

Covid 19 and returning to school after lockdown

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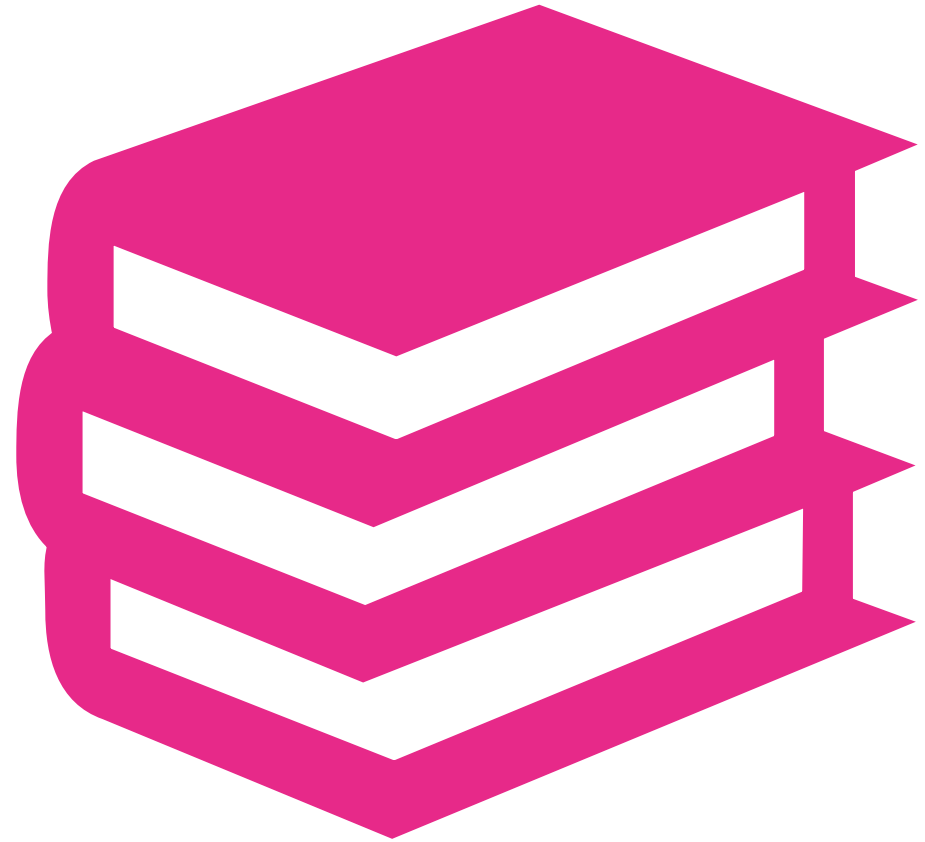
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Whararau webinar
27 January 2022

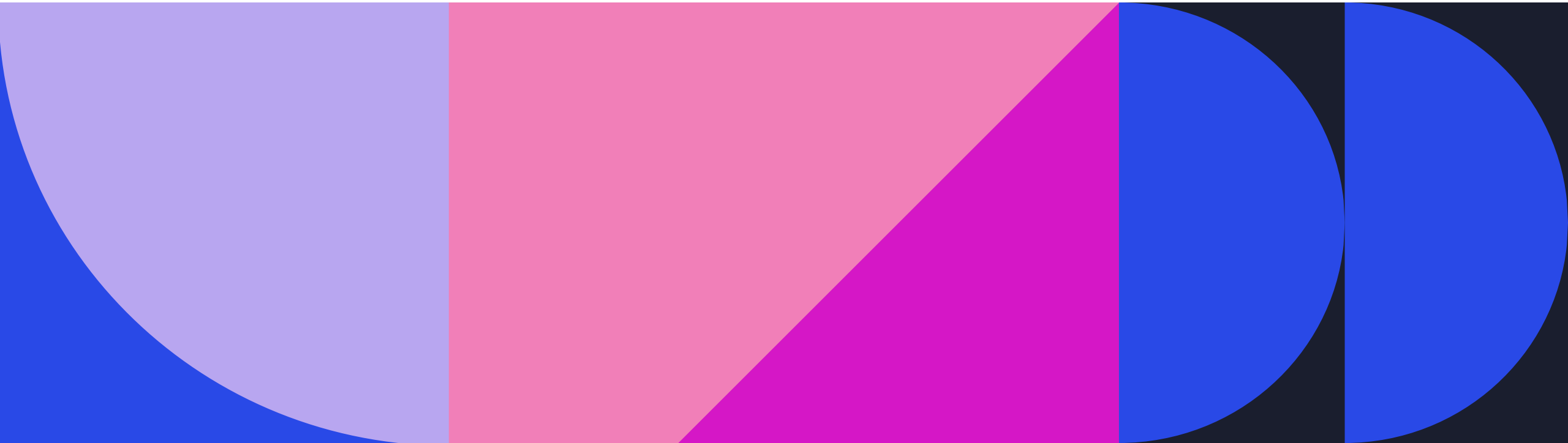


What we will cover today

- Psychosocial impact of COVID according to the international literature
- The NZ experience
- Current issues
- Supporting children to return to school and manage anxiety

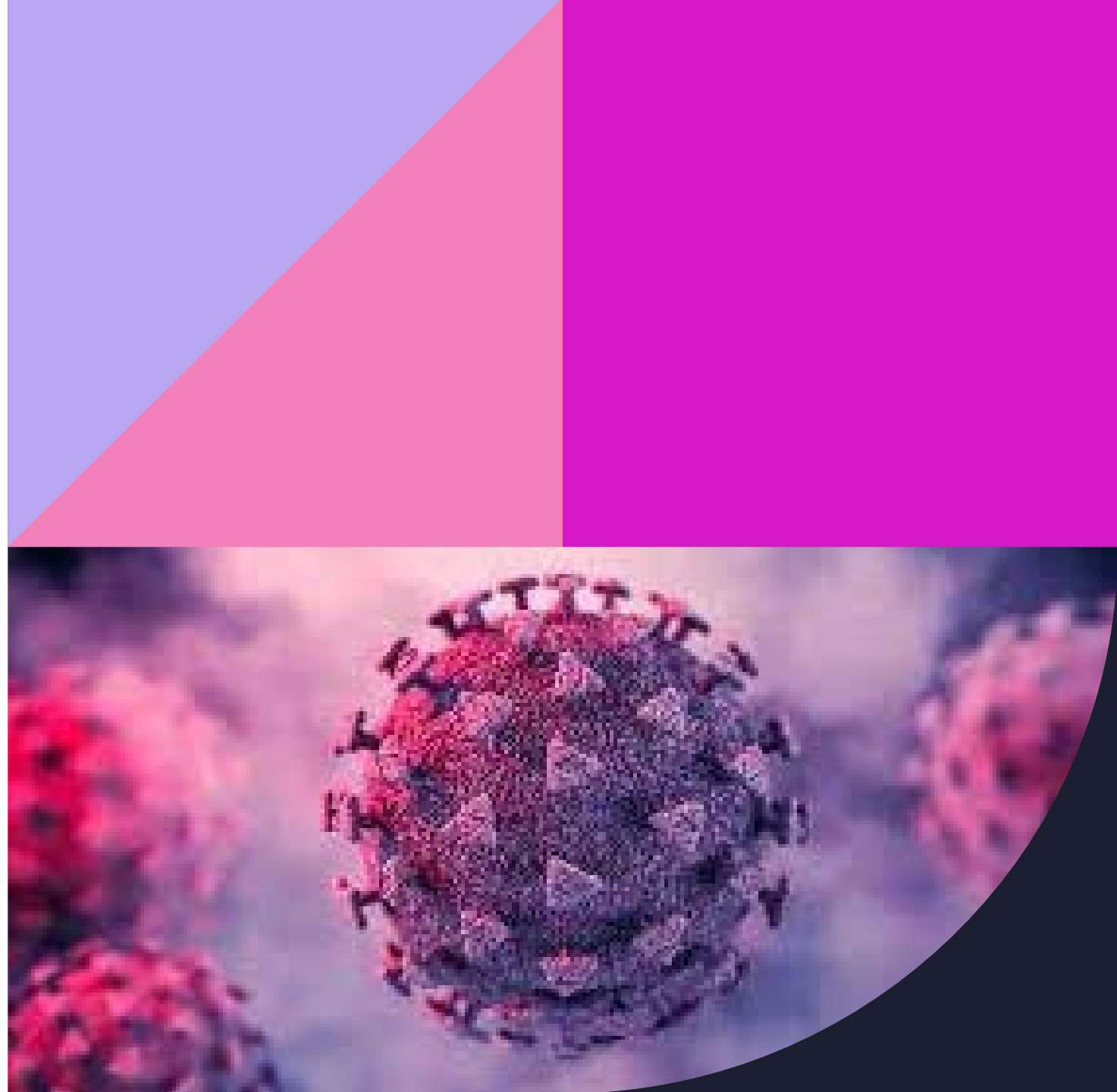


Psychosocial challenges and opportunities associated with the pandemic



The COVID-19 pandemic

- The latest in a series of pandemics - including the Spanish Flu, SARS, Ebola, MERS
- Rapid spread over the past 3 years
- Arrived in NZ in March 2020
- Multiple strains - currently *delta* (Jul 21) and now *omicron* (Nov 21) are most problematic



Psychosocial challenges

1. Heightened anxiety about health and well-being

- Real danger
- Perceived danger: amplified by social media - “cyberchondria” (Schenkel 2021)
- Existing health issues
 - Clinginess, distraction, irritability and fear of asking questions about the pandemic, more so in those who reside in highly affected regions (Jiao 2020)



Psychosocial challenges

2. Increased rates of common mental health issues

Anxiety

- Anxiety found in 18.9% - 37.4% of children and young people, worse in older age group, worse in more infected areas (Review of studies from China, Racine et al., 2021)
- Anxiety symptoms common among included studies and ranged from 1.8-49.5%. Special needs and the presence of mental disorders before the lockdown, alongside excessive media exposure, were significant risk factors. Good parent child communication was protective (Systematic review of international studies, Panchal et al., 2021)

Depression

- Almost 40% of secondary school students reported elevated difficulties and distress. Levels were greater among female students, those with few friendships or perceived poor quality friendships and those with poor connectedness to school (Statewide survey Western Australia, Thomas et al., 2022)
- Depression found in 22.6% - 43.7% of children and young people (Review of studies from China, Racine et al., 2021)
- Depressive symptoms were common in the included studies and ranged from 2.2-63.8%, respectively (Systematic review of international studies, Panchal et al., 2021)



Other

- o Increase in externalizing problems (behaviour disorders), worse if maternal stress or depression. Predictable home environment may protect against child mental health problems (US study of preschool children, Glynn et al., 2021)
- o Mental health conditions up from 10.8% (2017) to 16% (Jul 2020) across all ages (especially young females), all ethnicities. 47% young people 17-22 did not seek help for probable mental health issue. (UK survey of national health records, Nealove-Delgado et al., 2021)



Psychosocial challenges

3. Greater impact on certain subgroups

- **Neurodiverse children**
 - Families of autistic children reported increased mental health difficulties during this period mostly due to changes to routine (O' Sullivan et al., 2020, Zhang 2020)
 - Children with ADHD also struggled with these changes (Collizzi 2020, Nonweiler 2021)
 - Routines, physical activity helpful for both (Yarimkaya 2020)
- **Children with special education needs**
 - Over 80% of children with SEN were victims of psychological aggression and over 20% experienced at least one episode of severe physical assault (Tso 2022)
- **Sexual and gender minority groups**
 - Greater self-reported mental health issues and poorer sense of connection (Mitchell 2022)
- **Migrant children and young people**
 - Higher rates of anxiety and depression (Pei 2022)



Psychosocial challenges

4. Challenges associated with school closure

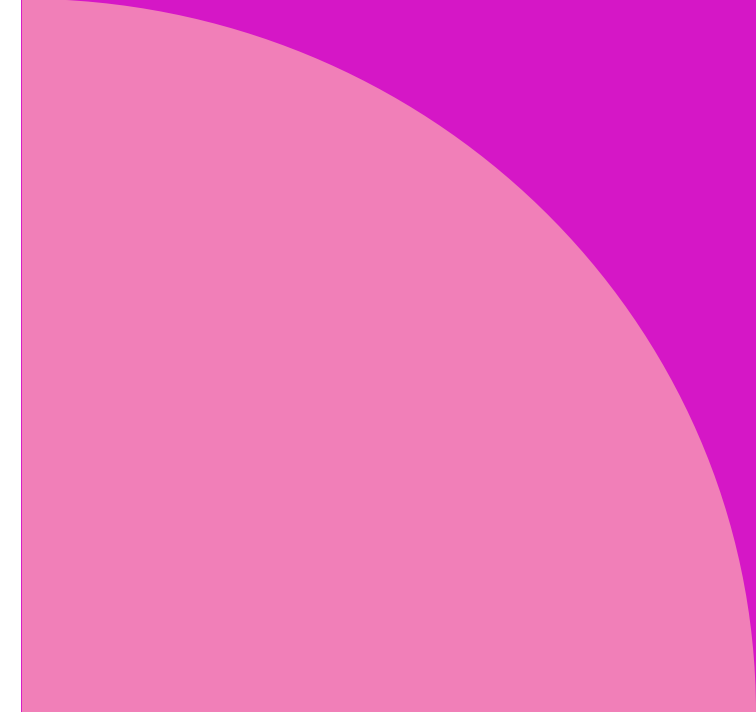
- Loss of structure, increased sedentary behaviour (Rundle 2020)
- Food insecurity, limited internet access (Dunn 2020)
- Worse mental distress and anxiety (Viner 2022)
- Reduced mental health support (Lee 2020)

5. Increased risk of family stress, domestic violence and abuse

- Greater family stress during lockdown (Bradbury-Jones 2020)
- Significantly reduced child protection assessments during lockdown (Bhopal 2020)

6. Reduced access to physical and psychosocial support

- Reduced access to primary care, well-child surveillance, ED care (Thornton 2020; Li 2020)
- Reduced access to specialist medical and mental health services (Lazerini 2020, Davis 2020)



Psychosocial opportunities

1. Reduced academic and social stress

- Less pressure to conform (Shaw 2008)
- Less exam stress (at least last year)

2. Increased time with families

- Emerging evidence suggesting that effective communication and distraction can help to protect children's psychological health (Dalton 2020)
- Domestic social capital associated with improved behaviour (Sanders 2007)
- Social connectedness associated with reduced distress and fatigue (Nitschke 2020)



Psychosocial opportunities

3. Reduced access to substances

- o Less direct access, lower financial independence (Benscshop 2021)

4. Easier access to healthcare using technology

- o Regulatory barriers to telehealth urgently amended (US Health Dept. 2020)

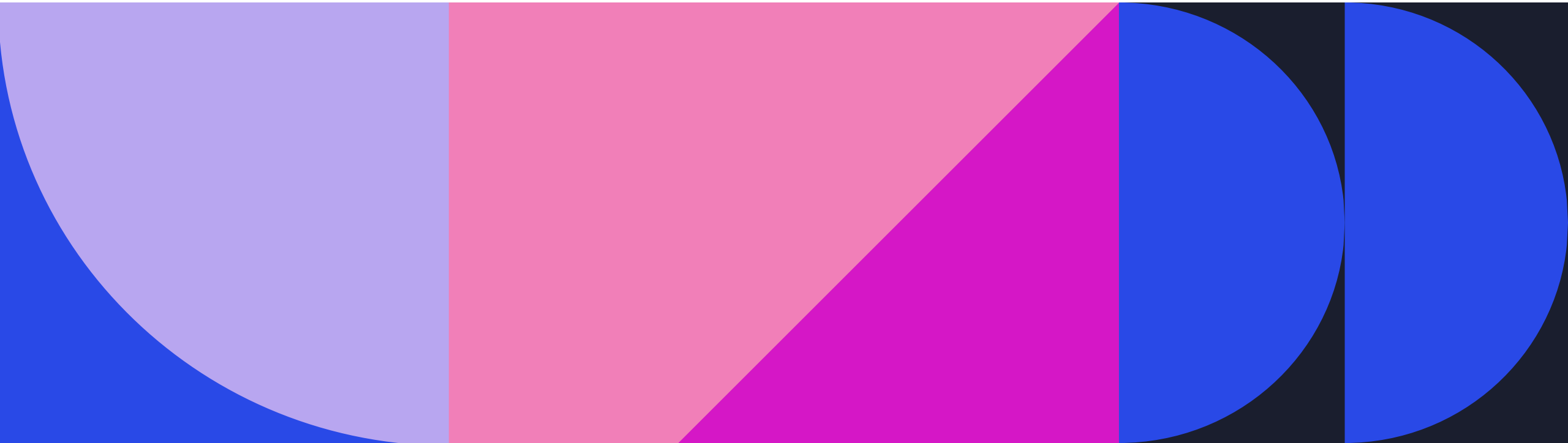
5. Opportunities to build resilience

- o Re. health concerns, family stress, missing out on schooling, peer contact, leisure activities, vaccination

Serlachius, A., Badawy, S. M., & Thabrew, H. Psychosocial challenges and opportunities for youth with chronic health conditions during the COVID-19 pandemic. *JMIR Pediatr Parent.* 2020; 3 (2): e23057.



The New Zealand experience



Early increase in anxiety

- Related to pandemic
- Amplified by social media and other forms of 'contagion'
- Worse in the context of parental anxiety



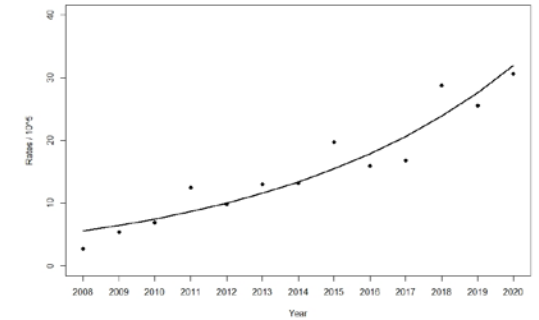
Worse behaviour among those with autism, ADHD and neurodevelopmental issues

- Similar to that reported overseas
- Related to changes in routines
- Worse in the context of family stress or hospitalisation
- Associated with carer burnout

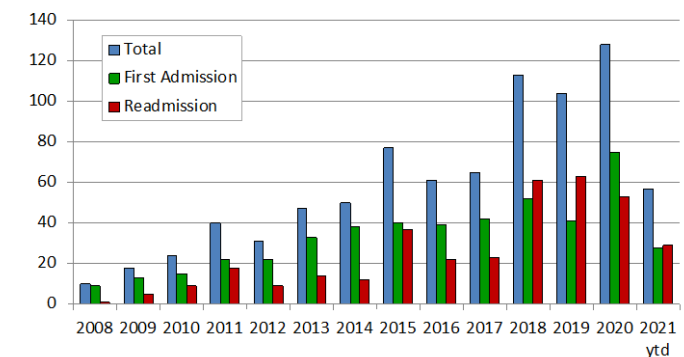


Increase in eating disorders

- Long-standing upward trend in number of young people developing eating disorders
- Surge within months of onset of pandemic
- Increased community and inpatient referrals
Up by 30-50% since mid-2020
- Delays in commencing community treatment
- Increased severity of illness/medical complications
More seriously unwell at admission
- Increased co-morbidity (especially anxiety, depression, ODD)
- Delays in transition to community care on discharge
Up to 6 months
- Increased early relapse/re-admission
- Staff burnout and turnover

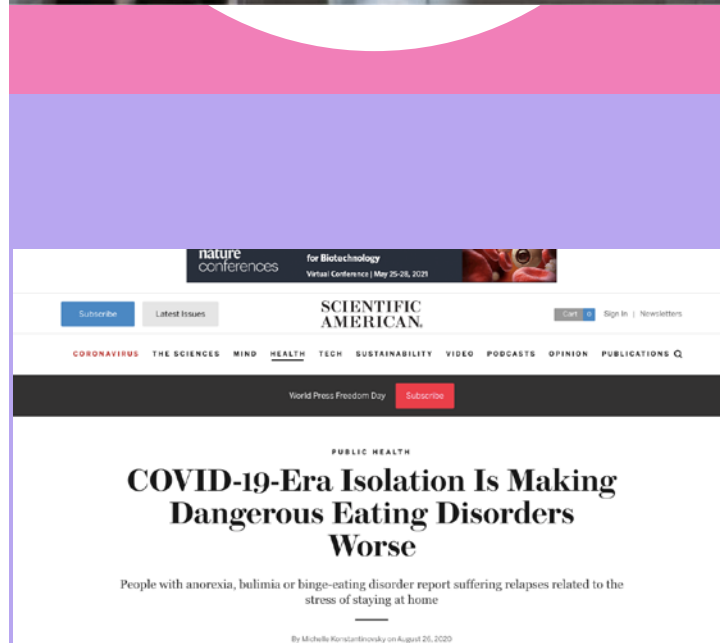
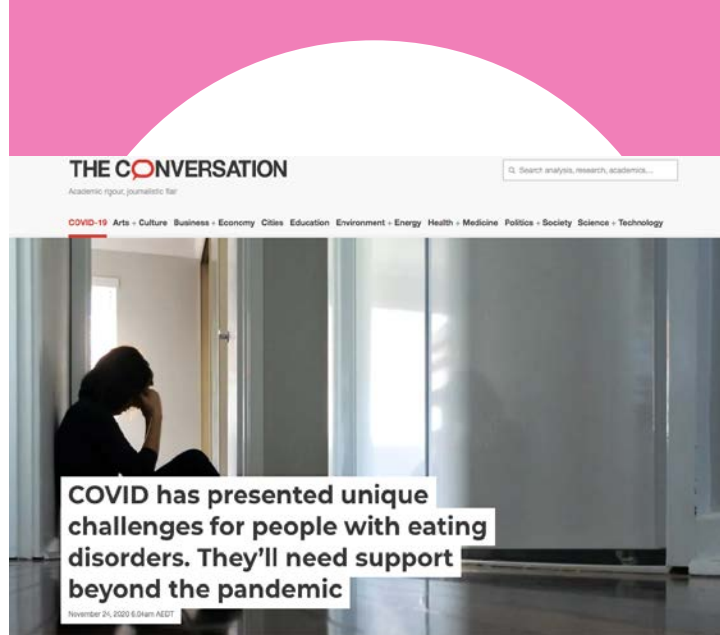


Admissions by Calendar Year



As at Apr 30 2021

- Similar situation to other countries (mostly anecdotal vs published as yet), but different approaches to management
- Increased funding provided by Australian government to deal with mental health crisis
- Recently large package of funding for NHS to improve eating disorder services in UK



Eating disorders: MPs call for government action amid pandemic rise

7 March



A group of MPs has called for government action to support those with eating disorders amid a rise in people seeking help during the pandemic.

Sheffield Hallam Labour MP Olivia Blake coordinated a letter, signed by 40 MPs and lords, asking for additional funding for mental health provision.

Eating disorder charity Beat reported a 173% increase in demand for support between February 2020 and January 2021.

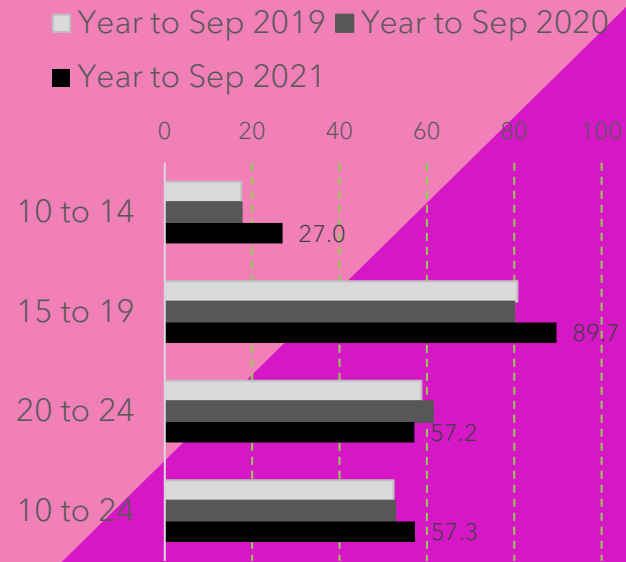
The government said it was "investing more each year" to help those affected.

NHS Digital data shows there were 21,794 hospital admissions for eating disorders in 2017-2020, a 32% increase on 2017-2018, with children accounting for almost a quarter.



Increase in Self-harm

- Clear increase in self-harm and use of support services
- CAMHS (more) flooded
- More frequent presentations to hospital
- Staff burnout and turnover
- Increased recommendation of online mental healthcare



Covid-19: Police called to 57 incidents at managed isolation facilities

Sam Shenwood · 16:52, Mar 03 2021



Nearly 120,000 people have been through MIQ facilities.

Police have been called to more than 50 incidents – including reports of self-harm and family harm – at managed isolation facilities since they opened nearly a year ago.

NEW ZEALAND

Calls and texts to mental health line almost double since 2019

23 Sep, 2021 01:14 PM

© 2 minutes to read



Lifeline says demand has almost doubled. Photo / 123rf



By: **Katie Harris**
Social Issues reporter
@katieharrisnz



More children are self-harming since the start of the pandemic. Here's what parents and teachers can do to help

September 5, 2021 8:10am NZST

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There has been a reported spike in young people attending emergency departments for self-harm and suicide during the pandemic. In New South Wales, presentations to emergency departments for self-harm and suicidal thoughts are reportedly up by 47% since before the pandemic.

In the year to July 29 2021, there were 8,489 presentations to NSW emergency departments for self-harm in people aged up to 17. This was up from 6,489 presentations in the year to July 20 2020.

A study published in December 2020 found children as young as in primary school are harming themselves intentionally.

Services like crisis help lines and emergency departments are not meeting the increased demand for mental health support.

Author

Emily Bl...

Share's

curator

from the

relevant

appoint

Partner

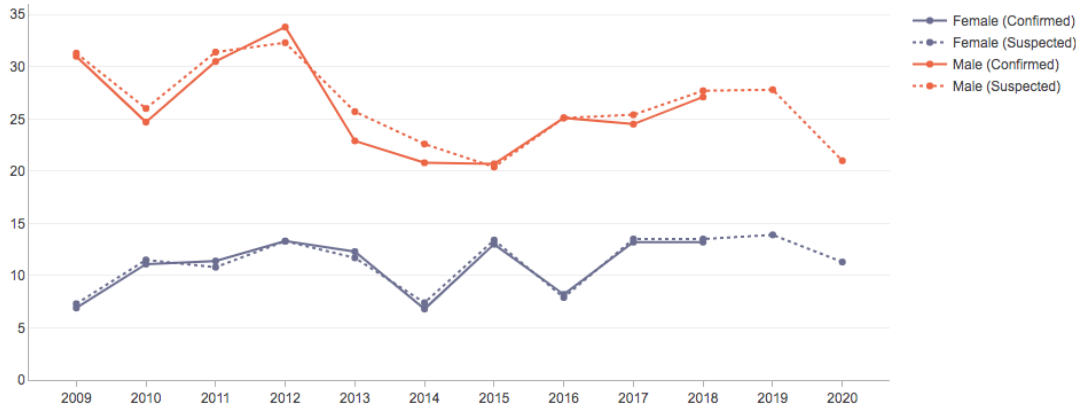
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Decrease in Suicide

- Concerns about suicide rate rising during the pandemic
- It actually went down (2nd year running) – including youth suicide!
 - ? Data fluctuations
 - ? Protective factors associated with pandemic eg. reduced access to materials, greater family/whanau support
 - ? Phase-limited

Rate of suicide deaths for all ethnic groups in the 15–24 years life-stage group, by sex, 2009–2020



Source: New Zealand Mortality Collection (confirmed suicides); Ministry of Justice's case management system (suspected suicides). Rates are age-specific and per 100,000 population.

NEW ZEALAND

Covid 19 coronavirus: 'No evidence' suicide rate up during lockdown

2 Nov, 2020 11:22 AM

Latest from New Zealand

NEW ZEALAND | POLITICS
It's a challenge, it's not popular! Minister responds to Three Waters criticism
2 Nov, 2020 03:44 PM

NEW ZEALAND
The shot van: Government gives \$2.2m for Ngāti Kahungunu-led vaccination strategy
2 Nov, 2020 03:45 PM

NEW ZEALAND
MIQ changes for health staff won't plug South Auckland gap - nurses' union
2 Nov, 2020 03:18 PM

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Covid-19: Challenge over legality of 2020 level 3 and 4 lockdown rejected by Court of Appeal
2 Nov, 2020 03:13 PM

NEW ZEALAND
Medics on scene suffers fatal blow as event industry crashes
2 Nov, 2020 01:08 PM

Shaun Robinson, chief executive of the Mental Health Foundation, says the MHF is deeply disappointed false information is circulating online. Photo / Supplied

MENTAL HEALTH

New Zealand's suicide rate drops for second consecutive year

04/10/2021 | Ireland Hendry-Tennent

Related video: Mental Health Foundation CEO Shaun Robinson speaks to The AM Show about the suicide numbers in 2020. Credits: Image - Getty Images; Video - Newshub

New Zealand's suicide rate has dropped for a second consecutive year, the Chief Coroner has revealed.

Judge Deborah Marshall released the figures to June 30, 2021 on Monday, which show 607 people died by suspected suicide, compared to 628 the year before - a decrease of 21 deaths, and a drop in the suspected suicide rate from 11.8 deaths per 100,000 to 11.6.

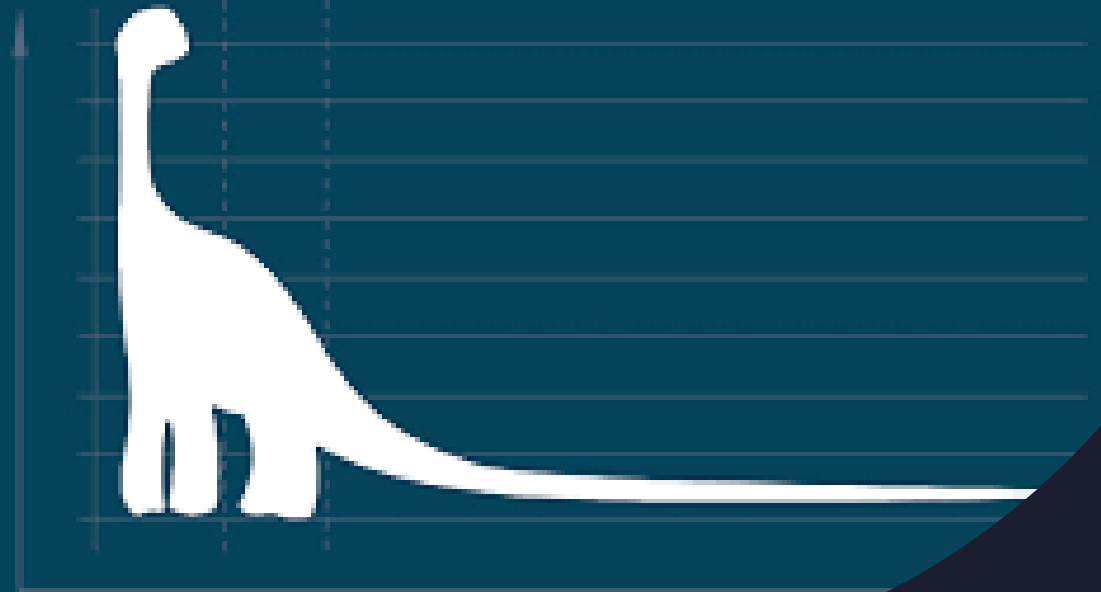
"Understanding what a change in numbers and rates from one year to the next means is difficult because these numbers and rates can fluctuate considerably," says Judge Marshall.



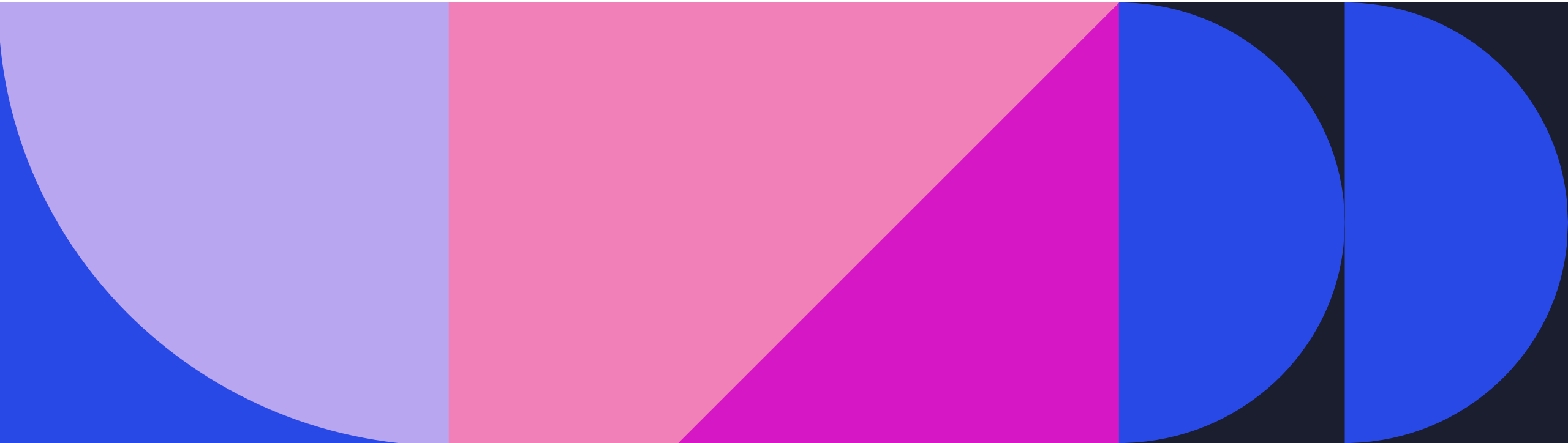
What young people in CAMHS are saying

What's to come?

- Long tail of the pandemic
- Based on previous pandemics and environmental disasters (e.g Christchurch), likely increase in anxiety, depression and PTSD
- More likely to affect those with pre-existing vulnerability and family/social issues
- Greater vigilance needed with those already linked with services



Current issues



Vaccine hesitancy

Occurs in a significant proportion of the population: 18% (UK), 22% (USA)

Different subgroups in each country:

- UK - BAME health workers > others
- NZ - young, female, less educated
 - Ethnicity not statistically associated (so ? Access issues more relevant to Māori and Pacific individuals)
 - Most commonly cited reasons: worry about future effects of vaccines (48.2%), worries about side-effects (15.6%)

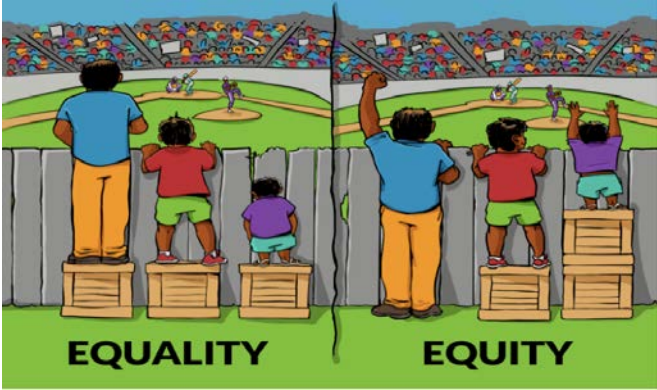
WHO recommendations:

1. Creating an enabling environment - making vaccination easy, quick and affordable, in all relevant respects.
2. Harnessing social influences - especially from people who are particularly trusted by and identified with members of relevant communities.
3. Increasing motivation - through open and transparent dialogue and communication about uncertainty and risks, including around the safety and benefits of vaccination

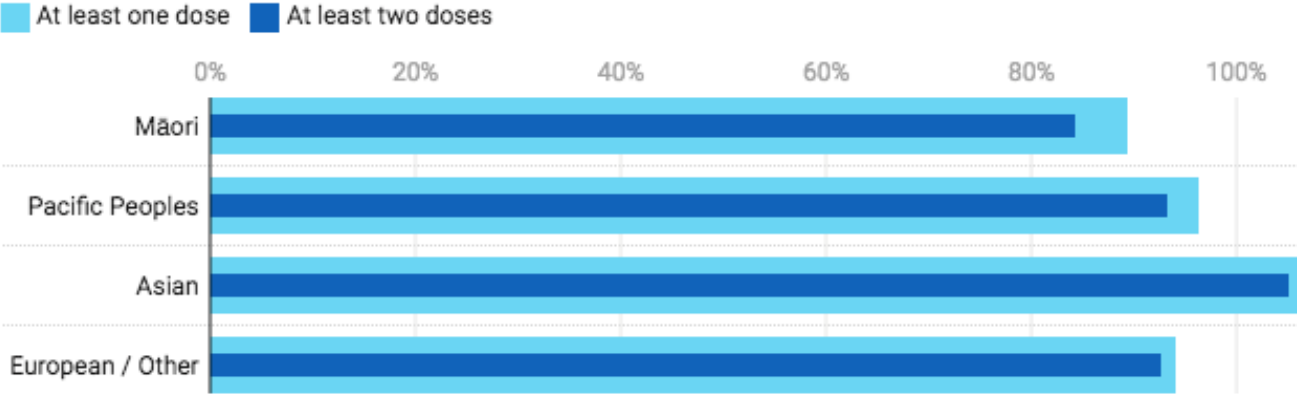


Equity

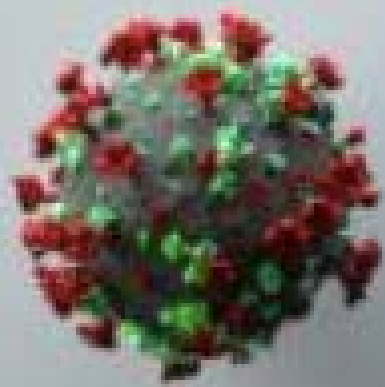
- Severe illness and hospitalization from COVID 19 expected to be inequitably distributed with worse outcomes for tamariki Māori and Pacific children
- Need to ensure equity of vaccination to mitigate these



Percentage vaccinated by ethnicity



Rates are calculated using Ministry of Health's HSU population numbers. For people identifying with multiple ethnic groups, only the first is used (ordered by Māori, Pacific Peoples, Asian and European/Other). Only includes people aged 12+



Alpha
B.1.1.7



Beta
B.1.351



Gamma
P.1



Delta
B.1.617.2



Omicron
B.1.1.529

The changing face of COVID

Delta and children

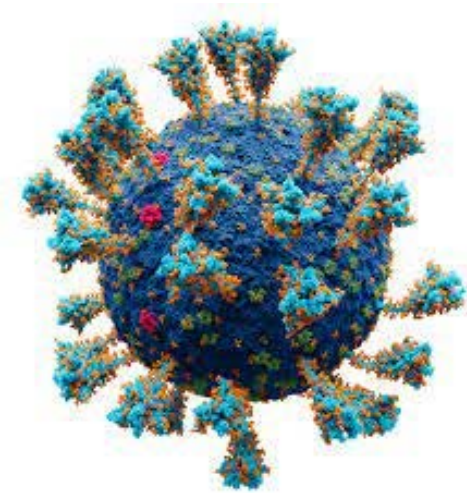
More transmissible, but not more lethal than previous variants – most children and adolescents have mild symptoms

Those with pre-existing conditions and socio-economic disadvantage are more likely to need hospitalization (1/20 vs 1/500; Tsankov 2021)

Children made up 22% of recent cases in USA, 27% of cases in NSW, 30% of cases in Victoria

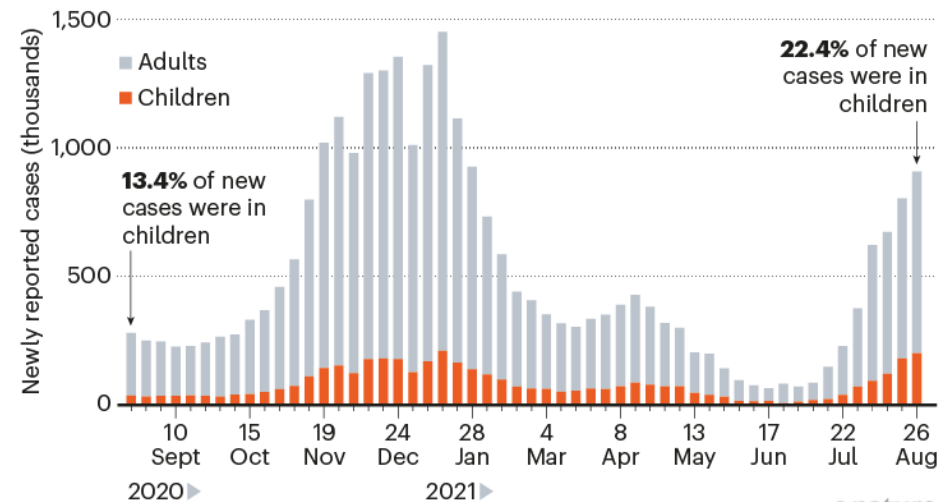
Only 1 death in 12, 597 cases <20 years (Australia; Tsankov) 1.5% NSW outbreak cases hospitalized and 0.2% of those required ICU

Little data re long COVID syndrome (fatigue, headache, anosmia, sore throat) –shorter and less severe than adults; and multisystem inflammatory syndrome 9MIS-C) – very rare



YOUNG AND INFECTED

Over the course of the COVID-19 pandemic, nearly 15% of all confirmed cases in the United States have been in children. In the last week of August 2021, just over 22% of weekly reported cases were in children, a rise that may be attributable to higher vaccination rates in adults.



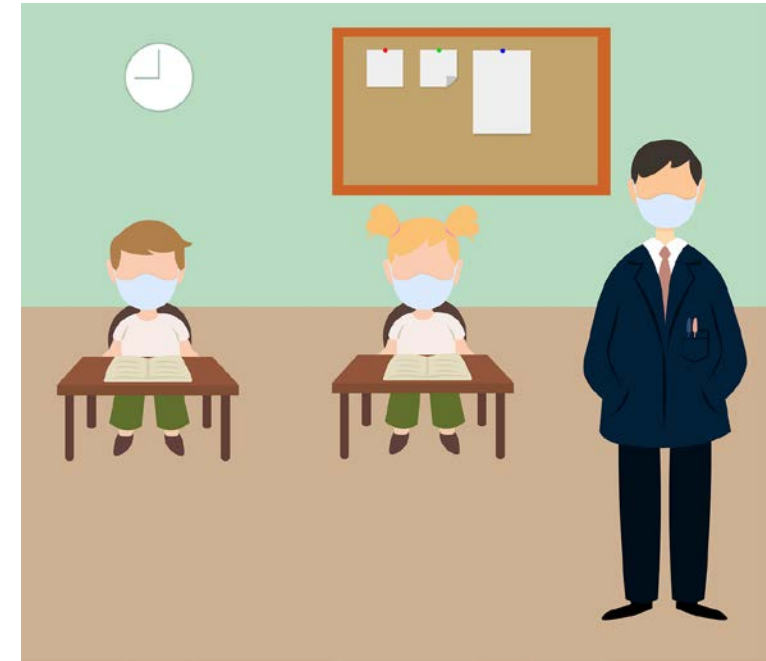
Delta and students

Early studies showed little transmission when children returned to school

With Delta, things changed:

- Increased transmission confirmed (NSW)
- Worse when face masks removed (UK)
- Transmission more of a risk for staff! (NSW June -July 2021)
 - Adult to adult 11.2%
 - Adult to child 7%
 - Child to child 1.6%

Best protection found using a combination of approaches



Omicron and children

Fever, cough, shortness of breath most commonly reported symptoms. Sore throats also more common, Loss of taste and smell less common.

UK (CO-CIN): Higher risk of hospitalization of children under 1, but lower risk of need for oxygen (12% vs 22.5% during first wave), non-invasive ventilation (2% vs 7.2%) and mechanical ventilation (2% vs 5.8%) plus shorter length of stay (1.7 vs 6.6 days)

South Africa (Cloete et al, 2021): 7.2% of children with Omicron required hospitalisation vs 4% with Delta. Most (92%) children received standard ward care, 25% required oxygen and 6% required ventilation.

USA (Wang et al., 2022): Children made up 27% of all cases. They had less than half the rates of ED visits (4.55% vs 15.22%), hospitalization (1.75% vs 3.95%), ICU admission (0.26% vs 0.78%) and mechanical ventilation (0.07% vs 0.43%)

No research data re efficacy of vaccines against omicron in children, omicron-related long-COVID syndrome



Rates of hospitalisation and death

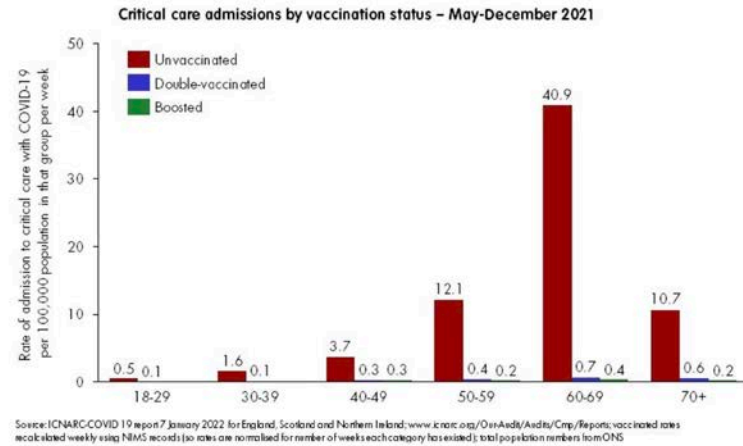
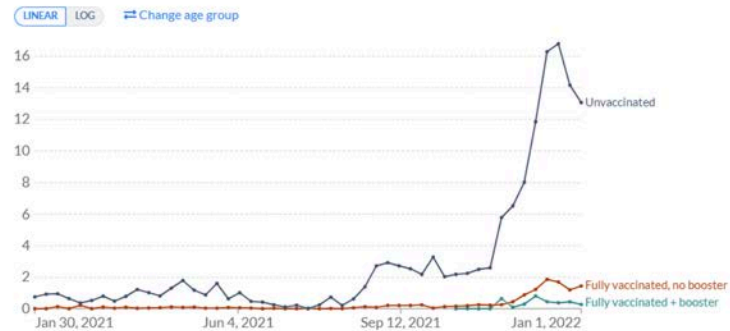


Image by [Paul Mainwood](#)

Switzerland: COVID-19 weekly death rate by vaccination status, All ages

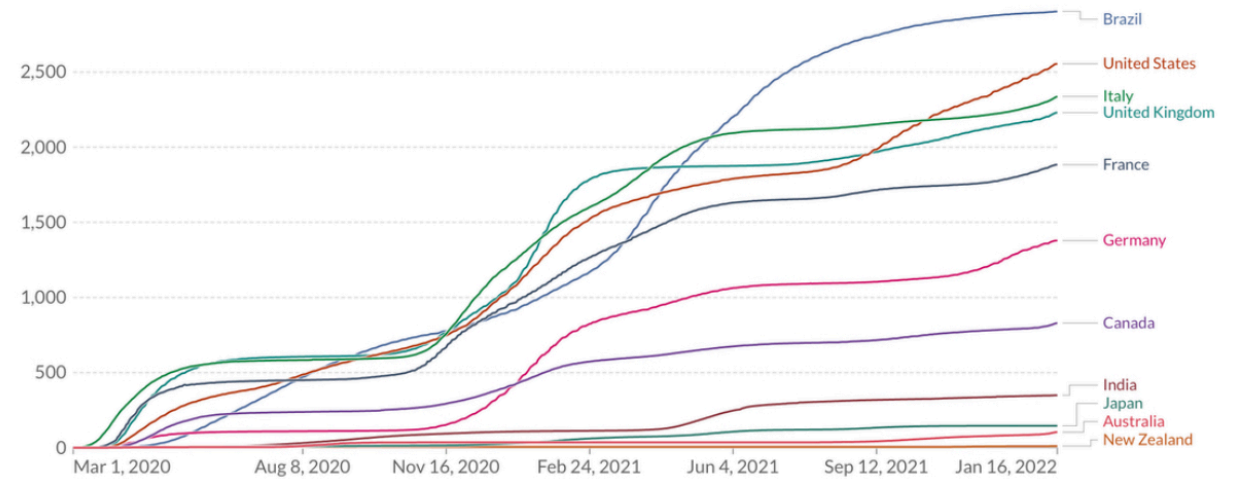
Death rates are calculated as the number of deaths in each group, divided by the total number of people in this group. This is given per 100,000 people.



Cumulative confirmed COVID-19 deaths per million people

For some countries the number of confirmed deaths is much lower than the true number of deaths. This is because of limited testing and challenges in the attribution of the cause of death.

LINEAR LOG

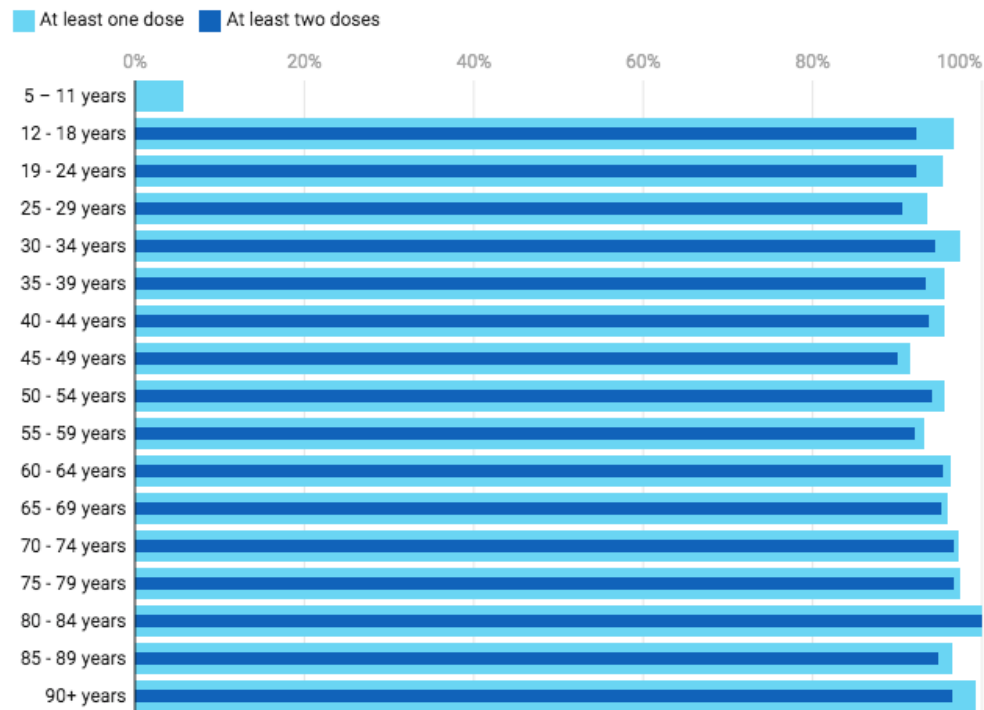


Our World in Data

CC BY

Percentage of children vaccinated

Percentage vaccinated by age



Rates are calculated using Ministry of Health's HSU population numbers.
Source: [Ministry of Health](#) (as at Jan 18) • Created with [Datawrapper](#)

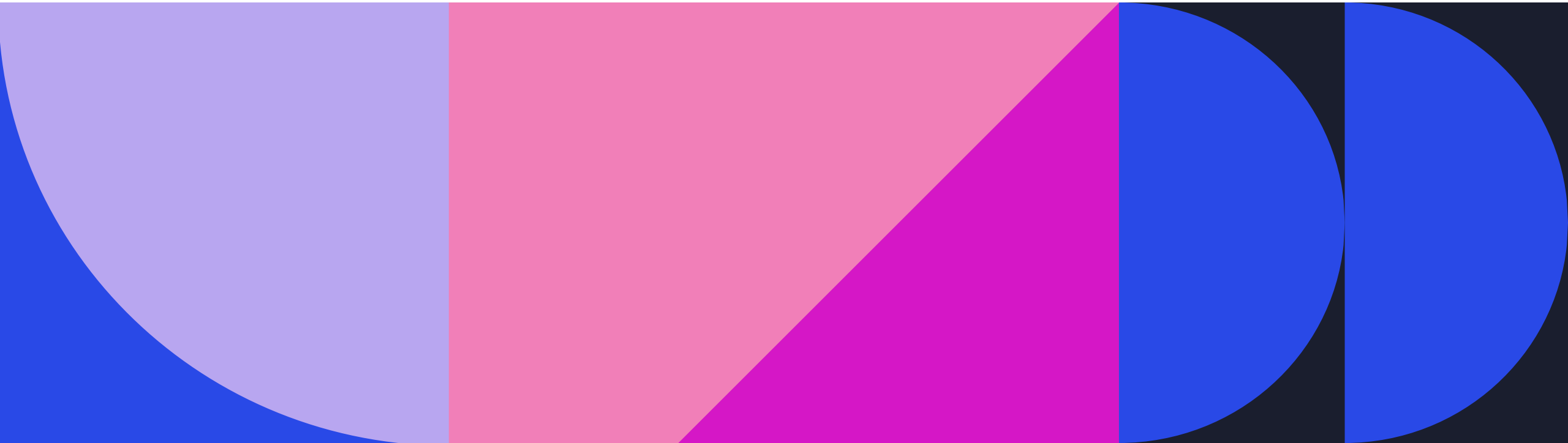
How many 5–11 year-olds have received a vaccine?

On January 17 people aged 5–11 became eligible for paediatric doses of the Pfizer vaccine. Children receive a lower dose and smaller volume compared to the adult formulation.



As at 24 January, 2022
There are 476,294 tamariki aged between 5-11 years eligible for the child Pfizer vaccine
Source: [Ministry of Health](#) • Created with [Datawrapper](#)

Returning to school



Benefits and risks of returning to school

Benefits

Social, emotional and cognitive development

Improved learning experiences and reduced inconvenience of online exams and teacher support

Improved access to food, physical and psychological support

Reduced administrative burden for teachers

Reduced burden for parents

Risks

Catching COVID-19

Passing the virus on to family/whanau'

Increased anxiety on return to school

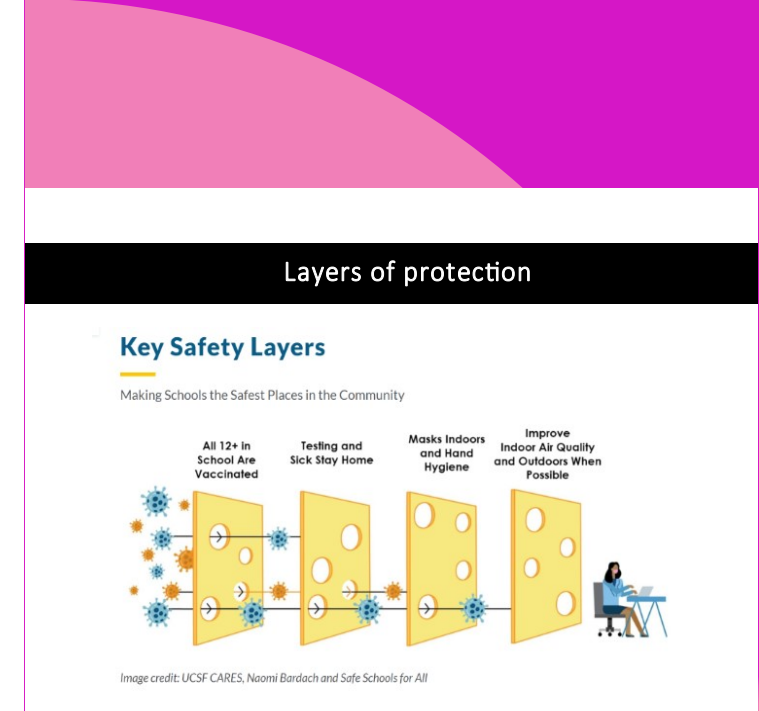


How can we keep students safe?

Key mitigation strategies

- Vaccination of students >5 and all staff
- Wear masks (currently adults, older students, optional for younger ones)
- Physical distancing
- Basic hygiene
- Ventilation
- Other measures

CDC: It is important that mitigation strategies are age-appropriate and strike a balance between infection control and enabling optimal learning and social interactions especially for children with additional developmental needs



Masks

- Source control (including during asymptomatic phase) and user protection
- Surgical masks - 85% effective against Omicron, better if good seal, single use
- Cloth masks - probably only 25% protection, but needs to be washed between use
- N95, KN95 and P2 masks most effective - 95% protection against Omicron, but need to be properly fitted



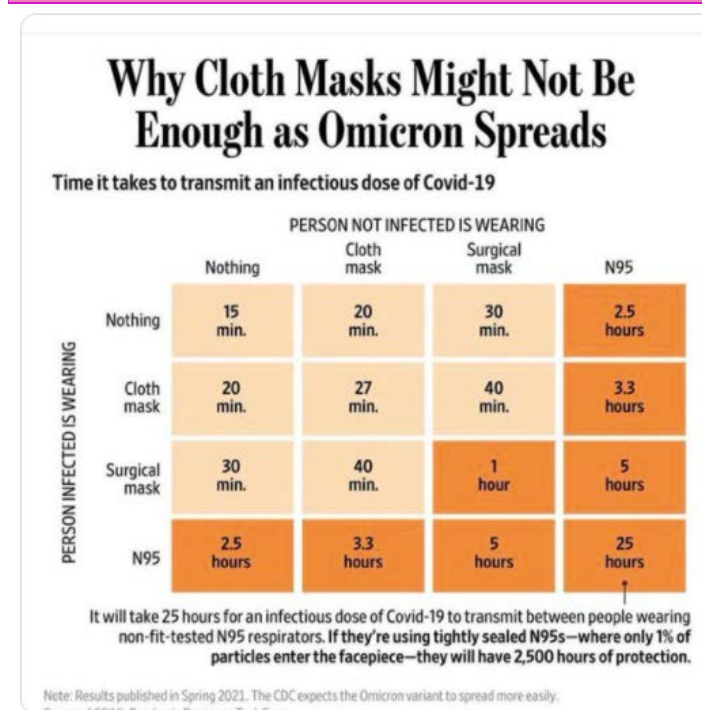
Verywell / Alex Dos Diaz

Physical distancing

- Most important between staff
- Class and staff bubbles
- Higher risk activities (singing, assemblies) outdoors - v low risk

Basic hygiene

- Hand-washing
- Cleaning surfaces
- Coughing into elbow

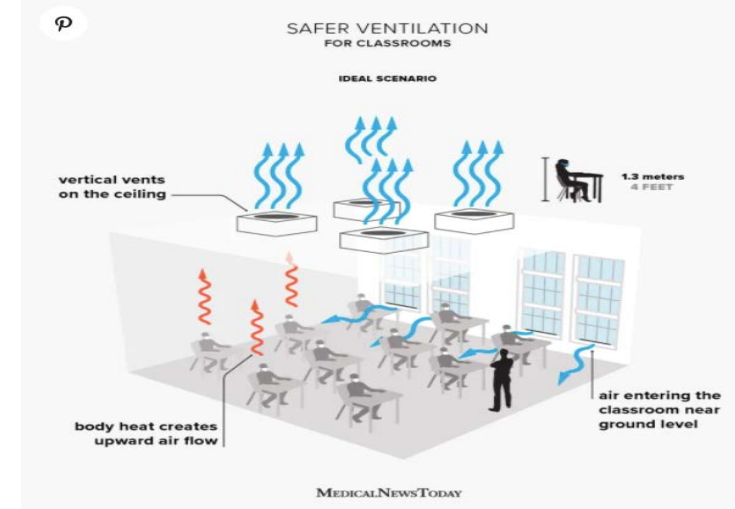


Ventilation

- o Delta and Omicron variants spread by droplet and aerosol transmission
- o Good ventilation key to reducing latter and could reduce transmission by 35% (Getting 2021)
- o Recommendations:
 - Opening windows as much as possible (even high up to reduce drafts)
 - Use air purifiers with HEPA filters (can capture 99.7% viruses and human particles)
 - Use CO2 monitors

Other measures

- o Staggered drop off/pick-up
- o Limiting visitors to schools
- o Staying home when unwell
- o Schools keeping accurate and accessible records



POLITICS / COVID-19

Government orders portable air cleaners for schools - Minister

12:47 pm today

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The government is ordering 3000 portable air cleaners, to ensure schools are ventilated enough to help prevent the spread of Covid-19.



COVID-19

Sign up for daily emails

Full coverage

RELATED STORIES

Covid-19: NSW, Victoria introduce new measures for schools

28 Jun 2020

NSW and Victorian governments have unveiled their best-kept school plans, with a focus on rapid antigen tests and masks, while they remain adamant schools will reopen on Friday.

Delaying school reopening could cause more harm than Covid-19 - paediatricians

12 Jun 2020

Paediatricians warn that children could suffer more from widespread school closures than any possible exposure to coronavirus in the classroom.

Regional and national efforts

MoH and MoE - joined activities to support schools and provide them with necessary resources

Each school developing risk mitigation and outbreak management plans

Some RTLB clusters offering additional support

New MoE-funded well-being coordinators being asked to focus on return to school

Cases notified to Public Health Units (PHU) and contact tracing, surveillance testing +/- school closures undertaken with their support

- o Casual contacts: Monitor for 10 days, test if symptomatic
- o Close contacts: Self-isolate for 10 days, test immediately and on day 5 and 8



MoE approach to supporting children's mental health through the pandemic

- 2020 Urgent Response Fund
 - One off \$50m nationally (of which \$14.5m in Tāmaki Makaurau)
- Counselling in Schools
 - \$75.8m over 4 years nationally
- Expansion of Mana Ake initiative into the Northland, Counties Manukau, Bay of Plenty, Lakes, and West Coast District Health Board (DHB) regions to provide support to learners in these regions.
- 2021-22 Re-engaging Learners in Auckland
 - Includes \$1.5m for counselling support, targeting years 6 to 9.
- Ministry's specialists – psychologists working directly with whānau

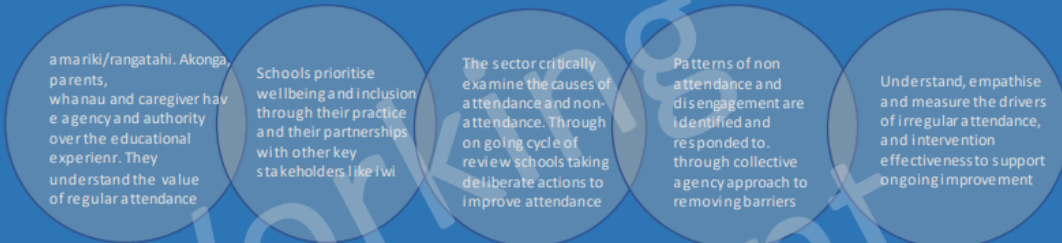




TĀMAKI MAKAURAU ENGAGEMENT AND ATTENDANCE STRATEGY

Ko te arotahi mō te Tāhuhu o te Mātauranga I Tāmaki Makaurau

We partner with whānau, iwi, education providers, local agencies and community providers to create the conditions for tamariki and rangatahi Māori to experience success with their education. We will support and enable an education system in Tāmaki Makaurau that is mana enhancing, focuses on wellbeing and engagement in learning, is free of racism and listens to make changes for tamariki and rangatahi Māori



Mana Ōrite, Te Ao Māori, Whanaungatanga, Te Ira Tangata, Rangatiratanga, Te Hāngaitanga

Goal 1: Understanding the value of regular attendance	Goal 2: Prioritising Wellbeing, Inclusion and partnerships	Goal 3: Critically reflect and examine causes	Goal 4: Collective approach to remove barriers	Goal 5: Understanding drivers for change Improvement
<p>Key Themes</p> <ul style="list-style-type: none"> Iwi, whānau and community at the heart of approach: "There is a lot of anxiousness in the Pacific community about returning to school" Direct lines of communication between decision makers and those delivering on the ground 	<p>Key Themes</p> <ul style="list-style-type: none"> Focus on ensuring our processes are better configured for equity Focus on how we partner meaningfully, particularly in relation to honouring Te Tiriti Address the growing digital divide in education Provide investments that are critical to long term wellbeing - social, economic, cultural 	<p>Key Themes</p> <ul style="list-style-type: none"> Improved transitions at all ages and levels, with higher risk among certain year levels Covid-19 having a negative impact on attendance and engagement of learners Relinquish power to other agencies and providers 	<p>Key Themes</p> <ul style="list-style-type: none"> Māori at the table at the beginning so true notion of partnership and recognition and valuing of different knowledges. This is demonstrated by MoE relationship teams connecting directly with iwi, Taumata Kōrero (Māori providers) Māori Medium leadership teams Focus on power sharing relationships and how decision making happens Utilise the multi-agency connections through the Auckland Regional Leadership Group and others for collective design Coordinate and connect existing community agencies to utilise assets by collective design Build a cycle of trust and empowerment In the Resurgence, Māori and Pacific funding programmes, - contract 49 Pacific providers and 17 Māori providers to work closely with families and learners return to school and remain engaged 	<p>Key Themes</p> <ul style="list-style-type: none"> "We are well connected to Pacific students and their families. It is important that we are not just asking students for their thoughts and opinions about various topics/issues/barriers etc... but that we start shifting the whakaaro and fono to action." Our Māori Leaders have heard that we are prioritising Māori. They have said that they want to see that demonstrated in our communications and processes that are developed to respond to the Covid-19 environment. They have challenged us to 'walk the talk'.

Attendance Plan

- Interagency approach
- Support Safe Transitions
- Leverage Community
- Partnerships Create Shared Value

2021-22 Re-engaging Learners in Auckland:

- \$6m Māori and Pacific whānau
- \$3m resurgence funding for schools
- \$2.2m Te Kura Programme
- \$1.5 million additional counselling support
- \$1 million for students with learning support needs
- \$630,000 Check and Connect
- \$600,000 Attendance Service

Anxiety and returning to school

What

- School anxiety/general anxiety
- Covid-19 related anxiety

Why

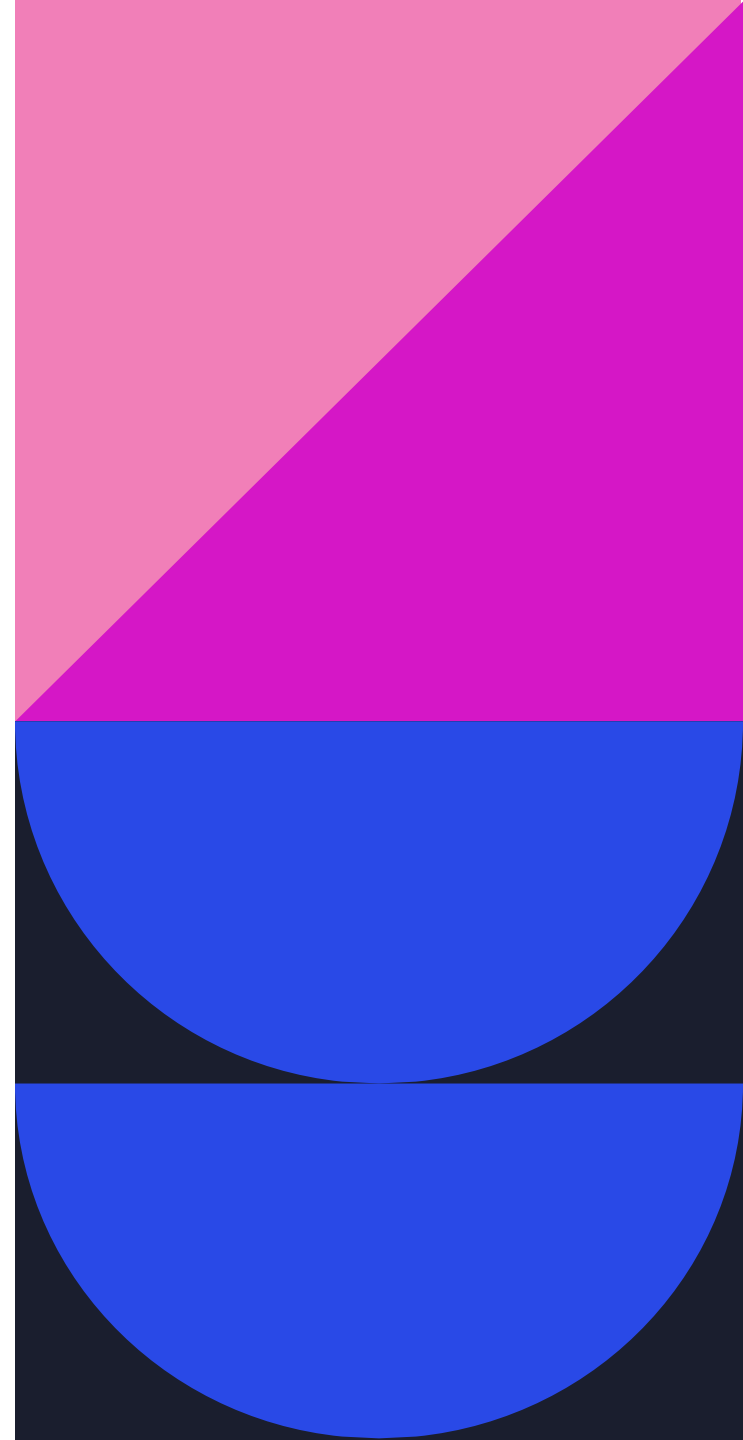
- Change
- Ongoing Covid-19 outbreaks (change, uncertainty)
- Underlying or pre-existing mental health issues
- Family factors
- Multiple stressors



What can whanau do to help anxious children?

Listen and talk

- Be available, create opportunities to talk
- Emotion coaching
 - Acknowledge, name and validate feelings
- Be matter of fact and give factual information
 - Developmentally appropriate
- Add in positive/reassuring/brave perspective



What can whanau do to help anxious children?

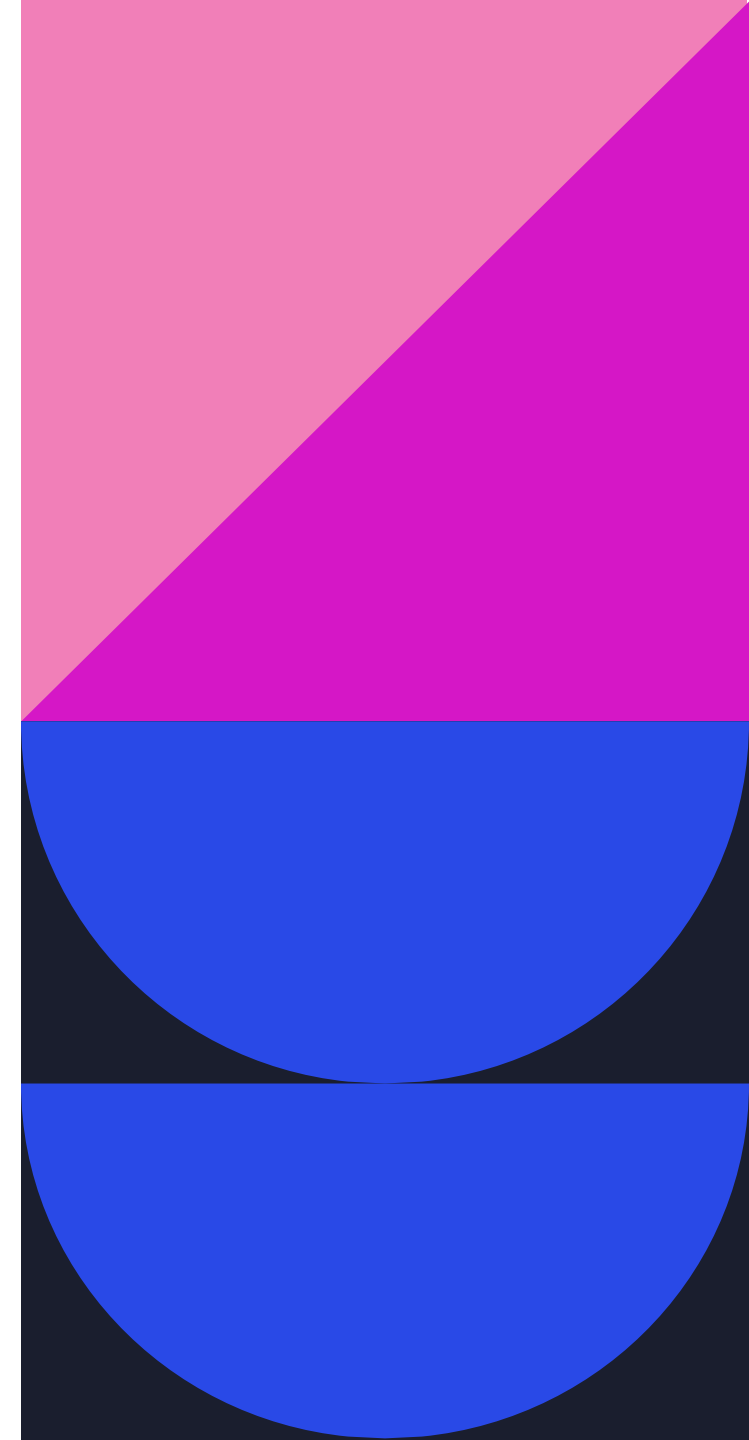
Planning and preparation

(Reduces anxiety in and of itself , is also gradual exposure)

- Check their uniform still fits!
- Visit the school and introduce to a 'buddy'
- Get to know the teacher
- Contact with friends who are school/classmates
- Covid-19: Risk reduction strategies
- Covid-19: Have a family plan

Self-care and be a good role model!!

- Self-care
- Manage own stress and anxiety
- Use helpful coping strategies



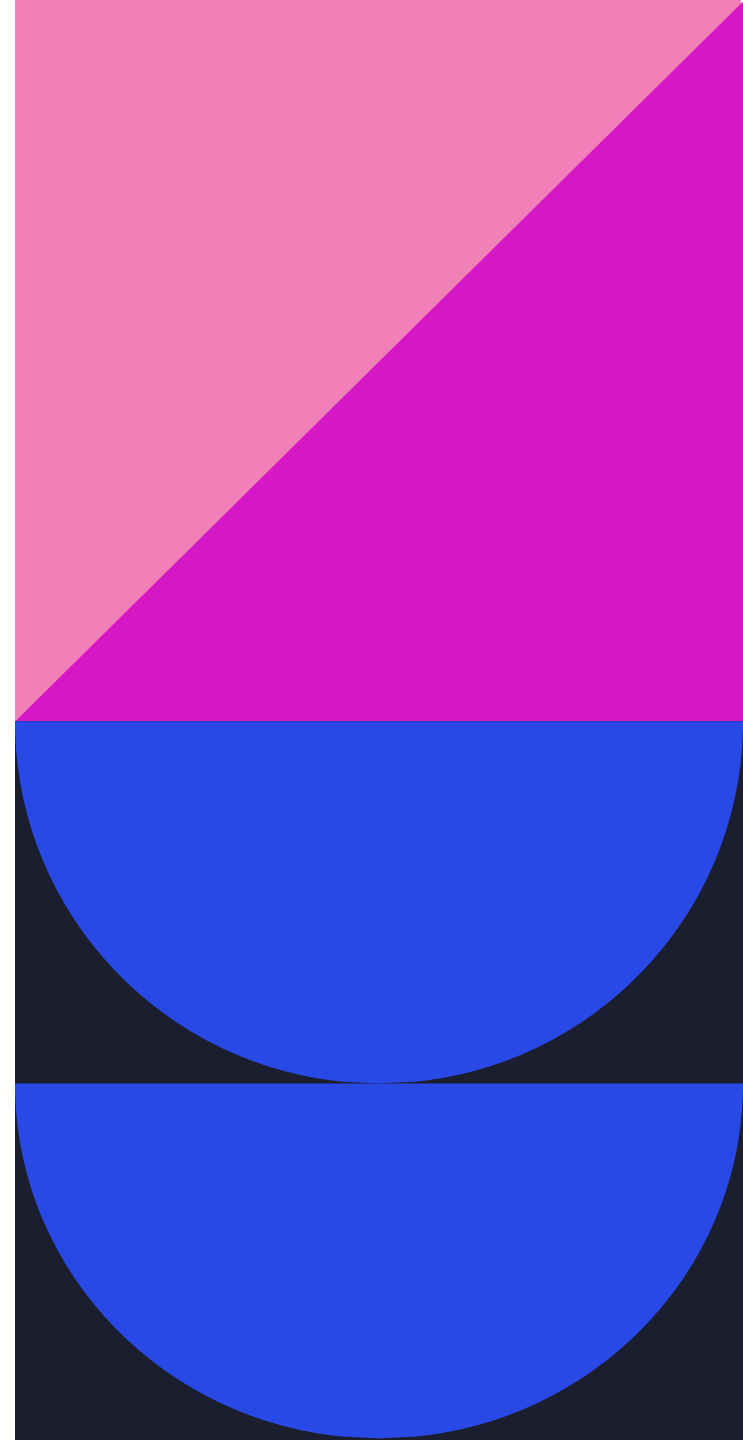
What can whanau do to help anxious children?

Teach/coach coping skills

- Calm breathing
- Mindfulness
- Tolerating uncertainty
- Realistic thinking/"tricky brain"
- Problem-solving

Attend to the behaviours you like

- Brave behavior
- Expressing feelings appropriately
- Using coping strategies
- Resilience

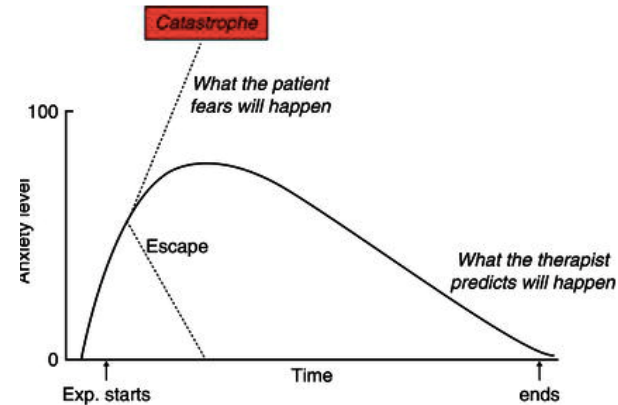


What can whanau do to help anxious children?

Gradual exposure: Challenge Avoidance!!

- Visit school
- Practice runs
- Shorter days
- Consider using rewards

Set them up to succeed and have faith that they can do this (and communicate this to them)



How can schools support students' psychological well-being

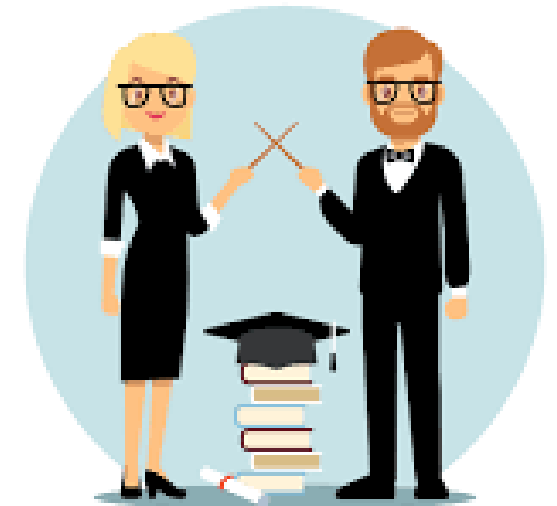
Key tips

1. Check in, set goals for return while still at home (to encourage positive forward thinking)
2. Keep familiar routines
3. Promote a safe space for discussion
4. Provide safe spaces and trusted adults for those who are worried
5. Identify a process for questions (set times, not all the time/not at all)
6. Continue to work closely with families
7. Take a whole school approach to improving the well-being of students and staff

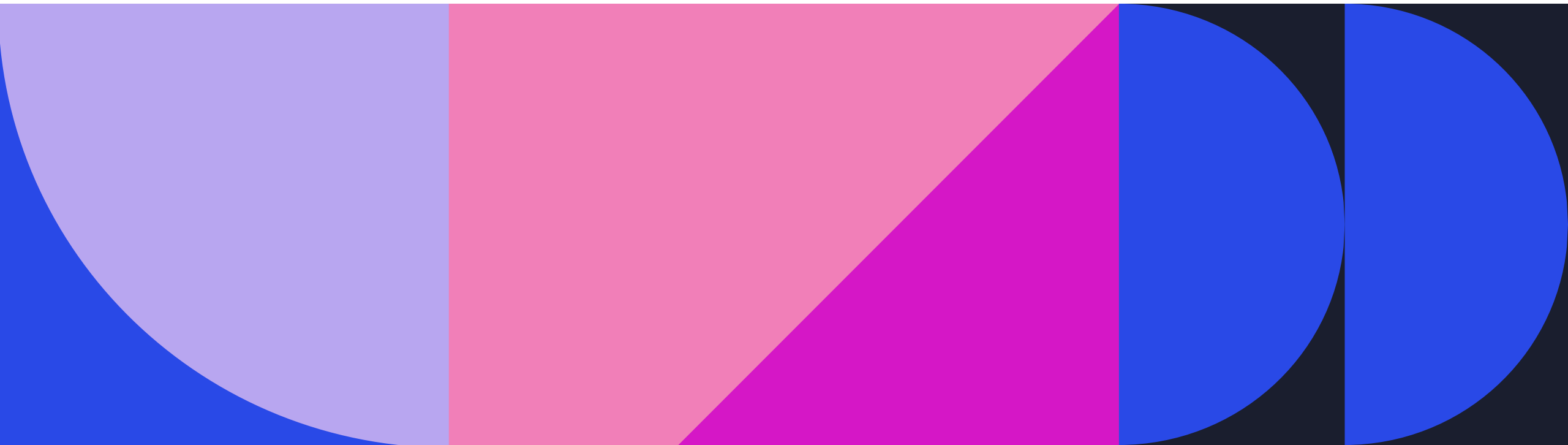


What about teachers?

- Anxiety about returning to school - especially if uncertain about safety measures
- Cumulative stress of transition to school, online classes, personal and family situations
- All teachers should be supported via staff well-being initiatives
 - Regular staff meetings
 - Additional measures
- Those in need should be assisted to access necessary help without discrimination



Useful resources



Return to school

NZ resources developed by Ministry of Education

He Ara Hauora:

<https://waiukukahuiako.school.nz/wp-content/uploads/2020/06/He-Ara-Hauora-Ka-Anga-Whakamua-Secondary-School-Aged-Children-3.pdf>

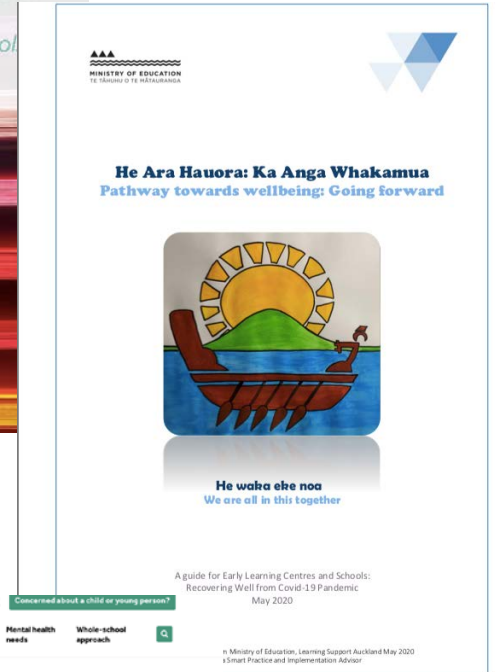
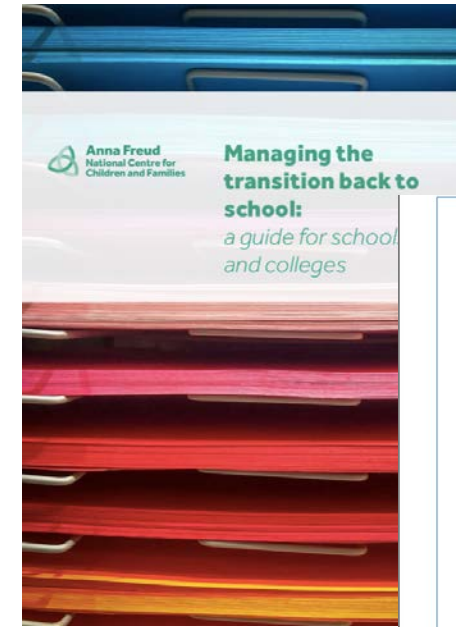
International resources (UK):

Anna Freud Centre:

<https://www.annafreud.org/media/11727/managing-transition-back-to-school-jun2020.pdf>

Back to School Toolkit:

<https://www.mentallyhealthyschools.org.uk/resources/back-to-school-2021-toolkit/>



Back to school 2021 toolkit

As we start a new academic year, our latest toolkit features resources to help education staff feel more confident dealing with mental health concerns.

Download resource Save resource page

Back to school toolkit

Date published: 06/08/2021

Information for children and young people

Unite against COVID-19

Auckland is at Alert Level 3 Step 2

Search

Alert Levels & updates | Travel | Health & wellbeing | Vaccines | Business & money | Activities | Iwi & communities

The COVID downlow

A lot of stuff changed when COVID-19 turned up in Aotearoa New Zealand. Find out what it means for you and the things that are important in your life.

2 shots for summer — get vaccinated

Need support? It's OK to ask for help

Get your free COVID-19 vaccination

KidsHealth

Keeping Kids Healthy | Conditions & Treatments | Search

Topics A-Z

Resources To Help Explain COVID-19 To Children

Looking for something to help your child make sense of COVID-19? Check these resources - from videos for kids about the science behind coronavirus to online stories that can be important conversation starters in your household. The resources cover the range of Alert Levels in New Zealand.

SHARE



Email this page

Print this page



Return from DELTA 2021 (up to year 8)

Return from DELTA 2021 (PDF, 2.12MB) is a booklet by Mel Churton, a New Zealand psychologist, supporting children returning to school in New Zealand after DELTA in late 2021.



Resources for managing anxiety and behaviour

The screenshot shows the Health Navigator website. The header includes the logo, navigation links (About, Get involved, News, Languages), and a search bar. A teal navigation bar contains links for Home, Health A-Z, Medicines, Healthy living, Services and support, Clinicians, Apps, Videos, and Tools. The main content area is titled 'COVID-19 – helping kids cope with anxiety' and includes an 'Overview' tab and a 'Resources' section. The text explains that it's normal to feel anxiety during a pandemic and lists key points on how to help a child cope. A right-hand sidebar contains 'Resources' and 'Key contacts and sources of information'.

Health Navigator NEW ZEALAND

About Get involved News Languages Search health

HEALTH A-Z Medicines Healthy living Services and support Clinicians Apps Videos Tools

Health A-Z / COVID-19 - helping kids cope with anxiety

COVID-19 – helping kids cope with anxiety

Overview Resources

It is perfectly normal for anyone, including children, to feel anxiety when in a global pandemic. It can lead to strong feelings, reactions and changes in behaviour. However, there are steps you can take to help your tamariki, whānau and yourself.

Key points on how to help your child cope with COVID-19 anxiety

1. It is normal for tamariki, teens and adults to have strong feelings, reactions and changes in behaviour when faced with uncertainty.
2. Children learn from their parent's responses, as well as what they see and hear in the media.
3. Limit the amount of information that your child has access to, while still providing them with accurate information that is suitable for their age.
4. Allow for whānau/family time and try to keep as many routines in place as possible. This helps provide a sense of safety and security.

Resources

Key contacts and sources of information

- Healthline **0800 358 5453**
- Government helpline **0800 779 997**
- Need to talk? Call or text **1737**
- Essential business enquiries essential@mbie.govt.nz or **0800 22 66 57**
- Reporting breaches of self-isolation NHCCselfisolation@health.govt.nz
- Reporting breaches of any Level 4 Alert restrictions [105.police.govt.nz](https://www.police.govt.nz)

Brochures

The screenshot shows the Ministry of Education website. The header includes the logo, navigation links (ABOUT US, CONTACT US), and a search bar. A dark navigation bar contains links for 0-4 YEARS, 5-19 YEARS, 16+ YEARS, and OUR WORK. The main content area is titled 'Helping children and young people while they are learning at home' and includes a 'Guidance for parents, caregivers and whānau' section with a list of tips. A right-hand sidebar contains links for advice for early learning services, schools, tertiary providers, and in-school services.

Ministry of Education Te Tāhuhu o te Mātauranga

ABOUT US CONTACT US Search SEARCH

0-4 YEARS Early Learning 5-19 YEARS School 16+ YEARS Tertiary Education OUR WORK Ministry of Education

Te Mahau Parents COVID-19

COVID-19 COVID-19 and wellbeing SHARE PRINT

Helping children and young people while they are learning at home

Guidance for parents, caregivers and whānau

- ✓ Children's well-being is connected to your well-being
- ✓ Remain calm and reassuring
- ✓ Making yourself available
- ✓ Structure your days – one day at a time
- ✓ Try these tips for learning at home
- ✓ Routines
- ✓ Support an independent learner
- ✓ Create moments
- ✓ Exercise

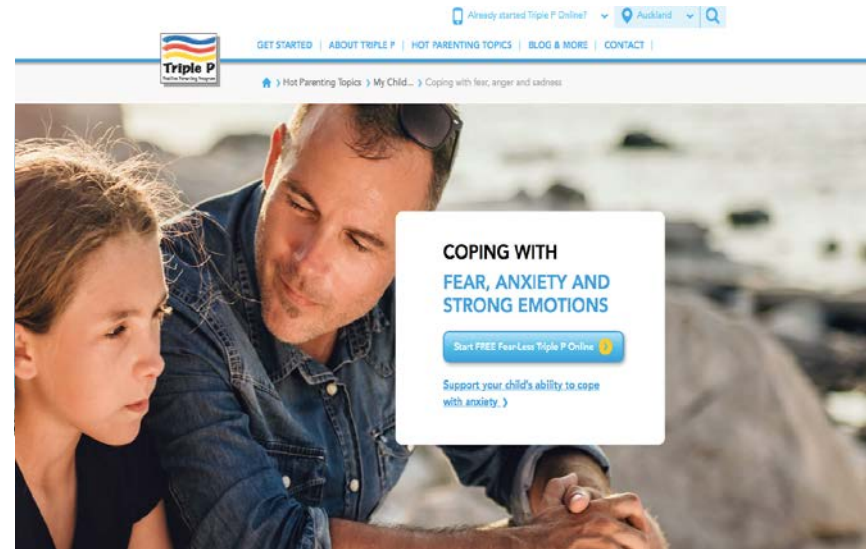
Advice for early learning services

Advice for schools/kura

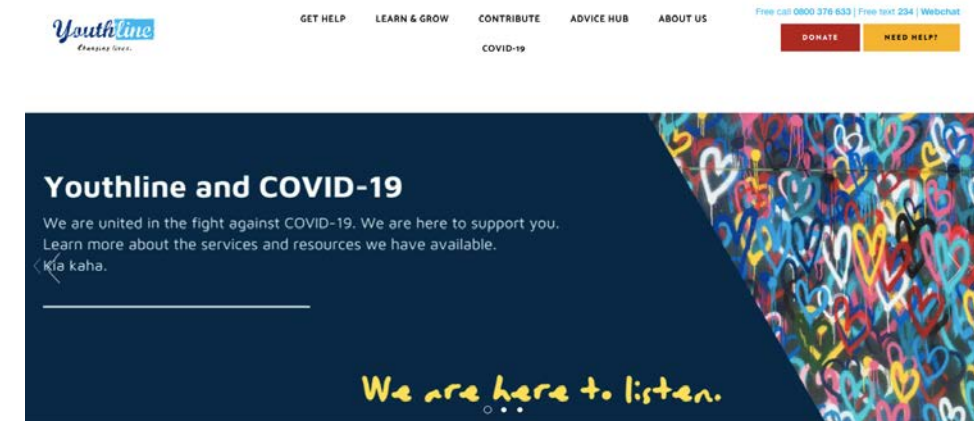
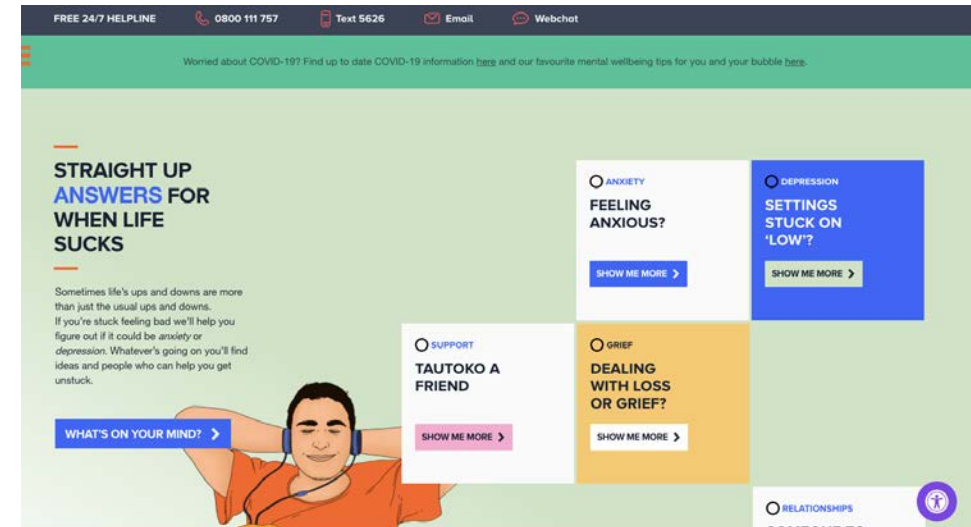
Advice for tertiary providers/whare wānanga

COVID-19 in your school or early learning service

Resources for managing anxiety and behaviour



Resources for managing low mood and self-harm



Resources for managing eating disorders

Call us today! 0800 2 EUNZ or (07) 542677 | info@edanz.org.nz | join our mailing list

edanz
Eating Disorders Anorexia Bulimia Recovery

Home About Us Eating Disorders Explained Treatment & Recovery Getting Help Resources Contact Us/Donate

Offering support, practical advice and understanding so you can help your loved one recover from an eating disorder

<h3>Eating disorders explained</h3> <p>Understand the causes and symptoms of eating disorders, whether your loved one is suffering from anorexia, bulimia or another form of eating disorder.</p> <p>Read More</p>	<h3>Support services</h3> <p>Most people find helping their loved one on their recovery journey challenging. Many people say it is the hardest thing they have ever done. Becoming informed about EDs and connecting...</p> <p>Read More</p>	<h3>Hope and recovery</h3> <p>Eating disorders are multi-faceted and complex to treat, but full recovery is possible at any stage.</p> <p>Read More</p>	<h3>Get help now</h3> <p>If you believe your child or loved one is suffering from an eating disorder, visit your GP immediately and ask for a referral to an Eating Disorder specialist service. Click below for more ways we can help you.</p> <p>Read More</p>
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F.E.A.S.T. F.E.A.S.T. EATING DISORDERS SERVICES NEWS

DONATE FIRST 30 Days

English

REGISTER NOW FOR OUR 30 DAY EDUCATIONAL SERVICE

First 30 Days

Welcome to our new 30 Days service. You are among the first families to try out the service and your feedback will be essential to how it is rolled out to help other families in the coming months. Here is our goal:

"Transforming parents into caregivers in 30 days."

"Thank you for the support and guidance you have brought to my family and so many families. I

chat PARENT SUPPORT offline

<https://www.feast-ed.org/wp-content/uploads/2020/08/2-1-ef59638207687.png>

Resources for improving parent/whanau well-being

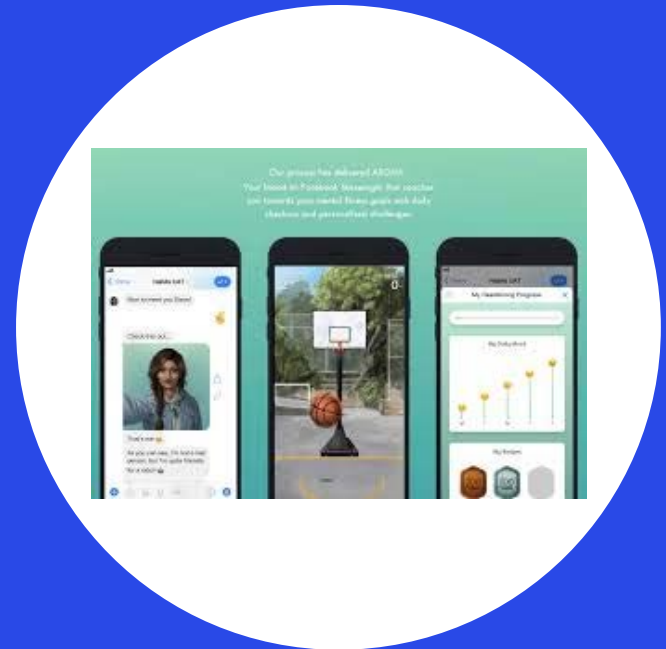
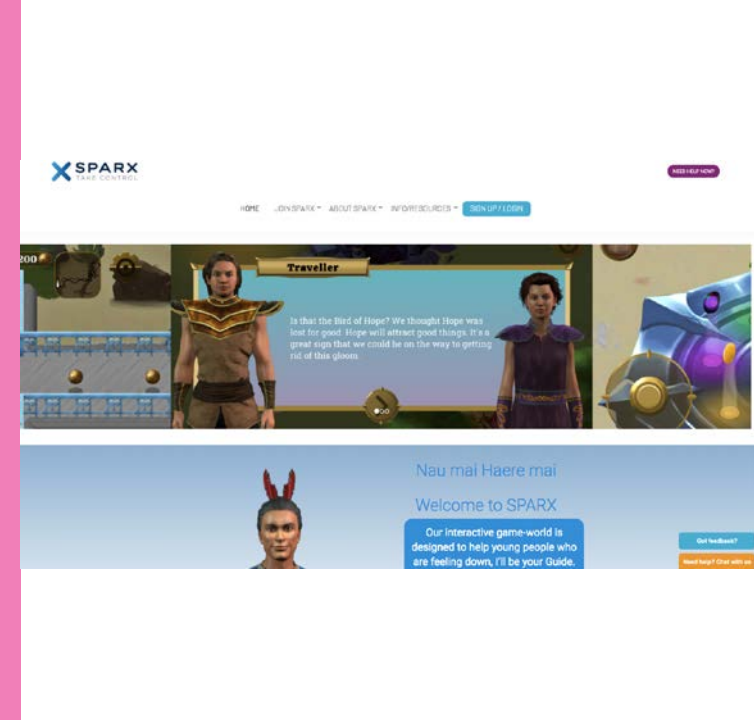
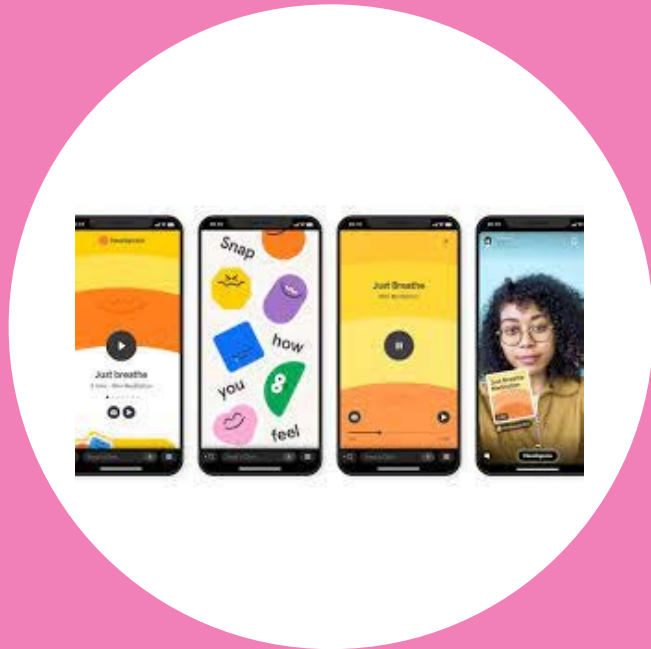
The screenshot shows the 'Unite against COVID-19' website. The header includes the logo, a search bar, and a notification 'Parts of NZ are at Alert Level 3'. A navigation menu lists categories like 'Alert Levels & updates', 'Travel', 'Health & wellbeing', 'Vaccines', 'Business & money', 'Activities', and 'Iwi & communities'. The main content area is titled 'Looking after your mental wellbeing' and includes a sub-header 'Health and wellbeing' with a list of links: 'About COVID-19', 'Contact tracing', 'COVID-19 testing', 'How to access healthcare and emergency services', 'Protect yourself and others from COVID-19', 'Looking after your mental wellbeing', 'Misinformation and scams', and 'Signs and posters for practising good hygiene'. The main text states: 'It is normal to feel anxious or stressed in times of difficulty. Here's how to stay mentally healthy and where to get help.' Below this is a section 'On this page' with links: 'Staying mentally healthy', 'Where to find help', 'Top ways to look after your mental wellbeing', and 'Staying safe online'. A button at the bottom right says 'Get your free COVID-19 vaccination'.

The screenshot shows the 'Mental Health Foundation' website. The header includes the logo, navigation links for 'News', 'Suicide Prevention', 'Suicide Loss', 'Workplaces', 'Education', 'Resources', and 'Donate', and a search bar. The main content area is titled 'Support to get through COVID-19' and includes a sub-header 'GETTING THROUGH TOGETHER' with the Māori text 'WHĀIA E TĀTOU TE PĀE TIWHITI'. The main text states: 'Information about wellbeing, parenting during COVID-19, support for workplaces, grief and loss, suicide prevention, what to do if you're hard time getting through and more helpful resources.' Below this is a section 'Share:' with social media icons for Facebook, Twitter, LinkedIn, Email, and Print. A button at the bottom right says 'Need Help Now'.

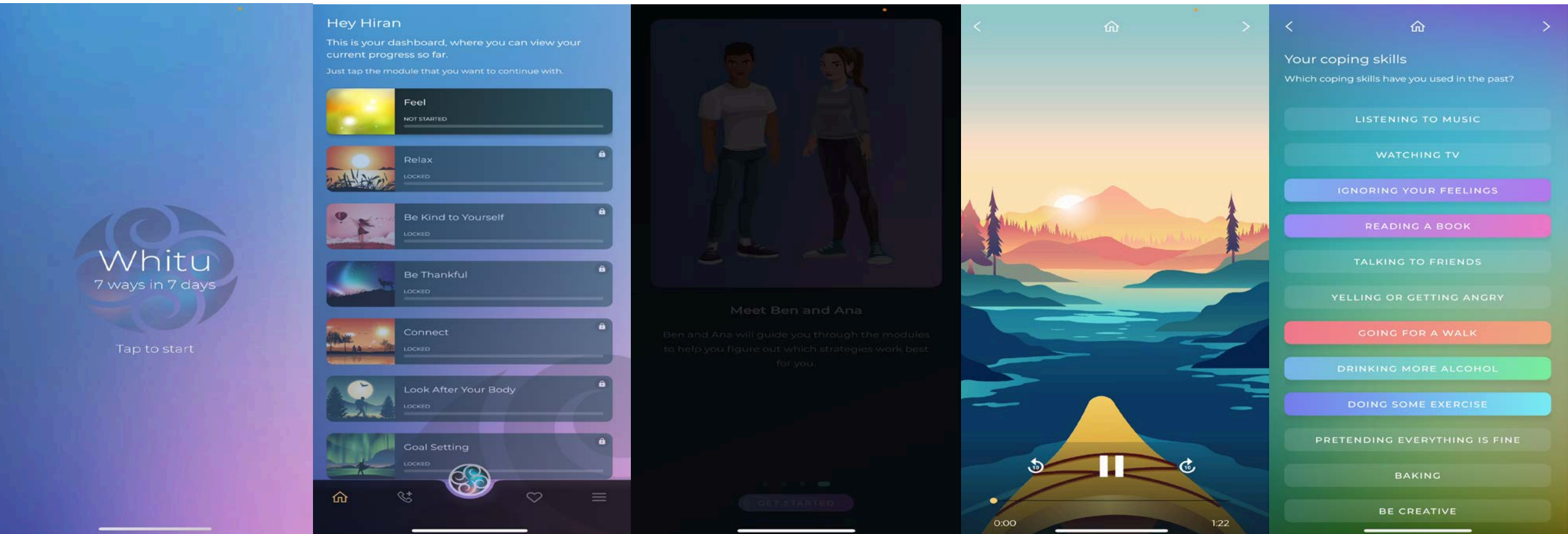
COVID-19 has been one of the biggest challenges to our collective mental health we've seen in several generations, and New Zealanders, by and large, have faced this challenge by looking after each other and

Follow our social channels, and sign up

Other e-health resources (apps)



Whitu: Seven ways in seven days



iOS App Store: <https://apps.apple.com/nz/app/whitu/id1508135602?ign-mpt=uo%3D4>

Google Play Store: <https://play.google.com/store/apps/details?id=com.carbonimagineering.whitu>

RCT RESULTS

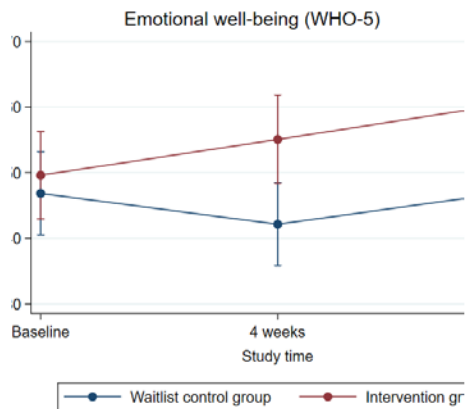
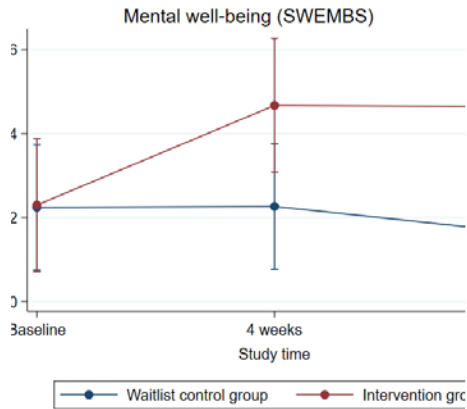


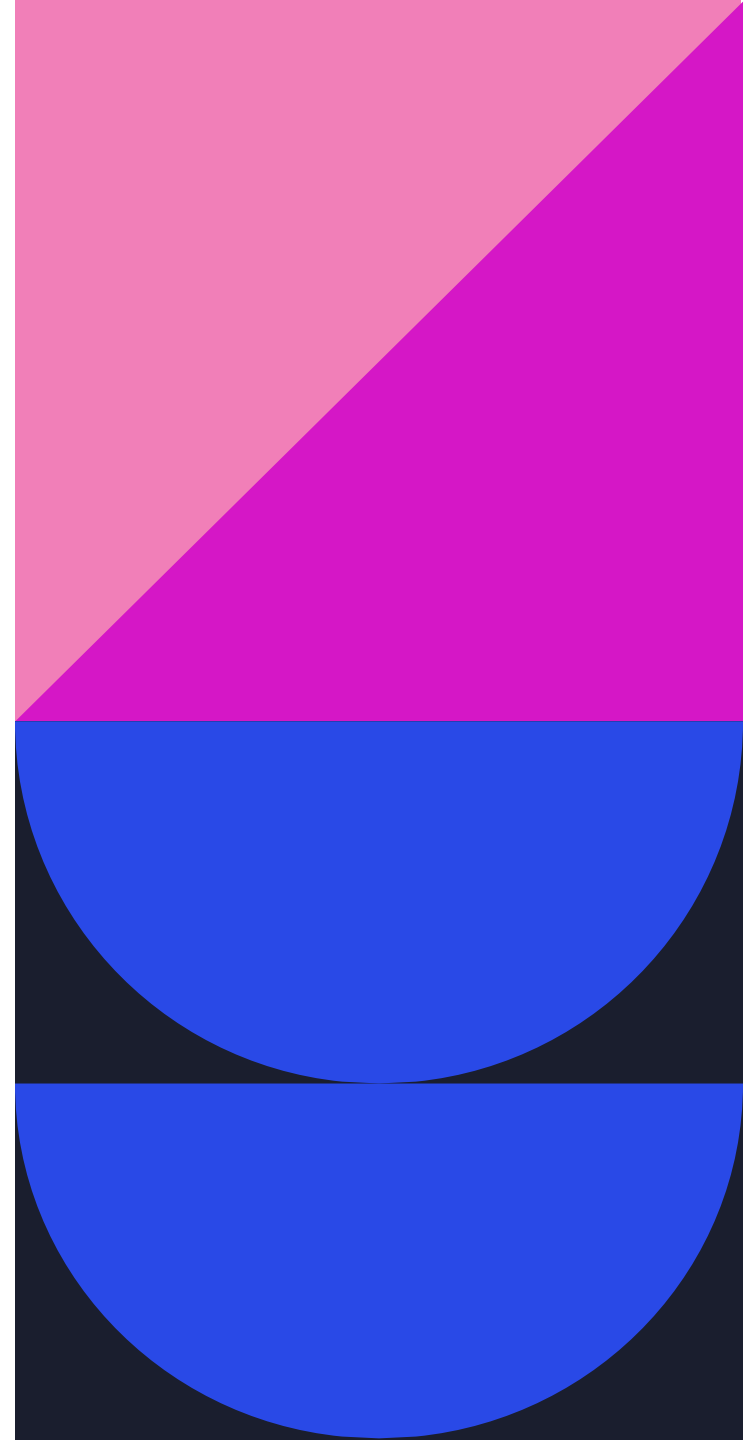
Table 2: Comparisons between groups in outcome measures over the study period

Outcome	Whitu app (N=40) Mean (SD)	Waitlist control (N=45) Mean (SD)	Mean difference Whitu vs control (95% CI)	P value	Group by time interaction P value	Cohen's f^2 effect Size
Emotional well-being (WHO-5)						
Baseline	49.60 (19.40)	46.84 (23.78)	2.76 (-6.43, 11.94)	0.556		
4 weeks	55.28 (23.03)	42.13 (21.02)	12.93 (3.70, 22.15)	0.006	0.038	$f^2 = 0.050$
3 months	60.51 (18.70)	47.09 (22.74)	13.50 (4.24, 22.76)	0.004		
Mental well-being (SWEMBS)						
Baseline	22.30 (4.99)	22.24 (5.16)	0.06 (-2.12, 2.23)	0.960		
4 weeks	24.69 (4.98)	22.27 (5.04)	2.41 (0.22, 4.59)	0.031	0.008	$f^2 = 0.077$
3 months	24.58 (4.95)	21.70 (5.47)	2.98 (0.77, 5.18)	0.008		
Depression (CES-D)						
Baseline	20.18 (12.44)	22.31 (11.51)	-2.14 (-6.94, 2.67)	0.384		
4 weeks	15.72 (10.15)	21.56 (11.54)	-5.66 (-10.48, -0.83)	0.022	0.081	$f^2 = 0.048$
3 months	16.26 (9.42)	23.07 (12.15)	-6.94 (-11.77, -2.12)	0.005		
Anxiety (GAD-7)						
Baseline	9.13 (5.82)	9.42 (5.36)	-0.3 (-2.52, 1.92)	0.793		
4 weeks	6.54 (4.76)	8.56 (5.74)	-2.04 (-4.27, 0.19)	0.073	0.081	$f^2 = 0.046$
3 months	6.05 (4.22)	8.48 (5.15)	-2.46 (-4.70, -0.23)	0.031		
Stress (PSS-10)						
Baseline	21.70 (7.42)	21.62 (7.07)	0.08 (-2.89, 3.05)	0.959		
4 weeks	16.62 (6.34)	21.42 (7.24)	-4.77 (-7.75, -1.79)	0.002	0.002	$f^2 = 0.106$
3 months	17.33 (6.32)	21.41 (7.29)	-3.92 (-6.92, -0.93)	0.010		
Self-compassion (SCS-SF)						
Baseline	2.74 (0.66)	2.69 (0.60)	0.05 (-0.22, 0.33)	0.696		
4 weeks	3.21 (0.55)	2.68 (0.66)	0.54 (0.26, 0.82)	<0.001	0.002	$f^2 = 0.095$
3 months	3.11 (0.73)	2.82 (0.66)	0.30 (0.02, 0.57)	0.036		
Sleep (SOS)						
Baseline	5.13 (1.99)	4.84 (2.17)	0.28 (-0.61, 1.17)	0.537		
4 weeks	6.90 (1.93)	5.82 (2.23)	1.08 (0.19, 1.98)	0.018	0.123	$f^2 = 0.085$
3 months	7.05 (1.85)	6.14 (2.31)	0.88 (-0.02, 1.77)	0.056		

- At 4 weeks, significantly higher emotional (Mean difference (md) 12.93 (3.70, 22.15); p=0.006) and mental (md 2.41 (0.22, 4.59); p=0.031) well-being, self-compassion (md 0.54 (0.26, 0.82); p<0.001) and sleep (md 1.08 (0.19, 1.98); p=0.018)
- Also, significantly lower stress (md -4.77 (-7.75, -1.79); p=0.002) and depression (md -5.66 (-10.48, -0.83); p=0.022), compared to the waitlist controls
- Group differences remained statistically significant at 3 months

Conclusions

- The COVID-19 pandemic has brought a number of challenges and opportunities, including some stage-related issues
- Currently return to school is the biggest challenge being faced by children, families/whanau and educators
 - Safe return is possible (and beneficial), as long as appropriate steps are taken
 - Some children who experience anxiety or other mental health issues may require greater support
 - Collaboration between health, education and community services will be key
- Longer-term issues remain to be encountered and addressed
 - Technology may help with some of these
 - Opportunities exist to improve well-being, resilience and community mindedness



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presented in this webinar

