

# **COVID-19**

and

# **Children**

---

**A call from  
paediatric leaders  
across Europe**

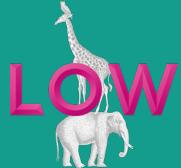


**European Academy of Paediatrics**

Paediatric Section of U.E.M.S

---

**Don't Forget  
The Bubbles**



In April this year, the UN published a policy brief<sup>1</sup> on the impact that COVID was having on children. It highlights key areas of concern, affecting the safety, education and welfare of children around the world. In its conclusion it calls for more information, more solidarity and more action.

We, paediatric leaders from across Europe, urge European leaders and national governments to take urgent and unified action to follow that lead, helping to mitigate the risks identified, to ensure the best possible future for our most precious asset – our children.

The UN Convention of the Rights of the Child enshrined the principles that we should follow when making decisions about children and young people. In particular they state:

- ▶ In all actions concerning children, the best interests of the child shall be a primary consideration (Article 3)
- ▶ All children and young people have a voice and the right to participate in decisions that affect them (Article 12)
- ▶ All children and young people should have access to information required to make informed decisions with respect to their health and well-being (Article 17).

We have addressed three areas of concern – **Protection, Play** and **Education** – where we believe intervention is most needed. For each area we have defined a number of specific issues, providing evidence of the problem, recommending what we believe should be done, and finally suggesting how progress might be measured.

Some evidence remains uncertain, nowhere more pertinent than in the simple questions about how susceptible and how contagious children are compared to adults. Trials of novel therapies need to include studies in children, as physiology and pharmacokinetics can vary substantially. Careful psychological studies need to assess the true impact of the disease on vulnerable groups.

Much research is needed, and that needs coordinated funding across Europe. In this document however we look at the policies that need to be urgently put in place that will help define key areas and direct that research.

1: [https://www.un.org/sites/un2.un.org/files/policy\\_brief\\_on\\_covid\\_impact\\_on\\_children\\_16\\_april\\_2020.pdf](https://www.un.org/sites/un2.un.org/files/policy_brief_on_covid_impact_on_children_16_april_2020.pdf)

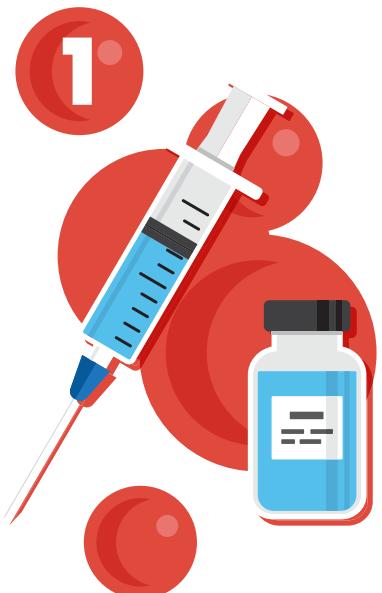
# Protection.

## Vaccination and routine screening<sup>2</sup>

**Issues:** Vaccination rates have fallen during the pandemic<sup>3</sup> with risk of infectious diseases increasing,<sup>4</sup> vaccine delivery is compromised,<sup>5</sup> the low levels of uptake before the pandemic multiply the risks that any further reduction in coverage has on outbreaks.<sup>6,7</sup>

### Policy recommendations:

- ▶ Pan-European cooperation on vaccine supply
- ▶ Funding allocated to train health care providers to vaccinate
- ▶ Active campaign across Europe to publish international vaccine strategies, to raise awareness about vaccines and to address vaccine hesitancy

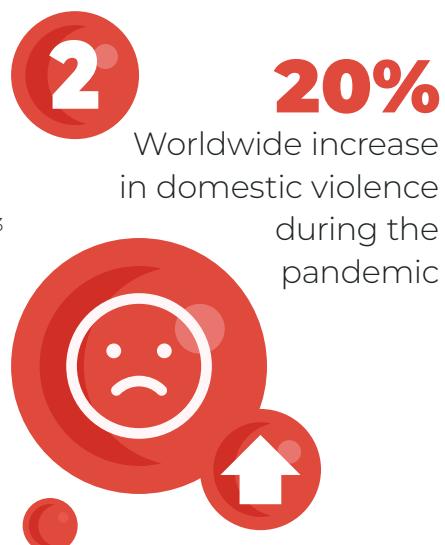


## What does success look like?

- ▶ Increase of vaccine uptake on a European and worldwide level, with all European countries reaching measles free status.

## Physical safety

**Issues:** The risk of death from COVID is extremely low in children.<sup>8</sup> Isolation of households has increased the risk of violence and injury<sup>9,10,11</sup> presentation may be severe or late.<sup>12,13</sup> Children with chronic disease may have suffered through this period.<sup>14,15</sup> There is evidence of late presentation of medical emergencies to hospitals and routine surgery and clinic appointments have been postponed.<sup>16</sup> Young carers have been exposed to greater risks during lockdown.<sup>17</sup>



2: [https://apps.who.int/iris/bitstream/handle/10665/331590/WHO-2019-nCoV-immunization\\_services-2020.1-eng.pdf](https://apps.who.int/iris/bitstream/handle/10665/331590/WHO-2019-nCoV-immunization_services-2020.1-eng.pdf)

3: [https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2020.25.19.200084#html\\_fulltext](https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2020.25.19.200084#html_fulltext)

4: <https://www.cdc.gov/mmwr/volumes/69/wr/mm6919e2.htm>

5: [https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(20\)30304-2/fulltext#coronavirus-linkback-header](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(20)30304-2/fulltext#coronavirus-linkback-header)

6: <https://www.bmjjournals.org/content/bmjj/369/bmj.m2392.full.pdf>

7: [https://www.who.int/immunization/diseases/measles/statement\\_missing\\_measles\\_vaccines\\_covid-19/en/](https://www.who.int/immunization/diseases/measles/statement_missing_measles_vaccines_covid-19/en/)

8: <https://reader.elsevier.com/reader/sd/pii/S0033350620302092?token=D99AB3E816985EBDDEC2AA0C6A2EFCD72260FE39EB1E4E6CAC2D851BFC059E7DA9D499E7015C7888ECC5CA142B5D548B>

9: <https://www.bmjjournals.org/content/369/bmj.m1669>

10: <https://www.boa.ac.uk/policy-engagement/journal-of-trauma-orthopaedics/journal-of-trauma-orthopaedics-and-coronavirus/non-accidental-injury-in-children-in-the-time-of.html>

11: <https://www.nytimes.com/2020/04/06/world/coronavirus-domestic-violence.html>

12: <https://adc.bmjjournals.org/content/archdischild/early/2020/06/30/archdischild-2020-319872.full.pdf>

13: <https://eu.usatoday.com/story/news/nation/2020/05/13/hospitals-seeing-more-severe-child-abuse-injuries-during-coronavirus/3116395001/>

14: <https://adc.bmjjournals.org/content/early/2020/05/19/archdischild-2020-319482>

15: <https://www.apa.org/topics/covid-19/parenting-chronic-disease>

16: [https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642\(20\)30206-6/fulltext](https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(20)30206-6/fulltext)

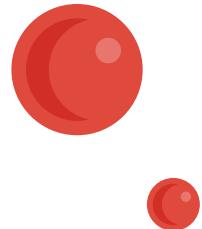
17: <https://www.childrenssociety.org.uk/news-and-blogs/our-blog/new-challenges-for-young-carers-during-covid-19>

# Emotional safety

**Issues:** Depression and anxiety are more common, normal peer support groups are lost.<sup>18</sup> Those living in more violent households are more prone to depression. Other 'guardians' (teachers etc) are not seeing children<sup>19</sup> with referral rates to protection agencies falling.<sup>20</sup> Increased financial pressure on families may increase tensions.<sup>21</sup> For adolescents social distancing and lockdown can be especially difficult.

## Policy recommendations:

- ▶ Increased funding of psychological support for children (especially adolescents) and families
- ▶ Funding for better training in recognition of family dysfunction from health care workers
- ▶ Prioritised health care access for children with chronic conditions
- ▶ Young people should be given power and leadership to decide for themselves how to make up for not being able to do these things in person.



## What does success look like?

- ▶ A reduction in the incidence and severity of abusive injuries
- ▶ National registers of the incidence of neglect and emotional abuse
- ▶ Reduced self-harm/suicide
- ▶ Improved outcomes in chronic conditions



18: Mental health effects of school closures during COVID-19. Lee J. Lancet Child Adolesc Health, Apr 2020.

19: <https://www.childrenssociety.org.uk/news-and-blogs/our-blog/being-the-eyes-and-ears-spotting-signs-of-abuse-while-schools-are-closed>

20: <https://www.rpch.ac.uk/resources/impact-covid-19-child-health-services-tool-results>

21: <https://voxeu.org/article/potential-impact-covid-19-child-abuse-and-neglect>



## Long term dangers

**Issues:** Financial impact of pandemic over a generation,<sup>22, 23, 24</sup> loss of education and future employment possibilities (see below), vulnerable families (socio-economic, BAME, being in care, in youth justice systems) have fewer resources to cope with both with effects of illness and effects of lockdown; consequently all poor outcomes from the pandemic will affect them disproportionately. Deliberate exploitation (grooming, trafficking etc), including evidence of pamphlets showing how to target children during the pandemic.<sup>25</sup>



### Policy recommendations:

- ▶ Poverty reduction targets in all countries for vulnerable children and poor families
- ▶ A 'child health in all policies' approach to all policy development
- ▶ Targeted resources for at risk families

## What does success look like?

- ▶ Improving social equality across Europe
- ▶ Stable unemployment figures without increasing poverty

Global debt during the pandemic has increased by

**+13%**



22: <https://www.hrw.org/news/2020/04/09/covid-19s-devastating-impact-children>

23: <https://www.un.org/development/desa/dpad/publication/un-desa-policy-brief-72-covid-19-and-sovereign-debt>

24: Adjustment with a Human Face, Volume 1, Protecting the Vulnerable and Promoting Growth. Eds. Cornia GA, Jolly R, and Stewart F. OUP 2020.

25: <https://www.theguardian.com/society/2020/may/14/child-abuse-predator-handbook-lists-ways-to-target-children-during-coronavirus-lockdown>

# Play (and exercise).

## Child

**Issues:** Play is critical for early cognitive and social development,<sup>26</sup> has been affected by COVID,<sup>27</sup> and provides support networks for families, especially those in vulnerable groups. Obesity is likely to increase,<sup>28,29</sup> social development affected.<sup>30</sup>

### Policy recommendations:

- ▶ Improved education for families, encouraging explorative play
- ▶ Focused funding for vulnerable families
- ▶ Relax social distancing rules for children
- ▶ Promote and facilitate exercise in children, with regular structured exercise at school
- ▶ Increased provision of child friendly sport and leisure access



## What does success look like?

- ▶ Reducing levels of obesity
- ▶ All schools open and functioning normally

26: The Importance of Play in Promoting Healthy Child Development and Maintaining Strong Parent-Child Bonds. Ginsburg KR. Pediatrics 2007 (119) 182-191

27: <https://www.theatlantic.com/family/archive/2020/04/coronavirus-tag-and-other-games-kids-play-during-a-pandemic/609253/>

28: COVID-19-related school closings and risk of weight gain amongst children. Rundle AG et al. Obesity 2020 (28) 1008

29: Effects of COVID-19 Lockdown on Lifestyle Behaviors in Children with Obesity Living in Verona, Italy: A Longitudinal Study. Petrobelli A et al. 2020 <https://doi.org/10.1002/oby.22861>

30: <https://www.theguardian.com/education/2020/may/07/prioritise-play-when-schools-reopen-say-mental-health-experts-coronavirus-lockdown>

## Adolescent

**Issues:** Adolescents have distinct developmental needs compared to children and adults. They are very much invested in social connections and in separating from their parents. COVID social distancing requirements is particularly challenging for them.

### Policy recommendations:

- ▶ Involvement of young people in policy development
- ▶ Specific policies developed for adolescents

## What does success look like?

- ▶ Direct involvement of adolescents and young adults in policy development

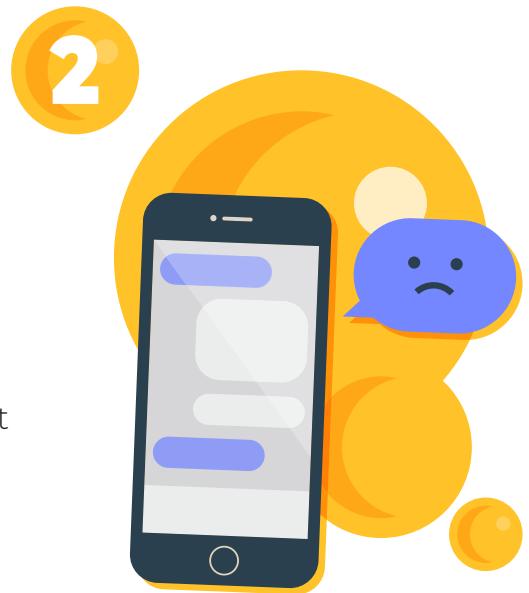
Foster requests in the UK are up by

**+30%**



However offers of places are down by

**-20%**



# Education.<sup>31</sup>

## School attendance

**Issues:** School closure affects families directly by requiring child care, and affecting the parents' ability to work. It has a disproportionate effect on the underprivileged,<sup>32,33</sup> including the loss of support such as free school meals. There is a significant effect on children regarding their well-being and (psychological) health due to the loss of interactions with peers.

### Policy recommendations:

- ▶ Open schools for all ages.
- ▶ Support the development of internet access and online teaching resources
- ▶ Training for teachers and parents to recognise psychological problems (mental health support teams)



## What does success look like?

- ▶ Optimal psychological, educational and health development of all children

## Examinations

**Issues:** Many children do not work through lockdown<sup>34</sup> and lose valuable education time. 11% European families have no access to the internet<sup>35</sup> or to equipment and technology. There may be a long-term effect on children due to under-education and reduced opportunities for further education and training,<sup>36</sup> with fewer job-possibilities, affecting low income families disproportionately.

### Policy recommendations:

- ▶ Provide resources and funding to allow catch up education
- ▶ Ensure full internet coverage for all areas of Europe

## What does success look like?

- ▶ Full internet accessibility for children and schools



**11%**  
of families in  
Europe have  
no access to the  
internet



31: <https://en.unesco.org/covid19/educationresponse/consequences>  
32: <https://cpag.org.uk/news-blogs/news-listings/impact-school-closures-children-living-poverty-wales>  
33: <https://www.unicef-irc.org/publications/pdf/rc12-eng-web.pdf>  
34: [https://www.llakes.ac.uk/sites/default/files/LLAKES%20Working%20Paper%2067\\_0.pdf](https://www.llakes.ac.uk/sites/default/files/LLAKES%20Working%20Paper%2067_0.pdf)  
35: <https://www.statista.com/statistics/185663/internet-usage-at-home-european-countries/>  
36: <https://www.unicef-irc.org/publications/pdf/rc12-eng-web.pdf>

## Higher education

**Issues:** Young people lose daily structure and motivation for learning. Exam results are devalued. Motivation is reduced; loss of long-planned events such as graduation can be very depressive. Loss of daily structure affects their ability to schedule effectively, and work efficiently.

### Policy recommendations:

- ▶ Improve career guidance support in higher education establishments
- ▶ Support with scheduling teaching and self-directed learning

## What does success look like?

- ▶ Increasing employment levels and job satisfaction



European Academy of Paediatrics

Paediatric Section of U.E.M.S

