with those restrictions anymore. But to be honest career wise, especially as a musician, it doesn’t feel like much has changed. I was looking forward to being booked for numerous events when all the restrictions ease but the capacity of events was cut in half. This meant that instead of an event needing 5 artists they only needed 2 or 3, which means more competition and still going months without booking any gigs.”**

63% of survey respondents reported that resuming work post COVID-19 pandemic had an impact on their mental health. Approximately 70% of these respondents report that it affected their mental health in a positive way as they got to meet with colleagues, family and friends in person. While the remaining 30% of respondents report that it was difficult.

Engagement through individual interviews found that one participant was extremely anxious about the COVID-19 pandemic restrictions being lifted because of the possibility of infection. Participant 5 reported, **“I am extremely anxious about everything opening up again. Yes, I am excited because I can connect with friends and family again, and further my creative career. But it is scary to see how everyone is going on as if the virus does not exist. No wearing masks and all that. I am worried about catching it.”** Likewise, when asked how they felt about resuming work, school or business activities. Anxious, happy and extremely excited were the top three feelings reported by survey respondents.

Figure 2: Survey respondents feelings transitioning to life post COVID-19 pandemic



MENTAL HEALTH SUPPORT RECOMMENDATIONS

1 Participants recommend that mental health organisations and youth organisations, especially those targeted at Black African and Caribbean youth should use large music festivals or concerts that are African and Caribbean centric. As a platform to discuss mental health or to share positive mental health messaging within this community. Participants feel that this would be an effective way of getting youth engaged on mental health topics and activities. Furthermore, participants felt that because there are no major African and Caribbean music festivals in Scotland. It is likely to be a success and engage with a large population of youth.

2 Conducting more community research on mental health within African/Caribbean communities was consistently recommended by participants. Participants felt that research projects within ethnic minority communities would be an effective avenue to educate and dispel mental health stigma within the Black African and Caribbean community.

3 Participants recommend that mental health organisations create positions for youth to become youth mental health support champions. Participants envision that the youth champions will engage their peers on mental health issues and create a strong system of peer support. Furthermore, participants felt that youth would be more receptive to engaging on sensitive topics like mental health if the conversation is steered by their peers. Through this, participants hope that peers can encourage each other to explore healthy outlets of coping with mental health distress other than substance abuse and reduce suicide ideation and completion.

4 Participants suggest that mental health organisations need to conduct mental health awareness drives in Black African and Caribbean communities. By doing this participant believe that organisations can dispel mental health stigma in these communities.

CONCLUSION

The preceding sections of this report have highlighted the impact of the COVID-19 pandemic on the mental health of Black African and Caribbean creatives aged 16-24. The findings of this research emphasised that the COVID-19 pandemic had mostly a negative impact on the mental health of the target group. The finding addressed the research objective that sought to understand the effect of the COVID-19 pandemic on the mental health of the target group. Anxiety and depression were the main mental health outcomes experienced by participants. This was consistent with research that identified anxiety and depression as the main mental outcomes experienced by people globally during the COVID-19 pandemic. The findings have shown that the uncertainty of the future of their careers as a creative post pandemic exacerbated the anxiety participants experienced. Participants were particularly anxious about the likelihood of them securing paid jobs that would allow them to consider pursuing a creative career full time.

The research findings showed that mental health stigma within the Black African and Caribbean community negatively impacted participants' view of mental health and their help seeking behaviour. As a result, participants report only recently acknowledging any mental health challenges they experienced and making efforts to seek support. Lack of cultural competency and diversity of mental health practitioners was also identified as a significant barrier to participants seeking support like counselling or therapy. Participants distrust mental health practitioners' ability to provide support that is culturally sensitive and won't negatively impact other areas of their life. Like being sectioned or having the involvement of social workers imposed on their family.

The recommendations provided by the participants addressed the second objective of this research that sought to provide a platform for the target group to share their experiences and provide recommendations for specialised support. The recommendations outlined in this research attest to the need for more engagement with the Black African and Caribbean community by mental health organisations. Participants believe that more community mental health awareness campaigns should be conducted and would be effective in dispelling mental health stigma with these communities. This will allow people to speak out about their mental health challenges and encourage healthy help seeking behaviour.



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