



Child & Youth Mental Health during the Pandemic

Office of the BC Representative for Children and Youth
Office of the Provincial Health Officer

March 12, 2021

Impact of school closures on learning, child & family well-being

Dr. Naomi Dove

Office of the Provincial Health Officer

BC Ministry of Health

Focus Disability

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Land Acknowledgement

We respectfully acknowledge that we are on the unceded traditional territories of the Coast Salish peoples – Skwxwú7mesh (Squamish), Sel̓íl̓wítulh (Tsleil-Waututh), and x̣ẉməθḳẉəỵəm (Musqueam) Nations - and the Lekwungen peoples – Songhees, Esquimalt and WSÁNEĆ Nations



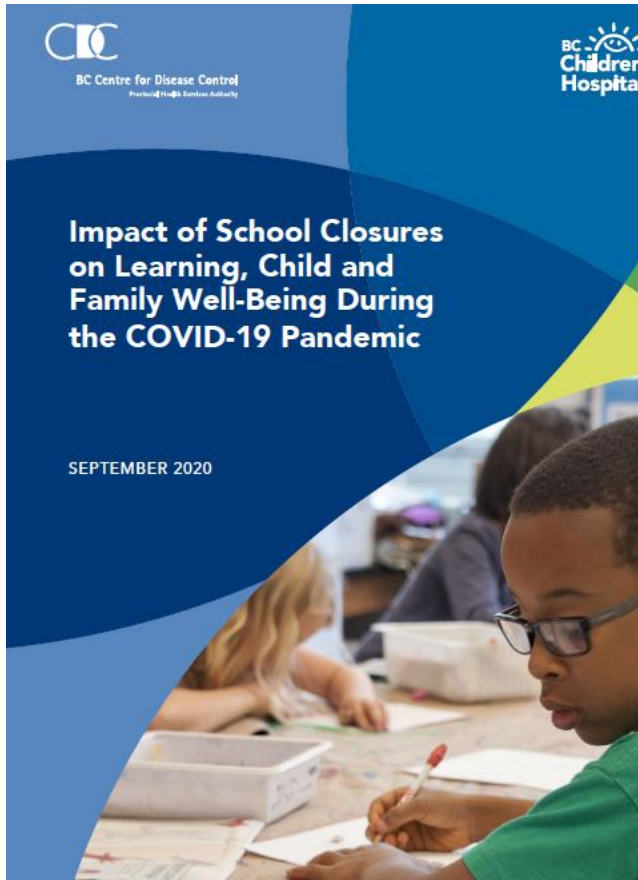
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Background of COVID-19 suspension of in-class instruction

- 70% of children in 153 countries were impacted by school closures in spring 2020
- On March 17, 2020, the PHO provided advice to the Ministry of Education that suspending in-class instruction was appropriate in the circumstances then existing.
- On March 27, 2020, the PHO advised school districts to provide in-class instruction for children of essential service workers. Over following weeks, the advice evolved to include in-class instruction for student subject to social vulnerabilities and those requiring additional supports.
- On June 1, 2020, a voluntary partial return to in-person schooling started across school districts for children of non-essential workers for the remainder of the school year.
- Schools returned to in-person learning across BC for the 2020/21 school year, with options for in class or virtual attendance, along with multiple layers of prevention and control measures including hand washing, physical distancing with smaller classes/ cohorting, being outside when possible, active screening, and keeping sick children, teachers & staff from school.



Endorsements



- BC Children's Hospital
- BC Centre for Disease Control
- BC Public Health Leadership committee

- Sponsored by the Office of the Provincial Health Officer of BC, Dr. Bonnie Henry



Schools support the learning, health, and development of children and youth and provide valuable resources for families

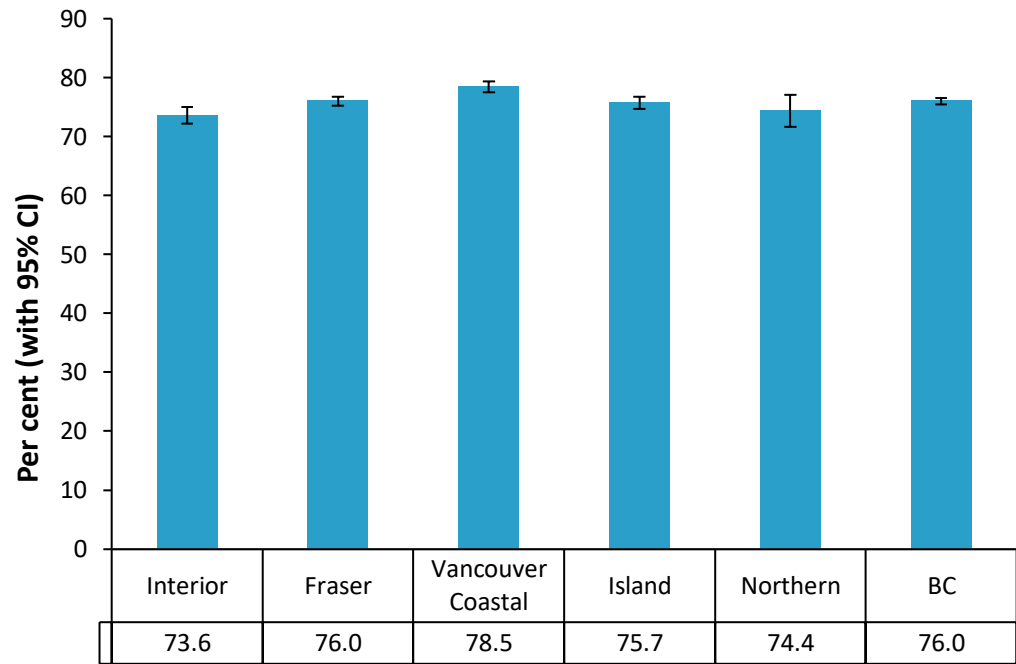
- Educational attainment is an important determinant of health, positive well-being and future socio-economic outcomes
- Families and children rely on schools for social engagement, opportunities for physical activity, food access, access to some health services and psychosocial support, enabling time for working parents to balance work & caregiving demands
- Up to 80% of children with disabilities, neurodevelopmental, mental, and behavioural health needs rely heavily on school services and may be affected by a loss of resources, specialized educators, and structured learning environments
- According to BC's Ministry of Children and Family Development, there are ~74,000 children and youth with special needs in BC, with ~21,000 receiving regular supports and funding



School closures have had significant impacts on children's learning in BC

- **76.0%** (95% [CI]: 75.5%, 76.5%) of BC families reported impaired learning for children during COVID-19
- School closures and the shift to distance learning may result in uneven educational opportunities
 - Up to 30% of families surveyed by school districts in BC have access to no technology at all
- Existing vulnerabilities in educational attainment and development vary by socioeconomic status, gender and geographic area

Figure 1: Percentage of Household* Children Experiencing Impaired Learning



* Among households with school-aged children.

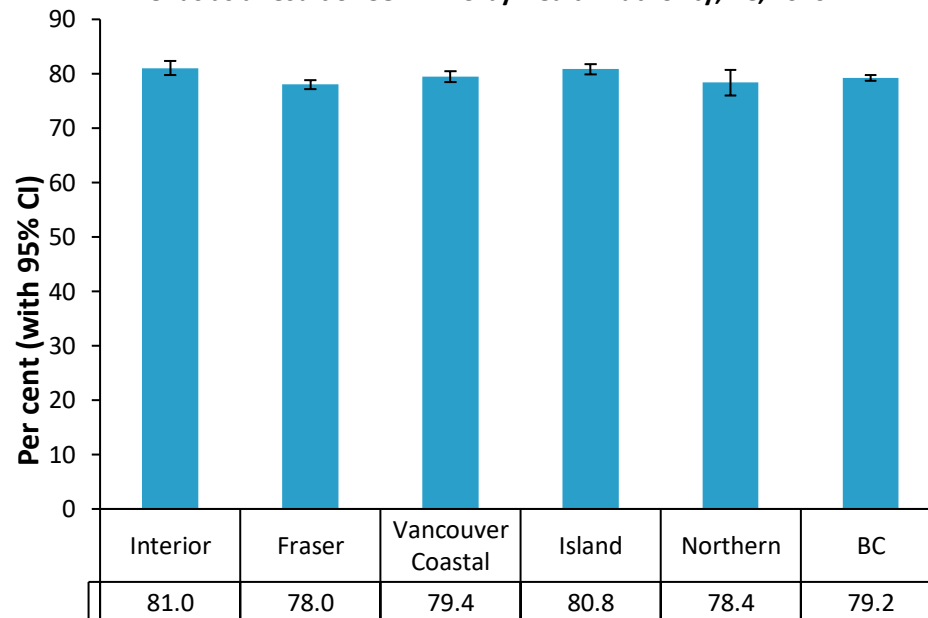
Notes: Responses were weighted using 2016 National Household Survey data by age, sex, and Local



Children and youth report decreased connection during pandemic school closures

- **79.2% (95% CI: 59.7%, 60.9%)** of BC respondents report children have decreased connection with friends during COVID-19
- School connectedness is associated with numerous benefits for students including higher self-esteem and life satisfaction, lower rates of substance use and violence, participation in fewer risk-taking behaviours, increased likelihood of completing secondary school, and greater feelings of positive mental health

Figure 3: Percentage of Household* Children With Decreased Connection With Friends as a result of COVID-19 by Health Authority, BC, 2020



* Among households with school-aged children.

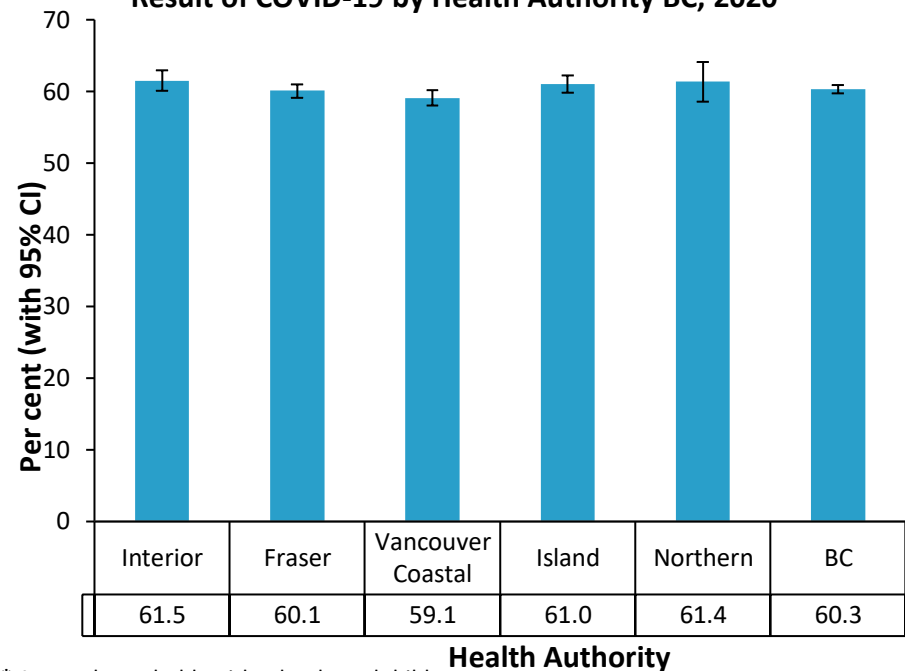
Notes: Responses were weighted using 2016 National Household Survey data by age, sex, and



Children and families in BC have experienced greater stress and isolation in COVID-19

- 60.3% of BC respondents report increased stress for school age children
- Increased stress and decreased connection for children and youth during the pandemic may be important contributors to future mental health conditions and are key to prevent and monitor

Figure 2: Percentage of Households* With Increased Child Stress as a Result of COVID-19 by Health Authority BC, 2020



* Among households with school-aged children.

Notes: Responses were weighted using 2016 National Household Survey data by age, sex, and



Children's mental health and well-being may be declining with school closures and social isolation

- School closures and distancing may result in increased loneliness in children and youth, correlated with mental health effects including anxiety & depression in a review of 63 studies
- Declining mental health has been noted for children and youth during COVID-19, highlighting trends in heightened anxiety, however studies are mainly cross-sectional studies with unclear long-term effects
- Trends in mental health disorders and perceived need for services for children and youth have increased over recent decades and are a key predictor of future mental health outcomes in the absence of early identification and intervention

Schools are important settings for mental well-being promotion and access to mental health services

- School closures may result in barriers to mental health resources and services usually accessed through schools
- Teachers, school counsellors and social workers are an important source of emotional and mental health support for students
 - In 2018 in BC, 55% of students had asked a teacher for help, 31% had asked a school counsellor and 23% had asked other school staff.
- Social and emotional learning curricula in schools fosters positive personal attitudes, relationships, school connection, and improved academic performance, while reducing emotional distress and conduct problems
 - Recent new funding was announced in BC for student mental health; school closures may result in a loss of momentum, delaying work that parents and families had identified as critical



School closures occurring in the context of pandemic measures may compound stress for some families

- A recent review of 38 studies showed families with children are under considerable strain during COVID-19 and have greater fear and anxiety
- A Spanish survey found a higher level of pandemic related psychological distress in families with affected working situations with children under age 16
- Females with school aged children disproportionately experienced reduced hours, job losses, and a greater caregiving burden, increasing the gender work gap by 20-50%
- Single mothers, Indigenous households, and recent immigrants are among those most likely to experience greater stress due to work interruption and the effect on regular earnings needed for financial stability
- A lack of respite care for families of youth with special needs has been identified a key source of stress for many families



Food insecurity has surged during the COVID-19 pandemic, with greater impacts on some families

- Global reports suggest food insecurity has surged during the pandemic
- Food insecurity and hunger are associated with impaired learning and poor health outcomes, including risk to physical and mental health in children
- During the COVID-19 pandemic:
 - Almost 1 in 7 (14.6%) Canadian households reported food insecurity in the past 30 days, with 2% reporting severe food insecurity, compared to pre-pandemic levels of 10.5%
 - More likely to occur in households with children (19.2%) compared to without children (12.2%)
 - Canadians who were employed but absent from work more likely to be food insecure (28.4%)
- 75% of school districts in BC have a meal program in at least one school
 - The number of BC families accessing food programming increased considerably during pandemic closures, with 75,000 meals delivered to 16,000 families every week



Family violence may leave some children vulnerable during COVID-19

- Global and national reports suggest family violence has intensified by ~20-30% in the pandemic
- Effects compounded by social isolation and economic recession
 - Financial strain, isolation and substance use are well known risk factors for family violence that may be exacerbated in the current pandemic
 - The last economic recession demonstrated increases in child maltreatment
- Teachers and support staff play a valuable role in protecting vulnerable children
 - BC's Ministry of Child and Family Development received 23% fewer child protection reports in May/June 2020 compared to 2019, with 75% fewer protection reports from schools
- Certain children may be at a greater risk of violence during the pandemic
 - Vulnerable children may include those with behavioural health needs or disabilities, children in care or at risk for maltreatment and families experiencing social inequalities
 - Family violence and child abuse has significant deleterious health and social sequelae well into the future, including enduring metabolic, emotional and immunologic illness



The loss of routine and structure with school closures and pandemic restrictions have substantially impacted children's health behaviours

- Physical activity, sleep duration & healthy eating are key for children's physical & mental health
- Children obtain most daily physical activity through travel to school, physical education, recess, organized sports and playground time, with more sedentary behaviour at home and in summer
- School closures and home confinement can lead to a loss of structure and routine, decreased recreation opportunities and increased sedentary activities
- Global studies show COVID-19 restrictions had drastic impacts on health behaviours, including:
 - A national survey found only 4.8% (2.8% girls, 6.5% boys) of children and 0.6% (0.8% girls, 0.5% boys) of youth met combined movement behaviour guidelines (physical activity, sleep and sedentary behaviour)
 - A survey of 1,000 Chinese school aged children found widespread smartphone and social media use, with problematic internet behaviours predictive of psychological distress
- Over time, effects of reduced physical activity, poor nutrition and excess screen time may be contributors to adolescent depression, anxiety and other negative health effects



Families with fewest resources are likely to experience the most disadvantage related to school closures

- Families with fewest resources and greatest stress may be most at risk of detrimental educational, social, and health ramifications related to extended school closures
- Social determinants, such as poverty & racism, have a significant influence on health outcomes and mediate the relationship between health and individual lifestyle behaviours
 - BC has the second highest child poverty rate in Canada, impacting 1 in 5 children
- Schools are important settings for health promotion, provide structure and supportive routines, as well as resources and opportunities, for those who may experience disadvantage at home



Listening to Indigenous voices is essential to Truth & Reconciliation

- No studies of the effect of school closures on Indigenous children and families were found.
- Effects of the pandemic may be disproportionately experienced by Indigenous children, families and communities, due to ongoing experiences of racism, social exclusion, and structural violence
- Indigenous peoples are resilient and have drawn on their collective strength and connectedness to buffer adversity of the pandemic
- Respecting Indigenous ways of knowing and being and listening to the experiences of Indigenous children and families in rural, remote and urban settings regarding the effects of school closures and the pandemic more broadly is needed to direct future work.



Summary

- Schools support the learning and development of children and youth and provide essential health, nutrition & social supports for many families.
- BC families reported impaired learning, increased child stress, and decreased connection during COVID-19 school closures, while global data show increased loneliness and declining mental health.
- With the loss of supportive routines and structures, healthy behaviours declined dramatically.
- Provincial child protection reports declined significantly despite increased domestic violence, suggesting decreased detection of child neglect and abuse without reporting from schools.
- Prolonged school absences have detrimental and accumulating effects on children and their families, particularly for those already experiencing social inequities.



Acknowledgements

Slide credit:

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Evidence Review: School Closures Impact on Learning, Child & Family Well-being

Authors:

- Dr. Naomi Dove, Public Health & Preventative Medicine Consultant, Office of the Provincial Health Officer
- Dr. Jason Wong, Acting Medical Director, Clinical Prevention Services, BC Centre for Disease Control
- Dr. Réka Gustafson, Vice President, Public Health and Wellness, PHSA and Deputy Provincial Health Officer

Contributors (in alphabetical order):

- BC Children's Hospital clinicians, researchers, and leadership, Dr. John Carsley, Meghan Day, Dr. Quynh Doan, Dr. Eleni Galanis, Dr. Andrew Gray, Dr. Dee Hoyano, Dr. Perry Kendall, Gina McGowan, Dr. Geoff McKee, Daniel Naiman, Dr. Michael Otterstater, Dr. David Patrick, Stephen Smith, Dr. Kate Smolina, and Andrew Steele

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COVID-19 and Youth Mental Health: the UniCon Project

River Chandler, MA

Director, COVID-19 Response

Office of the Provincial Health Officer

BC Ministry of Health

March 12, 2021



The Unintended Consequences Project

- Leaders in many sectors along with BC citizens expressed interest in and raised concerns about the negative unintended consequences (UniCons) of public health and other measures implemented when the BC public health emergency was declared a year ago.
- The UniCon Working Group was established in April, 2020 at the request of Public Health Leadership to identify, monitor and report on the unintended consequences of the public health measures implemented in response to the COVID-19 pandemic.
- Four areas of focus: mental/physical health, social, economic and environmental impacts.



Mental Health in BC

- 53.1 per cent of respondents age 15+ in BC reported experiencing somewhat or much worse mental health due to COVID-19 and related measures. Females and individuals age 25-44 were more likely to report worsened mental health.
- Individuals living with disabilities, gender-diverse individuals, recent immigrants, and individuals earning lower levels of income may experience greater stress and worsened mental health.
- Between May to September 2020, there was an increase in the number of respondents who reported worsening mental health among people with a pre-existing mental health issue, people living with a disability and LGBTQ2S respondents.
- Youth and young adults (age 15-24) in BC were more likely to report their mental health worsened compared to before the pandemic:
 - 62.5% reported their mental health was somewhat worse or much worse, compared to 37.5% reported the same or better.
 - 19% of youth (age 18-24) reported suicidal thoughts, compared to 6% in the general population



Parent Mental Health

- Parents' mental health can affect their children's mental and emotional health.
 - Almost 50% of parents with children under 18 in Canada reported worsening mental health during the pandemic.
 - Parents were 1.5-2 times more likely to report increased use of alcohol, fear of domestic violence, and suicidal thoughts

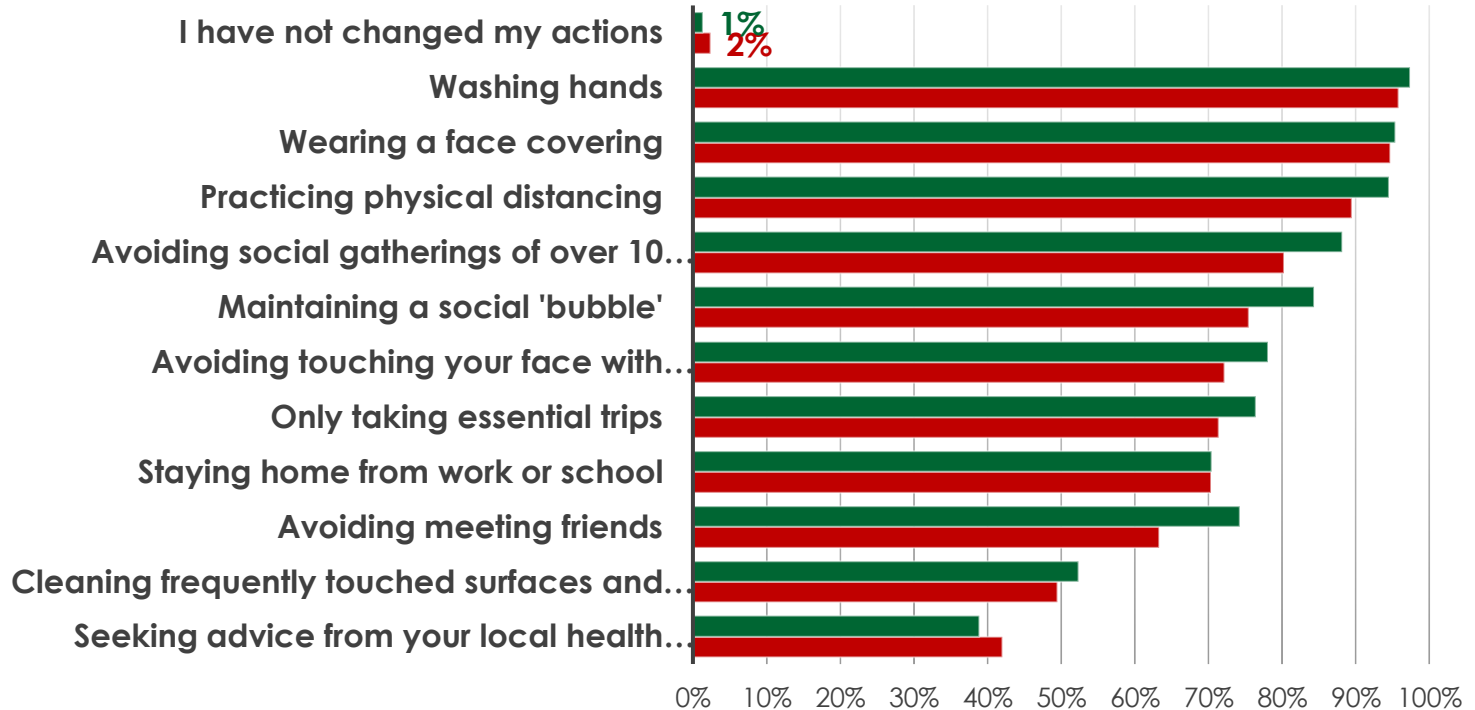


Youth Research Studies/Findings

- FOCUS study (Canada & France)
 - How the evolving social, policy and public health measures related to the COVID-19 pandemic are affecting the lives of youth living in Canada and France.
 - **Mental health:** 36% of Canadian youth age 18-30 reported that their mental well-being was poor; in comparison 42% of British Columbian youth reported the same
 - **Strategies:** 99% of BC youth changed their actions in 1 or more ways (next slide)
 - Researchers are concerned about the impact of (cumulative) exposure to social isolation, which is associated with mental health issues including suicide.



Strategies to decrease the risks of catching and spreading COVID-19



Source:

Preliminary findings of the FOCUS study by Rod Knight (UBC) and Pierre-Julien Coulaud (UBC)
 Supported by the British Columbia Centre on Substance Use and the Canadian Institute of Health Research



Youth Research Studies/Findings

❑ YOUNGMiNDS (UK)

- Impact of pandemic measures on youth aged 13-25 with a history of mental health needs.
- **75% of respondents agreed that they have found the current lockdown harder to cope with than the previous ones** including 44% who said it was much harder. (14% said it was easier, 11% said it was the same)
- **67% believed that the pandemic will have a long-term negative effect on their mental health.**
- **79% of respondents agreed that their mental health would start to improve when most restrictions were lifted**, but some expressed caution about restrictions being lifted too quickly and the prospect of future lockdowns.
- Primary concerns: loss of interaction with peers, loss of school support services, and loss of safety that school provided if they came from an unsafe family home.



Family & community connectedness

- COVID-19 and related response measures are creating both positive and negative impacts
- Respondents (age 18-29) in BC, May 2020:
 - 38.0% connected with family more compared to before the pandemic (vs. 30.9% connected with family less)
 - 41.3% reported somewhat/very strong sense of community belonging (vs. 41.1% reported somewhat or very weak sense).



Substance Use

- Disruptions to daily life resulting from the direct impacts of COVID-19 have led to increased harmful alcohol consumption among Canadian youth and adults, as evidenced by self-reported survey data and alcohol sales in BC.
- Results show increased alcohol consumption during the first wave of the pandemic reported among:
 - 31.8% of those aged 18-29 years
 - 26.0% of respondents with high school education
- Vaping an “epidemic” among youth
 - 15% of 15-24 vs 3% of those aged 25+
 - Linked to MH, respiratory, and other health concerns
- Survey of Canadian youth who vape found slight reduction during COVID, esp. in BC, ON



Physical Activity

- Physical activity ↑ MH, ↓ stress/anxiety
- Closures of schools, parks, rec centres =
↑ screen time, ↓ physical activity & sport
- Home-based ↓ fitness, “exergaming”



Considerations for Further Action

- Foster positive mental health in individuals, families, and communities during COVID-19.
 - Provide evidence-based information for individuals, families and communities to promote mental health in places such as home, schools, workplaces, and care facilities.
 - Actively promote protective health behaviours (i.e. getting enough sleep, physical activity, reducing screen time, stress management) that are important for active coping and are affordable, accessible, and within current pandemic response restrictions.
 - Collaborate across sectors and partners to increase support for determinants of mental health, including increasing protective factors that foster mental health resilience.
- Ensure early identification of mental health issues and timely access to appropriate and accessible mental health services.
- Monitor mental health status as the pandemic continues and as we reopen and recover.

