



Final Statement on "The Covid Generation: Children and Youth in and after the Pandemic Responding to the World Crisis"



Abstract

The Pontifical Academy of Social Sciences (PASS) gathered scholars, policy makers, university administrators, philanthropists, faith leaders, practitioners, and NGOs to examine the impacts of the COVID-19 pandemic on children and youth.[1] International, interdisciplinary, and multi-sectorial in orientation, academicians and scholars presented new data on youth wellbeing—considering health, mental and spiritual health, the transcendental dimension of the person, educational, and developmental processes in a variety of contexts including Southern Africa, the Americas, the Asian subcontinent, and Europe. We identified emerging findings pertinent to the medical, socio-emotional, cognitive, spiritual and religious youth development under the wicked COVID pandemic from *in utero* to adolescence and emerging adulthood. We highlighted the unfolding of the COVID-19 pandemic *qua* the multiple inequities-accelerants which came to sharpen disparities in processes and outcomes for poor and disadvantaged communities. We identified and named strengths, resiliencies, local knowledges and practices in families and communities of care that unfolded around the world. We considered innovation in education, best practices in schools, and new educational technologies. We examined pertinent levers of change to better serve youth in humane, sustainable, transcendental, culturally and religiously relevant, and scientifically sound approaches. We identified the need for better longitudinal and comparative data as well as conceptually rigorous, developmentally focused, and culturally relevant new

studies of youth in and after the pandemic. We articulated a plea for the need to better respond to pandemics moving forward and to guide various paths to recovery and re-construction. Lastly, we decried Russia's violent invasion of Ukraine and the return of war, death, loss and despair for millions of human beings, leaving so many young people without a future.[2]

Preface

The full impact of the COVID pandemic on the health of children around the world will take decades to understand. Yet the devastating nearer-term impacts are already coming into focus.[3]

Children are impacted in three major ways: (1) the direct effects of the virus itself; (2) the social disruptions of life in a pandemic; and (3) the impact of COVID on families. While all children around the world have been impacted by the pandemic, the impact has not been equally felt. Poorer children, those who are ethnic and racial minorities, and children already suffering from other health issues, are bearing a disproportionate burden of harms. Modeling studies – usually more accurate than official statistics — suggest it is likely that hundreds of millions of children around the world have become infected with the virus and hundreds of thousands have died. The societal disruption of the pandemic has meant isolation, stress, and even sexual and physical violence, leading to substantial increases in anxiety, depression, suicide and other mental health effects. Disruption to healthcare systems has meant hundreds of millions of children around the world have missed critical regular vaccinations and other essential healthcare services. In the broader context of family, the latest estimates – surely an undercount – suggest that at least 5 million children have lost a parent or a close caregiver. Such a loss has substantial short and long-term physical and mental health impacts on children.

The pandemic is not yet over. With a particular emphasis on children who are less privileged, we focused our attentions on a comprehensive approach to understand the effects of the pandemic and how to respond to protect all our children.

The Context

The COVID-19 pandemic presented novel and unique features but was also foretold. Human-induced climate change has made pandemics ever more likely.[4] Warming has allowed a spread of vectors to wider areas and habitat destruction has lessened access to natural defenses. Human incursions have increased opportunities for diseases to move across species. Further, growing global inequality and lack of access to health care and health care-preparedness has made underserved populations more vulnerable. The COVID-19 pandemic both highlighted and exacerbated already troublesome wealth inequalities, which have been accelerating around the

globe. Within nations, the wealthy got wealthier and the poor took on disproportionate suffering. Access to safe and sheltered work environments, medical treatments, and in many countries, vaccines were least available to the less privileged. On the international level, the world's leading nations failed to maximize their help to struggling populations outside their borders and lost an opportunity to cooperate in vaccine technologies and delivery, treatments, and data sharing. Moving forward, the work of resilience will require advanced preparation and abstention from irresponsible environmental behaviors.

Impacts on Children and Youth

Millions of children and youths are experiencing damage and dislocations likely to mark their developmental pathways for years to come. COVID-19 can be described as a long-lasting catastrophic shock removing youth from the proscribed pathways to reach and master culturally marked milestones – in the maturational, socio-emotional, cognitive, and spiritual realms.[5] Millions of youths are in mourning and facing losses that are at once tangible and immediate as well as ambiguous and indefinite. In the extreme, millions of youths have lost parents and care-takers. The pandemic has also robbed millions of many of the rituals and routines that structure and give predictability and meaning to daily life. The pandemic deprived millions of youths of learning opportunities, the joy of socializing with other youth, and supports from care-takers, teachers, mentors, faith workers, and extended family members. For millions, the pandemic suddenly disrupted access to school, health care, vaccinations, nutrition, sports, and various scaffolds needed for normatively appropriate maturational development. According to UNICEF, “Across virtually every key measure of childhood, progress has gone backward in the 12 months since the pandemic was declared, leaving children confronting a devastating and distorted new normal” <https://uni.cf/3b2FJVA>.

The losses encompassed a variety of domains including loss of parents, care-takers and loved ones; loss of routines including dramatic educational disruptions which precipitated profound health, mental health, and educational losses and placed vulnerable children at increased risk of poverty, trafficking, and other vulnerabilities.

Domains of Disruption

Children were placed at particular risk for being precipitously exposed to (1) death, loss, and mourning; (2) increased mental health disorders; (3) profound education disruptions and learning loss.

Death, Loss, and Mourning

Millions of children are in COVID-mourning — as of March 2022, more than 5.2 million children lost a parent or caregiver to COVID-19[6] (see also, <https://bit.ly/3t7pAXh>) The 5.2 million figure is most certainly an undercount. An earlier *Lancet* found that the countries most damaged by parental/care-taker loss were all in the metaphoric global south: Peru (10·2 per 1000 children), South Africa (5·1), Mexico (3·5), Brazil (2·4), and Colombia (2·3) leading the way <https://bit.ly/2XDmEWO>.

In the high income countries, underserved populations faced severe risks. In the United States, [analyses](#) suggest that youth in minoritized populations were ravaged by COVID-related parental and care-taker losses. The inequities are barbaric: for every one white American child orphaned, 1.8 Hispanic American children, 2.4 Black Americans and 4.5 Native American and Native Alaskans were orphaned.[7]

Youth also mourned the loss of other kin and kith, neighbors, and friends. Youth around the world lost routines, rituals, access to schools, athletics, open play spaces, clubs, and places of worship as the institutions of society shut down. Isolation rules, bans on social gatherings, social distancing orders further removed youth from the normative experiences essential for culturally appropriate psycho-social development. Millions of children around the world came to be cared by parents who lost their livelihoods. Mothers and other caretakers, who were themselves in mourning and depressed became less available to meet the needs of children. As death stalked cities, suburbs, and rural areas in a tsunami of suffering, the cumulative impact of such scale of loss will be felt for decades to come.

Mental Health Impacts

As COVID advanced globally, distress became the pandemic within the pandemic. In a rare advisory on youth mental health, the United States Surgeon General warned:

Recent research covering 80,000 youth globally found that depressive and anxiety symptoms doubled during the pandemic, with 25% of youth experiencing depressive symptoms and 20% experiencing anxiety symptoms. Negative emotions or behaviors such as impulsivity and irritability — associated with conditions such as ADHD — appear to have moderately increased. Early clinical data are also concerning: In early 2021, emergency department visits in the United States for suspected suicide attempts were 51% higher for adolescent girls and 4% higher for adolescent boys compared to the same time period in

early 2019.

At the Workshop, we foregrounded scholarly research using a range of methodologies in various countries around the world. The data reveal significant increases in mood disorders, including depression and dysthymia, as well as anxiety, clinginess, distraction, irritability, panic, loneliness, and regressive behaviors, *inter alia*. In a pattern repeated in a number of scholarly papers, youths with a parent in psychological distress, older adolescents, girls, and children and adolescents living with neurodiversity and/or chronic physical conditions were more likely to experience negative mental health outcomes.

An analysis of 116 peer-reviewed articles with data on a total of 127,923 children and adolescents; 50,984 child and adolescent proxy reports (e.g., parents, healthcare practitioners) examined a range of primary data on COVID-19-related mental health impacts on children and adolescents <https://doi.org/10.1111/camh.12501>. A plethora of studies from around the world, sketch a picture of the dangerous mental health undertows youth face as they struggle to navigate the global ebbs and flows of COVID-19. Isomorphic patterns of psycho-social suffering are emerging from countries around the globe, including Argentina,[8] Canada, China, India,[9] Jordan,[10] Bangladesh,[11] Pakistan,[12] Qatar,[13] Australia,[14] Italy and Spain,[15] Austria, Germany, Lichtenstein, Switzerland,[16] Greece,[17] Ireland,[18] South Africa,[19] and others.

Educational Disruptions

“The pandemic has an enormous impact on education. In many parts of the world, great numbers of children are unable to return to school, and this situation runs the risk of an increase in child labor, exploitation, abuse and malnutrition”.

Pope Francis, Message to the Pontifical Academy of Sciences, Oct. 7, 2020

For youth, school is a home away from home. The pandemic shut down the second home for hundreds of millions of children the world over. COVID-19 stunned schooling systems with geologic force. For almost half-a-billion children whose schools closed due to COVID-19, there was no such thing as remote learning opportunities. A year into the pandemic, by the first quarter of 2021, more than 160 million children “around the world have missed school for nearly a year due to COVID-19 restrictions”. Fourteen countries “have remained largely closed since March 2020 to February 2021”. UN data suggest that COVID-19 has wiped out twenty years of gains as “100 million more children fail basic reading skills because of COVID-19” <https://bit.ly/3Hm89IZ>. School closures disrupted immunization and other health services that are often provided at

school and prevented many children from accessing the only nutritious meal of the day. Researchers found that neurodevelopmentally atypical and complex learners experienced significant negative COVID related educational, socio-emotional and physical outcomes “(including [less] sleep, [poor] diets, [less] exercise, [more] use of electronic media; and increased symptoms of child neurodevelopmental disability [NDD] and comorbidities)” <https://bit.ly/2ZLgDYP>.

As schools closed, the world of education turned to radio, television, mail, and an array of newer technology and apps to provide youth continuity in education. The COVID-19 pandemic renewed expectations that new technologies would be deployed to effectively continue the education of youth via remote teaching and learning.[20]

New technologies were deployed with speed, optimism, and a sense of hope.[21] Important gains were made. Yet significant limitations and inequities were also clear. First, “Over a third of youth worldwide do not have Internet access and most of these young people are in developing countries”.[22] Second, there are significant gaps in preparation to leverage technology to connect homes and schools. Third, there is unequal access to the Internet and devices, and, fourth, there are differential teacher and parent knowledge limiting the capacity to sustain (remote) learning in a time of crisis” (Ibid.).

Other research suggests new technologies can be powerful tools but are also creating new concerns in a number of basic educational domains,[23] *seriatim*, (1) scholars in the field of mind, brain and education have documented negative long-term impacts of new apps on deep reading[24] and (2) socio-emotional learning; (3) they can undermine empathy,[25] (4) intensify cyber bullying, (5) give children and youth access to inappropriate materials, and (6) can be lethally effective new tools for exploitation and trafficking of children and youth. The purposely designed addictive features found in many new media platforms open another domain of deep concern.

As the world of education endeavors to move into a phase of recovery, the most vulnerable children face significant challenges moving forward:

Since its outbreak two years ago, the COVID-19 pandemic has disrupted education systems globally, affecting the most vulnerable learners the hardest. [T]he costs stand to be tremendous in terms of learning losses, health and well-being and drop-out. Prioritizing education as a public good is crucial to avoid a generational catastrophe and drive a sustainable recovery. To be more resilient, equitable and inclusive, education systems must transform, leveraging technology to benefit all learners and building on the innovations and partnerships catalyzed throughout this crisis. UNESCO, 2022 <https://bit.ly/3GBhXgG>

COVID-19 Intensification of Pre-Existing Inequities

A theme running across presentations was the intensification of vulnerabilities for communities already at risk.[26] As COVID-19 damaged entire swaths of economy and society, it put millions of already disadvantaged youths on the streets and at risk of violence, exploitation, and trafficking. David Bloom and Maddalena Ferranna offered an early assessment of COVID's impact on children and youth as, "degrading the emotional and mental health of students, and increasing the risk of domestic violence and abuse" <https://bit.ly/3HYUpmp>.

The pandemic at once revealed and intensified gross inequalities in opportunities for children and youth to flourish. Inequalities are growing within nations and between nations. Disadvantaged youth are experiencing alarming levels of increased poverty, food insecurity <https://bit.ly/2ZMYqdC>, child abuse <https://bit.ly/3cr04ET>, child trafficking and child labor <https://bit.ly/3watKya>.

Children in Poverty

COVID-19 has put millions of children in poverty at great risk. Extreme poverty compromises socio-emotional and cognitive development, health and wellness. The COVID-19 pandemic is pushing an additional 97 million human beings into extreme poverty <https://bit.ly/3DvOFiA>. Global hunger and malnutrition cripple millions around the world. The COVID-19 pandemic is reversing gains. Food prices are a near all-time highs,[27] and "as of January 2022, the Agricultural Commodity Price Index is 25% higher than its January 2021 level. Maize and wheat prices are 20% and 25% higher, respectively, than their January 2021 levels. Millions are suffering from chronic hunger, regularly not getting enough food to conduct an active life" <https://bit.ly/2lqoA1M>.

Youth in Flight

The pandemic, war, terror, and climate change are the new drivers of mass migration <https://bit.ly/3203Tif>. These forces are pushing unprecedented levels of both legal and unauthorized migrants and asylum seekers worldwide.[28] Over the last 12 months, the most trafficked border in the world – between Mexico and the United States has seen a skyrocketing surge of unauthorized immigrants with an all-time record 1.7 million apprehensions, "many of them fleeing pandemic-ravaged countries ... trying to enter the United States in the last 12 months, capping a year of chaos at the southern border" <https://nyti.ms/3jxTrEy>. [29]

Worldwide, 36 million children are immigrants, and another 18 million are internally displaced.

Russia's war on the Ukraine is forcibly displacing millions of children. Children in immigrant families are differentially impacted by the COVID-19 pandemic.[30] In the US and Europe immigrants are more at risk from the virus because they work in occupations such as health care, agriculture, meat-packing, and other low wage jobs at much higher rates than natives. They also are more likely to live in crowded multigenerational households where it is more difficult to physically distance if they are sick.[31] Immigrant families were further isolated from extended family members and many children were cut-off from parents when the borders were closed.[32]

Immigrant children experienced disruptions in schooling, but they were particularly at risk because their parents often could not help them with home schooling because of language differences and because parents do not know the curriculum of the new country. The successful integration of immigrant children which happens in schools through play with other children and through mentoring by teachers and other adults was interrupted. The resilience of immigrant children who know how to adapt to new norms and circumstances through their immigration history is a strength that these families have in their favor. For a brief time in the summer of 2020 detention centers were emptied in Europe and the US and extra government aid reduced poverty. Unfortunately, these brief windows of assistance which helped many immigrant families, did not last and the opportunity to help immigrant children was not sustained. In refugee contexts, 'pedagogies of belonging' are key for young people in linking past-present-future through their education. Essential are relationships with teachers that explicitly support reconciling current situations of uncertainty with future-building focused on what young people hope will be less confined opportunity.

Modern Slavery

The COVID-19 pandemic has had immediate and severe impacts on women in the sex trade who are already among the most vulnerable people on the planet. COVID-19 increases harms resulting from the poverty and violent exploitation of prostitution, an oppressive institution built on foundations of sexism and racism. Because of quarantines, social distancing, governments' neglect of the poor, systemic racism in all walks of life including healthcare, failure to protect children from abuse, and the predation of sex buyers and pimps – the coronavirus pandemic threatens already-marginalized women's ability to survive. Understanding what it's like to be anxious about access to food and shelter is key to understanding the risks taken by people in prostitution. Knowing they were risking their lives, many women prostituted during the pandemic. "Poverty will kill us before the coronavirus", said an Indian woman in prostitution. Even before the pandemic, sex buyers and pimps inflicted more sexual violence on women in the sex trade than any other group of women who have been studied by researchers. The greater the poverty, the greater the likelihood of violent exploitation in the sex trade, as noted 26 years ago by a Dutch researcher.[33]

Youth in Modern Slavery

The World Health Organization's Global status report on preventing violence against children, warns of the dramatic impact of COVID-19 on violence against children <https://bit.ly/3cr04ET>. Abused children, missing children, the children of forcibly displaced migrants, children in modern slavery are enduring in an empire of suffering that COVID-19 made harder to detect.[34] According to the United Nations Office of Drugs and Crime (UNODC) under COVID-19 trafficking has become more hidden and difficult to detect. In its most recent report UNODC) states, "The pandemic has increased vulnerabilities to trafficking in persons while making trafficking even harder to detect and leaving victims struggling to obtain help and access to justice" <https://bit.ly/3B5SFGe>. COVID-19 is increasing trafficking in persons, particularly from countries experiencing the fastest and most persistent drops in employment. "Children account for about one third of the detected victims of trafficking" <https://bit.ly/3watKya>.

Women, children and migrants have been identified by survey and interview participants as particularly vulnerable to recruitment and exploitation during the COVID-19 pandemic. Women and girls have been recruited, often locally or online, for sexual exploitation, especially in private apartments. Children have been particularly affected – out of school and needing to support parents who have lost their livelihoods, children have been increasingly targeted by traffickers at the local level and online. They have been trafficked for sexual purposes, forced marriage, forced begging and for forced criminality. There is clear evidence of increased demand for child sexual exploitation materials (CSEM), which has exacerbated the exploitation of children around the world <https://bit.ly/3spMPvp>.

We decry and call for an immediate end to the plight of abused children, children in war, children of forcibly displaced migrants, missing children, trafficked children, and children in modern slavery. COVID-19 has created new, unimaginable opportunities to destroy human potential as youth are made to endure in an empire of suffering the pandemic is both intensifying and making harder-to-survey, prevent, and heal. The world is currently advancing its efforts to end child sexual exploitation and abuse, online and offline. This must remain global an imperative for the COVID generation – a generation that has increased reliance on digital technologies. This effort must be underpinned by high-quality data and evidence, representing children's own voices and unique experiences.

A Developmental Snapshot

Children across the developmental spectrum were placed at risk.

Early Childhood Impact

Prior to the COVID-19 pandemic, an estimated 250 million children (43%) living in low- and middle-income countries (LMICs) were unable to meet their developmental potential in the first five years of life due to various biological and psychosocial risks (e.g., malnutrition, inadequate early learning opportunities, maternal depression, and exposure to violence).[35] Early childhood is a time of rapid brain development that lays the foundations for sensory-motor and cognitive-language skills that will grow in the life course. Due to greater neuroplasticity, early life is a sensitive window of opportunity in which environment and experiences can shape the quality of the developing brain. However, in the first 11 months of the pandemic, the number of children off track in their early development is estimated to have increased by a further 10.75 million children, as the pandemic disrupts the protective environments and nurturing relationships around young children that foster their healthy development in the short and longer term.[36]

These risks include increased parental anxiety, stress, and depression; increased violence against young children;[37] and reduced early childhood care and education (ECCE) access due to childcare and preschool closures. Moreover, these risks are likely to further compound existing inequities between children living in disadvantaged contexts and those living in advantaged contexts. For example, prior to the pandemic only 20-55% of young children had access to ECCE services in LMICs compared with nearly 80% in high-income countries, illustrating the fragility and inequitable access to support systems for the youngest citizens. During the pandemic, the proportion of in-person instruction days lost due to preschool closures was between 50–57% in LMICs and the number of children off track in their early development increased by slightly more than 10 million. In contrast, for young children living in high-income countries, the proportion of in-person instruction days lost was less (close to 46%) with far fewer children off track in their early development (less than 0.5 million). The cost of inaction in the early years is likely to have long-term consequences with children lagging in their developmental and learning trajectories across the life course.

Impacts During Adolescence

Mental health problems in particular nearly doubled in adolescence during the pandemic.[38] Adolescents may be at particular risk for psychosocial problems associated with COVID-19 for several reasons: neuroplasticity in the brain causes adolescents to be more emotionally aroused, evolutionary tasks like identity development were disrupted by social confinement and school closures, and existential threats are experienced deeply by this age group. The effects of the pandemic are best understood using a cumulative risk model. Parental warmth protected

adolescents, while parental conflict placed adolescents at risk for psychosocial problems. Isolation from peers mostly served as a risk; however, it did protect some adolescents from social exclusion and bullying. Longitudinal studies demonstrate that school closings led to increases in depression and anxiety as well as a decrease in life satisfaction, with greater effects for adolescent girls – the result, perhaps of social isolation from peers; a decrease in physical activity; and an increase of time with parents, impeding the development of autonomy. The effects of the pandemic no doubt vary by community values and resources. Adolescents from poorer communities were at increased risk for mental health problems.

Adolescents shape their communities as well, and several studies suggest that interventions should focus on empowering adolescents to act to ensure the common good within a community; in other words, adolescents can be powerful change agents during crises like COVID-19. Because we are still in the midst of the pandemic, we reiterate, its long-term impact is not clear. Based on studies of other existential threats, it is likely that the incidence of mental health problems will decline as conditions improve. Regardless, most experts agree that there was a global mental health crisis for adolescents before the pandemic that must be addressed with prevention and intervention programs targeting families, schools, and communities.

The Path to Recovery & Re-Construction

As we move from emergency relief to recovery and re-construction, we would be wise to heed the words of Pope Francis, “In order to educate, one has to be able to combine the language of the head with the language of the heart and the language of the hands” <https://bit.ly/3i0kebd>. In re-construction and recovery education must endeavor to inculcate in children and youth cognitive skills for critical thinking, as well as the metacognitive abilities to become lifelong learners, civic agents and for making the transition to the labor force for the 21st Century. In recovery we must also nurture the humane sensibilities, empathy and perspective taking, communication and collaboration skills. The work of education is cultivating the signs of healthy, flourishing, and engaged children. In the Platonic sense, education endeavors to nurture logic (truth and science), ethics (goodness and justice), and aesthetics (beauty). Creating a more inclusive, just, and sustainable world is education’s urgent challenge. In the words of Pope Francis, a “summons to solidarity” with the next generation, with our each other, and with our ever more fragile planet, as the paper by the Stones suggest, is the ethical imperative of our times.

It is too soon to fully discern the long term sequelae of the still raging pandemic.[39] Its long-term impact on children is yet to be known. Children are resilient and highly adaptable even to the most adverse of circumstance (Betancourt 2019). The US Surgeon general notes,

According to more than 50 years of research, increases in distress symptoms are common

during disasters, but most people cope well and do not go on to develop mental health disorders. ... Many young people are able to bounce back from difficult experiences such as stress, adversity, and trauma. 61 <https://bit.ly/354aObt>

The sources of resilience are not always obvious. The answer does not lie in individual characteristics. Research suggest that the process plays out in a physical and social environment that involves family and caretakers most immediately, but also includes peers, schools, places of worship, athletics, and other institutions of society <https://bit.ly/3f96vxp>.

Just as the pandemic, war and flight imply a disruption, displacement and even destruction, healing comes about with the rebuilding of a child's social world. Fortunately, we know how to do that. And primarily, we do it through institutions of society. Early child care and education settings,[40] schools,[41] universities,[42] foundations,[43] philanthropists,[44] youth-serving community-based organizations, NGOs, clubs, voluntary associations, places of worship[45] and allied stakeholders will have a special responsibility in reconstruction moving forward.

Recommendations

“To speak of transcendent human dignity thus means appealing to human nature, to our innate capacity to distinguish good from evil, to that ‘compass’ deep within our hearts, which God has impressed upon all creation.[4] Above all, it means regarding human beings not as absolutes, but as beings in relation”. Pope Francis, Address to the European Parliament, Strasbourg, France, Tuesday, 25 November 2014 <https://bit.ly/3KQQGte>

We must protect the transcendent dignity of all children. It is critical we protect children directly from the virus – prioritizing vaccines for all children. As vaccine supplies increase, childhood vaccination against COVID should become a global priority. The evidence for the benefit of the vaccine for children aged-5 and above is already clear and when we have strong scientific evidence for children under 5 years of age, they should be included as well. We need a global strategy to expand mental health services for children, from the use of more technology based solutions to training of lay people to provide mental health services. There is emerging evidence that these strategies can substantially increase both access and quality of mental health services for children. Finally, we need civil society and religious organizations to partner with governments to identify children who are suffering from parental loss and other severe disruptions and provide emotional, financial and social support for these children during these very difficult times.

Realizing Sustainable Development Goal target 4.2 (for all children to have access to early care,

development, and education services) requires urgent multisectoral action to mitigate the detrimental impact on the quality of care and opportunities that young children receive. Solutions are available to address the needs of young children and their caregivers (e.g., parenting programs, ECCE services, and prevention of violence strategies). However, interventions' design and delivery must not further exacerbate the stark inequities in access to early childhood care and opportunities for young children. Further, approaches must invest in strengthening systems that serve young children and their caregivers (e.g., investing in early childhood workers who are often poorly paid and poorly valued in society).

Pandemic education, like other education in crisis and disruption, has typically been framed as temporary holding grounds to keep people safe until a return to 'normalcy' is possible, but without accompanying conditions for learning, belonging, and opportunity.[46] Education is never only about the here and now. It importantly connects histories to the dual imperative to live in the present moment while also connecting that present to future-building. Future-building involves imagining, and planning for, multiple possible futures – processes that are not linear and not seeking 'normalcy' or some sedentary and arrived-at geographic, spatial, or social state. Following Pope Francis' teachings, the consideration of the transcendent human person open to God is central in education

The pandemic is creating a deep human recession in children and youth.[47] The lessons emerging from this pandemic are a clarion call for transformation. School re-openings do not equate with the end of a crisis because the scars of this experience run deep, with the cost of inaction carrying potentially high long-term costs. Education is a human right, a social vaccine and the strongest anchor to shape a sustainable world. As UNESCO's recent Futures of Education report calls for, we need a new social contract for education to rebalance our relationships with each other, with technology and with the planet. These will include pedagogies that emphasize cooperation, belonging and solidarity, and curricula that prize ecological, intercultural and interdisciplinary learning <https://bit.ly/3w1KZEn>.

Learning from the detrimental impacts of school closures, we must set the right priorities and seize the opportunity to steer the recovery in the direction of inclusion, equity and sustainability. It will be crucial to make technology work of the most marginalized, to support pedagogical innovation and to anchor the digital transformation in principles of human rights and equity so that technology works for the most marginalized. Our challenge is humanistic and ethical: we have a collective responsibility towards the COVID-19 generation to make education a public good and involve youth in defending it. The Transforming Education Summit, to be convened by the UN Secretary-General in September will unite world leaders, all education partners and young people around this common agenda and ambition, one that resonates with the Global Compact on Education launched by Pope Francis. <https://bit.ly/3i0kebd>

Endnotes

[1] See, Zamagni, <https://tinyurl.com/2p84jssn>

[2] See, M. Suárez-Orozco, <https://tinyurl.com/2p9bf99y>

[3] See, Jha, <https://tinyurl.com/2vvwn28c> (1:20)

[4] See, Stone and Stone, <https://tinyurl.com/yckrezt4>

[5] See, Mpilenhle Pearl Sithole, <https://tinyurl.com/593u85t4>

[6] See Unwin HJ, Hillis S, Cluver L, Flaxman S, Goldman P, Butchart A, Bachman G, Rawlings L, Donnelly C, Ratmann O, Green P, Nelson C, Blenkinsop A, Bhatt S, Desmond C, Villaveces A, Sherr L [et al.](#), 2022, More than 5.2 million children affected by global surges in COVID-associated orphanhood and caregiver death: new evidence for national responses, *The Lancet Child & Adolescent Health*, ISSN: 2352-4642

Alexandra Blenkinsop, the Imperial College London co-author of the *Pediatrics* paper, notes: “We were already aware that minorities were [disproportionately affected by COVID-19 mortality](#), however, we were surprised by the degree to which these inequalities were magnified when looking at children losing their caregivers. Minorities represent only 39% of the U.S. population, so to find 65% of children orphaned were of a racial or ethnic minority group is one of the most profound disparities we’re aware of”.

[7] Data from January 2020 to November 2021 suggest that “more than 167,000 children under 18 lost a parent or in-home caregiver to COVID-19, according to a December [report](#) titled “Hidden Pain” by researchers at the University of Pennsylvania, Nemours Children’s Health and the COVID Collaborative. The report found that Black and Hispanic children lost caregivers at more than double the rate of White children, while American Indian, Alaska Native, Native Hawaiian and Pacific Islander children lost caregivers at nearly four times the rate of White children”.

[8] See, Lipina, <https://tinyurl.com/y35j4ayp> (3:20); See, Beliz, <https://tinyurl.com/3w5pnpfx>

[9] See, de Figueiredo, C.S., Sandre, P.C., Portugal, L.C.L., Mázala-de-Oliveira, T., da Silva Chagas, L., Raony, Í., ... Bomfim, P.O-S. (2021). COVID-19 pandemic impact on children and adolescents’ mental health: Biological, environmental, and social factors. *Progress in Neuro-Psychopharmacology and Biological Psychiatry*. See also Sethi, <https://tinyurl.com/2p8uur8z> (4:30)

[10] See, Malkawi, S.H., Almhdawi, K., Jaber, A.F. et al. COVID-19 Quarantine-Related Mental Health Symptoms and their Correlates among Mothers: A Cross Sectional Study. *Matern Child Health J* 25, 695-705 (2021). <https://doi.org/10.1007/s10995-020-03034-x>

[11] See, Yeasmin, S., Banik, R., Hossain, S., Hossain, M.N., Mahumud, R., Salma, N., & Hossain, M.M. (2020). Impact of COVID-19 pandemic on the mental health of children in Bangladesh: A cross-sectional study. *Children and Youth Services Review*, 117, 105277. doi:10.1016/j.chilyouth.2020.105277

[12] See, Imran, N., Zeshan, M., & Pervaiz, Z. (2020). Mental health considerations for children & adolescents in COVID-19 Pandemic. *Pakistan journal of medical sciences*, 36 (COVID19-S4), S67-S72. <https://doi.org/10.12669/pjms.36.COVID19-S4.2759>

[13] See, Abdelrahman, M., Al-Adwan, D. & Hasan, Y. Impact of Social Distancing on the Mental Health of Parents and Children in Qatar. *Int J Ment Health Addiction* (2021). <https://doi.org/10.1007/s11469-021-00555-6>

[14] See, Li, S.H., Beames, J.R., Newby, J.M. et al. The impact of COVID-19 on the lives and mental health of Australian adolescents. *Eur Child Adolesc Psychiatry* (2021). <https://doi.org/10.1007/s00787-021-01790-x>

[15] See, Davico, C., Ghiggia, A., Marcotulli, D., Ricci, F., Amianto, F., & Vitiello, B. (2021). Psychological Impact of the COVID-19 Pandemic on Adults and Their Children in Italy. *Frontiers in Psychiatry*, 12. doi:10.3389/fpsy.2021.572997; Di Giorgio, E., Di Riso, D., Mioni, G. et al. The interplay between mothers' and children behavioral and psychological factors during COVID-19: an Italian study. *Eur Child Adolesc Psychiatry* 30, 1401-1412 (2021). <https://doi.org/10.1007/s00787-020-01631-3>; Vallejo-Slocker, L., Fresneda, J., & Vallejo, M.A. (2020). Psychological wellbeing of vulnerable children during the COVID-19 pandemic. *Psicothema*, 32(4), 501-507. See also, Orgilés et al. 2020; and Westrupp, E.M., Bennett, C., Berkowitz, T. et al. Child, parent, and family mental health and functioning in Australia during COVID-19: comparison to pre-pandemic data. *Eur Child Adolesc Psychiatry* (2021). <https://doi.org/10.1007/s00787-021-01861-z>

[16] See, Schmidt, S.J., Barblan, L.P., Lory, I., & Landolt, M.A. (2021). Age-related effects of the COVID-19 pandemic on mental health of children and adolescents. *European Journal of Psychotraumatology*, 12(1), 1901407. doi:10.1080/20008198.2021.1901407

[17] See, Magklara, K., Lazaratou, H., Barbouni, A., Poulas, K., Farsalinos, K., & Group, C.G.R. (2020). Impact of COVID-19 pandemic and lockdown measures on mental health of children and adolescents in Greece. medRxiv. doi:10.1101/2020.10.18.20214643

[18] See, also for example, O’Sullivan, Katriona, Serena Clark, Amy McGrane, Nicole Rock, Lydia Burke, Neasa Boyle, Natasha Joksimovic, and Kevin Marshall. 2021. “A Qualitative Study of Child and Adolescent Mental Health during the COVID-19 Pandemic in Ireland”. *International Journal of Environmental Research and Public Health* 18, no. 3: 1062.

<https://doi.org/10.3390/ijerph18031062>

[19] See Sithole, <https://tinyurl.com/593u85t4>

[20] As Carnegie Foundation for the Advancement of Teaching scholars note,

The COVID-19 pandemic saw schools the world over turn to digital technologies for continuing schooling millions of children. This rapid innovation has led to great enthusiasm about the potential for networked tools to provide more children with low-cost access to learning opportunities that might help minimize existing educational inequities. Ambitious initiatives to provide inexpensive computing power to those most in need have distributed networked laptops to children in remote villages and urban centers, in the hope that provision of access to content and modern tools would fuel learning. Although these experiments have yielded important insights, they largely failed to lead to significant transformation in educational practice (Gomez, Louis M., Biag, Manuelito, and Imig, David G. “Improvement Science: The Social Glue that Helps Helpers Help?”. In *Education: The Global Compact In A Time Of Crisis*. Columbia University Press, 2022. <https://bit.ly/3j7Rpva>)

[21] See Reimers <https://tinyurl.com/ykamzxc5>. See also, Daniel Kardefelt-Winther & Gunilla Olsson, <https://tinyurl.com/2p8kmf7e>. See also, Zollner, SJ <https://tinyurl.com/2vvwn28c> (3:10)

[22] Barron. “Education & Technology for Equity in Learning Opportunities”. In *Education: The Global Compact In A Time Of Crisis*. Columbia University Press, 2022. <https://bit.ly/3j7Rpva>

[23] See “Children in a Digital World – UNICEF, 2017” <https://uni.cf/3khSwaT>

[24] Wolf, Maryanne. “The Future of Literacy in a Digital Culture: Reconciling the Promise and Perils in our ‘Hinge Moment’”. In *Education: The Global Compact In A Time Of Crisis*. Columbia University Press, 2022 <https://bit.ly/3j7Rpva>

[25] Katzir, Tami. “The Feeling of Reading in a Changing World: From Neurons to Narratives”. In *Education: The Global Compact In A Time Of Crisis*. Columbia University Press, 2022. <https://bit.ly/3j7Rpva>

[26] See Sachs, <https://tinyurl.com/2vvwn28c> (2:00). See also Barber II, <https://tinyurl.com/3ayswenr> (1:14)

[27] “As of January 2022, the Agricultural Commodity Price Index is 25% higher than its January 2021 level. Maize and wheat prices are 20% and 25% higher, respectively, than their January 2021 levels”.

[28] See, Dryden-Peterson, <https://tinyurl.com/yyme26jzm> (3:05:40)

[29] According to the International Organization for Migration, the vulnerabilities of international migrants are “exacerbated ... with the COVID-19 pandemic”. Migrants have been affected by the pandemic in a number of ways – many have lost their employment in the destination country and have been unable to return to their home. Some of them ended up in an irregular status in destination countries... Others have been forced to stay in inadequate accommodation with limited COVID-19 safety measures in place. The families of migrants have also suffered through the loss of much needed remittances. Survey and interview respondents highlighted the plight, in particular, of migrant domestic workers who have been confined to private homes and exploited by abusive employers <https://bit.ly/3spMPvp>.

[30] See, Waters, <https://tinyurl.com/258t5vtr>

[31] Immigrant parents are more likely to become sick, to be hospitalized and to die from COVID-19, which has caused many children to lose a parent or grandparent, and some to be orphaned by the virus. Low-wage immigrant workers lost their employment and income as result of the economic shock, leaving families hungry and at risk of eviction. In the US in December 2020 41% reported food insecurity in the last year. Government aid specifically denied benefits to families where any member was an undocumented immigrant adding to the suffering of these families.

[32] Throughout history, “strangers” have been blamed for epidemics, and this has characterized COVID-19. <https://bit.ly/3pFgkc9>. Unscrupulous politicians exploited people’s fear of the virus and blamed it on Chinese people or Latino immigrants, leading to hate crimes and prejudice directed towards immigrants and their children.

[33] Farley also discussed the connections between resource extraction, prostitution, poverty, and climate change. Although resource extraction and prostitution have been viewed as separate phenomena, evidence shows that they are related harms that result in multiple violations of women’s human rights. The business of resource extraction and the business of sexual exploitation (prostitution) adversely impact women’s lives, especially those who are poor, ethnically or racially marginalized, and young. Farley discussed associations between prostitution and climate change on the one hand, and poverty, choicelessness, and the appearance of consent on the other. A number of human rights conventions are relevant to mitigation of these harms, including anti-slavery conventions and women’s sex-based rights conventions. Farley, <https://tinyurl.com/yc7jf3vp>. See, Al-Hashimi, M., Fukurai, H., Marchand, A., Singh, S., Ryser, R., Farley, M., Rogers, D., Delfanti, L. (2022) Nations’ Land Rights vs. Corporate Exploitation. *Fourth*

World Journal 21(2): 1-20. Olympia: Center for World Indigenous Studies; Farley, M. (2022) Exploiting Indigenous Peoples: prostitution, poverty, climate change, and human rights. *Fourth World Journal* 21(2): 117-123. Olympia: Center for World Indigenous Studies; Farley, M. (2021). Making the connections: resource extraction, prostitution, poverty, climate change, and human rights. *The International Journal of Human Rights*, 1-24. <https://prostitutionresearch.com/making-the-connections-resource-extraction-prostitution-poverty-climate-change-and-human-rights-2/>; Farley, M. (2020) Prostitution, the Sex Trade, and the COVID-19 Pandemic. *Logos - a journal of modern society & culture* 19 (1). <https://prostitutionresearch.com/wp-content/uploads/2020/06/Farley-Prostitution-Sex-Trade-COVID-19-pandemic.pdf>; Lee, A., Jay, S., and Melissa Farley (2021, March 25) Prostitution is a Racialized Hate Crime against Women. *Scheerpost* <https://scheerpost.com/2021/03/25/prostitution-is-a-racialized-hate-crime-against-women/>

[34] See, Farley, <https://tinyurl.com/yc7jf3vp>

[35] See, Yousafzai, <https://tinyurl.com/2vvwn28c> (55:00) See also, Black, M.M., Walker, S.P., Fernald, L.C., Andersen, C.T., DiGirolamo, A.M., Lu, C., McCoy, D.C., Fink, G., Shawar, Y.R., Shiffman, J., and Devercelli, A.E., 2017. Early childhood development coming of age: science through the life course. *The Lancet*, 389(10064), pp. 77-90.

[36] See, McCoy, D.C., Cuartas, J., Behrman, J., Cappa, C., Heymann, J., López Bóo, F., Lu, C., Raikes, A., Richter, L., Stein, A., and Fink, G., 2021. Global estimates of the implications of COVID-19-related preprimary school closures for children's instructional access, development, learning, and economic wellbeing. *Child Development*, 92(5), pp. e883-e899.

[37] See, Moya, A., Serneels, P., Desrosiers, A., Reyes, V., Torres, M.J., and Lieberman, A., 2021. The COVID-19 pandemic and maternal mental health in a fragile and conflict-affected setting in Tumaco, Colombia: a cohort study. *The Lancet Global Health*, 9(8), pp. e1068-e1076. See also, Cuartas, J., 2020. Heightened risk of child maltreatment amid the COVID-19 pandemic can exacerbate mental health problems for the next generation. *Psychological Trauma: Theory, Research, Practice, and Policy*, 12(S1), p. S195.

[38] See McCartney & Fenlason <https://tinyurl.com/2vvwn28c> (3:36:50). See, Caffo, <https://tinyurl.com/yme26jzm> (1:09)

[39] See, Caffo, <https://tinyurl.com/yme26jzm>

[40] See, Yousafzai, <https://tinyurl.com/2vvwn28c> (55:00)

[41] See, Giannini, <https://tinyurl.com/yme26jzm> (2:42:41)

[42] See, DeGoia, <https://tinyurl.com/3ayswenr> (57:16)

[43] See, Gamoran, <https://tinyurl.com/3ayswenr> (3:50)

[44] See Stone and Stone, <https://tinyurl.com/yckrezt4>

[45] See, Barber II, <https://tinyurl.com/3ayswenr> (1:14)

[46] See, Dryden-Peterson, <https://tinyurl.com/yyme26jzm> (3:05:40).

[47] See, Giannini, <https://tinyurl.com/yyme26jzm> (2:42:41)