Building Resilience in Children during COVID-19

Carla Hearl Morton, PhD
******@***gmail.com

The COVID-19 pandemic has some potential positive outcomes, including opportunities to increase resilience in children.

The COVID-19 pandemic has resulted in death and serious illness for millions of people. Frustratingly, many of these individuals suffered and died because mitigation efforts, which should have been sensible scientific discussions, became culture wars. The pandemic also brought into sharp focus societal inequities. Indeed, while we have all been in the same storm, we have been in very different boats. Some individuals continue to barely remain afloat while clinging to flimsy rafts.

In addition to the physical effects some have experienced due to COVID-19 infections, many have experienced a decline in psychological well-being resulting from new stressors as well as worsening symptoms of pre-existing conditions. Children, in particular, may be at risk for mental health difficulties because of their own emotional distress as well as increased stressors within their families. However, in spite of the various losses that many of us have experienced over the past year, some opportunities for growth exist.

Benefits of Resilience

The challenges that we have faced over the past year have demonstrated the importance of resilience. Resilience is the ability to adapt to difficult situations and can reduce the risk of developing mental illness. In addition to psychological benefits, resilience can improve recovery from, and ability to manage, physical illness or injury. While we all will experience some trauma during our lives, resilience can enable us to more effectively cope with those events. Although some individuals are innately more resilient, resilience can also be nurtured; the COVID-19 pandemic offers multiple opportunities to teach these skills to children.

Ways to Teach Resilience

One way to teach resilience is by maintaining hope that things can get better. None of us knew what to expect when the pandemic began and societal reactions varied immensely. While some people felt certain that we would never return to “normal,” others have continued to deny the existence, or at least, the seriousness of the pandemic. Nevertheless, scientists immediately began studying the virus to learn the best ways to treat the illness and prevent it from spreading. Hope is the core of science and the scientific method exists so that we can develop solutions to difficult problems. Children should be taught that, while not every situation will turn out the way they want, hope is more productive than despair.

Even with an optimistic outlook, we all have negative emotions sometimes, and those feelings should be validated. Feeling sad, frustrated, disappointed and angry are all valid emotional reactions to events over the past year. Children need to know that “big feelings” are normal. However, children can also be taught more productive ways to manage those feelings. Although options for healthy coping strategies may still be limited, alternatives should be considered. For example, even if it must be over the Internet, talking to a friend can be helpful. Creating a piece of art can also be an excellent way to express strong emotions. Physical activity, even if it is running around your home and not with your sports team, can also be a productive coping strategy.

Another way to teach resilience is by encouraging prosocial behaviour. The effect of our behaviour on others was exemplified by mask-wearing during the pandemic. Though we have all seen selfish behaviour by some, we should emphasise that many other people have been wearing masks because they care about the welfare of those in their communities. In addition, many people, including children, have helped their more vulnerable neighbours stay healthy by running errands for them.

Although children can feel helpless when problems arise, we can encourage them, even in small ways, to help when they can. We often develop a sense of purpose as a result of significant personal experiences. Thus, the potential for a child today to help society in the future can be emphasised. After their experiences during the pandemic, this generation may ultimately produce many brilliant virologists, remarkable public health professionals and extraordinary communication technology experts.

While we should encourage critical thinking to solve problems, we should also teach children that some problems cannot be solved. Despite our planning, things do not always work out as we wish and change is inevitable. However, we can teach children to accept change and learn new ways to adapt. Still, we should be open to the possibility that challenges will lead to solutions that work better than the status quo. The closing of school buildings has become emblematic of disruption caused by the pandemic and many individuals have insisted that in-person academic instruction resume (often to justify the premature re-opening of businesses).

Students typically benefit from being inside a classroom, which can facilitate group learning and enable children to develop social skills. Students with special education needs, who are at greater risk for academic declines, may be particularly disadvantaged by the virtual instruction setting. However, online education can actually be preferable in some circumstances. Some students who do have learning difficulties benefit from virtual instruction because they can review lessons recorded by their teachers and may be better able to complete assignments when working at
a slower pace. In addition, although many students with inattention perform better during in-person instruction, other students may be less distracted by classmates and can maintain focus better during virtual learning.

Whilst peer engagement is important for young people, social demands can impede learning for children who have anxiety or social deficits (e.g. autism). Some students also have chronic or temporary medical conditions that make in-person attendance difficult or life-threatening (e.g. multiple sclerosis or chemotherapy treatment). Despite some asserting that online learning has been devastating for all students, the continued option for virtual instruction could improve academic outcomes for some students. It should not be completely abandoned in a post-COVID-19 world.

The pandemic has also necessitated long-overdue innovation in healthcare delivery. Although some clinicians had already begun to provide telehealth services, institutional support was inconsistent. However, when faced with the possibility of not being able to provide care for patients (as well as potential lost revenue) due to shutdowns, many facilities found ways to remove barriers to telehealth. Virtual visits are often more convenient for patients because of minimised travel time. It may be easier to follow treatment recommendations when medical visits do not require that a person has to miss an entire day of work, particularly for a brief check-up that would only last a few minutes. For individuals who live in areas with few providers, the availability of telehealth can mean the difference between receiving and not receiving treatment, especially when frequent visits are necessary (e.g. mental health services).

Virtual medical visits may also be easier for parents of young children who would have to find childcare or caregivers of individuals with behavioural issues that make travelling to medical visits extremely challenging. Some clinicians may also be more willing and able to virtually see patients outside typical office hours, which can also increase access to care. Finally, in some circumstances, patients may prefer telehealth to in-person visits (e.g. individuals with social anxiety).

Lessons for Children - Good and Bad

Over the past year, children have been placed in situations few could have imagined. They have learned that life can be unfair and that bad things can happen to anyone. Although all of us have experienced disappointments over the past year, adults are the ones who have done the majority of complaining. We could, and should, have been better role models for children. Fortunately, today’s children have quickly adapted to significant changes in their lives and their future challenges may seem minor in comparison.

If we are lucky, today’s children will look back on this period of their lives and remember the people who made sacrifices to help others. Hopefully, they will remember the healthcare workers who risked their own well-being to treat patients with a virus that was not yet understood.

Hopefully, they will remember how their teachers implemented new instructional techniques with minimal preparation. They will know that many scientists worked diligently to develop and test new vaccines as quickly as possible. They will have seen everyone who helped people in their community get vaccinated. When they are the adults in charge, they will heed warnings from scientists about potential threats and will better appreciate the need for preparedness. Hopefully, they will have learned, because of the mistakes made by some of today’s adults that batting together against our common enemy is much more effective than fighting a culture war amongst ourselves because of misplaced frustration.

It is our responsibility to keep our children healthy physically and mentally through the COVID-19 pandemic. However, we also have the opportunity to use their experiences over the past year to teach them resilience. Today’s children are living through a unique and difficult time in history, and we should continue to remind them that they are survivors who can make the world a better place during their lives.

Published on : Thu, 22 Apr 2021