

**Title: *Disruptions, Adjustments, and Hopes: The impact of the COVID-19 pandemic on child well-being in five Majority World Countries***

## **Abstract**

Emerging findings indicate the adverse impact of the COVID-19 pandemic on child well-being, especially those living in Majority World Countries (MWC), yet little is known on how children themselves experienced the pandemic across different sociocultural contexts. Drawing on integrated data from focus groups, diary entries, and drawings, we explored the impact of the pandemic on child well-being for 73 children from five MWC (South Africa, Kenya, Brazil, Turkey and Pakistan). We focus on the disruptions the pandemic caused, the adjustments made in response to these and children's vision of a post-pandemic world. Underlying children's experiences of loss, boredom, and concerns about educational progress, was an awareness of systemic inequalities that disadvantaged them or others in their community. Findings have implications on capturing children's voices through introspective and dialogical approaches that transcend cultures and for the development of preventive and responsive interventions during crises to enhance child well-being.

## **Keywords (3-5)**

Children, youth, COVID-19, Majority World Countries, well-being, inequalities

## Introduction

While the primary global focus for COVID-19 has been on biomedical consequences and the race to find effective treatments, a secondary but equally distinguished feature of the pandemic has been the range of public health measures that have curtailed human interaction and hampered economic activity. For specific populations, like children and adolescents (herewith referred to as children) (see Convention of Child Rights, UNICEF, 1989), the impact of these measures has been profound and hugely consequential. Safety measures like social distancing, business and school closures have resulted in challenges for children across multiple well-being domains, including health, education, care, and protection (UNICEF, 2020; Wong et al., 2020; Katz et al., 2021, Kola et al., 2021). For children living in Majority World<sup>1</sup> countries (MWC) (that is, countries where majority of the global population lives, also often referred to as Low- and Middle-Income or Majority South Countries), these challenges have been exacerbated by pre-existing systemic inequalities (Zar et al., 2020; Kola et al., 2021; Nwosu & Oyenubi, 2021; Türk et al., 2021). Longer-term negative repercussions may be more pronounced for these children, as inequalities are reinforced and further entrenched.

The added burden that socio-economic, geographic, cultural, political, and historical legacies have on children in MWC emphasises the multiple and complex ways in which systems intersect. A multi-level systemic perspective acknowledges the importance of both proximal and distal structures in determining well-being outcomes (Bronfrenbrenner, 1977; Ungar, 2018). Children's actions and relationships, their networks, and the resources of their caregivers, as well as national policies and context, contribute to and influence different domains of child well-being such as emotional, social, or cognitive development (Dornan & Woodhead, 2015).

In our multi-disciplinary, qualitative study, we acknowledge the importance of these systems and adopt a relational view that explores the ways in which children engage with both human and non-human aspects of the world, including technologies, systems, and historical eras (Spyrou et al., 2018). Using participatory methods, like "draw and talk", we invited children living in resource-poor contexts from Brazil, Kenya, Pakistan, South Africa, and Turkey to describe how they experienced the pandemic in light of pre-existing

challenges, the disruptions the pandemic caused to their ecologies, how they adjusted to the pandemic and their hopes for the future. This process of engaging with children to learn how they experience, understand, and shape their own lives, contributes to our knowledge of child well-being in the context of collective adversity (Helseth & Haraldstad, 2014).

### **Literature review**

Emerging literature indicates that intersections of the virus, public health measures, pre-existing inequalities, structural disadvantage, and limited community resources have created conditions that compound poverty and inequalities (Spaull et al., 2020; UNICEF, 2020). In many MWCs, hunger and food insecurity rates have increased, economic opportunities have diminished significantly, education has been erratic and, in some instances, non-existent, while gender-based violence and child abuse have increased (Josephson et al., 2021). Exposure to such adversity compromises the overall well-being of children and has negative consequence on their long-term trajectories (Patel et al., 2017).

From a systemic perspective, all experiences that a child is exposed to contribute to well-being. The recognition that child well-being is multi-dimensional is gaining traction. It includes domains of physical, emotional and social well-being and considers the immediate and future lives of children, as well as subjective and objective measures,. This is reflected in the definition of child well-being adopted by UNICEF (2007), which considers the physical health, safety, material security, education, socialisation, sense of belonging and care of children in assessing well-being. Child well-being is thus understood by incorporating both objective measures, like household income, and subjective measures, like children's perceptions of quality of life (Statham & Chase, 2010). Helseth and Haraldstad (2014) suggest that child well-being encompasses factors that contribute to optimal functioning for children, factors that promote their growth and development, and factors that improve their feelings of happiness and satisfaction with life, capturing both negative and positive aspects of the quality of a child's life. In our study we consider child well-being to include the physical health, psychological and social development, educational progress and safety of the child (Patel et al, 2021, UNICEF, 2020). We also consider the context in

which the child lives, acknowledging the impact that socio-economic conditions, service access and policies have on children (Bray & Dawes, 2007; Patel et al. 2021).

Banati et al. (2020) found that the economic fallout of lockdown measures increased food insecurity for children in Lebanon, the Ivory Coast, and Ethiopia. Similarly, research from other African countries (Ethiopia, Malawi, Nigeria, and Uganda) found that approximately 77% of the population lived in households that had lost income since the beginning of the pandemic (Josephson et al., 2021). Economic challenges adversely impact on household security and overall well-being (Posel et al., 2021). Findings from a national survey in South Africa found that depression scores were significantly lower for adults who retained employment during the lockdown than those who lost employment (Posel et al., 2021). Likewise, in an online and telephonic survey with over 2,000 youth in Kenya, Karijo et al. (2021) found that approximately 50% of the respondents reported a significant decline in income during the pandemic, with almost a third reported living in fear and 26.5% feeling stressed.

Educational provision and supports are similarly vulnerable to fluxes in surrounding systems, and in turn impact on child well-being (Dormady et al., 2021). Globally, school closures, as a containment measure, received mixed responses, with some research findings questioning its impact on transmission rates while simultaneously highlighting the adverse impact on children's cognitive, social, and emotional well-being (Lee, 2020; Josephson et al., 2020; Van Lancker & Parolin, 2020). Schools provide structure, emotional and social support, and, for many children living in poverty, access to food. The importance of school nutritional programmes in promoting academic performance and enhancing cognitive development is well documented; failure in accessing this basic necessity has been detrimental for many children living in poverty (Van der Berg et al., 2020).

UNICEF (2020) reports that approximately 1 in 7 children globally have missed more than three-quarters of in-person learning since March 2020; with school closures also influencing school attendance and dropout. For example, Josephson et al. (2021) found an estimated decrease of 50% in school attendance in four African countries due to lockdown. Research from South Africa suggests an estimated threefold school dropout for children between 7-

17 years (Spaull et al., 2021). In some countries and socioeconomic contexts, children had access to online platforms, while for many, including refugee and migrant children, lack of digital access meant a cessation of learning during periods when schools were closed (Mian & Chachar, 2020; Spaull et al., 2021, UNICEF, 2020). UNICEF (2020) suggests that at least 1 in 3 children could not access online learning during this period.

Reduced access, lost learning time and school dropout is a significant setback for children in the short- and long-term; permanent disengagement from the education system and curbing of educational aspirations impact on life skills acquisition, future employment opportunities, poorer income in adulthood, and continuation of poverty (Patel et al., 2017; OECD, 2020). Additionally, a significant body of literature points to a strong relationship between social disadvantage and poor child mental health (Patel et al., 2019). Several studies confirmed the observation about an increase in child mental health problems globally because of the pandemic (Baird et al., 2020; Cao et al., 2020; Lee, 2020; Orgilés et al., 2020; Singh et al., 2020, Zhou et al., 2020); for children in MWCs, this has been compounded by no or scarce resources and fragile health systems (Kola et al., 2021).

While there is a growing body of knowledge regarding the impact of COVID-19 on children, it is critically important to examine the effects in a child-centred way; creating spaces for children's voices to inform our understanding of the complex intersections between and across systems in MWCs in relation to child well-being during periods of crises. In this participatory study, by engaging with children, we incorporate a subjective assessment of how children experienced different factors along their socioecology, and how these influenced their well-being (Helseth & Haraldstad, 2014).

## **Method**

To date, children have been largely excluded from pandemic-related discussions and decision-making (Driscoll et al., 2021). However, a substantive body of evidence indicates that children are more than passive subjects (Larcher & Brierley, 2020); instead, when actively involved in research, children have found meaningful ways to support and protect themselves, their families, friends, and communities during the pandemic (Currie et al., 2020). In our multi-country exploratory, qualitative study, we privilege the voice of children

from five MWC contexts. Our approach recognises that children’s voices must be heard to inform policy debates that relate to their best interests and well-being (Livingstone & Bulger, 2014).

### **Context and participants**

In the sections that follow, we describe the research contexts of the five countries included in our study (Table 1) and the data generation techniques employed in each of these contexts (Table 2).

**Table 1: COVID-19 statistics in each of the five contexts**

	<b>Brazil</b>	<b>Kenya</b>	<b>Pakistan</b>	<b>South Africa</b>	<b>Turkey</b>
No. of confirmed cases (3/01/20 – 12/08/21) (WHO, 2021)	20,245,085	217,276	1,085,294	2,568,511	6,018,485
No. of deaths (3/01/20 – 12/08/21) (WHO, 2021)	565,748	4,273	24,187	76,247	52,703
Levels of school closure (January 2020 – May 2021) (UNICEF, 2020) (Note: this varied during different periods)	Recommended closing certain categories and level	Recommended closing certain categories and level	Recommended closing certain categories and level	Full closures	Recommended closing certain categories and level

*Brazil:* Rocinha is a large favela in Rio de Janeiro. It has a clinic; schools, and it enjoys proximity to employment opportunities and services. Challenges include poor sanitation, drug-related violence, and trafficking (See [www.data.rio/](http://www.data.rio/)).

*Kenya:* Kiti is in Nakuru city. It is one of the poorest residential areas in the city, with a large migrant and refugee population (Getanda et al., 2015). Many people in the area face deprivation of basic needs, social amenities, and technology/social media (Mugalavai, 2012).

*Pakistan:* Manzoor Colony Mehmoodabad is in Karachi. The area is challenged by crime, illegal occupation of land, poor housing, and lack of essential services.

*South Africa:* Emandleni and Wattville are located in Gauteng, on the outskirts of Johannesburg. The two areas neighbour each other. Though neighbouring, the former has limited access to essential services, while the latter is better resourced and has several schools and early childhood development centres. Both areas are challenged by crime and violence (City of Ekurhuleni, 2020).

*Turkey:* Karatay and Selcuklu are the two largest central districts located in Konya. Karatay is a low-resourced area, characterised by informal dwellings and apartments and a high crime rate (Mevlana Development Agency, 2016: 47). Selcuklu is more developed, and families of both low-medium and high SES live in close proximity.

### ***Participants***

In each country, we worked with local non-governmental organisations (NGOs) to identify and facilitate access to children in communities where the NGO had existing networks. We invited children aged 8-10 years and youth of 13-17 years to participate; we met separately with parents/caregivers and children to share information about the study. In total, 36 children and 37 youth took part in the study. Ethics approval was obtained from (anonymized) Research Ethics Committee. Parents provided written consent, and additional verbal assent was sought from children and youth.

Table 2 (below) summarizes the data recruitment strategy and the number of participants per context.



**Table 2: Recruitment strategy**

	<b>Brazil</b>	<b>Kenya</b>	<b>Pakistan</b>	<b>South Africa</b>	<b>Turkey</b>
Recruitment facilitated by:	Local music school (non-governmental organisation)	Church leader and youth leader	Local school	Community-based organisations	Municipal teaching institution
No. of Children (8-10 years)	8	4	9	7	8
No. of youth (13-17 years)	7	7	10	7	6
Where/How data was gathered	Online - Zoom platform (schools closed)	In-person Hotel conference facility (schools closed)	In-person NGO office	In person Community-based organisation	Online and In-person Educational institution

**Data collection**

We facilitated 20 focus groups (FG) consisting of two per age group at two-time points in each country. The “draw and talk” method was used to encourage discussion; this method is accessible, serves as a stimulus for communication, actively engages the young participant, and allows for collaborative meaning-making (Mitchell et al., 2011: 11).

In addition to the focus groups, we asked children and youth in each context to keep a diary of their experiences over one month. The diary captured real-time experiences and was used to elicit and stimulate a discussion during the focus group discussions. Participants were encouraged to write, draw, or stick pictures into the diaries. In each context, a stationery pack was given to children, together with a mask and snacks. Participants interacted with researchers via in-person sessions as well as virtually via the *Zoom* platform. Participants' access to digital technology and devices (including mobile phones, computers, the internet, and televisions) varied within and across sites. All participants in Brazil had access to wi-fi, television, and phones /smartphones with some data package. Some participants in Turkey, South Africa, and Pakistan had access to their own or a parents' device, and fewer participants in Kenya had access to any of these resources. Sampling

adequacy was assured within and across countries and groups, which is necessary for a thematic design (O'Reilly and Parker, 2013).

### **Data analysis**

We utilised thematic analysis to attend to the focus groups and diary data (Braun and Clarke, 2006). All data were translated and transcribed in-country. The data sets were combined and coded by two coders working independently. All data were then subjected to a thematic mapping consultation process by the multidisciplinary research team (which included a youth adviser, historian, geographer, sociologist, psychologists, psychiatrist, and digital technologies specialist). Each team member reviewed all the transcripts prior to the online consultation meetings. Two online sessions of three hours each were held where team members jointly reviewed transcripts and codes. Consensus discussions were held to reach agreement and conceptual categories were jointly agreed. In this paper, we do not present a comparative analysis, instead, we identified common themes across all five data sets while highlighting any emerging context-specific issues.

### **Findings**

Findings from across the five MWCs reflect how the pandemic disrupted children's well-being, impacting their mental health, family life, education, and community relationships and activities. An underlying thread throughout was the added vulnerability due to systemic inequities and disparities. Despite this, children adapted, sharing how they adjusted to the changes, drawing on both internal and external resources to cope. For children, the pandemic was recognised as temporary, allowing them to plan for life beyond this challenging period.

### ***Theme One: Experiences of the pandemic: individual, family, school, and community/social disruptions***

#### ***Individual-level disruptions***

Children typically referenced the difficulties adjusting to the new regulations and online learning (where this was happening), their feelings of loneliness and boredom, and frustrations at not pursuing the activities they usually did, such as celebrating functions and

visiting family. The image below (Image 1) shared by a child in Pakistan captures the range of changes because of the pandemic, which included social distancing, changes to school routines and mandatory mask wearing.



Image 1: Changes due to the pandemic (Girl, 16, Pakistan)

Despite their relative age-related protection from the virus, children were affected by the resulting illness, loss, bereavement, and mortality caused by the COVID-19 virus.

Participants expressed fear of the virus and loved ones getting ill, saying, *'I'm a little scared of COVID-19. I'm afraid someone in my family will get sick'* (Girl, 10, Turkey). While some spoke of personal experiences, citing loss within their communities, others oriented to a wider discourse of loss and its emotional consequences. In a focus group discussion, one young person from Kenya expressed sadness at a peer's loss, *'My week was not good. It was a sad moment to learn that one of our friends lost her dad to COVID-19'* (Girl, 16, Kenya). Another young person from Kenya was saddened by the global loss of life, saying, *'I have been feeling sad because it has killed a lot of people in the world'* (Boy, 15, Kenya).

There is a growing body of evidence documenting the emotional impact of the pandemic on children. Likewise, in our study, the pandemic and the resultant and varied lockdown measures impacted children's mental well-being. A significant difficulty for almost all of the children related to social isolation. Children shared feelings of loneliness and boredom,

missing friends, peers, and social activities. One young person in Turkey emphasized the monotony of lockdown, saying, *'It repeats every day and I think I'm dying of boredom'* (Girl, 14, Turkey) while another from Kenya emphasised the social impact and shared in her diary, *'I felt lonely. I did not have time to play with my friend in the neighbourhood'* (Girl, 16, Kenya). The ongoing nature of the pandemic appeared to be a common theme, making children weary and disoriented, as explained in this quote from Brazil,

*'At first, I thought I would be able to go back to my routine soon, but then months and a whole year went by, and the schools continued closed, nothing went back to normal. My head was getting a little confused, because my whole routine was a mess'. (Boy, 8, Brazil)*

School closures appeared to cause emotional distress for many, as conveyed by this child from Turkey who said, *'I'm very unhappy today. I learned that the school will not open'* (Girl, 9, Turkey). For another young person in Turkey, multiple negative experiences aggravated her well-being; the lockdown caused disruptions in friendships, and the continuous proximity with siblings appears to have led to family problems. Added to this were concerns regarding her education. She says,

*'Disgusting things happened to me: I broke up with my best friend, my lessons started to go down, my family and I started to have problems, my brothers and sisters are on me, I have exam stress. I want schools frozen until the pandemic is over. If this happens for one year, we won't lose anything, so we can get out much stronger'. (Girl, 15, Turkey)*

### **Family-level disruptions**

Children's experience of how the pandemic impacted the family ranged from the disruptions to regular family routines of spending time and holidays together to the worsening financial condition of their own or peers' families. As highlighted in the literature, the pandemic has resulted in significant job losses in MWCs; this has had numerous negative implications for children and families, with poverty and hunger increasing (Posel et al., 2020). One young person in South Africa highlighted how job losses impacted her family's well-being and parents' mental health, saying,

*'Most of my family members lost their jobs, so they could not provide as usual. They could not buy things for us kids to be happy. Our parents feel like they are not parents enough, because they are unable to support us financially'. (Girl, 13, South Africa)*

Children expressed sadness and even shame at the increasing financial difficulties and stressors facing the family. It appeared that, before the pandemic, some children and families were just managing, but the pandemic eliminated this tenuous safety. The following extract from the diary of a young person in Kenya draws attention to increasing food insecurity,

*'I was very sad because we didn't have anything to eat for breakfast. When I asked dad to give us some money, he said he was broke. My other siblings were crying because they were hungry'. (Girl, 15, Kenya)*

For another young person in Kenya, admitting that his family had no food was difficult, he shared,

*'I was affected the other day. It's hard to say but.... we slept hungry the whole family. We didn't, I mean we didn't have anything to eat. My mother didn't have any money to buy any food'. (Boy, 16, Kenya)*

In addition to food poverty, intensified because of the lockdown, children highlighted how economic challenges facing their families and their lack of access to digital technology constrained access to online educational platforms. A young person from Kenya shared, *'My parents don't have any TV, phones and computer, because they can't afford to buy them'. (Boy, 10, Kenya)*

### ***School-level disruptions***

For participants across all five countries, disruptions to schooling were of central importance. Schools provided access to education and learning, as well as access to peers and opportunities to socialize. Participants expressed sadness regarding school closures,

missing friends, concerns about switching to online learning (where this was an option), fears of falling behind, and some despaired at the lack of access to digital platforms.

Rotational schooling appeared to be challenging for some children. A child from Turkey begins a diary entry, saying, *'Today I want to tell you about sadness.....'* She describes her sadness at not being able to see a close friend at school, then she adds, *'I am waiting patiently, as I do not have the opportunity to find a solution to this problem. I look forward to the days when I will be in the same class with my dear friend [anonymised] and my other friends'* (Girl, 9, Turkey). One young person in Turkey shared the following difficulties at not seeing friends and having to learn online, she said,

*'My life has changed a little in a negative way. For example, about the lessons. In the past, we were discussing face to face in classrooms, I could talk with my friends during the breaks, we could do a lot of different activities. But now it wasn't very pleasant for me when I was in front of the screen. I do not understand the lesson very efficiently, but I repeat it later. But it is not very enjoyable'. (Girl, 14, Turkey)*

For a young person in South Africa, the unavailability of online learning meant time lost and academic challenges. She said,

*'We did not go to school and in my school, there was no online learning. So that affected me, because I was sitting at home, and I did not know what to learn. I did not know which topic I should focus on, so when you go back to school suddenly, they tell you that you have 15 days till exams, and now you have a pile of work, and you must go back and study everything. This may cause our brains to be unstable'. (Girl, 14, South Africa)*

Unequal access to education and learning platforms has been widely evidenced during the pandemic. In our study, this too emerged as a central concern for the young participants. Even within low-resource contexts, digital inequalities were present, with some participants having access to a wide array of technology, while others had limited or no access. Participants were aware of how this divide favoured some and disadvantaged others. For this child from Brazil, access did not appear to be a problem. She said,

*'Here at home, we have computers, mobile phones, and televisions, in my room and in my mother's room where we can watch Netflix. In the living room we can't watch it, there's only the regular cable TV. I use the mobile more, I don't have one of my own, I use my mother's when she's not using it. I also use the computer a lot, and there is my tablet, which I don't use much'. (Girl, 10, Brazil).*

However, for many others, the lack of access to digital devices meant they were falling behind with schoolwork. One young person in Turkey highlights his disadvantage,

*'My friends have a computer and tablet; they can attend online classes. I don't have it, I have to attend the online classes on the phone. I think my experience is more negative than theirs' (Boy, 15, Turkey).*

Participants were aware of this unequal access and how this impacted negatively on peers. One young person commented,

*'Some people don't have computers. I use mostly my mobile, but there are people who don't have internet and they end up being left out, they don't know about the news, and they don't attend the online classes. It is very bad for these people'. (Boy, 14, Brazil)*

Another young person from Turkey recognized the challenges facing migrant communities, saying,

*'My brother has a friend in his class, and he is a Syrian too. Only his father had a cell phone. He could not attend online classes because his father is at work during the school times'. (Boy, 10, Turkey).*

### **Community-level disruptions**

Children were not unaffected by what they observed in their extended family networks and communities. Disparities observed appeared to focus on access to education (mentioned above) and an awareness of growing hunger and economic strain in the community, as reflected by the following excerpts. The suggestion that some people or communities have resources while others are struggling highlights the unequal ways in which the pandemic

impacted communities in MWC. The following quotes draw attention to racial and socio-economic differences:

*'There are young people I know; they stay by the shop. They did not have enough food in their homes, so they had to go to the white people area to ask for food. They also had one meal per day'. (Boy, 15, South Africa)*

*'We had some friends who were not stable financially, so we gave them some groceries...tried to help them'. (Girl, 16, Pakistan)*

*'It was hard for daily wagers. It was sad seeing them in financial crisis'.  
(Boy, 15, Pakistan)*

Participants from South Africa spoke at length about the inequalities across socio-economic and racial groups. For many, this disparity was most visible in their inability to continue schooling; they were aware that, while their learning stopped, other children in private or better-resourced schools, had access and were progressing academically. One said, *'Other kids woke up and went to school, and on the other hand we were chilling in our homes because our school was not sanitized'* (Girl, 14, South Africa) and another added, *'Online learning was for students who paid school fees, but with government schools it was a different story'* (Girl, 14, South Africa).

Similarly, young people in Turkey highlighted the added difficulties that some communities, like refugees, experienced. One young person reported, *'I have a friend, he is Syrian, they cannot access technology at all, so he failed in the exams'* (Boy, 9, Turkey). In this, we see the connections that children make between material access, educational access, and well-being.

### **Theme Two: Resilience-building adjustments**

Despite the many challenges experienced, children drew on both internal and external resources to help them cope during this time. Internal mechanisms that facilitated resilience included meaning-making, future-oriented cognitions, faith, self-regulation, and distraction.



One young person in Pakistan viewed lockdown as an opportune time to think and prepare for her future, she said,

*'If we have free time at home, we should spend this time in thinking about our future that what do we want to become in future and, if we want to become an artist, then we should practice it that how to hold pencil and how to paint, etc. So, that it wouldn't be difficult for us in future'. (Girl, 17, Pakistan)*

In the image below, a young person from Kenya references her faith and belief in God to help her through this period, explaining of her drawing (Image 2), *'I have drawn a church because I love going to church, it makes me feel strong, and I know GOD will help me and provide for me'. (Girl, 9, Kenya)*

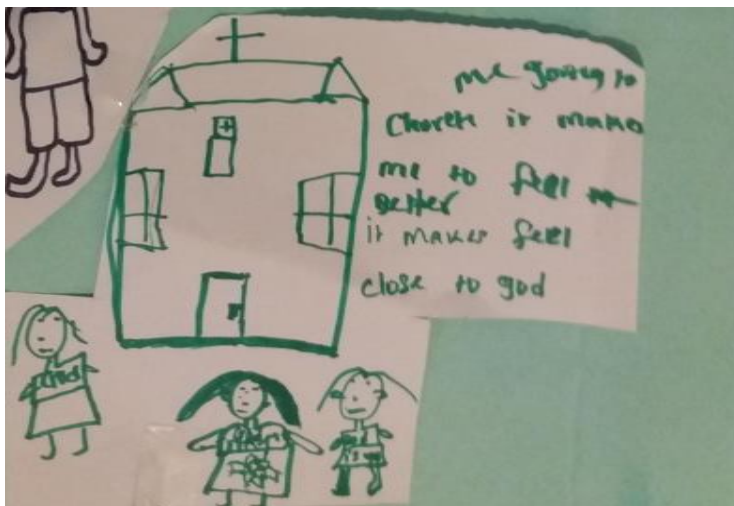


Image 2: Role of faith

Other children employed a range of self-regulatory mechanisms like drawing, music and art, to manage this period. A child from Brazil says, *'I like squeezing this ball that has Styrofoam inside, because it helps me take the stress away' (Boy, 10, Brazil)*. Another young participant from Turkey gives an example of what helps her, saying, *'For example, I didn't like listening to music or painting before. Now I'm doing both together and it feels so good, especially when I'm sad'. (Girl, 14, Turkey)*

Parents, extended family and peers appeared to be the most significant external resource. This child in Brazil describes how her mother kept her entertained during lockdown,

*'My mom too helped me the most. I used to get bored a lot in corona virus, so she was the one who used to tell me different activities, she kept me busy, so that is why it was easy for me'. (Girl, 9, Brazil)*

Of the image (Image 3) below, a child explains that spending time with family helped her cope with the challenges of the pandemic.



Image 3: Picnic with family

The importance of peer socialization (playing, spending time together) during childhood was also highlighted by others (Image 4). A child in Turkey shared, *'We study together with my cousins, we come together, read stories and tell each other. This is good for us'. (Girl, 9, Turkey)*

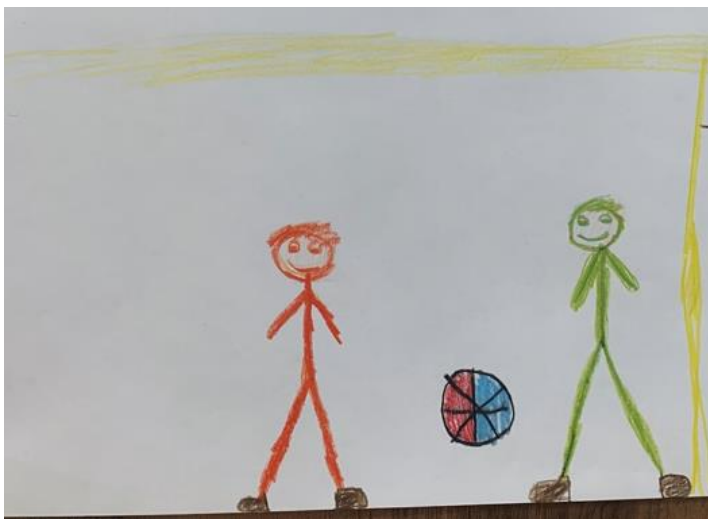


Image 4: Playing ball with a friend (Boy, 10, Turkey)

The image (image 5) below, shared by a young person in Brazil, encapsulates the importance of individual and relational resources in adapting to the pandemic. She writes,

*'In this difficult period, we need something to entertain us and cheer us up. Playing an instrument, reading, listening to music, hanging out with my family and watching a series, were the things that helped me the most through this moment, and I believe they can help many other people'. (Girl, 13, Brazil).*

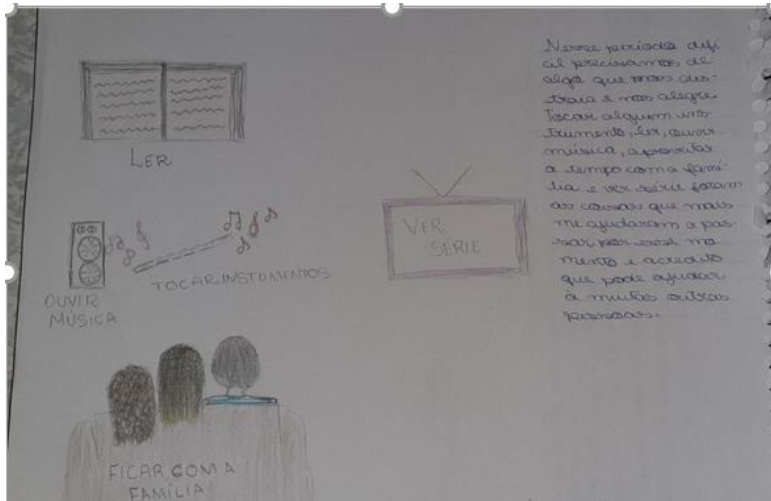


Image 5: Individual and relational resources

As indicated in the literature, schools represented access to more than just education. For many of our participants, schools also aided coping. This is reflected in the following comment from a young person in Turkey in response to what has helped her,

*'I would say my friends, and then the school! I realized the importance of the school after the pandemic. Before, I wished to have two weeks of school and five weeks holiday, but now I want to go to the school forever'. (Girl, 14, Turkey)*

### **Theme Three: Hopes beyond the pandemic**

While global politics work to ascertain the scope of a post-pandemic future in terms of living with the virus or eradicating its existence, the future of children and youth transcend its mere medical implications. In the imaginings of a post-pandemic world, participants across both age groups ascribed both individual aspirations as well as communal hopes.

A child from Brazil, shares a simple desire to resume normal activities once the pandemic is over, saying, *'I would feel very happy with the end of the pandemic, go back to playing in the street, swimming, going to school, studying, all of that'* (Boy, 10, Brazil). A child from Turkey captures a desire for freedom in a drawing he shares, saying, *'I drew riding a bike over a very long distance. I want to go every city in Turkey on a bicycle'* (Boy, 10, Turkey).

Across the contexts, participants shared hopes of a better, more equal world; with better access to education, employment, and health for all. One young person in Brazil said, *'Having doctors who are willing to help, because there may be a lot of doctors, but none are there to take care of people, to provide good care'* (Boy, 14, Brazil).

Echoing this call for better services and calling for greater governmental support for young people in terms of education and financial aid is this statement by a young person from Pakistan:

*'I think after pandemic, government should support students of colleges and schools by organizing campaigns where they can work as volunteer or internship kind of thing. Like half payment should be paid to students, so that they will be helped in this way. They will get stipend for their tuition or college fee, or they can pay for their books. Like there should be saving accounts for students, there should be some changes in rules too after pandemic'. (Girl, 16, Pakistan)*

This young person from Brazil, spoke of a wish for additional educational and recreational spaces that are accessible to more children, she says:

*'I would love to have more music schools available. A lot of people want to take music classes, but not everyone gets a place or knows there's a school. There are many people who live far away, who can't afford motorcycle taxi or bus fares every day. I think there should be more places, or even other sports for people to practice'. (Girl, 16, Brazil)*

These comments reflect children's understanding of historical inequalities, poor access to resources, and disparate access to services in their sociocultural contexts. Interestingly, children also consider the pandemic an opportune moment to introduce more equity.

### **Discussion and Recommendations**

Focusing on the voices of children provides a necessary understanding of their subjective assessment of the impact of the pandemic on various well-being domains. Through listening to children and youth we learn how the local and wider societal systems in which they are embedded intersect during a crisis and how the COVID-19 pandemic is shaping their immediate and future realities. The multi-level systemic approach and a multi-dimensional view on child well-being illustrated the disruptive impact of the pandemic on children's mental health, family life, school and educational progress, and socio-economic hardship facing their communities. Our findings further underscore the influence of children's relationships, family resources, public policies, and national contexts on children's well-being during COVID-19.

Findings from this study are consistent with emerging evidence regarding the psychological impacts of the pandemic on children, which has noted increasing anxiety, difficulties in concentrating, and behavioural problems (Lee et al., 2020; Orgilés et al., 2020). Likewise, for participants in our study, lockdown measures resulted in children feeling bored and irritable. Children's exposure to loss of life, both in their immediate environments and globally, also caused distress. Many of these children are unlikely to access help, given the limited mental health facilities in MWCs (Vostanis et al., 2020).

In addition to these challenges, children were also exposed to familial stress due to worsening economic conditions and food insecurity. Financial challenges meant that parents could not provide for families, impacting both caregivers' and children's mental health and well-being. Research shows that economic stressors during the pandemic heightened the risk for depression in adults (Posel et al., 2021) and exposure to parental stress influences children's mental health and well-being (Spinelli et al., 2020). Extensive research speaks to the relationship between systemic inequalities and risk factors in the development of a range of mental health problems in childhood (Broadman et al., 2015; Kohrt, 2013); the

presence of which may further exacerbate inequalities (Van Lancker & Parolin, 2020). In the absence of early intervention, these conditions may result in substantial emotional, behavioural, and relational deficits, with consequences for education and productivity (Sellers et al., 2019). It is thus imperative that mental health support and interventions be made available and accessible for both parents and children during and post-crises. In countries where mental health resources are scarce, innovative solutions that draw on indigenous knowledge systems and community resources should be explored.

Participants in our study were not oblivious to the social and economic disparities within their environments and the negative impact this has on some of them. Research (Patel et al., 2018) shows that children living in poorly resourced contexts are vulnerable to poorer health and social outcomes in the future, including disrupted education, unemployment, and reduced livelihood opportunities, maltreatment and exploitation, substance misuse, and poor health. In our study, children's reference to online schooling and limited access to digital platforms drew attention to the socio-economic disparities in each context. Children were aware of how their access either privileged or disadvantaged them and others. Their concerns about the impact of this loss of learning time on their future academic and employment aspirations is consistent with research showing that socio-economic status and access are significant predictors of educational success (Darmody et al., 2021). In response to these challenges, we concur with suggestions made by Human Rights Watch (2021) and UNICEF (2021), which argues for limiting school closures to a minimum and negotiating with key role players (teachers, education ministries, school governing bodies) to ensure that lost time is recouped. Additional recommendations include adapting teaching and learning outcomes to ensure learning in key priority areas and ensuring that children that have disengaged from school have opportunities to re-enter (Human Rights Watch, 2021). In addition to this, we recommend that the affordability of the internet service be improved through coordinated efforts of the private-public partnership, for example, between telecommunications companies and education ministries. Specific low-cost packages can be offered to schools and associated user accounts. Governments need to develop long-term and practical strategies for building the infrastructure to enable citizens to utilize digital connectivity with reasonable broadband speed, especially in hard-to-reach premises and rural areas. Regarding the provision of online education, alternatives independent of the

internet service, such as national education television networks, were already launched in some countries (Worldbank, 2021).

Despite multiple challenges, young participants from across the MWC displayed signs of resilience and adaptation, looking beyond this unprecedented period. They did this by drawing on internal resources that facilitated self-regulation and meaning making, and relationships that provided comfort and support. The importance of these resources has been discussed extensively in resilience research (Botha & van den Berg, 2016; Collishaw et al., 2016; Haffejee & Theron, 2019; Mosavel et al., 2015; Van Breda, 2018). Reliance on faith and religious beliefs is also consistent with existing research in contexts challenged by multiple adversities (Abuakibash & Lera, 2015; Panter-Brick & Eggerman, 2012; Wilson & Somhlaba, 2016). Knowing what helps children to adapt provides opportunities to develop contextually and developmentally relevant interventions and support systems to enhance diverse resilience.

Mingled with individual hopes and wishes for continuing education, playing with friends, and having fun, children's vision for a post-pandemic future reflected the need for social change in the form of greater structural support, and availability and access to services and resources. As indicated above, children appeared to understand that changing circumstances require more than just individual change. This understanding of the influence and role of external structure resonates with social justice and resilience perspectives, which argue for greater accountability from systems surrounding the child (Bottrell, 2013). Childhood hunger, poverty, and inequalities in education stem from historical, cultural, political, and economic factors. These influence multiple child well-being outcomes (Dornan & Woodhead, 2015). Addressing social inequalities, oppression, and other social injustices, requires the coordinated mobilization of these systems at policy and ground level (Evans, 2016; Farmer, 2004; Farmer et al., 2006).

### **Limitations**

Research cannot fully capture all aspects of a complex historical moment, and thus there were limitations to the work we report. The short duration of the project during a peri-pandemic period led to some constraints on the process of data collection. Nonetheless,

while the sample size is ostensibly small, it does represent voices from five countries and two developmental age groups. We acknowledge that the research sites are not necessarily fully representative of each country, as socio-economic status varied even within sites, like in Turkey. In difficult social circumstances, partnerships across countries ensured rich and valuable data, allowing us to showcase children's voices from areas not often represented in the research literature.

## **Conclusions**

Children's developmental trajectories, experiences, and well-being are shaped by multiple intersecting systems, all of which have been impacted by COVID-19. These multidimensional impacts require a multi-level, coordinated response. While children have found ways to adapt to the changing times, they are also acutely aware of the disparities in their ecologies and how these impact on their well-being. The solutions they offered shows promise for more equitable access and resource distribution. Including children from MWCs in discussions about their experiences is imperative for the delivery of services and in the development of contextually relevant, child-centred policies.



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<sup>i</sup> Majority World is a term coined by Shahidul Alam (2008) and is used to refer to the majority of the global population that lives in what is referred to as the developing world. The term *developing world* and *third world* are critiqued for the limited view of the countries grouped here and may be regarded as derogatory. See Shahidul Alam (2008) Majority World: Challenging the West's Rhetoric of Democracy, *Amerasia Journal*, 34:1, 88-98, DOI: [10.17953/amer.34.1.13176027k4q614v5](https://doi.org/10.17953/amer.34.1.13176027k4q614v5)