

Yes, It's Time to Send Our Kids Back to School !

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The school is the fountainhead of modern civilization. The unique ecosystem of a school provides the child with stable predictable activity, opportunities for learning and play, and a vibrant social life made up of daily interactions with schoolmates and peers. Within the paradigm of modern nuclear families, the school supplements – and very often complements – the child's overall developmental needs. In the absence of school life, the child will feel lost, and this deficit cannot be compensated easily within the settings of the modern nuclear family. Hence it is very important that continuity of school life is maintained until the child attains maturity.

It is this very important space that the coronavirus disease (COVID-19) pandemic has rather brutally cut short with the series of lockdowns that have been imposed on the population. As a result, the global education system has plunged into a crisis. Though children have been the least vulnerable segment of the population with regard to the pandemic itself, they have also been the most affected due to its other fallouts. Closure of schools and the need for social distancing have resulted in personal isolation. Disruption of normal life and uncertainty regarding the future has evoked a sense of being distraught. For adolescents, the career track seems confused; considering that this is a crucial period for making choices on professional education, the wrong choice can have lifelong adverse implications. The dilemma is palpable.

As many as 1.5 million schools in India remained shut due to the pandemic and successive lockdowns during the last 24 months, impacting 247 million children enrolled in elementary and secondary schools, according to data released by UNICEF [1]. While schools gradually began to offer online education, this is not a perfect solution. Online education is not an option for all as only one in four children has access to digital devices and internet connectivity. Pre-COVID, only a quarter of households (24%) in India had access to the internet and there is a large rural-urban and gender divide [1].

THE NEGATIVE FALLOUT

The negative impact of school closure is manifest in other

ways too. It is widely being reported that mental health problems in children have increased with this forced isolation. Among older children and adolescents greater depressive symptoms, anxiety and externalizing behavior have been reported with greater alcohol and substance abuse being reported among males during the pandemic. Children with pre-existing mental health conditions were more significantly affected by pandemic-related changes. Children who were exposed to pre-existing childhood abuse and neglect, as also those living in poverty or in lower socio-economic status were at increased risk of stress and depressive symptoms. Family conflict, again exacerbated by the forced lock in at home, increased the risk of mental distress among children and adolescents.

School drop outs is yet another issue to deal with. Both in developed and underdeveloped countries, higher rate of school drop outs is expected. Education always had persistent issues such as access, continuity, learning gaps, among other issues which result in dropouts; the pandemic has added newer challenges and amplified a few others leading to further increase in drop outs [2]. All these factors will reverse societal progress and have long term impact on society at large. The reasons for closure of schools have been many. Initially it was the sheer novelty of the pandemic and the fact that very little was known about it that made governments to clamp down on schools as a precautionary measure. Even when it was understood that the pandemic had little impact on children, it was feared that schools might become major sources for transmission of the virus to adults. But evidence is now accumulating that school closures alone would prevent a very small percentage of deaths (as opposed to other mitigating interventions) and that schools are not strong drivers of SARS-CoV-2 transmission. These considerations strongly shift the balance, risks and benefits in favor of schools being open except in the most extreme circumstances and as a last resort.

WHAT CAN BE DONE

Being a child focused organization, it is for the Indian Academy of Pediatrics (IAP) to take stock of the situation

and advice the governments as well as all the other stakeholders to create the ground for the reopening of schools. IAP has already come out with Guidelines on School Reopening, Remote Learning and Curriculum in and after the COVID-19 pandemic [3], which give clear solutions to some of the vexing problems relating to school reopening. Many local branches of Indian Academy of Pediatrics have already taken a proactive approach, organized discussion and engaged with the government to facilitate reopening of schools. The following are some of the issues that need to be considered at this juncture:

- The decision to close schools comes with potential risks to children's physical and mental health and their social and academic development, and these must be balanced against the risks of not doing so (such as risk of infection, extended community transmission and its associated harms, mortality, and morbidity - mostly of older segments of the population or children with complex underlying health conditions). Many of these risks are predictable and should be actively and vigorously mitigated when and if school closures are deemed necessary. In future also, school closure should be linked to hospital admissions rather than number of positive cases.
- COVID-19 vaccination should be administered to all adolescents 15 years of age and older who do not have contraindications, using a COVID-19 vaccine authorized for use for their age. School-based health Centers (SBHCs) should be promoted as COVID -19 immunization sites for students and staff. / Parents should be encouraged to complete the routine vaccination of children. However vaccination should not be a prerequisite to attend school.
- Universal masking for children is a must. Mealtime break should be staggered or modified to reduce the risk of spreading COVID-19, especially during periods

of high transmission. Timings and number of students per class can be an administrative and logistic decision by school.

- School reopening as the pandemic subsides will necessitate a comprehensive program of support to children and families to address their mental health needs and missed opportunities for learning, socializing, and personal growth. On-site school health services, should be supported if available, to provide pediatric acute, chronic, preventive and behavioral health care. Collaboration with health care workers is essential.

I appeal to all IAP branches across the country to actively engage with their local communities, organize discussion, give proper guidance and develop roadmaps to facilitate reopening of schools. Encouraging parents and giving them the much needed confidence is the priority here. Return to normalcy being the need of the hour, this is the greatest service that we can render to the profession and to the well being of children as well as society as a whole.

REFERENCES

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