Supporting children and young people through the COVID-19 pandemic

There are 598,000 children and young people in Western Australia, representing 23 per cent of the total population - it is critical that we understand how the COVID-19 pandemic and our community response to it is impacting them and how to best support their wellbeing.

COVID-19 has caused sudden and unforeseen changes to the lives of children and young people worldwide. For many in WA, this has been their first experience of significant upheaval to everyday routines and being physically isolated from family members, friends and support networks. These changes have had immediate impacts on the wellbeing of children and young people across the state, which will need to be addressed in the short-term. We must also consider the long-term impacts to their mental health and wellbeing, which will be more likely to impact vulnerable groups of children and young people.

Under the United Nations Convention on the Rights of the Child, all children and young people have the right to be heard and to have their views sought on all matters that impact them. It is critical that families, carers, service providers and decision makers continue to uphold these rights. Doing so will mean they better understand how the COVID-19 pandemic has affected children and young people and how best to support them now and into the future.

Although the scale of the COVID-19 pandemic is unprecedented, the impacts it is having on the lives of children and young people themselves are not. Along with the evolving body of work focused on COVID-19, there is significant research on epidemics, natural disasters and other similar events that has been summarised below to guide the ongoing support of children and young people.
Impacts of the COVID-19 pandemic

“Corona has changed so much. Parents are worried, not much food, can’t hug our friends, constantly having to wash our hands.” WA young person

While only some WA children and young people have been directly impacted by COVID-19 as the result of the illness or death of an important person in their life, almost all will have been impacted by the steps taken to protect our community from the spread of this disease.

These measures include social distancing requirements, restrictions on the size of gatherings, changes to schooling arrangements, travel restrictions and mandatory shutdowns of some businesses. These measures have impacted children and young people’s ability to engage in regular schooling and social and recreational activities outside the home that are meaningful to them such as sports and visiting friends or extended family. Shutdown measures have also led many families to experience financial problems.

Many children and young people will look to family, friends and community members for the support and guidance they need to understand the current situation and manage their mental health and wellbeing as WA responds and recovers from the COVID-19 pandemic. Others may require more intensive supports as a result of vulnerabilities or past experiences. What is important is that the support networks of all children and young people are adequately prepared to have these conversations, offer the right level and types of support, and seek further assistance when necessary.

Vulnerable children and young people

Research indicates some vulnerable groups of children and young people will be at greater risk as a result of the pandemic. It is important to ensure the particular supports these children and young people require remain accessible during the response and recovery phases. Particularly vulnerable groups of children and young people are highlighted below.

**Aboriginal children and young people**, particularly those living in remote communities.

The Commissioner’s Speaking Out Survey, released in early 2020 prior to the onset of the COVID-19 pandemic, found that Aboriginal school students fared less well regarding material basics such as food and housing and reported greater concern about someone in their family hurting somebody compared with non-Aboriginal students. The Australian National University has highlighted the risk of this pandemic in exacerbating existing health, social and economic inequities such as these between Aboriginal and non-Aboriginal Australians.

**Children and young people with a history of mental health issues**

The Speaking Out Survey found that prior to the pandemic, a substantial percentage of students already did not view their lives positively, including reporting high levels of stress and the feeling they can’t cope with life’s challenges. Emerging evidence, such as increased volume of calls to children’s helplines since the pandemic onset, highlights the mental health risks to children and young people of the current situation.
Children and young people experiencing poverty and homelessness

The Speaking Out Survey also found that 10 per cent of students reported there was only sometimes enough food for them to eat at home prior to the onset of the COVID-19 pandemic. Many WA families are currently experiencing financial insecurity as a result of shutdown measures which may intensify food and housing insecurity.

Children and young people living in unsafe family environments

The Speaking Out Survey additionally highlighted one half of Year 7 to 12 students worry that someone in their family will be fighting, with one-in-ten worrying a lot about this and three per cent identifying they only feel safe at home a little bit of the time or never.

Current research highlights that the disconnection children and young people are experiencing from their usual networks poses increased risks to their safety. This includes through online platforms and increases in family violence, while also reducing interactions with mandatory reporters (e.g. teachers) or others who may raise alerts under normal circumstances.

Other vulnerable groups that may be disproportionately impacted by the pandemic include children and young people living in out of home care or youth detention, those with a disability or chronic health condition, those who identify as lesbian, gay, bisexual, transgender or intersex, and those from culturally and linguistically diverse backgrounds.

How children and young people respond to events such as the COVID-19 pandemic

Children and young people’s resilience in the face of significant upheaval depends on many factors including their age, developmental stage, trauma history and economic, social and cultural environments. Many are resilient and may experience few reactions and even positive changes arising from adaptive responses to the situation. Others may experience some immediate reactions that resolve over time.

Research on how children respond to situations such as the COVID-19 pandemic reflects that some will express reactions that persist or evolve over time, and that others who appear resilient at first may later develop reactions.

Broadly, children and young people may experience changes in thinking, behaviour, emotional state and physical activity. The Australian Child and Adolescent Trauma, Loss and Grief Network identifies that common immediate/short-term reactions and behaviours may include:

<table>
<thead>
<tr>
<th>Reactions/behaviours</th>
<th>Emotional distress</th>
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<tbody>
<tr>
<td>feeling shocked</td>
<td>crying, feeling down</td>
</tr>
<tr>
<td>asking lots of questions about the event and the future</td>
<td>anxiety</td>
</tr>
<tr>
<td>frustration, acting out</td>
<td>sleep troubles</td>
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<td>outbursts of distress</td>
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• relationship difficulties with peers and others
• absence from school
• separation problems such as clinging
• changes in thinking and learning, such as returning to a behaviour typical of a younger child, trouble concentrating, difficulty with organisation and difficulty with schoolwork.

• feeling grumpy and losing temper.

Physical problems
• headaches
• upset stomach
• muscle aches and pains
• lethargy.

Research shows that the responses of children and young people will also vary depending on prior exposure to trauma and a range of vulnerabilities such as those identified earlier.

It is important to note that it is normal for children and young people to show some changes in behaviour, or difficulties managing emotions immediately in response to situations such as the current pandemic.

How to support the wellbeing of children and young people during the COVID-19 pandemic

Overall approach

Previous national and global events suggest the majority of children and young people will recover from an experience such as the COVID-19 pandemic without needing specialised support. Australian researchers have therefore suggested that an overarching stepped response is appropriate to cater for varying impacts on different groups of children and young people.

Universal approaches: At the initial level, wide-reaching responses with general information on how the wellbeing of children and young people can be supported and promoted during the pandemic and recovery efforts. The practical strategies outlined on Page 5 have been developed as a universal approach.

Targeted approaches: This intermediate level involves targeting initiatives to areas of life and people with the greatest engagement with children and young people, and children and young people themselves – such as school-based initiatives, resources for primary health care and social service professionals and parenting support. These initiatives can provide specific advice relevant to the context, as well as support to identify children and young people who may need more specialised services to assist their recovery.
Specialised approaches: This most intensive level involves specialised initiatives to reach those children and young people requiring specific supports to assist their recovery. Particular attention should be paid to the most vulnerable children and young people.

Throughout all phases of the response, it is critical for organisations to be guided by the National Principles for Child Safe Organisations as they adapt their service delivery methods (e.g. through online platforms), and as children and young people re-engage with regular learning and other activities outside their homes.

Experience from other international crises has shown that children and young people can be more vulnerable to abuse from organisations and others outside their home during times of upheaval such as these.

Practical strategies

The following information draws on the universal rights of children and young people and the work of various organisations and researchers with expertise in child psychology, child participation, disaster management and clinical and service delivery expertise in post trauma situations. These strategies are important because they can help resolve concerns of many children and young people without the need for more specialised support. Families and community members should also consider the advice provided in the coronavirus response page on ccyp.wa.gov.au in order to build their capacity to recognise and respond to the needs of children and young people at this time.

1. Help children and young people understand what has happened and why, including giving facts according to their age, specific needs and answering questions.
2. Ensure children and young people feel safe and respected. The presence of a responsive and caring adult is the most important factor in recovery. You can approach this by thinking about 3 Rs:
   a. Reassure children and young people about their safety and that of loved ones and that it is normal to have reactions to a situation like this. You can also share stories of hope and resilience (e.g. people helping each other or animals). Because children and young people are tuned into adult reactions and emotions, it is also important to seek support yourself, if needed, to retain the capacity to be responsive.

b. **Routines**: as much as possible maintain or reintroduce predictable routines (e.g. sleeping, eating, learning, playing). As children and young people re-engage with usual activities outside their home, parents and carers can check if organisations are child safe, using the Commissioner’s [Child Safe Checklist for Parents](#).

c. **Regulation** of emotions: make time for emotional ‘check-ins’ and support children and young people by providing suggestions to help them manage difficult feelings (e.g. deep breathing, physical activity or quiet time); including chatting about what has helped them to manage these before.

3. Promote connectedness through links with family, friends and other support networks:

   a. Virtually connect with extended family members and friends regularly, with caregiver support to ensure online safety.

   b. Promote opportunities for children and young people to engage in age-appropriate play with their peers, initially virtually and transitioning to face-to-face interactions in line with government advice. It can be a helpful recovery strategy for peers to talk and share their experiences, reactions and solutions with each other.

   c. Check on the wellbeing of and offer support to other local families with children by reaching out to them.

4. Engage children and young people in decision making about their own recovery and that of their family and community. Not only does this support social connectedness, but giving children and young people a voice in recovery efforts is important in its own right. Children and young people have the capacity to make meaningful contributions to community level recovery efforts. Their engagement has multiple positive effects, including for their mental health and wellbeing as well as ensuring their safety in organisations and that recovery programs reflect what is meaningful to them.

5. During stressful times, taking care of basic needs for shelter, healthy food, warmth and rest is essential to protect children and young people’s wellbeing, particularly for those in families facing economic instability and job loss. Impacted families, along with people and organisations who are connected with them, can explore local support service options and make enquiries through their networks. It is also important that children, young people and their families who were accessing specialised support services prior to the pandemic are able to continue to do so. For example, the delivery of therapeutic supports or specialised health services may need to be adapted to ensure they remain available to those who rely on them.
References and acknowledgements

The following researchers and organisations have directly informed this research summary.


