

# The COVID-19 pandemic is remapping childhood—and the effects may linger <sup>[1]</sup>

Not only do we not understand what the virus does to kids, we're also in the dark about what this crisis might mean for them psychologically and emotionally. Some researchers are trying to look ahead.

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## AVAILABILITY

Access online <sup>[2]</sup>

## EXCERPTS

Children adapt quickly. The group headed to school in Beijing one recent May morning seemed to know their new routine. They approached a building whose entrance resembled an odd blend of movie-theatre foyer and airport-security checkpoint: red ropes, barrier posts, bright directional signs painted on the ground. News clips showed them moving efficiently through the stations in two lines, always keeping a six-foot distance: take a squirt of sanitizer, wait; get temperature check with a thermometer gun, wait. And of course they all wore masks. At a different school, they might use a personal thermometer to take their own temperature twice a day. Or a worker in a hazmat suit might spray disinfectant on their shoes and the ground as they entered. Or they might have to show a green code on a smartphone app signalling a low enough risk of infection.

If they were at a school in Hangzhou, in eastern China, they could be wearing special hats, made with three-foot-long poles and designed to encourage social distancing. (One poke in the eye is surely a good enough lesson.) If they were in Taiwan, they might have individual cardboard barriers on their desks at lunch—a “cone of silence” of sorts with a more sinister undertone. If they were nursery schoolers in France, they'd each be confined within a square drawn in chalk on the ground, six feet or more from the next square. In Denmark, they would wash their hands at least once an hour at specially installed hand-washing stations. And of course, none of them could touch a classmate or friend.

This is what it is to be a child on planet Earth in the spring of 2020. In faraway Canada, where back-to-school is still months away for most—Quebec and now B.C. being the exceptions—the signs of change are less forbidding: ubiquitous hand-coloured rainbows in windows; posters in bubble letters thanking front-line heroes (they are heroes, yet it's strange to hear war metaphors and public-health jargon trip lightly off the youngest of tongues); and, on one Toronto sidewalk, cheery sidewalk-chalk drawings of coronaviruses, their telltale haloes of tiny crowns rendered in mauves and apple green. Each is a signal of how much the world has changed for children.

Not long after news of a deadly outbreak emerged from China, we learned a surprising, hopeful fact: this novel coronavirus didn't seem to target kids. In fact, it rarely seemed to sicken them. Of the more than 376,000 global fatalities from COVID-19, few have been minors. So we've read obsessively about testing protocols and how to protect seniors, and flattening the curve; most of us haven't had to worry as much about kids.

Well, sort of. Kids started the pandemic as part of a group accusingly dubbed “superspreaders.” They were kept home from school mostly to help flatten the curve. Then, in late April, came reports from New York hospitals of a rare but severe new ailment in kids that caused organ failure and heart complications, sometimes fatal. The mystery illness seemed tied to COVID-19; children with the symptoms either tested positive or had antibodies, meaning they'd had COVID-19 in the past. And it seemed to strike kids who had no underlying health conditions at all. Doctors in Canada are now looking into 47 possible cases of multisystem inflammatory syndrome in children.

As it turns out, we actually don't understand what the coronavirus does to kids. There isn't consensus on the most fundamental question: Do children get sick from the coronavirus? The thousands of confirmed children's cases worldwide would suggest yes; yet it remains true that most children don't. In late April, Switzerland's infectious diseases chief announced young kids could now visit and hug their grandparents because, as he put it, they can't transmit the coronavirus. “They just don't have the receptors to catch the disease,” Daniel Koch said in a news conference. That's not science denialism at work; at least one recent study reached this conclusion, although it is in a pre-print stage and has not passed peer review—the benchmark for issuing clinical guidance. Other studies have concluded kids spread the virus less than adults, and still other studies say kids transmit at the same rate as adults. So how much should we worry? In the absence of data and scientific consensus, children remain a kind of black box.

We are, likewise, in the dark about what this crisis might mean for them psychologically and emotionally. How could we not be? We don't know how long the pandemic will last. We don't know if normal life—or some form of it—will resume by fall. We don't know if or when the virus will return with twice the force, as many epidemiologists warn. It's hard to predict the long-term effect of this period on children,

hard to engineer a solution that is stress-proof for them. Keeping kids home indefinitely is hardly an option. The prospect of economic recovery—parents returning to jobs, businesses staying open, supply chains reactivating, money flowing, food on the table—rests on those small shoulders.

Yet resumption of normal life, and a return to school and socializing, brings strange new realities to which they must adapt. The pandemic may have mostly spared kids, but there are few groups whose experience of the world is changing so dramatically as a result.

Most years, around this time, children across the country are counting down the hours to overnight camp, that Canadian ritual of days spent in the wilderness canoeing, swimming, and bunking with a pack of strangers-cum-best friends-in-waiting. A week at Camp Tamakwa, near Algonquin Park in Ontario, is one of these cherished experiences. Its website suggests business as usual: a countdown clock flips on top of a picture of South Tea Lake's still, blue waters. There's a quote from an alum (1986): "This is the place I see when I close my eyes and dream."

Victoria Flowerday went to Tamakwa last summer. She met her boyfriend there, and was going to be a counsellor this summer, a last stint before heading to university on the East Coast. An athletic 18-year-old, she runs triathlons, swims competitively and plays water polo. Her bedroom (we talked on Zoom) is decorated with camp pennants and her racing tags. But overnight camps are closed in Ontario, and Victoria looked wistful as she counted off the other cancelled events in a milestone year: graduation, prom, the senior trip, triathlons, her lifeguarding job. "It's really hard," she said. She can't see her boyfriend, who lives in Michigan, or her friends. "But I got a job at Sobeys as a cashier," she said, "so I'm doing that and saving up some money for university." In lieu of the last real summer of her childhood, she gets the chance to be a front-line worker.

She worries a little about that. She wears a mask and gloves for fear of bringing the virus home to her large blended family of seven: five siblings, two parents. She worries about school this fall: "I hope they don't move to online classes." But there are silver linings. "I've become a lot closer with my family," she said. "I hadn't spent this much time with them in a really long time. Through all of the negative things that come with this, my parents made sure we make the best of it. I had my 18th birthday in quarantine, and it was my best birthday yet."

All the kids I spoke with for this story said they miss their friends, school and activities (often in that order). "I miss going to places I haven't been," Victoria's half-brother Evan, age 13, said, capturing succinctly how the pandemic has shrunk the world for all of us. Joshua Miller, an angelic eight-year-old, said, "'Me time' is the only time I get alone, but I don't get 'me time' till my brothers go to bed"—again encapsulating a reality for many. We are distancing, but never very far from the people with whom we share our homes.

For the oldest of this cohort, though, there is a poignant added layer. Victoria Flowerday's parents can work from home, and there is financial security, a huge plus. But that doesn't take away the sense of loss, the interruption to milestones that bring meaning, the broken transition to a next stage of life. "The developmental tasks young people are supposed to be working on at this age are positive, healthy separation from family, autonomy, spreading their wings, establishing more intense social relationships," said Joanna Henderson, a senior scientist at the Centre for Addiction and Mental Health (CAMH) in Toronto. COVID-19 has slowed all that. The past 10 weeks don't feel like a blip to Victoria. "I'm definitely not gonna be the same after this," she said. "I'll always think about even the most mundane things differently."

That wouldn't surprise Jean Twenge, a professor of psychology at San Diego State University, who studies generational patterns and differences. "The coronavirus outbreak," she said, "is equivalent perhaps to World War II in its impact." At one point, Twenge lived in a neighbourhood with a lot of elderly residents, people who were young in the 1930s. She recalls getting a catalogue in her mailbox that was bursting with products aimed at that demographic. "For \$2 you could buy this plastic device for your toothpaste tube that would push the toothpaste all the way to the top so you could get every last drop out. And as a Gen Xer, I remember looking at that and thinking, 'Why would you spend \$2 on that? Who cares?'" Formative events stay with us.

Twenge wrote the best-seller *iGen: Why Today's Super-Connected Kids Are Growing Up Less Rebellious, More Tolerant, Less Happy—and Completely Unprepared for Adulthood—and What That Means for the Rest of Us*. She argues that pandemic life reinforces some patterns for a generation already more accustomed to virtual life and dealing with higher levels of anxiety, though behaviours could also go the opposite way post-pandemic.

The implications of pandemic life can be dramatic for some. For refugees who have escaped political violence in Latin America or fled domestic abuse in Nigeria, the sense that the world is unsafe again can revive old traumas, said Mariana Martinez Vieyra, a counsellor and coordinator of refugee mental health services in B.C. at the non-profit Vancouver Association for Survivors of Torture (VAST). Stay-home guidelines are hard on everyone, but they are intensely destabilizing for people who were just beginning to make a home. "It ruptures their sense of control," she said. "They say, 'I feel as if I'm in jail again.' At the same time, some parents have got very comfortable staying cocooned. Hiding has been the strategy to survive in the past, so some parents are not letting the children out of the house."

The kids' experiences, as in any family, depend on the parents'. For some, this is cherished time together. The counsellors hear often how grateful their clients are to be experiencing this pandemic in Canada. But it's not an easy time. A number of clients are essential workers, so some kids have been going to daycare. Other kids are stuck indoors with none of the frills that ease life in quarantine. And while they may find comfort in family, said Martinez Vieyra, "one thing that refugee children present is difficulty in moving beyond the family unit and trusting other adults." Those connections with the outside community are vital to settling, and may now be set back.

Kids who are resettling are not alone in navigating such disruptions. I heard about kids of various ages who don't want to go outside. One teen stayed home for the first six weeks of the lockdown. A preschooler I came across who loved dogs pre-COVID is now afraid of them—and of bugs. ("I should've called it a 'virus,' her mom told me.) Suniya Luthar, an American academic whose research for decades has centred on kids, feels for a generation denied its real-world connections to peers. "It's just heartbreaking to think of the physical contact, the hugs,

time with teammates,” she said. “A lot of their camaraderie and support, not to mention, for older kids, romance, comes from physical contact and proximity.”

I live with a member of this tribe, a third-grader. Early in May, on the anniversary of the Hindenburg crash, I showed him a short film on the disaster. The Hindenburg was almost as big as the Titanic, we learned, a mammoth reflective balloon launched into the sky. As news cameras lingered on its luxurious interiors, diners clinking their glasses in the dining lounge, my son began flailing his arms. “Mummy!” he squealed. “Pause it. Pause it. All I can think about is why are they all so close to each other? Why on Earth did they pack themselves into that small place?” He was looking at the Hindenburg, and what he saw was a crowded room.

My son shows no signs of anxiety; a talkative kid who loves to draw and make books, he doesn’t leave too many thoughts unexpressed. But there are glimpses of a new world inside his head. In the dreams he now recounts, the people are always socially distancing. It’s winter, the roads are iced over and we get around on skates; he’s in school in Japan, studying art and math and prayer; he and his dad chat with a knife sharpener in the park every night at 10 o’clock. In the most improbable dreamscapes he describes, nobody touches and there are invisible two-metre barriers between people.

What longer-term effects will all this have for children? It really depends on which child. The pandemic has created bubbles of personal experience. Every family, every individual, seems to go through it differently. Experiences like this are not automatically traumatic, child psychologist Stacey Schell noted. “Trauma is really about someone’s response to an event,” she said. “For some kids this might end up being traumatizing and for others it might not.”

In an effort to capture the variety of experience, and the seismic changes in family life, Toronto’s Hospital for Sick Children (SickKids) is launching a project surveying 6,000 children and families over the next nine months. The real-time data-gathering exercise relies on new recruits and subjects from four existing research groups, including the Child and Youth Psychiatry Outpatient Program at SickKids and Spit for Science, a study of the interplay of genes and environment in kids’ health. The children will be surveyed monthly on their dietary habits, physical activity, sleep, screen time, and how they feel: Are they sad, irritable, anxious? How is their concentration? (Their parents will be surveyed, too.)

“I’m looking to see how these kids fare over time,” said the project’s head, Daphne Korczak, a psychiatrist, researcher and director of the Children’s Integrated Mood and Body program at SickKids. “How did they fare on the return to school? Are there differences? How can we understand kids who come in with higher risk vs. kids without known higher risk? And how can we use that information to plan for the future and to support them?”

One factor the SickKids study is tracking is pre-existing anxiety, and how kids with these issues fare over time compared with other kids. Among the children I spoke with, experiences of the pandemic can be worlds apart. The coronavirus isn’t a big worry for Joshua, the eight-year-old who craves “me time.” “I just pretend it’s not really there and school was just canceled,” he said. Joshua lives in a small town near London, Ont. He misses knocking on his best friend’s door, but his family has holed up at the cottage, where they get lots of outside time. He likes the reduced schoolwork, and he and his two younger brothers, four and six, now get to watch movies every day.

His parents check in with them periodically about how they are feeling, which is hugely beneficial. “We know that trauma is linked to a feeling of being unsafe or at-risk,” Stacey Schell said, “and one of the best protectors from trauma is the space for people to talk about what they’re feeling.” Joshua’s parents have also shielded the kids from the pandemic’s harshest realities, as well as their family’s own. In January, his mother, Beth, a fit, active gym teacher, had a hemorrhagic stroke. “At a time when many Canadians are in isolation,” she said, “this has been my norm since January.” She spent a month in hospital relearning how to walk and write. She has three hours of physical and cognitive therapy a day, plus weekly virtual meetings with her doctors, physiotherapist, occupational therapist, and social worker. Beth shows the calm of someone who has had to recalibrate her goals and expectations, and in the process has stumbled onto a deeper happiness. “My life has already changed so much that I am so happy to be with my family,” she said in May. “I feel among the fortunate in this situation.”

The virus looms larger for 11-year-old Yohan Maramot. His mother, Reyamie, is a nurse at Michael Garron Hospital on Toronto’s east side. She often works double shifts, getting home at 7:30 a.m. Lessons about COVID-19 are part of Yohan’s schoolwork, and he’s alert to misinformation online. “There’s a lot of fake news, like people saying it comes from bat soup, and exaggerations,” he said.

He worries his mother will test positive for COVID-19. His mother worries about him. She monitors the COVID-19 case count in their west-end neighbourhood (it was 100 the day we spoke), and they sanitize high-traffic door knobs and light switches at home. Reyamie works in respirology and acute medicine, and sees two to three patients who have tested positive for COVID-19 a day. “I see how quickly patients can deteriorate,” she said.

Yohan misses normal life. His mother, an immigrant from the Philippines, follows the “takes a village” model, and most pre-COVID weekends were spent with close friends. He misses church, “especially the part when church is starting and all of us get to say a brief announcement about our week, and the part after, where we arrange play dates,” he said. These days, hanging out with friends over Roblox games on his iPad and chatting with family makes him happiest.

Not everyone understands the burden shouldered by families of health-care workers, said Indrani Lakheeram, a pediatric anesthesiologist based in Montreal. “It’s very hard to manage the two things: my role as a parent, trying to safeguard my family; and my role as a professional, trying to do what’s right for my patients.” Lakheeram is the one who’s working now, while her husband, Roger LeMoine, a globetrotting photojournalist, stays home with their two teenaged kids. Anesthesia is a high-risk profession—intubations and managing the airway mean exposure to COVID-19—and when the pandemic started, she found it nerve-wracking. “Does my loyalty lie with my patients, and is it worth it for me to get sick and potentially die vs. my loyalty to my kids?” she said. The kids find it hard, too. “They don’t like it. I work

in pediatrics and they often wonder why somebody else's child is more important than mine."

There are not many modern precedents for these times. A couple of studies, including a survey from 2004 that examined the effects of the SARS quarantine affecting 15,000 Canadians, have found a spike in symptoms associated with post-traumatic stress. But those were adults, and the scale of this shutdown is different.

The news is not all grim. There are indeed troubling spikes in youth anxiety and depressive symptoms in Canada, on top of rising anxiety rates pre-COVID. In an April CAMH survey of youth aged 14 to 27, 68 per cent of youth who had previously sought mental-health help, and four in 10 youth who hadn't, said they've had problems. But there were also signs of hope in the study. Rates of substance abuse dropped, presumably as more kids stayed home. Social connection matters, and eight in 10 said they connected with friends online. "I was surprised by the proportion of young people who reported positive impacts: more time to spend with family, more time with pets, on their hobbies. Some even said they're saving money because they go out less," said Joanna Henderson, the lead researcher and director of the Margaret and Wallace McCain Centre for Child, Youth & Family Mental Health at CAMH.

Anxiety and depression are what Suniya Luthar, the American academic, thought she'd find when she began surveying students about COVID-19. Luthar is an authority on resilience in children. Her ground-breaking research in the 1990s exposed the reality that high-achieving students, often from educated, white-collar families, are among the most vulnerable populations for substance abuse, anxiety and depression, alongside kids who grow up in urban poverty or whose parents have been incarcerated.

Luthar's organization, Authentic Connections, conducts student surveys at schools to identify vulnerabilities in mental health. When COVID-19 struck, the organization pivoted and began running student resilience surveys instead, focusing on anxiety, depression and kids' concerns during the pandemic. They've administered the surveys to kids at 25 schools so far, and what they found was startling: rates of clinically significant depression and anxiety were consistently lower than in 2019.

"This is why we do research," Luthar said. "You stop to think about it, and it adds up. The oppressions that these children experienced have by default become less. They're not running from pillar to post with multiple extracurricular activities." Absent an early school start, kids are sleeping in—a great boon to adolescent bodies, which want to wake later. And most are carrying a lighter load at school. "Everything is not crammed, and in most cases teachers are being understanding," she said. "So I imagine that there is some sense of relief: 'my God, I can breathe now.' " Gone, too, are the social dynamics of school. "Nobody is going to feel left out because they're not at the popular kids' lunch table," Luthar offered.

Some of these were motifs in conversations I had with kids. Jaime Rockwell, 15, is happy she doesn't have to go to overnight camp, as is her brother Evan. An introvert by nature, Evan seems to enjoy the reprieve from social gatherings; both have actually made new friends in quarantine through online social apps or games. Their half-sister Julia Flowerday, 13, told me she too likes elements of the new normal, including the fact they now eat all their meals together; before, they were too busy with activities.

Some younger children prefer this time. "I'm doing great," said Thrivev Chandramouliswar, a sweetly impish eight-year-old who lives in a Toronto high-rise with his parents, his two-month-old-sister and, for now, his grandparents, who came to visit from India not long before borders closed in March. An athletic kid, Thrivev loves the sorts of activities the pandemic has made difficult. But he has virtual art and music lessons and, somehow, basketball coaching. He does a lot less schoolwork. And he has a grandmother who loves to bake, and time with his parents, who are now both home. A molecular biologist by training, his mother, Jayantasri, is on mat leave, and intrigued by the pandemic rather than worried—a coolness that her son seems to have picked up.

What the pandemic has given Thrivev's family is connection. Until two years ago, when his parents immigrated, all five lived as a joint family in a sprawling Chennai homestead with his cousins, and aunt and uncle. So this is familiar, if at closer quarters. "Actually, the social isolation period was when we first moved here," Jayantasri said with a laugh.

That ties in with a theme in Luthar's decades-long research: resilience rests on relationships. Close relationships with parents are a big predictor of resilience in adulthood, and can compensate for dire risk factors. Research from Cornell University found that higher environmental risk—from poverty, overcrowding, even family stress—was mediated by a mother's responsiveness. "If your mom was particularly sensitive to your emotional state during a game of Jenga . . .," Paul Tough wrote in the book *How Children Succeed*, "all the bad stuff you faced in life had little to no effect on your allostatic load"—meaning blood pressure, stress-hormone levels, and so on.

How, then, are parents doing? In another CAMH survey, nearly a third reported being more anxious vs. only a quarter of people without kids. (How could we not be?) In a joint Italian-Spanish study from April of the effects of COVID-19 on kids, parents who were more stressed turned out to have kids who were more anxious, worried or argumentative. Yet the increase in family time also affords many more of those ordinary opportunities for parents, even stressed-out ones, to be responsive to kids. It's a tremendously reassuring thought.

Ensuring a child's well-being also means ensuring the well-being of those caregivers. For parents, as for kids, Luthar believes the answer lies in meaningful relationships. It's not the easiest time to nurture adult friendships, but busy or not, parents must make time for connection. "Just as we learned to put on our masks and distance and wash our hands," said Luthar, "we have to learn to do this. It's not optional."

The other critical component of children's lives is, of course, school. Reopening schools isn't just a necessary step in restoring the economy; it's also something kids themselves desperately need, for structure, for social connection. The question is when and how to do it safely. As Reyamie Maramot, the Toronto nurse, put it, "We want our kids to be happy, and we want them to be safe. How can we choose?"

Since kids generally have mild or no symptoms when they have COVID-19, they don't get tested. "We don't have very good information on what proportion of kids may have been infected," explained Amy Greer, the Canada Research Chair in Population Disease Modelling at the

University of Guelph, who's working on mathematical modelling of COVID-19 transmission at summer camps. Greer said it concerned her that discussions of relaxing guidelines in Quebec in early May were taking place in the absence of this data, while cases were still high. Schools reopened on May 11; by month's end, 44 students and 34 staff at several schools had tested positive.

Being the child of an anesthesiologist can be worrying for some, like Chloe Lemoyne (Roger LeMoyné)

Greer believes we will have more data in the coming months with which to make policy decisions about schools. Several studies are under way examining transmission by children within households for clues to how SARS-CoV-2 (the virus that causes COVID-19) spreads. There should also be data out of other countries soon, where schools have been open for a while.

All roads seem to lead to testing and contact tracing. "There is still time for us to get our testing and tracing house in order," Greer said. "If we can drive cases down over the course of the summer, if we can ramp up testing and tracing such that we're able to really understand what we're dealing with, then we can make better decisions."

Reopening will bring its own challenges. A common mantra in these times is that kids are resilient. "Yes, kids are resilient," said Stacey Schell, the Toronto child psychologist, "but not all kids are equally resilient. And I worry that we will underestimate the challenges for some." Daphne Korczak of SickKids pointed out that for high-achieving kids or anxious kids who enjoyed a reprieve during the pandemic, anxiety may return. There will also likely be much variation in kids' academic levels when they go back. "It'll be important for schools to have the capacity to address different educational needs effectively," she said.

Then there are the day-to-day realities. "As a parent, sending your kid back to school and wanting to ensure that they're safe is one thing. But the other thing is, what is the experience like?" mused Greer, who is also a mother. Other parents, such as anesthesiologist Indrani Lakheeram, aren't counting on a normal school year. "I'm expecting them to have to be at home at some point," Lakheeram admitted. "I don't really know how we're going to manage. I just hope schools have really thought about how to educate people in this digital age. I feel it's going to come back to that."

For now, those realities seem an eternity away. As I took an evening walk in late May, though, there were signs of change. Packs of kids were out together on bicycles or playing. In a kindergarten playground, a teen hangout was under way. And on some sidewalks, in place of drawings of rainbows and cheerful thank-yous, were a new set of chalk slogans: "Black Lives Matter"; "Silence is Violence"; "Justice for George Floyd." I was reminded of walking into my child's school one afternoon last fall. It was the day of the climate strikes, during Greta Thunberg's visit to New York, eons ago now. The yard was covered with chalk drawings and writing: "Save the Turtles"; "HELP! We don't want to be extinct in 30 years!"; "Earth is burning!" I imagine there were school yards like it all over the country. It struck me that night that, to this cohort of children, a pandemic may not seem insurmountable. They were already facing worse. Maybe, in the words of the old song, they will be all right.

**Related link:**

**Region:** Canada <sup>[3]</sup>

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