

The Impact of Covid-19 on the Social and Emotional Wellbeing among School-Aged Children in Minnesota, USA

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Abstract

This research study investigated the impact of Covid-19 on the social and emotional wellbeing of school aged children in Minnesota, USA. The study adopted a descriptive survey research design in which school-aged children completed a questionnaire enquiring about the impact of the Covid-19 pandemic on their social and emotional wellbeing during the period. A sample of 400 school-aged children were randomized from a population of 955,000 school-aged children in the Minnesota metropolis. The first stage involved the population being stratified into male and female, public and private schools before a sample of 400 school aged children were randomly selected. Two instruments were utilized: The Social Well-Being Scale (SWBS) and The Emotional Well-Being Scale (EWBS). The result revealed a significant difference ($\beta = .223$, $t = 3.667$, $p < .05$) leading to the conclusion that there was a significant impact of Covid-19 on emotional wellbeing among school-aged children in Minnesota, USA. Also, there is a significant impact of Covid-19 on social wellbeing among school-aged children in Minnesota, USA ($\beta = .607$, $t = 12.301$, $p < .05$). Lastly, there was a significant positive relationships between Covid-19 and social wellbeing ($r = .607$, $p < .05$), Covid-19 and emotional wellbeing ($r = .223$, $p < .05$), and social wellbeing and emotional wellbeing ($r = .230$, $p < .05$). The following recommendation was made. School authorities and stakeholders should develop targeted interventions on promoting social connections, providing mental health support, and fostering resilience among children. Governments should implement preventive measures to ensure access to remote learning resources, promote health education and prioritize mental health and wellbeing as integral components of the education system.

Keywords: Covid-19- Pandemic, Social Wellbeing, Emotional Wellbeing, School-Aged Children.

Introduction

The current global health emergency due to Covid-19, has caused the world's population including children and adolescents, to change their lifestyles and behaviors, despite the initial conflict in understanding and adapting to the changes brought about by the emergency. Likewise, the entities in charge of health care, such as hospitals, clinics, non-governmental, and governmental organizations have had to carry out sanitary measures conditioned to the implications of the disease. For example, psychological care has been adapted to take into consideration the increase in mental health

problems and thus the necessity for mental health care since the start of the pandemic.

According to [1], the Covid-19 is the disease caused by the novel coronavirus, also known as SARS-CoV-2, affecting mainly the respiratory system to produce respiratory insufficiency, in addition to acute respiratory distress syndrome, septicemia and septic shock, pulmonary thromboembolism and multiorgan failure. Other organs can be affected in addition to the lungs, which can cause heart, liver and kidney damage. The lethality of the disease is 2% compared to other diseases. Approximately 80% of people infected by it recovers, 15% deteriorate to a more

serious condition, and 5% enter a critical state. Thus, the extent of the disease infection itself generates alarm and concern in the population [1].

Covid-19 is transmitted directly through contact with an infected person, specifically when a person hosts the virus at the moment of coughing, sneezing or speaking. Droplets that are released from the nose or mouth of a person with Covid-19 into the mucous membranes of another person can cause the other person to become infected. If an infected person touches a surface that has been contaminated with these droplets and makes direct contact with their eyes, nose or mouth, they can become infected [2]. This is why one of the first considerations has been the use of the mask as a medium of protection, in addition to maintaining a minimum distance of one meter between individuals. Recent studies indicate that the burden of the virus is improved when a distance of four meters is maintained [3], and constant washing or disinfection of hands is practiced [4, 5]. Children, adolescents, and adults are required to follow the same guidelines (quarantine and isolation) if there is a risk they have been exposed to the virus or have presenting symptoms [2].

Children and adolescents have specific physical and emotional care needs especially in adolescence when they are in a process of identity consolidation, search for independence and autonomy. At this life stage, the family plays a fundamental role for adequate development with fewer psychosocial risks [6]. In a UN policy report [7] on the repercussions of Covid-19 on the mental health of children, it highlighted how severe Covid-19 has affected the emotional state and behavior of children. In the case of children, the current crisis has directly affected their perspective of life and how they view the future. For example, a study in the United Kingdom reports that 32% of adolescents identified that the pandemic worsened their mental health [7]. The psychological response to Covid-19 depends on the age of the minor, and reaction to

traumatic events or events that threaten his/her life or that of his/her family, making care necessary during and after confinement [8].

Covid-19 has a multifactorial impact on children and adolescents, triggered by stressors (which produce neuroinflammation and behavioral alterations), making these individuals more susceptible to developing a psychiatric disorder in the future [8]. Likewise, stress due to social isolation can induce greater food intake, and thus weight gain. As social beings, people need to create and maintain social ties. Unfortunately, the state of confinement does not allow attending schools, holding family or friendly meetings in a face to face format, but virtual connections.

Regarding the impact of epidemics on the health of parents, children and adolescents, it is of vital importance for governments to formulate policies that help develop strategies to face adversity [9]. A study conducted by [10] through an online questionnaire, determined that emotional reactions in school aged children are most prevalent during confinement (69.6%) and problems of sleep (31.3%), with behavioral reactions at 24.1%. The impact of Covid-19 on the routine and lifestyle of school aged children are enormous.

Likewise, [11] mentioned that this quarantine has mainly affected children and adolescents who have already suffered from a severe mental health condition, due to the special attention needed and the limitation of care services. [12] Concluded that the Covid-19 outbreak had a significant psychosocial impact in children and adolescents, emphasizing the need to address mainly the emotional distress and the presence of symptoms of anxiety and depression, with the possibility of developing other psychiatric disorders in adulthood. [13], through a systematic review determined that the most common diagnostic presentation during the Covid-19 pandemic is acute stress disorder, adjustment disorder, grief and post-traumatic stress disorder, which appears in the form of restlessness, irritability, anxiety, attachment and

inattention. In a study focused on children (5 to 11 years) and adolescents (12 to 17 years) residing in Canada, 1472 participants completed an online survey that evaluated the immediate changes in physical activity and gambling behavior during confinement by Covid-19. It was reported that there was a decrease in physical activity and sleep disorders during the outbreak [14]. This can be contrasted with a review in which it is mentioned that the impact of the outbreak should not only be addressed in terms of it being an infectious disease, but also the psychophysical impact due to the lack of physical activity and maintaining a balanced diet [15].

The Covid-19 pandemic has been a tragedy due to its health and economic consequences, and due to its strong impact on the mood and mental health of the population [16]. It is important to focus on a specific aspect of the impact of the pandemic on the population; its impact on the feelings, senses, and emotions experienced by people; that is, its subjective impact. Getting into the study of the impact of a socio-sanitary catastrophe such as the Covid-19 pandemic through the study of the emotions that it has generated in people, could seem an option too focused on the individual whereas it is a phenomenon whose main long-term consequences seem to be predominantly social. The emotions that human beings experience play a fundamental role in all social phenomena [17]. Sociologists of emotions have helped us, first, to understand what an emotion is, the countless number of existing feelings, and the great complexity of emotional processes. Secondly, they have revealed the social nature of human emotions, and the emotional nature of social phenomena. Thirdly, they have developed several theoretical approaches to studying emotions. And, lastly, they have carried out sociological analyses of many specific emotions; fear, trust, shame, and emotional analyses in many areas of sociology; gender, work, organizations, social movements [18]. In addition, integrating emotions into explanatory

models of various types of collective behavior has been extremely productive, for example, to understand people's political behavior in its institutional participation dimension [19], as well as in their participation in protests or social movements [20]. Therefore, this research study sought to describe the impact of Covid-19 on the social and emotional wellbeing of school aged children in Minnesota metropolis. Considering the sanitary measures established for Covid-19 and the implication of said measures in the lifestyle of the population, the following hypotheses were tested:

1. There is no significant difference in the impact of Covid- 19 on the social wellbeing of school-aged children in Minnesota, USA.
2. There is no significant difference in the impact of Covid- 19 on the emotional wellbeing of school-aged children in Minnesota, USA.

Methodology

The research methodology utilized to investigate the effects of Covid-19 on the social and emotional wellbeing of school-aged children in Minnesota-USA was adopted from existing literary evidence and scientific research. The research methodology addressed the methods and procedures used in the study. These include research design, population, sample and sample technique, instrumentation, data collection and data analysis.

Research Design

The study adopted a descriptive survey research design in which school-aged children in Minnesota-USA will be asked to complete a questionnaire enquiring about the impact of the Covid-19 pandemic on their social and emotional wellbeing during the period.

Sampling Technique

The research utilized stratified random sampling. A sample of 400 school-aged children were randomized from a population of 955,000 school-aged children in the Minnesota metropolis. The first stage involved the

population being stratified into male and female, as well as public and private schools before a sample of 400 school aged children were randomly selected. This technique captured key population characteristics that were proportional to the overall population and was helpful in gaining detailed knowledge of the effects of Covid-19 on the social and emotional wellbeing of school-aged children in Minnesota-USA. The technique provided a clear criterion and rationale for participant inclusion.

Data Collection Tools

Two instruments were utilized namely, The Social Well-Being Scale (SWBS) and The Emotional Well-Being Scale (EWBS). The Social Well-Being Scale (SWBS) was adapted from the Social Well-Being Questionnaire (SWBQ) which assesses how a person experiences his or her own social life and how this is related to the construct of social well-being [21]. The SWBS consists of 36 items in a 5-point Likert format, which consists of five categories. Strongly disagree (1), disagree (2), neither agree/disagree (3), agree (4) and strongly agree (5). On the other hand, The Emotional Well-Being Scale (EWBS) was developed by Portia and Shermila in 2015 for the purpose of measuring the emotional life of teacher participants. The EWBS contains 26 items in a 5-point Likert-type format with possible responses ranging from 1 = Strongly Disagree to 5 = Strongly Agree. Sample items on the scale include *in spite of physical and mental tortures*

in school/at work, I am calm and undisturbed, and I don't bother about ups and downs in my life. The developer reported Cronbach's alpha coefficient of .83 which showed that the items on the scale are internally consistent with one another. Factor analysis was used to confirm the construct validity of the scale.

Data Collection

Data was collected using an electronic poll for the randomly selected participants. This was completed by the Primary Researcher and trained Research Assistant within 4 weeks. This study was criterion-based. Criterion sampling involves selecting cases that meet some predetermined criterion of importance [22]. Criterion sampling can help identify and understand information-rich cases and provide an essential qualitative component to quantitative data.

Data Analysis

Data was analyzed according to the following hypotheses:

1. Hypothesis one was analyzed using Independent –t –test.
2. Hypothesis two was analyzed using one way ANOVA.

Results

Hypotheses 1

There is no significant impact of Covid-19 on social wellbeing among school-aged children in Minnesota, USA.

Table 1. Coefficients of Simple Linear Regression Analysis for Impact of Covid-19 on Social Wellbeing

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	16.034	1.437	-	11.161	.000
	Covid_19	.714	.058	.607	12.301	.000

Dependent Variable: Social Wellbeing

Table 1 revealed significant results ($\beta = .607$, $t = 12.301$, $p < .05$). The null hypothesis is therefore rejected, while the alternative hypothesis is upheld, leading to the conclusion

that there is a significant impact of Covid-19 on social wellbeing among school-aged children in Minnesota, USA.

Hypotheses 2

There is no significant impact of Covid- 19 on

emotional wellbeing among school-aged children in Minnesota, USA.

Table 2. Coefficients of Simple Linear Regression Analysis for Impact of Covid-19 on Emotional Wellbeing

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	13.998	4.527	-	3.092	.002
	Covid_19	.669	.182	.223	3.667	.000

Dependent Variable: Emotional Wellbeing

Table 2 revealed significant results ($\beta = .223$, $t = 3.667$, $p < .05$). The null hypothesis is therefore rejected, while the alternative hypothesis is upheld, leading to the conclusion that there is a significant impact of Covid-19 on emotional wellbeing among school-aged children in Minnesota, USA.

Discussion

The finding of the first hypothesis was that there is a significant impact of Covid-19 on social wellbeing among school-aged children in Minnesota, USA. This suggests that the pandemic has negatively affected children's ability to connect with others and maintain social relationships, which is likely due to the disruptions in daily routines, limited social interactions, and increased isolation caused by the pandemic. The finding of a significant impact suggests that this issue should be a priority for policymakers, educators, and parents to address.

The Minnesota Department of Health has put up severe measures and recommendations to protect its residents against the impact of Covid-19. These recommendations include getting vaccinated, wearing a mask, getting tested, avoiding contacts, staying home if sick, maintaining ventilation, washing hands, and have access to treatment [23]. Specific policies have also been put in place by law makers and stake holders to address different entities and businesses operating in Minnesota that have been impacted by the Covid-19. These

documents provides a list of guidance available for Covid-19 response [23].

The finding of the second hypothesis was that there was a significant impact of Covid-19 on emotional wellbeing among school-aged children in Minnesota, USA. This suggests that the pandemic has negatively affected children's mental health and emotional stability, which could be due to factors such as increased stress, anxiety, and uncertainty caused by it. This suggests that the pandemic has affected children's ability to socialize and interact with others, potentially leading to feelings of isolation and loneliness. This finding corroborated [10] report that children manifested negative emotional reactions such as sleep disturbance. The finding also supported those of [24, 25] who found that most children and adolescents infected with Covid-19 appeared to have mild to moderate symptoms of mental and emotional health problems such as anxiety, stress, depression, and panic disorder.

In the context of race, 44% Asian, 31% Black, 40% Latinx and 30% White students reported declining emotional health [26]. It was similarly observed that Black, Latinx and Indigenous communities as well as children with disabilities and refugee or immigrant communities experienced more significant negative effects of the Covid-19 pandemic [27].

Conclusion

Based on the findings of this study, it was concluded that the Covid-19 pandemic has affected children's ability to engage in social

activities, maintain relationships and experience a sense of belonging.

The pandemic has caused emotional distress and potentially affected their mental health and overall well-being. Furthermore, as the pandemic's impact increased, there was a corresponding decrease in both social and emotional wellbeing among school-aged children.

Recommendations

Based on the findings of this study, the following recommendations were made:

1. School authorities and other stakeholders should develop targeted interventions focused on promoting social connections, providing mental health support, and fostering resilience among children.
2. Schools should collaborate with community organizations and resources to ensure comprehensive support for children's social and emotional wellbeing. This can involve partnerships with mental health professionals, community centers and youth organizations to provide additional support services, extracurricular activities, and safe spaces for children to express themselves and build social connections.
3. Governments and other stakeholders should, in order to minimize the impact of future pandemics or crises on children's wellbeing, implement preventive measures. This can include developing contingency plans,

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ensuring access to remote learning resources, promoting health education, and prioritizing mental health and wellbeing as integral components of the education system.

4. Regular monitoring and evaluation of the implemented interventions should be made by regulatory bodies to assess their effectiveness and make necessary adjustments. This will help ensure that the support provided meets the evolving needs of school-aged children and inform future interventions and policies.

Conflict-of-Interest Statement

The author whose name is listed immediately below certify that they have NO affiliation or involvement in any organization or entity with any financial interest. The author certify that the submission is original work and is not under review at any other publication.

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