The Psychosocial Impacts of COVID-19 on Children: A Parents' Perspective

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By

Nontokozo Macingwane

Master of Arts

Social and Psychological Research

Supervisor: Dr Mpho Mathebula

School of Human and Community Development

Department of Psychology

University of the Witwatersrand

UNIVERSITY OF THE
WITWATERSRAND,
JOHANNESBURG

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ABSTRACT

The societal and psychological repercussions of the COVID-19 pandemic on children have become a crucial focus, necessitating thorough examination. Given the pandemic's disruptions in various aspects of children's lives, ranging from education to social interactions, a comprehensive investigation is vital to unravel the intricate impacts on their well-being and development. This Qualitative research delves into the psychological and social consequences of COVID-19 on children aged 6-17 in Gauteng, South Africa. Through semi-structured interviews with seven participants, including parents and guardians, the study aimed to discern the psychological and social effects of the pandemic on their children. Employing thematic analysis, six major themes were identified: Psychological and Emotional Impact, Fear and Anxiety, Adjustment to Changes in Routine and Social Contact, Changes in Everyday Functioning, Impact on Learning and Education, and Changes in Behaviour and Emotions Post-Lockdown. The thematic analysis uncovered a range of emotional responses among children during the COVID-19 pandemic, including loneliness due to extended indoor confinement and diverse expressions of fear and anxiety. Furthermore, the findings emphasized the challenges in adapting to changes in social contact and routine, disruptions in everyday functioning, and notable consequences on children's learning and education. The COVID-19 pandemic significantly impacted the psychological well-being and social functioning of children, underscoring the need for focused support to enhance their resilience and overall well-being. The findings highlight the importance of prioritizing social connections, adaptive coping mechanisms, effective reintegration into educational settings, and collaborative efforts among stakeholders to support children's psychological resilience and overall well-being during and after the crisis.

Key Words: *Children, COVID-19, Psychological Impact, Social Impact*

Declaration

I, Nontokozo Macingwane, declare that this research report is a product of my independent work. I am submitting it for the Master of Arts in Social and Psychological Research at the University of the Witwatersrand, Johannesburg. This work has not been presented for any previous degree or examination at this university or any other institution.

Signed: 

Date: 23/02/2024

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CHAPTER 1: INTRODUCTION

1.1 Introduction

The psychosocial impacts of the Coronavirus Disease-2019 (COVID-19) on children represent a crucial area of inquiry amid the global pandemic. As the virus rapidly spread across the world, children found themselves grappling with multifaceted challenges that extended beyond immediate health concerns. The closure of schools, implementation of social isolation measures, economic hardships faced by families, and disruptions to routine activities have collectively shaped the psychosocial landscape for children. This exploration delves into the unique experiences of children during the pandemic, aiming to unravel the complexities of their emotional and social well-being in the face of unprecedented global changes.

1.2 Background of the Problem

The global outbreak of the Coronavirus Disease-2019 (COVID-19), caused by the novel corona virus SARS-CoV-2, precipitated unprecedented challenges across the world (Umakanthan et al., 2020). Beyond its immediate health implications, the pandemic cast a profound impact on various aspects of society, particularly vulnerable populations such as children (Shereen et al., 2020; Saladino et al., 2020). South Africa, like many other nations, grappled with the multifaced repercussions of the virus (Adebiyi et el., 2021).

In the context of South Africa, the COVID-19 pandemic unfolded against a backdrop of existing social, economic, and healthcare disparities (Adebiyi et el., 2021). The country, characterised by diverse cultural landscapes and socioeconomic conditions, faced unique challenges in managing psychosocial implications of the virus, especially among children (Adebiyi et el., 2021). Although COVID-19 has been contained, its impact extends beyond immediate health concerns, intertwining with pre-existing issues and exacerbating vulnerabilities (Shereen et at., 2020).

Children, as a particularly susceptible demographic, experienced the effects of the pandemic in distinctive ways (Bloom et al., 2022; Kim et.al., 2022). The closure of schools, social isolation measures, economic hardships faced by families, and disruptions in routine activities potentially influenced the psychosocial well-being of children (Bloom et al., 2022; Kim et al., 2022). These circumstances underscore the importance of investigating and understanding the nuanced psychosocial impacts of COVID-19 on children within the South African context.

While extensive research has been conducted globally on the broader implications of the pandemic (Caggiano et al., 2020; Hiscott et al., 2020; Pawar, 2020), there is a noticeable gap in the understanding of specific psychosocial challenges faced by children in South Africa. Existing studies, such as those conducted by (Bloom et al., 2022; Evelyn Thsehla & Hofman, 2023) often lack granularity in addressing the experiences of South African children during the global health crisis.

This research study seeks to bridge the gap by delving into the psychosocial impacts of COVID-19 on children aged 6-17 years in South Africa. This study aims to contribute valuable insights that can inform interventions, and support systems tailored to the needs of South African children. The research intends to uncover the intricacies of children's experiences, shedding light on both the challenges and resilience exhibited within this specific cultural context. In doing so, this research study aspires to advance our understanding of the psychological and social dimensions of the pandemic on the well-being of South African children.

1.3 Statement of the Problem

The COVID-19 pandemic, a contagious respiratory ailment that emerged from the wet markets of China in December 2019, has evolved into a global health crisis with far-reaching implications across age groups and societal landscapes (Umakanthan et al., 2020). Stemming from a coronavirus strain, this novel virus has not only posed a significant threat to physical health but has also cast a profound shadow on mental well-being and presented formidable societal challenges (Shereen et al., 2020; Saladino et al., 2020). As the world grappled with the rapid spread of the virus, various preventative measures, including the widespread adoption of masks, emphasis on hand hygiene, and the enforcement of physical distancing, were implemented in a bid to curb its transmission. Additionally, the development and distribution of vaccines emerged as a pivotal strategy to safeguard individuals against severe illness and hospitalization, offering a glimmer of hope during the pandemic.

The undeniable impact of COVID-19 on children has been a focal point in numerous studies that have sought to address the psychological and social well-being of this vulnerable demographic during the ongoing crisis. Research conducted by Bloom et al. (2022) and Kim et al. (2022), among others, has predominantly focused on the objective effects of the pandemic on children, providing critical insights into the challenges they face. Bloom et al. (2022) documented significant psychological and emotional impacts on children, including heightened

feelings of loneliness due to extended periods of indoor confinement, increased fear, and anxiety stemming from uncertainty and disruption to routine activities. Additionally, disruptions in social contact and educational settings have presented substantial challenges for children's social development and academic progress. Kim et al. (2022) highlighted further issues faced by children, such as difficulties adapting to abrupt changes in daily routines and limited social interactions. The study revealed notable consequences on children's learning and education, with disparities in access to remote learning resources exacerbating educational inequalities. However, a discernible gap persists in the literature, particularly regarding the subjective experiences of parents and caregivers in relation to the pandemic's impact on their children. The dynamic interplay between the child's perspective and the parent's perception is a crucial aspect that requires deeper exploration, as it holds the potential to unravel a more comprehensive understanding of the multifaceted consequences of COVID-19 on children.

The COVID-19 pandemic presents a significant problem for children due to its pervasive effects on physical health, mental well-being, and social development. Children are particularly vulnerable to the indirect impacts of the pandemic, including disruptions to routine activities, limited social interactions, and challenges in accessing educational resources. These disruptions can have long-lasting consequences on children's overall well-being and development, underscoring the urgent need for research to explore and address the complex ramifications of COVID-19 on children's lives (Umakanthan et al., 2020; Shereen et al.,2020).

1.4 Rationale

Several studies done during the COVID-19 pandemic consciously excluded children from their research endeavours, primarily driven by ethical considerations inherent in investigating this vulnerable population. El Seira, Adriany, and Kurniati (2020) underscored the myriad challenges faced by researchers when attempting to study children during the outbreak, highlighting ethical concerns that prompted a cautious avoidance of face-to-face interactions to safeguard the well-being of the children involved in data collection. Consequently, the studies on the psychological and social impacts of COVID-19 on children leaned towards a more objective and quantitative orientation, perhaps as a pragmatic response to the ethical complexities associated with direct engagement.

To achieve a more comprehensive and nuanced understanding of the psychosocial impacts on children, a qualitative approach becomes imperative. The intricacies of children's experiences, emotions, and coping mechanisms demand a more in-depth exploration that goes beyond

quantitative metrics. However, within the South African context, there is a glaring scarcity of qualitative studies specifically focusing on the psychosocial impacts of COVID-19 on children. This dearth of qualitative research limits the depth of insights available and hampers efforts to tailor interventions and support systems that address the unique needs of children.

This research endeavours to contribute significantly to the existing body of knowledge by shifting the focus towards the subjective experiences of parents in understanding the psychosocial impacts of COVID-19 on children. By exploring the intricate interplay between parental perspectives and the well-being of children aged 6-17 in Gauteng, South Africa, this study aspires to offer nuanced insights that can inform targeted interventions, support systems, and policy decisions tailored to the unique needs of children in this region during and beyond the pandemic.

In essence, the exclusion of children from many studies, coupled with the predominance of quantitative approaches and the scarcity of qualitative research within the South African context, underscores the urgency of adopting a more holistic and culturally sensitive investigative approach. By employing qualitative methods that delve into the lived experiences, perceptions, and emotions of children in the wake of COVID-19, this research study seeks to fill the existing knowledge gaps and enhance our overall comprehension of the psychosocial impacts on this vulnerable population within the South African context.

1.5 Research Aim

To explore the psychological and social impacts of COVID-19 on children aged 6-17 years in Gauteng, South Africa.

1.6 Research Objectives

1. To explore parents' perceptions and understanding of the psychological and social impacts of COVID-19 on children.
2. To explore children's adjustment to the national lockdown restrictions
3. To explore children's adjustment after the pandemic.

1.7 Research Questions

1. What are parents' perceptions and understanding of the psychological and social impacts of COVID-19 on children?
2. How did children adjust to the lockdown restrictions during the COVID-19?

3. How did children adjust after the pandemic?

1.8 Summary of Research Methodology

In this research, a total of seven participants, including adults with children and young adolescents aged 6-17, were interviewed using snowball sampling through social media platforms. Participants included parents, aunts, uncles, grandparents, and older siblings, representing diverse familial roles. Exclusion criteria were applied to individuals with severe mental health conditions, and the study focused exclusively on participants residing in the Gauteng province. The research adopted an interpretive research paradigm to understand the subjective meanings individuals assign to their experiences during the COVID-19-2019 pandemic. Data was collected through in-person, semi-structured, and in-depth interviews lasting approximately 45 minutes to 1 hour, focusing on children's reactions during lockdowns and the post-pandemic period. Ethical considerations were prioritized, including obtaining ethical clearance, written informed consent, and maintaining confidentiality. Thematic analysis was employed for data analysis, ensuring a rigorous and systematic approach to uncovering the psychological and social impacts of COVID-19 on children.

1.9 Chapter Outline of the Research Report

Chapter 1 serves as the introduction to the study, delineating the statement of the problem and providing the rationale for the research. The chapter outlines the aim and objectives that underpin the study, setting the stage for a comprehensive exploration of the psychosocial impacts of COVID-19 on children in the South African context.

In Chapter 2, the literature review unfolds, offering a detailed discussion of existing literature on various dimensions: COVID-19, its impact on children, the specific context of South Africa, and the theoretical framework guiding the study. This comprehensive review provides a foundation for understanding the broader landscape and theoretical underpinnings of the research.

Chapter 3 shifts focus to the methodology, placing the study within a descriptive framework. It provides insight into the sample selection process, which involved seven parents and guardians sharing their experiences. The chapter details the methods of data collection and analysis, emphasizing their completeness, relevance, and meaningfulness. Ethical considerations are also expounded upon, ensuring transparency and ethical integrity in the research process.

Moving on to Chapter 4, the findings of the study are presented and discussed in-depth, utilizing thematic data analysis, and drawing connections to relevant theoretical frameworks. This chapter unfolds the nuanced complexities of the psychosocial impacts of COVID-19 on children, supported by verbatim quotes and a thorough exploration of the data.

Chapter 5 serves as the culmination of this study, encapsulating conclusions drawn from the research. This chapter synthesizes key insights gained, emphasizing their implications and potential applications in understanding, and addressing the psychosocial impacts of COVID-19 on children in the South African context. It primarily comprises a detailed discussion, providing comprehensive insights into the themes identified through thematic analysis.

Chapter 6 is dedicated to exploring the limitations of the current study. It critically examines the constraints, challenges, and potential biases inherent in the research methodology. Additionally, Chapter 6 provides valuable recommendations for future research, emphasizing areas for improvement and suggesting avenues for further investigation into the psychosocial impacts of COVID-19 on children.

CHAPTER 2: LITERATURE REVIEW

2.1 Introduction

This chapter undertakes a comprehensive exploration of existing literature, focusing on four pivotal dimensions: COVID-19, its impact on children, the South African context, and the theoretical framework guiding the research. By synthesizing and critically analysing the wealth of knowledge available, this chapter lays the groundwork for a more informed and contextually rich investigation into the psychosocial impacts of the COVID-19-2019 on children in South Africa. The examination of global implications, specific effects on children, unique challenges in the South African context, and the theoretical lenses employed ensures a robust foundation for understanding the multifaceted dynamics of the research topic.

2.2 Coronavirus Disease-2019

The World Health Organization (WHO) made a landmark declaration on March 11, 2020, officially classifying the COVID-19-2019 (COVID-19) as a global pandemic. This decisive move came in response to the escalating number of coronavirus cases worldwide (Kakodkar et al., 2020). At the core of this pandemic was the novel coronavirus, scientifically identified as SARS-CoV-2, marking the seventh known coronavirus capable of affecting humans and causing the disease now universally recognized as COVID-19 (Platto et al., 2020).

According to insights provided by (Berche, 2023), two prevailing theories sought to unravel the origins of COVID-19. The first posited that the outbreak emerged in China towards the end of 2019, attributing the genesis to the consumption of animals carrying the pathogen. The second theory suggested a potential laboratory incident involving gain-of-function manipulation of SARS-CoV-2.

Tracing the initial cases of COVID-19 back to Wuhan, the epicentre of the outbreak, attention was drawn to a seafood market that featured live species of bats, pangolins, snakes, and badgers (Kakodkar et al., 2020). Research findings by various sources, including (Gibson et al., 2020; Melo Neto et al., 2020; Platto et al., 2020; Qureshi et al., 2021), converged on the conclusion that bats played a pivotal role in the virus's genesis. Snakes and pangolins, identified as intermediary hosts, further fuelled the transmission of the virus (Melo Neto et al., 2020).

A critical aspect of the virus's evolution was its ability to become infective through contact with an animal reservoir. This reservoir served as an environment conducive to the virus's multiplication and acquisition of genetic mutations. These mutations played a pivotal role in

enabling the coronavirus to cross species boundaries, proliferate, and effectively infect human hosts (Platto et al., 2020).

As the world grappled with the relentless spread of COVID-19, the WHO, in an online report, grimly reported staggering figures. From December 2019 to July 2023, the global tally surpassed 767 million confirmed cases, with a devastating toll of over 6 million reported deaths (WHO, 2023). The gravity of these numbers underscored the profound impact of COVID-19 on a global scale, leaving societies, healthcare systems, and economies strained in unprecedented ways.

2.2.1 COVID-19 Transmission

Melo Neto et al. (2020) provides valuable insights into the persistence and transmission dynamics of the coronavirus. Their research highlights that the virus could maintain its infectious viability on inanimate surfaces within the temperature range of 21-23 degrees Celsius for up to three days. This revelation underscored the importance of stringent hygiene measures and surface disinfection to curb the potential spread of the virus.

Examining the incubation period of the coronavirus, the research by (Melo Neto et al., 2020) revealed a variable timeframe ranging from one to fourteen days. Notably, instances were documented where an extended incubation period of 24 days was observed.

Melo Neto et al. (2020) identified two critical factors influencing the transmission of the coronavirus. Firstly, the virus exhibits contagiousness during its incubation period, implying that individuals could transmit the virus even before manifesting symptoms. This feature heightens the challenge of early detection and containment. Secondly, individuals infected with the virus remain contagious for the duration of their symptomatic phase, extending the risk of transmission throughout the course of illness and even on clinical recovery.

Several additional factors are implicated in the transmission dynamics of SARS-CoV-2. Daily habits, encompassing frequented places and personal hygiene practices, played a role in the likelihood of viral spread (Djordjevic et al., 2021). Environments with lower temperature and humidity were identified as facilitating faster transmission. Closed spaces where individuals shared breathing air were noted as high-risk settings for virus transmission.

2.2.3 Clinical Symptoms of COVID-19

The clinical landscape of COVID-19 unfolded with a remarkable spectrum of manifestations, varying from mild to severe, and even critical. Understanding the nuances of these clinical presentations is pivotal in devising effective strategies for detection, management, and long-term care.

As elucidated by Gao et al. (2021), the elusive nature of asymptomatic cases poses a unique challenge. Unlike symptomatic individuals, those with asymptomatic manifestations show no overt clinical symptoms or abnormal imaging findings. Remarkably, the absence of a specific incubation period for asymptotic symptoms makes early detection a complex task. Gao et al. (2021) underscored that despite the lack of apparent symptoms, asymptomatic individuals remain capable of testing positive for COVID-19 through the Transcriptase-polymerase chain reaction (RT-PCR) test. The revelation that asymptomatic carriers retained the potential to transmit the virus to others emphasized the need for widespread testing and preventive measures.

Tragically, a substantial number of asymptotic cases went unnoticed due to the lack of obvious symptoms and poor prevention awareness. This inadvertent oversight significantly contributed to the swift global dissemination of the virus. The global health community faced the challenge of not only identifying and isolating symptomatic cases but also implementing strategies to detect and contain the elusive asymptomatic carriers.

Moving to the mildest end of the spectrum, the most common clinical symptoms associated with COVID-19, as reported by (Gao et al., 2021), include a constellation of discomforts such as sore throat, muscle pain, fever, fatigue, cough, nasal congestion, headache, anorexia, malaise, and diarrhoea. While individually these symptoms might appear mild, collectively they play a significant role in the detection of the virus. Alimohamadi et al. (2020) highlighted the importance of recognizing these mild symptoms as they served as indicators for further testing, quarantine measures, and contact tracing, thereby contributing to the broader effort of controlling the virus's spread.

Individuals with mild symptoms of COVID-19 typically do not exhibit dyspnoea or shortness of breath, and their imaging findings remained within the normal range. This category of patients, as suggested by the National Institutes of Health (NIH, 2023), often received treatment at home through telemedicine or in an ambulatory setting, underlining the feasibility of managing mild cases outside of the hospital environment.

Moderate clinical manifestations, characterized by shortness of breath and mild pneumonia symptoms on chest imaging (Gao et al., 2021), presents a more challenging scenario. NIH (2023) recommended close monitoring for individuals experiencing moderate symptoms due to the potential for rapid progression. While these cases fall short of severe manifestations, the need for vigilant observation underscored the dynamic nature of the disease and the significance of timely intervention.

Severe symptoms of COVID-19 signal a more critical phase, encompassing respiratory infection symptoms, shortness of breath, and oxygen saturation levels equal to or below 93% (Gao et al., 2021a; NIH, 2023). The severity of these symptoms warrants hospitalization, where patients receive oxygen therapy to address the compromised respiratory function. The rapid clinical deterioration observed in severe cases underscored the importance of timely and targeted medical intervention.

At the apex of the clinical severity spectrum lies the critical manifestations of COVID-19, representing the most severe cases. These critical symptoms include a rapid progression of the disease, respiratory failure, cardiac shock, thrombotic disease, organ failure, and exacerbation of underlying comorbidities (Gao et al., 2021a; NIH, 2023). Patients experiencing critical symptoms often find themselves in the Intensive Care Unit (ICU), where a multidisciplinary approach is employed to manage the complexities of the disease. Treatment strategies include the use of immunomodulators to modulate the immune response, addressing any comorbid conditions, and managing nosocomial complications.

Post-recovery, individuals who successfully battle COVID-19 may face a new phase of challenges, as discussed by (Kamal et al., 2021). The long-term effects and manifestations that persisted after recovery required thorough evaluation and targeted treatment. The study revealed that approximately 10.8% of recovered patients remained asymptomatic, providing insights into the subset of individuals who might be overlooked in post-recovery care. Furthermore, a significant proportion of individuals experienced lingering symptoms and new conditions, shedding light on the importance of comprehensive post-recovery care programs.

Fatigue emerged as the most common post-recovery symptom, affecting a considerable portion of individuals who had battled the virus. This persistent fatigue, often described as post-viral fatigue syndrome, presents a challenge for both patients and healthcare providers. Understanding and addressing these post-recovery symptoms is integral to ensuring the holistic well-being of individuals who had weathered the acute phase of the disease.

A smaller percentage of individuals, as revealed by (Kamal et al., 2021), suffered from critical post-recovery complications such as myocarditis, stroke, and pulmonary fibrosis. These findings underscored the need for ongoing monitoring and specialized care for individuals with a history of COVID-19. The long-term impact of the virus on various organ systems necessitated a nuanced and comprehensive approach to post-recovery healthcare.

2.2.4 COVID-19 Risk Factors

Qureshi et al. (2021) provides valuable insights into common risk factors associated with COVID-19 infection, shedding light on the multifaceted nature of susceptibility and severity. Among the prominent risk factors identified, age is a critical determinant of the disease's impact. Older individuals are found to be at a higher risk of developing severe illnesses when infected with COVID-19-2019. As age increases, so does the associated risk of mortality.

Comorbidities represent another significant risk factor associated with COVID-19 infection. Individuals, regardless of age, who have pre-existing serious health conditions such as diabetes, lung issues, heart conditions, a weakened immune system, or obesity face an elevated risk of developing severe illness and complications upon contracting the virus.

In addition to age and comorbidities, several other risk factors are linked to COVID-19 infection. These included C-reactive protein (CRP), body temperature, D-dimer, albumin levels, and the Sequential Organ Failure Assessment (SOFA) score. Elevated levels of CRP, an inflammatory marker, often indicate a more severe immune response to the virus. Monitoring body temperature is crucial as fever is recognized as a common symptom and an indicator of infection. D-dimer levels, indicative of blood clot formation, are identified as a risk factor, reflecting the virus's potential to induce coagulation-related complications. Albumin levels, reflecting nutritional status and overall health, also play a role in assessing the severity of the infection. The SOFA score, encompassing multiple organ systems, serves as a comprehensive tool to evaluate the extent of organ dysfunction and predict outcomes.

Understanding these diverse risk factors allowed healthcare professionals to tailor their approach to patient care, implementing targeted interventions based on individualized risk profiles. These risk factors not only influence the severity of the disease but also guided decision-making regarding hospitalization, treatment strategies, and post-recovery care.

2.2.5 COVID-19 Diagnosis

The diagnosis of COVID-19-2019 relies on a combination of clinical symptoms, epidemiological contact, and a positive COVID-19 test, as emphasized by (Gibson et al., 2020; Melo Neto et al., 2020). The Berlin diagnostic criteria play a pivotal role in confirming COVID-19 infection, requiring the presence of acute hypoxemic respiratory failure, bilateral airspace worsening on imaging studies like computed tomography (CT), chest X-ray, or ultrasound, not fully explained by other factors, and a presentation within one week of worsening respiratory symptoms. This comprehensive approach aimed to ensure accurate and timely diagnoses, particularly in cases where respiratory distress was a primary concern.

Molecular detection of the viral genome, specifically the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) ribonucleic acid, stands out as a fundamental method for confirming COVID-19 infection (Qureshi et al., 2021). Various samples, including urine, feces, upper respiratory tract specimens, and lower respiratory tract specimens, are analysed for the presence of the virus. The two primary diagnostic tools that gained prominence are Reverse Transcription Polymerase Chain Reaction (RT-PCR) and CT scans (Kakodkar et al., 2020).

RT-PCR, developed by the Centres for Disease Control and Prevention (CDC), emerged as the gold standard for COVID-19 diagnosis. This technique demonstrates high sensitivity, capable of detecting even low viral titters. Its 95 percent sensitivity allows for the early and accurate identification of infections, facilitating prompt intervention and containment efforts (D'Cruz et al., 2020). The widespread adoption of RT-PCR as the standard diagnostic tool marks a crucial step in the global response to the pandemic, enabling efficient and reliable confirmation of COVID-19 cases.

CT scans, characterized by their speed, non-invasiveness, and accessibility, prove to be valuable tools for diagnosing pneumonia and are particularly common in COVID-19 patients. Not only did CT scans provide rapid results, but they also exhibit great sensitivity in detecting viral presence. This imaging technique plays a crucial role in assessing the severity and extent of lung involvement, guiding healthcare professionals in determining appropriate treatment strategies (Qureshi et al., 2021).

Blood testing is an additional diagnostic avenue for COVID-19, according to Kakodkar et al. (2020) and Gibson et al. (2020). Blood tests reveal distinct patterns in COVID-19 patients, showcasing either normal or decreased lymphocyte counts and leucocytes. These

haematological indicators contribute to the overall diagnostic picture, aiding healthcare professionals in assessing the patient's immune response and formulating a comprehensive understanding of the disease's impact on the body.

In retrospect, the integration of diverse diagnostic tools marks a critical aspect of the global effort to combat the COVID-19 pandemic. The combination of clinical criteria, molecular detection methods like RT-PCR, imaging techniques such as CT scans, and blood tests facilitates a multidimensional approach to diagnosis. This comprehensive strategy not only ensures the accuracy of COVID-19 diagnoses but also provides valuable insights into the disease's clinical manifestations and severity, guiding appropriate medical interventions and public health measures.

2.2.6 Treatment and Management of COVID-19

The effectiveness of COVID-19 treatment hinges on its timely administration, ideally within days after the onset of clinical symptoms, as emphasized by the Centres for Disease Control and Prevention (CDC) in 2023. Antiviral medications play a pivotal role in managing individuals with mild to moderate symptoms of COVID-19. These approved antiviral treatments targeted specific components of the virus, impeding its replication within the host's body. By doing so, these antiviral medications not only alleviate symptoms but also play a crucial role in preventing the progression of the infection to severe illness or death.

Individuals experiencing mild symptoms of COVID-19, which are identified as the most manageable, were often able to recover and receive treatment at home. Over-the-counter medications, such as paracetamol, proved effective in addressing mild symptoms, providing relief to patients without the need for hospitalization. Additionally, medications like Tylenol and ibuprofen are commonly used in the treatment of mild symptoms, as outlined by the CDC in 2023.

For those facing severe respiratory distress, supplementary oxygen at a rate of 5 litters per minute is a standard intervention. The provision of oxygen support is critical in managing severe cases, ensuring that patients received the necessary respiratory assistance during the acute phase of the infection. In instances where complications like acute kidney injury (AKI) and septic shock arise, a comprehensive approach involving renal replacement therapy and adherence to sepsis protocols is implemented, as detailed by (Kakodkar et al., 2020).

Kakodkar et al. (2020) highlights an additional concern in the treatment of COVID-19 patients, noting the potential development of fungal infections in the middle or later stages of the disease. To address this, individuals are provided with empiric antimicrobial coverage, underlining the importance of a holistic and proactive approach to managing the varied manifestations of the virus.

Moreover, the introduction of vaccines marked a significant milestone in the fight against COVID-19. Designed to prevent severe illness and protect individuals from reinfection, vaccines aimed to decrease both the spread of the virus and the associated mortality rate. Vaccination efforts were critical in establishing widespread immunity within populations, contributing to the global strategy to curb the impact of the pandemic.

The evolution of COVID-19 treatment strategies involved timely administration of antiviral medications, effective management of symptoms, and proactive measures to address potential complications. The introduction of vaccines played a pivotal role in preventing severe outcomes and reducing the overall impact of the virus. The past approach to COVID-19 treatment reflects a dynamic and multifaceted response, incorporating a range of interventions to address the diverse clinical presentations and severity levels associated with the disease.

2.3 Global Impact of COVID-19

The global repercussions of the COVID-19 pandemic have been extensive, touching nearly every facet of human existence and societies on a worldwide scale. Stemming from the novel coronavirus SARS-CoV-2, the outbreak resulted in widespread sickness, loss of lives, disruptive economic patterns, and profound alterations in daily life. Health systems in numerous countries grappled with unparalleled challenges, facing overwhelmed hospitals, and strained medical resources as they coped with the surge in cases (WHO, 2020). The rapid transmission of the virus across borders underscored the interdependence of our globalized world, emphasizing the need for cohesive international strategies in effectively managing public health crises.

On the economic front, the pandemic served as a catalyst for a global recession, affecting businesses, industries, and livelihoods across the board. Imposed lockdowns, travel restrictions, and disruptions in supply chains contributed to widespread unemployment and financial instability. This economic downturn disproportionately impacted vulnerable communities, exacerbating pre-existing inequalities within and between nations (Internation Monetary Fund, 2020). Governments around the world responded with a range of stimulus

packages and relief measures, emphasizing the imperative for collaborative global strategies to address the socio-economic challenges resulting from the crisis.

Beyond the realms of health and economics, COVID-19 instigated transformative shifts in social dynamics and cultural norms. The pandemic accelerated the widespread adoption of remote work, online education, and virtual social interactions, fundamentally altering the way individuals lead their lives and conduct work (Cheng et al., 2021) . The shared experience of navigating through lockdowns and adhering to social distancing measures has left an indelible mark on mental health, community relationships, and perceptions of personal and societal resilience.

2.4 COVID-19 in the South African Context

South Africa emerged as the most profoundly affected country by the COVID-19 pandemic in Africa, as highlighted by Stiegler and Bouchard (2020). The initial case of COVID-19 in South Africa was reported on the 5th of March 2020, signalling the onset of the country's encounter with the global health crisis. By July of 2020, South Africa had garnered international attention, ranking as the fifth country worldwide with the highest number of confirmed COVID-19 infections. The province that bore the brunt of the pandemic's impact during this period was Gauteng, as noted by Lewis and Mulla (2021).

As the pandemic unfolded, the South African government and health authorities took proactive measures to assess and address the situation. By January 19, 2023, an online report from the Department of Health indicated that the country had conducted more than 21 million COVID-19 tests. Among these tests, over 4 million returned positive results, highlighting the substantial prevalence of the virus within the population. Encouragingly, the report also indicated that more than 3 million individuals had successfully recovered from COVID-19, reflecting the resilience of the healthcare system and the ability to manage a significant portion of the cases.

Tragically, the toll of the pandemic was evident in the reported numbers of deaths, surpassing 102,000 by January 19, 2023. Each reported death represented not just a statistic but a profound loss for families and communities. The gravity of the situation underscored the significance of ongoing efforts to mitigate the impact of the virus and protect vulnerable populations.

Furthermore, the data reflected the dynamic nature of the pandemic, with more than 1000 new COVID-19 cases reported on that specific day. This constant influx of new cases highlights the

ongoing challenges faced by South Africa in containing the spread of the virus and managing the healthcare implications.

South Africa's experience with COVID-19 2019 demonstrates the need for a comprehensive and sustained response to a global health crisis. The country's ranking among the most affected nations underscores the interconnectedness of the world and the urgency for collaborative efforts to address public health emergencies. The data, while indicative of past challenges, also served as a call to action for ongoing vigilance, preparedness, and international cooperation in the face of emerging health threats.

2.4.1 Intervention and Prevention of COVID-19 spread/outbreak in South Africa

In an earnest effort to mitigate the devastating impact of the COVID-19 pandemic, the South African government took decisive early action by implementing a nationwide lockdown. The initial restrictions, characterized as moderate, were introduced on the 15th of March 2020, demonstrating a commitment to proactive public health measures (Hatefi et al., 2020; Lurie et al., 2021). Subsequently, on the 27th of March 2020, a comprehensive and stringent nationwide lockdown, denoted as level 5, was instituted. This full lockdown imposed severe restrictions, prohibiting individuals from leaving their homes for any non-essential purposes and even restricting alcohol sales. The rationale behind these measures was grounded in the urgent need to curb the transmission of the virus and protect public health.

However, faced with financial constraints and recognizing the challenges posed by limited resources, the government decided to gradually ease the lockdown restrictions. Despite these efforts, the country experienced three waves of the COVID-19 pandemic, with the most severe occurring during July of 2021. The third wave prompted the maintenance of an adjusted level 4 lockdown, which entailed the closure of businesses, reflecting the ongoing struggle to contain the virus's spread. During this challenging period, South Africa recorded a staggering 480,570 new cases and 11,415 deaths, as reported by Chetty (2021). Notably, concerns were raised about potential underreporting, with natural deaths surpassing reported COVID-19 deaths, highlighting the complexities in accurately capturing the full impact of the pandemic.

Recognizing the need for international collaboration and support, the World Health Organization (WHO) deployed a surge team in South Africa from March 2020 to October 2021. Comprising healthcare professionals trained in infection prevention and control, international and local experts, health promotion practitioners, and COVID-19 champions, the surge team played a pivotal role. Their efforts included assessing public and private health facilities,

facilitating the acquisition and distribution of computers to enhance data management through Go.Data, conducting interaction reviews, and training case investigators and contact tracers. These initiatives aimed to reduce the transmission of COVID-19 by ensuring effective contact identification and follow-up.

In tandem with these measures, South Africa implemented various intervention strategies to curb the spread of the COVID-19-2019. Key among these strategies were COVID-19 testing and vaccination campaigns. Diagnostic testing for COVID-19 served a tripartite role, as highlighted by Baxter, Abdool Karim, and Abdool Karim (2021). First and foremost, testing confirmed positive cases, enabling the provision of appropriate clinical care. Secondly, testing played a crucial role in intervention strategies, facilitating contact tracing and isolation/quarantine measures. Lastly, COVID-19 testing contributed to surveillance purposes by monitoring temporal trends, geo-spatial patterns, and demographic spread of the virus.

Reports from the National Institute for Communicable Diseases (NICD) provided insights into the scale of COVID-19 testing in South Africa. From the 1st of March through the 27th of June 2020, more than 1.4 million COVID-19 laboratory tests were conducted nationally. Notably, Gauteng province contributed significantly, accounting for 40% of the tests conducted during week 26 of 2020. However, the period also witnessed a continuing increase in the number of positive cases from week 15 to week 26 in 2020. Subsequent reports by the NICD for the period January to June 2023 indicated a substantial escalation in testing, with more than 21 million tests reported nationally. During week 11 of 2023, Gauteng recorded the highest number of PCR tests, underlining the ongoing commitment to monitoring and managing the spread of the virus.

The vaccination campaign emerged as a critical component of South Africa's ongoing efforts to combat the spread of SARS-CoV-2. Commencing in February 2021, the vaccination rollout initially targeted high-risk populations, including healthcare workers, the elderly (aged 50 years and above), and individuals with comorbidities, as outlined by the World Health Organization (WHO, 2023). The primary objective of the vaccines was to confer immunity against COVID-19 infection.

An online report by the WHO in June 2023 revealed a commendable milestone, with a total of 38,882,146 vaccine doses administered to South Africans. Three authorized vaccines were utilized for the prevention of SARS-CoV-2 in South Africa, each with its unique characteristics and administration protocols. The Pfizer-BioNTech vaccine involved two doses administered

21-42 days apart, with full vaccination achieved two weeks after the second dose. The Johnson and Johnson vaccine, administered as a single dose, resulted in full vaccination after 28 days. The Sinovac vaccine required two doses, administered 2-4 weeks apart, with a person considered fully vaccinated two weeks after the second dose.

The introduction of these vaccines marked a turning point in the battle against COVID-19 in South Africa. Not only did they contribute to a reduction in the rate of transmission and infection of the virus, but they also played a pivotal role in lowering the mortality rate. Vaccines became a beacon of hope, offering protection to individuals and communities, and significantly contributing to the broader global effort to control the pandemic.

South Africa's response to the COVID-19 pandemic encapsulates a multifaceted and adaptive approach, characterized by early and stringent lockdown measures, international collaboration, robust testing strategies, and a comprehensive vaccination campaign. The journey reflects the nation's resilience in the face of unprecedented challenges and underscores the importance of evidence-based decision-making, public health infrastructure, and global cooperation in addressing complex health crises. The ongoing commitment to monitoring, testing, and vaccination initiatives demonstrates the imperative of continued vigilance and proactive measures in the pursuit of a healthier and more resilient society.

2.4.2 Social Impacts of COVID-19 in South Africa

Amidst the throes of the pandemic, South Africa found itself grappling with exacerbated challenges that had already been pervasive before the advent of COVID-19. Issues such as food shortages, inadequate sanitation, financial strain, and soaring unemployment rates were magnified, particularly in impoverished communities (Stiegler & Bouchard, 2020). The compounding effect of these challenges manifested in violent acts, including confrontations with law enforcement, hunger riots, and instances of looting in certain communities.

To safeguard the livelihoods of South Africans, the government implemented measures to address the economic fallout. This included a significant increase in social grants and the implementation of Temporary Employer/Employee Relief Scheme (TERS) benefits, providing crucial support for unemployed individuals during these challenging times (Blecher, Daven, Meyer-Rath, Silal, & van Niekerk, 2021).

The strategic decision to close businesses and prohibit alcohol sales in South Africa yielded notable benefits. Not only did these measures contribute to curbing the spread of the virus

within communities, but they also led to a reduction in alcohol-related casualties. While the prohibition of alcohol sales correlated with a decrease in domestic violence in South African homes, there were reports indicating a surge in such incidents against women during the third week of the national lockdown. Paradoxically, violent crimes experienced a decline during this period (Stiegler & Bouchard, 2020).

Access to healthcare services emerged as another pressing challenge during the pandemic. South African hospitals faced overwhelming pressures and struggled to respond adequately to the crisis, particularly during the peak of the third wave (Chetty, 2021). In the Gauteng province, hospitals found it challenging to meet the escalating demands for beds required to accommodate patients with COVID-19. The government's intervention strategies, encompassing community containment measures and distancing rules, inadvertently had a detrimental impact on the diagnosis and treatment of other contagious diseases, such as HIV and malaria (Hatefi et al., 2020).

The pandemic illuminated multifaceted challenges, prompting South Africa to adopt a comprehensive approach to address intricate issues. Balancing public health measures and mitigating socio-economic impacts on vulnerable populations was crucial. Government initiatives, including economic support and containment measures, demonstrated dynamic responsiveness to evolving challenges. Lessons learned from this experience will guide future strategies, aiming to build resilience and foster a more inclusive and equitable society.

2.4.3 The State of Mental Health in South Africa during the Pandemic

During the throes of the COVID-19 pandemic, South Africa found itself navigating uncharted territory as the government implemented a national lockdown to curb the rampant spread of the virus. This period, as documented by Duby et al. (2022), brought to light the inadequately documented mental health effects of the stringent lockdown restrictions imposed. Research findings, including those by Lentoor and Maepa (2021), highlighted a surge in anxiety and stress among South Africans, particularly impacting adolescents, girls, and young women.

Before the pandemic, data from 2018, as presented by the South African College of Applied Psychology, suggested that one in six South Africans grappled with anxiety, depression, or substance abuse. Alarming figures included 41% of pregnant women experiencing depression, 61% of the population suffering from PTSD, and 27% contending with severe mental disorders and undergoing treatment (Cooper & Kramers-Olen, 2021). As the pandemic unfolded,

research studies, such as those by Cooper and Kramers-Olen (2021), pointed to a significant escalation in the prevalence of mental disorders.

The initial wave of the pandemic, as examined by Lentoor and Maepa (2021), revealed a disconcerting landscape, with 61.2% of participants reporting stress and anxiety, 39.5% expressing financial concerns, and 31.6% grappling with feelings of sadness, frustration, and anger. Simultaneously, the South African Depression and Anxiety Group found that, despite adhering to lockdown restrictions, 65% of respondents experienced stress during the initial lockdown in March 2020 (Cooper & Kramers-Olen, 2021)

A comprehensive study by (De Man et al., 2022) delved into the relationship between mental health and COVID-19-related stressors and during lockdown. Their findings underscore the significant impact of distress related to virus infection and containment measures, correlating with heightened depressive and anxiety symptoms. Individuals with pre-existing mental disorders reported experiencing secondary effects of the pandemic, ranging from sleep disturbances and substance withdrawal symptoms to unemployment and depressive symptoms (Cooper & Kramers-Olen, 2021).

The precarious state of mental health during the pandemic was further exacerbated by a myriad of compounding factors. Household unemployment, elevated fears of domestic violence, strained family relationships, food security concerns, and economic stress contributed to the overall deterioration of mental well-being in the population. As South Africa grappled with the multifaceted challenges of the pandemic, the toll on mental health became a pressing concern that warranted attention and intervention.

2.5 COVID-19 in Children

As of the information available in an online report by the World Health Organization in 2023, children are generally considered to be at a low risk of contracting the Coronavirus. In the rare instances where children do become infected, they are more likely to exhibit mild symptoms such as cough, vomiting, and diarrhoea. However, severe clinical symptoms and, albeit rarely, fatalities were reported among some children who contracted the virus.

During the level three lockdown period in South Africa, a report by Hatefi et al. (2020) highlighted that more than a thousand children under the age of nine tested positive for COVID-19. This alarming number encompassed even newborns and infants. Notably, the incidence of asymptomatic infections among children was found to be lower than that observed in the

general population. This discrepancy is speculated to be associated with the robust immune response and AEC2 levels within the children's bodies, as suggested by Gao et al. (2021). Additionally, factors such as reduced international travel, limited outdoor activities, and lower exposure to cigarette and air pollution are cited as contributors to the lower prevalence of the virus in children, as noted by Zare-Zardini et al. (2020).

The risk of children being infected with the virus also exhibited a dependence on age, with the likelihood of severe outcomes increasing as children grew older. Kufa-Chakezha, Cohen, and Walaza (2021) reported that, out of the 1.8 million cases of COVID-19 detected in South Africa, only 0.7% were associated with death among children, and 4.2% were linked to hospital admissions. A subsequent online report by the National Institute for Communicable Diseases indicated a rise in hospital admissions to 5% for children under 19 years in December 2021.

2.5.1 Diagnosis, Treatment and Management of COVID-19 in Children

The diagnostic tools employed for monitoring children infected with COVID-19 mirror those used for adults, emphasizing a standardized approach to identification and confirmation of cases. As elucidated by Zare-Zardini et al. (2020), the initial step involves contact tracing, especially if there has been exposure to an infected person. Subsequently, laboratory testing is conducted through blood tests and/or nasal swabs to detect COVID-19 nucleic acid using the reliable RT-PCR method. In addition to these molecular diagnostic tools, X-ray and CT scan images are utilized as confirmatory and complementary methods, as noted by Sankar et al. (2020) and Zare-Zardini et al. (2020). The integration of various diagnostic modalities ensures a comprehensive assessment of COVID-19 infection in children.

In December 2021 alone, there were over 2 million tests conducted for individuals under the age of 19, with more than 370,000 testing positive for COVID-19, according to the National Institute for Communicable Diseases (NICD, 2021). The Gauteng province emerged as a significant contributor, accounting for 27.2% of the tests among individuals under the age of 19, highlighting the need for widespread testing efforts to effectively monitor and manage the spread of the virus in this demographic.

The treatment protocol for infected children aligns with approaches used for adults. Home isolation, typically recommended for a period of 2 weeks, is a common practice. Anti-viral therapy, like that employed for adults, constitutes a key element in managing infected children. For those exhibiting mild to severe symptoms of COVID-19, oxygen therapy, administered through masks and nasal catheters, is often recommended to alleviate respiratory distress. In

cases of COVID-19 pneumonia in children, antimalarial drugs and nitric oxide inhalation are suggested treatment modalities (Zare-Zardini et al., 2020), underscoring the importance of a tailored approach based on the severity of symptoms.

Efforts to curb the spread of COVID-19 in children involve vaccination, with the Pfizer vaccine approved for administration to children older than 12 years, according to the South African Medical Research Council (SAMRC, 2023). However, despite approval, the uptake among children remains limited, attributed to parental resistance and hesitancy among healthcare workers. Addressing these concerns and fostering awareness are crucial in optimizing vaccination coverage among the paediatric population, contributing to broader community immunity.

2.5.2 Impact of COVID-19 in Children

Throughout the pandemic and in its aftermath, children have navigated unique challenges contingent upon their developmental stages (WHO, 2023). The heterogeneous nature of children's experiences with COVID-19-2019 and the government-imposed restrictive measures underscores the need for a nuanced understanding of their specific vulnerabilities. The repercussions of the pandemic have left an indelible mark on the health and well-being of children, with potential lifelong implications for some.

Mitigation measures and the socio-economic impacts of COVID-19 disproportionately affected children, as outlined in an online report by the World Health Organization (WHO, 2020). This report delineates three primary channels through which children were impacted. First, there was the direct risk of being infected with COVID-19. Second, children faced immediate socio-economic repercussions stemming from measures to curb the virus's spread. Third, there were potential long-term effects due to the delayed implementation of the Sustainable Development Goals.

Children found themselves experiencing psychological effects of being confined to one place during COVID-19 (Loades et al., 2020; Prime et al., 2020). Fear and anxiety (Sprang & Silman, 2013), disturbance of daily routines (Brooks et al., 2020), as well as disruptions of sleep and eating habits (Marelli et al., 2021), were among the problems children experienced during the COVID-19 pandemic.

A study conducted by (Richard et al., 2023), involving children aged 2-17 years highlighted that 13% of the participants experienced severe impacts from the pandemic. Lifestyle changes,

family vulnerabilities, and health challenges during the pandemic collectively contributed to a severe and multidimensional impact on these children. Reports of suicidal ideation, social withdrawal, emotional problems, and symptoms of depression and anxiety emerged as prevalent themes in various studies, underscoring the multifaceted toll the pandemic has taken on the mental health of children (Aljaberi et al., 2021; García-Fernández et al., 2023; Pfefferbaum, 2021).

The research conducted on Italian children by Mensi et al. (2022) revealed alarming statistics regarding the mental health impact of the pandemic. Psychotic symptoms were present in 16% of cases, suprathreshold panic in 25%, suprathreshold anxiety in 46%, and suprathreshold depression in 18.7%. Eating-related symptoms affected 51%, sleep difficulties were reported by 57%, a propensity towards social withdrawal post-pandemic stood at 51%, while instances of suicidal ideation and self-harming behaviour were reported in 30% and 9%, respectively. These findings underscore the complex and pervasive impact of the pandemic on the mental well-being of children, highlighting the urgent need for comprehensive support and intervention strategies to address the diverse array of challenges children are facing Mensi et al (2022).

2.5.3 Negative/Indirect Impact of COVID-19 on Children

The vulnerability of children to the indirect risks of COVID-19 is a focal point of concern, as emphasized in a comprehensive narrative review conducted by (Goldfeld et al., 2022). The findings of this study shed light on 11 distinct areas of impact, categorized into three overarching domains: family-level factors, child-level factors, and service-level factors. This multifaceted exploration underscores the intricate web of challenges faced by children because of the pandemic's indirect consequences.

Research studies, including Gupta and Jawanda (2020) and UNICEF (2023), as well as a comprehensive study by Save the Children (2020), collectively corroborate the assertion that children, particularly those from disadvantaged backgrounds and communities, bear a disproportionate burden of the repercussions of COVID-19. The inequities laid bare by the pandemic accentuated existing disparities, with poor children facing an elevated risk of suffering from the consequences of the virus. This heightened risk manifests in various dimensions, including an increased susceptibility to poor nutrition, heightened exposure to violence within the home environment, and a greater likelihood of experiencing maltreatment.

The expansive study conducted by Save the Children (2020) stands out as one of the most comprehensive examinations of the impact of COVID-19 on children. Its findings bring into sharp relief the stark reality that children from poor backgrounds are grappling with challenges that extend beyond the immediate health implications of the virus. The increased risk of poor nutrition, coupled with the heightened vulnerability to domestic violence and maltreatment, underscores the pressing need for targeted interventions and support mechanisms to mitigate these adverse outcomes.

Children with pre-existing mental health conditions emerged as a particularly vulnerable subgroup. Richard et al. (2023) notes that disruptions in healthcare routines and the heightened stress experienced by caregivers, exacerbated by the lack of specialized care provision, disproportionately impacted the mental health of these children. The intricate interplay between pre-existing mental health conditions, disruptions in healthcare access, and the added stress on caregivers paints a complex picture of the challenges faced by children.

2.5.3.1 Family Level Factors

Family-level factors refer to the influences within the family environment that impact the well-being and development of children (Ma et.al., 2023). These factors encompass a range of issues related to economic stability, parenting practices, parental mental health, and overall household dynamics. During the COVID-19 pandemic, several key family-level factors significantly affected families and children:

2.5.3.1.1 Job loss and reduced family income

The impact of COVID-19 on South African households is characterized by stark inequalities, with varying levels of access to essential resources such as assets, income, employment, social protection, and healthcare, as highlighted by Scotté and Zizzamia (2021). The disparities in vulnerability have been exacerbated by the pandemic-induced economic upheaval, resulting in a substantial increase in the unemployment rate across the country, as noted by Posel, Oyenubi, & Kollamparambil (2021).

A recent study conducted by social sciences researchers from five different South African universities underscores the magnitude of the economic fallout. The study reveals that approximately 3 million South Africans lost their jobs between February and April 2020, attributing these losses directly to the pandemic, with women being disproportionately affected (news24, 2023). This substantial loss of employment not only represents a staggering figure

but also unravels the broader socio-economic implications, particularly on the most vulnerable segments of the population.

The repercussions of the economic downturn, as illuminated by (Goldfeld et al., 2022), extend beyond mere job losses. Deteriorating economic circumstances given rise to increased levels of persistent disadvantages and higher rates of families newly thrust into disadvantage. The widening economic disparities placed a considerable strain on the social fabric, exacerbating existing inequalities and magnifying the challenges faced by vulnerable households.

Economic pressure during the pandemic has been linked to harsher parenting practices and elevated parental stress (Wolf, Freisthler, & Chadwick, 2021). The intricate interplay between economic hardship and parenting dynamics underscores the far-reaching consequences of the pandemic on family life. The stress induced by financial insecurity has the potential to permeate household relationships, affecting parental well-being and, subsequently, the overall dynamics within families.

2.5.3.1.2 Increased child abuse and neglect

Research has compellingly demonstrated that during pandemics, the incidence of neglect and child abuse tends to surge, primarily attributed to heightened stress levels, increased isolation, and reduced access to support for families, as highlighted by Merrill et al. (2021). In the specific context of South Africa, the restrictive measures implemented in response to the COVID-19 pandemic, coupled with widespread unemployment and job losses, created a concerning backdrop that may have contributed to a rise in family violence and child maltreatment.

The compounding effects of governmental restrictions and economic hardships amplified the risk of family violence, with children living in adverse conditions facing an elevated threat, as noted by Greeley (2020). The confluence of these factors creates an environment that can be particularly challenging for vulnerable children, exacerbating existing adversities and increasing their susceptibility to maltreatment.

Disturbingly, the pandemic in South Africa witnessed a notable increase in reported cases related to domestic abuse and child maltreatment (Kourti et al., 2023). This surge in incidents underscores the urgency of addressing the growing crisis of violence within households. Paradoxically, Goldfeld et al. (2022) highlight a concerning decrease in the number of reports to child maltreatment hotlines during the pandemic. This decline in reporting may be attributed to reduced contact between educators and children, as schools and educational institutions faced disruptions and closures due to the pandemic.

An online report by the American Psychological Association (APA, 2020) further reinforces the link between increased parental stress and the likelihood of neglect and child abuse. The stressors induced by the pandemic, including economic uncertainties, health concerns, and disruptions to daily life, placed additional strain on parents, elevating the risk of harmful behaviour towards children.

The confinement measures implemented during the pandemic, as necessitated by health protocols, created an alarming situation where children were confined to their homes, unable to escape potentially abusive situations. This heightened vulnerability significantly increased the risk of children experiencing violence within the confines of their homes.

2.5.3.1.3 Poorer parental mental health

During past epidemics, the prioritization of mental health needs was a rarity, with limited access to professionally trained mental health professionals, as noted by (Decosimo et al., 2019). In a research study done by (Bloom et al., 2022) in the South African context, aimed at exploring how caregivers coped during the pandemic, a reciprocal relationship between child mental health and parental or caregiver mental health became evident. The study unveiled that higher levels of endorsement of mental health issues in children were associated with elevated levels of stress, depression, and anxiety in parents.

The ramifications of poor parental mental health extended beyond the emotional realm, with additional associations identified between parental mental health struggles due to the pandemic and economic hardships, as well as increased family uncertainty. Scrimin et al. (2022) further highlights that parental stress during the pandemic was linked to heightened emotional and physical discomfort in children, underscoring the interconnectedness of familial well-being.

Studies conducted by Whaley and Pfefferbaum (2023) delve into the myriad stresses experienced by parents and caregivers during the pandemic. Many caregivers and parents faced with COVID-19-2019 grappled with Post-Traumatic Stress Disorder (PTSD), anxiety, and stress. Although a significant number of parents adapted over time, the psychological outcomes were influenced by a multitude of factors, including employment status, pre-existing vulnerabilities, demographic factors, family structure, household responsibilities, and cohesion.

2.5.3.1.4 Increased household stress

The lockdown restrictions enforced by the government precipitated profound changes in family routines and rituals during the past tense of the pandemic. Extensive research conducted by (Chanchlani et al., 2020; Drane et al., 2020; Goldfeld et al., 2022) collectively demonstrated that families underwent significant challenges in supporting their children's needs, particularly concerning remote learning and other childcare demands. Parents and caregivers found themselves grappling with the delicate balance of managing unemployment, working from home, or navigating employment uncertainties amid financial instability.

The pandemic's impact extended beyond the logistical challenges, permeating parent-child relationships. According to Vaterlaus et al. (2021), the adoption of new roles by parents during the pandemic had the potential to influence the dynamics within parent-child relationships. The constrained interaction with the outside world, a consequence of lockdown measures, was identified as a potential stressor, contributing to strains in parent-child relationships.

The disruptions in daily life imposed by lockdowns forced families to adapt rapidly to unprecedented circumstances, navigating the complexities of remote work, financial uncertainties, and the evolving needs of children. As evidenced by the collective findings of various research studies, the challenges presented by the COVID-19 tested the resilience of families, influencing not only practical aspects of daily life but also the delicate fabric of relationships within the household.

2.5.3.2 Child Level Factors

Child-level factors pertain to characteristics and experiences unique to the individual child that influence their well-being and development (Griffith et al., 2016). These factors encompass various aspects of a child's life, including their physical and mental health, educational experiences, and socio-emotional development. During the COVID-19 pandemic, several key child-level factors significantly impacted children's experiences and outcomes:

2.5.3.2.1 Poorer mental health/ Psychological impact

The psychological health of children during the Coronavirus Desaese-2019 pandemic became a focal point of concern, with various factors contributing to poorer mental health outcomes. Beyond the immediate health threats posed by the virus, the pervasive fear of infection left a lasting imprint on the minds of young individuals. The World Health Organization (2023) underscores that this fear, ingrained during the pandemic, may have enduring consequences, shaping their perspectives and emotional responses well into adulthood. Buheji et al. (2020)

and Chawula, Tom, Singh Sen, & Sagar (2021) emphasize the multifaceted impact of lockdown measures, which not only disrupted routine activities but also severed crucial social ties that are integral to children's development.

In the South African context, Bloom et al. (2022) shed light on the distinctive challenges faced by children compared to adolescents during lockdowns. The enforced isolation led to a surge in hyperactivity, misconduct, and emotional problems among children. The absence of regular peer interactions, a crucial element of their social development, manifested in behavioural changes such as increased clinginess, irritability, and hesitancy to seek information about the pandemic (Buheji, et al., 2020).

The psychological toll on children extends beyond their immediate surroundings, reaching into the broader societal context. Depression and anxiety rates among children and adolescents surpass those in the general population, underlining the far-reaching consequences of the pandemic on the younger demographic (Chawula, Tom, Singh Sen, & Sagar, 2021). This heightened vulnerability was exacerbated by a disconnection from peers, as social support structures play a pivotal role in children's ability to cope with stressors.

The COVID-19 pandemic cast a shadow on children's mental health, as indicated by findings from various studies, including those conducted by Loades et al. (2020) and Prime et al. (2020). Loades et al. (2020) and Prime et al. (2020) bring attention to the psychological effects of confinement, revealing that children grappled with anxiety and fear during the pandemic. Sprang and Silman's (2013) work highlights the enduring impact of fear and anxiety on children's mental well-being. Brooks et al. (2020) emphasize the disturbance of daily routines, which serves as a cornerstone of stability for children. This disruption, combined with uncertainties, contributes to heightened stress levels. Marelli et al. (2021) shed light on disturbances in sleep and eating habits, elucidating the interconnectedness of physical and mental health

The socioeconomic dimension further amplifies these challenges. Children from families with lower socioeconomic status, parents with limited educational attainment, and those residing in confined living spaces faced heightened vulnerability to mental health challenges (Ng & Ng, 2022).

2.5.3.2.2 Poorer child health and development

The COVID-19 pandemic, as elucidated by Goldfield et al. (2022), triggered a substantial transformation in the landscape of children's play, bringing forth repercussions that extend

beyond the realm of recreation. The imposition of lockdown restrictions resulted in the closure of recreational spaces, fundamentally altering the dynamics of physical activities for children. The reduction in opportunities for outdoor play and structured sports activities during the lockdown period had a profound impact on the time children spent engaged in physical activities.

Remarkably, this shift in play patterns manifested in unintended consequences, particularly concerning children's health. Goldfield et al. (2022) observed an increase in snacking behaviours and weight gain among children during the pandemic. The absence of recreational outlets and the subsequent sedentary lifestyle adopted during lockdowns contributed to alterations in dietary habits, potentially leading to long-term health implications.

Furthermore, the pandemic disrupted routine health care services, creating a ripple effect on children with additional health care needs. Goldfield et al. (2022) pointed out that missed health care appointments resulted in lower rates of identifying children experiencing developmental delays. The interruption in regular health assessments and interventions may have profound consequences on the timely identification and addressing of developmental challenges, impacting children's overall well-being.

The impact of the COVID-19 pandemic on children extends beyond mental health, affecting their overall well-being and developmental trajectories. Loades et al. (2020) and Prime et al. (2020) underscore the widespread effects of confinement, revealing potential setbacks in child health and development. The disruption of routines, as highlighted by Brooks et al. (2020), not only contributes to psychological distress but may also impede important developmental milestones. Additionally, Marelli et al.'s (2021) insights into disturbances in sleep and eating habits underscore the comprehensive nature of the challenges faced by children during the pandemic, potentially impacting their growth and development.

Amin and Parveen (2022) delve into the educational aspect, highlighting how the lack of competition during school closures and social isolation may have led to a delay in children's personal and psychological development. The absence of structured learning environments, peer interactions, and extracurricular activities may have impeded the holistic development of children, influencing aspects beyond academic achievements.

Economic upheavals resulting from widespread job losses during the pandemic accentuated vulnerabilities, particularly for already marginalized children. UNICEF (2023) draws attention to the exacerbation of malnutrition among vulnerable children due to the deterioration in the

quality of their diets. The compounding shocks created by COVID-19, such as loss of income and disruptions in food supply chains, contributed to a precarious nutritional landscape for many children.

2.5.3.2.3 Poorer academic achievement

The profound impact of COVID-19 on children's educational experiences has been underscored by Goldfeld et al. (2022), emphasizing that the adversities brought about by the pandemic significantly jeopardized their learning journeys. Particularly vulnerable were children whose parents had lower educational qualifications, as they often found themselves grappling with a lack of resources and time necessary to adequately support their children's education. The repercussions of these challenges extended beyond mere academic struggles; children who experienced adversities also contended with societal prejudice, as their compromised learning engagement became a source of discrimination, potentially resulting in diminished academic achievement.

The shift to digital learning platforms, while essential for continuity during the pandemic, inadvertently exacerbated existing socio-economic disparities. As noted by Amin and Parveen (2022) and Gupta and Jawanda (2020), the use of digital learning devices tended to widen the gap between children hailing from low and high socio-economic statuses. In disadvantaged communities, where issues such as slow internet speed or the absence of internet facilities were prevalent, the academic achievement of children suffered disproportionately. The limitations imposed by digital access disparities amplified educational inequalities, reinforcing the existing divide between privileged and underprivileged learners.

Furthermore, the chasm between advantaged and disadvantaged learners during the pandemic was quantified to be three times more pronounced in the context of distance learning compared to traditional contact learning (Sonnemann & Goss, 2021). The implications of this widening gap extend beyond the immediate educational setbacks, as they potentially foretell long-term consequences for the affected children's future opportunities and societal contributions.

Literature reveals the multifaceted impact of the COVID-19 pandemic on children's education. The transition to remote learning, characterized by challenges such as maintaining focus and adapting to virtual methods. The resulting blurred home-school boundaries and uncertainties have heightened academic pressure, contributing to increased stress levels among children (Loades et al., 2020; Prime et al., 2020). Furthermore, lockdowns witnessed a decline in academic performance, reflecting concerns highlighted in existing research on the adverse

effects of disrupted education during pandemics (Prime et al., 2020; Viner et al., 2020; Xie et al., 2020). The digital divide exacerbated educational inequalities, and the reopening of schools introduced challenges in adapting to a structured learning environment (Loades et al., 2020; Prime et al., 2020).

2.5.3.4 Service level Factors

Service-level factors encompass the institutional and systemic aspects that influence the provision of services and support to children and families (Howard et al., 2003). These factors involve various services such as healthcare, education, and social welfare systems, as well as broader societal structures. During the COVID-19 pandemic, several key service-level factors significantly impacted children's access to essential services and support:

2.5.3.4.1 School closure

The global implementation of distance learning, as reported by Goldfield et al. (2022) in April 2020, marked a transformative moment in education, affecting approximately 86% of the global student population. This paradigm shift in learning methods was accompanied by a myriad of consequences, reshaping the educational landscape, and impacting the lives of students worldwide. Notably, parents responded to the uncertainties of the pandemic by withdrawing their children from both informal and formal childcare arrangements, reflecting a collective apprehension about the safety of traditional educational settings.

The closure of schools during the pandemic, while a necessary measure to curb the spread of the virus, led to a cascading set of challenges. Goldfeld et al. (2022) highlight that the closure of educational institutions was not only synonymous with the interruption of formal learning but also resulted in the loss of access to crucial school-facilitated services. These included mental health care services and free lunches, emphasizing the multifaceted impact of school closure on the well-being of students, extending beyond academic considerations.

Samuel Hume et al. (2023) shed light on the primary objective of school closures, which was to curtail social contact and reduce the rate of transmission in communities. However, the efficacy of school closure in achieving these goals remains uncertain, and the balance between the potential positive impacts on transmission rates and the negative impacts on children's holistic development is still a subject of ongoing investigation. The dynamic interplay between

the benefits and drawbacks of this public health measure underscores the complexity of decision-making during a global health crisis.

2.5.3.4.2 Reduced access to health care

The COVID-19 pandemic, in the past tense, exerted unexpected and immense stress on healthcare systems, amplifying existing inequalities and vulnerabilities, with children bearing the brunt of both collateral and direct impacts. The prevailing perception that children were at a lower risk of severe illness from COVID-19 led to the inadvertent oversight of their needs, exposing them to potential harm, as noted by King et al. (2021).

In the context of South Africa, the pandemic strained healthcare infrastructures, overwhelming facilities, and restricting access to essential child health services. The surge in COVID-19 cases created an environment where hospitals faced challenges in accommodating new patients, even with substantial waiting lists. A study conducted by Jensen and McKerrow (2020) in KwaZulu Natal during the initial months of the pandemic, between April and June 2020, uncovered a significant decline in hospital admissions and clinic attendance for children under the age of 5. This decline underscored disruptions in healthcare access, service delivery, and child well-being, painting a stark picture of the difficulties faced by the healthcare system during the pandemic.

As highlighted by Goldfeld et al. (2022), the decrease in clinic and hospital attendance may not only be attributed to systemic challenges but also to the palpable fear parents harboured regarding potential exposure to the COVID-19-2019. This fear likely played a pivotal role in parents' decisions to avoid healthcare settings, leading to a decrease in routine health visits for children.

2.5.3.4.3 Increased use of technology and internet

During the pandemic, schools, in the past tense, extensively relied on technology to transition the education curriculum into a distance learning environment. However, this shift revealed stark disparities as many children, particularly those from disadvantaged communities and younger age groups, lacked the self-confidence and necessary skills to effectively engage with technology for learning purposes, as highlighted by Goldfeld et al. (2022).

The widespread encouragement of online learning during this period inadvertently exposed children to new challenges, notably cyberbullying and offensive content, as observed by (Amin & Parveen, 2022). The digital landscape, including social media platforms, became breeding

grounds for cyberbullying, contributing to detrimental impacts on children's mental health such as low self-esteem, anxiety, and even suicidal attempts. The unfettered access to the internet exposed children to offensive or inappropriate content, including explicit material, posing additional risks to their well-being.

Gupta & Jawanda (2020) underscore the addictive nature of social networks, suggesting that children are susceptible to developing hazardous substance addiction through these platforms. Additionally, research has shown a robust association between adolescent smoking and exposure to mass media messages, as noted by (Amin & Parveen, 2022; Gupta & Jawanda, 2020b; Ray & Jat, 2010). The influence of mass media, especially through social networks, on the behaviours and choices of adolescents poses a significant concern, highlighting the need for awareness and protective measures in the digital realm.

2.5.4 Positive Impacts of COVID-19 on Children

Despite the myriad challenges and consequences experienced by children during the pandemic, several positive aspects emerged, as highlighted by Amin & Parveen (2022) and Gupta & Jawanda (2020). These positive outcomes encompassed the development of children, strengthened relationships, increased awareness, and an enhanced understanding of nature's value.

UNESCO played a pivotal role in promoting distance learning solutions, including the utilization of digital teaching aids (Amin & Parveen, 2022). Children with access to these digital learning tools were not only able to continue their education during the pandemic but also engaged with innovative educational methods that are likely to prove beneficial later in life. The school closures prompted children to participate in various learning, creative, and physical activities, fostering the development of new skills and broadening their horizons.

The enforced time spent with family during the pandemic became a catalyst for building stronger relationships(Amin & Parveen, 2022) . The quality time together allowed children to forge deeper connections with their family members, fostering a sense of unity and support. Additionally, the heightened awareness of the impact presented by COVID-19 instilled in children a sense of compassion and morality as they recognized the shared humanity in navigating challenging circumstances.

Parents and guardians played a crucial role during the pandemic by being encouraged to assist and comfort their children through open and honest communication about the situation(Amin

& Parveen, 2022). Providing children with clear explanations and reassurances about the practical steps needed to stay safe not only alleviated anxiety but also empowered them with a sense of understanding and control.

Furthermore, the pandemic-induced reductions in pollution, traffic, and noise led to discernible changes in the natural surroundings (Amin & Parveen, 2022). These changes provided children with unique opportunities to appreciate and observe biodiversity in their environments, offering a valuable hands-on learning experience about the interconnectedness of nature.

2.6 Theoretical Framework

2.6.1 The Biopsychosocial Model

The study is underpinned by George Engel's biopsychosocial model, which offers a holistic viewpoint surpassing traditional paradigms of health and illness. In 1977, Engel proposed a model that emphasizes the interconnectedness of biological, psychological, and social factors. This model recognizes that understanding the causes and manifestations of an illness requires a comprehensive consideration of physiological pathology (biological), emotions, behaviour, thoughts, and psychological distress (psychological), as well as family circumstances, socio-environmental factors, and socio-economic factors (Bolton & Gillett, 2019) .

In adopting Engel's biopsychosocial model, this research aims to explore the nuanced psychological and social impacts of the ongoing global pandemic on children. The model provides a robust foundation for understanding the intricate interplay of these dimensions in shaping the overall well-being of children during this challenging period.

Within the psychological dimension of the biopsychosocial model, the study focuses on the unique stressors introduced by the lifestyle changes imposed by the pandemic. These changes, as documented by (Kurz et al., 2022) , have triggered emotional responses and behavioural adaptations among children. Investigating factors such as anxiety and depression allows the research to gain a deeper understanding of the psychological impacts on children, as highlighted by Chawla et al. (2021).

The social component of the biopsychosocial model takes on heightened significance in the context of the COVID-19 pandemic. Government-imposed lockdowns, enacted as a preventative measure, inadvertently disrupted social interactions beyond the home environment. This disruption potentially fostered feelings of isolation and had negative implications for the social well-being of children, as suggested by Benke et al. (2020). Ellis et

al. (2020) and Loades et al. (2020) conducted studies on the psychological challenges experienced by children during Covid-19 and found that prolonged indoor confinement led to loneliness in children.

Beyond the academic literature, it is evident that the pandemic has reshaped the way children experience their daily lives. The sudden shift to remote learning, the absence of traditional social interactions, and the challenges faced by families have collectively contributed to a unique set of circumstances for children. These circumstances go beyond statistical data and research findings, encompassing the lived experiences of children and families navigating the complexities of the ongoing global health crisis.

In exploring the psychological and social impacts on children during the pandemic within the framework of the biopsychosocial model, this research aims to provide a comprehensive understanding that goes beyond scholarly references. By considering the interconnectedness of psychological and social factors, the study seeks to contribute insights that resonate with the lived realities of children and families, informing holistic interventions and support strategies tailored to enhance the well-being of the younger generation amidst the challenges posed by the pandemic.

2.6.2 The Ecological Systems Theory

Urie Bronfenbrenner's ecological systems theory, a foundational framework, delves into the intricate interplay between individuals and their environment, offering a nuanced understanding of developmental processes (Bronfenbrenner, 1977; Ryan 2001)). This theory posits that individuals exist within a nested hierarchy of interconnected systems, ranging from the microsystem to the macrosystem. Utilizing the ecological systems theory for exploring the psychosocial impacts of COVID-19 on children allows for a holistic analysis of how the pandemic reshaped the various ecological systems shaping children's lives.

In the microsystem, which constitutes the immediate environment of daily interactions, children navigate their familial, educational, peer, and community spheres (Haleemunnissa et al., 2021). The pandemic-induced disruptions within the microsystem are profound, altering routines, social dynamics, and support networks. Beyond academic references, it is evident that these changes have translated into a redefined normalcy for children – from adapting to new family dynamics to grappling with altered peer interactions and school routines. Understanding these microsystemic shifts provides valuable insights into the psychosocial experiences of children amid the pandemic.

Moving beyond the microsystem, the macrosystem encompasses overarching cultural and societal factors that influence individual experiences (Haleemunnissa et al., 2021).. . The pandemic triggered widespread societal changes, from the implementation of public health measures to economic shifts and cultural adjustments. These collective shifts form the macrosystem, significantly impacting children's well-being by shaping policies, societal norms, and access to resources. This broader perspective enables an exploration of how macro-level factors, such as government responses and economic disparities, contribute to the psychosocial well-being of children during the pandemic.

An intrinsic aspect that transcends scholarly citations is the ecological systems theory's ability to capture the complexity of children's experiences during the pandemic. It offers a comprehensive lens that considers not only immediate influences within the microsystem but also the broader societal and cultural forces shaping their lives. This comprehensive approach allows for a deeper understanding of the multifaceted impacts of the pandemic on children, recognizing the intricate web of relationships and environments in which they are embedded.

In acknowledging the utility of the ecological systems theory, it emerges as a valuable tool for researchers offering a holistic framework that resonates with the lived experiences of children (Bronfenbrenner, 1977). Its application provides a conceptual scaffold to understand the dynamic interplay between individual and environmental factors shaping the psychosocial landscape of children during the ongoing global health crisis.

2.7 Conclusion

This Chapter has provided a comprehensive overview of various facets related to COVID-19, encompassing its transmission, clinical symptoms, risk factors, diagnosis, and the broader context of the pandemic within South Africa. The discussion has delved into interventions and preventive measures implemented in the South African context, shedding light on the social impacts and the state of mental health during the pandemic. Furthermore, the chapter explored the diagnosis, treatment, and management of COVID-19 in children, outlining both the negative and positive impacts. The examination of factors influencing the well-being of children at the family, child, and service levels has enriched our understanding of the intricate dynamics at play. Anchoring this exploration is the Ecological Systems Theory, offering a theoretical framework to comprehend the interconnected influences shaping the experiences of children amidst the challenges posed by the pandemic.

CHAPTER 3: RESEARCH METHODOLOGY

3.1 Introduction

This chapter plays a pivotal role in the study, outlining the methodology for investigating the psychosocial impacts of COVID-19 on South African children. It provides insights into the sample selection process, methods for data collection and analysis, and underscores a commitment to transparency and ethical integrity, serving as a foundational guide for the subsequent stages of the study.

3.2 Research Paradigm

In this research study, an interpretive research paradigm has been deliberately chosen to align with the qualitative nature of the investigation, particularly as it delves into the psychosocial impacts of COVID-19 on children. The interpretive paradigm is rooted in the understanding that individuals ascribe subjective meanings to their experiences within specific contexts. Given the complexity and depth of the psychosocial effects of the pandemic on children, the interpretive approach provides a suitable framework for this study.

The adoption of an interpretive paradigm signifies a commitment to unravelling the intricate and varied ways in which children perceive and navigate the challenges brought about by the COVID-19 pandemic (Denzin & Lincoln, 2011) . By employing in-depth interviews as the primary method of data collection, the research aims to capture the diverse perspectives and nuanced narratives of children in response to the unprecedented circumstances they faced during the pandemic (Rubin & Rubin, 2011).

The choice of an interpretive paradigm is justified by the conviction that a qualitative approach is paramount for understanding the depth and richness of children's experiences during such a transformative period (Creswell & Poth, 2016). The study seeks to move beyond surface-level observations and numerical data, striving instead to uncover the psychological and social dimensions of the COVID-19 pandemic as perceived by children. Through the interpretive lens, the research endeavours to provide a holistic understanding of how children, with their unique perspectives and coping mechanisms, have grappled with the challenges imposed by the pandemic, contributing valuable insights to the broader discourse on child well-being in times of crisis.

3.3Research Approach

This study employed a qualitative methodology, utilizing direct data collection from participants to gain nuanced insights into the psychological and social impacts of COVID-19 on children. As outlined by (McMillan & Schumacher, 2010), qualitative research provides researchers with the opportunity to explore participants' experiences independently and rigorously. According to Green and (Thorogood & Green, 2018), qualitative research is especially applicable when the objective is to explore, elicit, and understand participants' perspectives, enabling a more profound observation of processes. Saunders (2014) contend that qualitative research is commonly linked with an interpretive philosophy, employing small sample sizes to collect detailed data describing individual experiences. This interpretive approach emphasizes the significance of human perceptions in acknowledging social realities and underscores the subjective practices of individuals in the external world. Qualitative research, with its emphasis on exploring and studying subjects within a social context, focuses on participants' opinions, attitudes, and emotions. Researchers following a qualitative approach typically adopt an inductive mode of reasoning, involving the emergence of questions and procedures that eventually evolve into themes, forming the basis for meaningful conclusions (Creswell & Poth, 2016). The selection of a qualitative approach for this study was driven by its appropriateness in comprehending the opinions of parents during the specified lockdown period and post-pandemic, facilitating a thorough and contextually embedded exploration of their experiences.

3.4 Sample and Sampling

During this research endeavour, a comprehensive examination involved seven participants, comprising both adults with children and young adolescents within the age range of 6 to 17 years. The selection of participants was executed through the implementation of snowball sampling, a non-random technique intricately known as the chain referral method (Neuman, 2006). This approach allowed for the recruitment of new participants through existing ones, fostering a network of interconnected individuals who shared relevant experiences regarding the psychosocial impacts of the COVID-19 pandemic.

To effectively source participants, social media platforms such as Facebook was strategically leveraged. A detailed and informative poster delineating the research objectives and particulars was disseminated in this platform, acting as a virtual beacon to attract potential contributors to the study. The participant pool deliberately encompassed a diverse range of individuals,

including parents, aunts, uncles, grandparents, and older siblings, all of whom had experienced living with children both before and after the onset of the pandemic. This intentional diversity in the sample aimed to capture a broad spectrum of perspectives and experiences, contributing to the richness and depth of the research findings.

Using Facebook for snowball sampling involved leveraging existing social networks to recruit participants for the study. I initially reached out to individuals within my social circles who met the study criteria and asked them to refer others who might be interested. This approach facilitated the recruitment of diverse participants beyond my immediate reach, tapping into various networks and communities. The advantages of using snowball sampling via Facebook include its efficiency in reaching a wide audience quickly and accessing "hidden" populations. However, there are limitations to consider, such as potential bias in participant selection and reduced sample diversity due to reliance on social networks. Despite these limitations, snowball sampling via Facebook proved effective for engaging participants and generating insights for the study.

Exclusion criteria were meticulously applied to ensure the ethical conduct of the research. Individuals living with severe mental health conditions were excluded, recognizing the potential vulnerability of this subgroup and the importance of obtaining fully informed and voluntary consent from all participants. Moreover, the study focused exclusively on participants residing in the Gauteng province, providing a geographically confined yet contextually specific lens through which to analyse the psychosocial impacts of the pandemic on children and their living arrangements. As part of the methodological transparency, a table summarizing participant characteristics has been incorporated into the research documentation.

Participant	**Relationship to the child**	**Marital Status**	**Race**	**Age Range**	**Educational status**	**Work Status**
Participant A	Mother	Single	Black	30-40	Secondary education	Unemployed
Participant B	Mother	Single	Black	30-40	Tertiary education	Employed
Participant C	Aunt	Single	Black	40-50	Secondary education	Employed
Participant D	Elder sister	Single	Black	30-40	Tertiary education	Unemployed
Participant E	Father	Widowed	Black	40-50	Tertiary education	Employed
Participant F	Grandmother	Widowed	Black	60-70	Secondary education	Retired
Participant G	Mother	Married	Black	30-40	Tertiary education	Employed

Table 1. Parcipant Characteristics

3.5 Research Instrument

In the execution of this research study, the primary method of data collection involved in-person, semi-structured, and in-depth interviews conducted exclusively with participants hailing from the Gauteng province. These interviews, ranging from 45 minutes to 1 hour in duration, were thoughtfully designed to extract accurate and clear responses to the research questions, thereby facilitating a comprehensive understanding of the nuanced opinions and experiences of the participants.

The interview questions were carefully crafted to focus predominantly on children's reactions during the various phases of the pandemic. The inquiry delved into the intricate dynamics of how children navigated and adapted during the stringent lockdown restrictions and in the subsequent post-pandemic period. By exploring these dimensions, the research aimed to unearth the multifaceted psychosocial impacts of COVID-19 on children within the unique context of the Gauteng province.

3.6 Method of Data Collection

Prior to commencing the research collection process, ethical clearance was diligently obtained from the University of the Witwatersrand's Human Research Ethics committee (non-medical). This essential step ensures that the research adheres to ethical standards, protecting the rights and well-being of the participants.

The primary method of data collection employed in this research study was in-person, semi-structured, and in-depth interviews. The seme-structured interviews were open-ended, which allowed participants to provide detailed and subjective responses. These interviews exclusively involved participants from the Gauteng province and were meticulously designed to extract accurate and clear responses regarding the psychosocial impacts of COVID-19 on children.

To ensure a conducive and comfortable environment for participants, the interviews were strategically conducted in locations of their choosing, including their homes and other familiar and comforting settings. This participant-cantered approach was adopted to foster a sense of ease and openness, facilitating candid responses and a more profound exploration of their experiences. The face-to-face nature of the interviews was intentional, aiming to establish a strong foundational relationship between the researcher and participants. This interpersonal connection was deemed crucial for cultivating an atmosphere of trust and rapport, thereby enhancing the depth and authenticity of the information gleaned during the interviews.

To facilitate rigorous analysis, all interviews were recorded and subsequently transcribed. This transcription process allowed for a meticulous examination of the qualitative data, ensuring that the richness and subtleties of participants' narratives were accurately captured and preserved. Through this methodological approach, the research sought to go beyond surface-level insights, delving into the intricate stories and perspectives of the participants, thereby contributing to a more comprehensive understanding of the psychosocial impacts of the COVID-19 pandemic on children in the Gauteng province.

3.7 Data Analysis

The data collected for this study underwent a meticulous thematic analysis, a chosen method for its adaptability and widespread applicability in qualitative research. Thematic analysis facilitated the systematic identification, analysis, and reporting of patterns (themes) within the collected data, contributing to a nuanced understanding of the psychosocial impacts of COVID-19 on children in the Gauteng province. Following the guidelines set forth by Braun and Clarke (2012), the analysis process comprised several distinct steps, ensuring rigor and depth in the exploration of participants' experiences.

Step one: The initial phase involved the immersion of the researcher in the data through repeated readings of the transcribed interviews. This immersive approach aimed to cultivate a profound understanding of the content and context, allowing for the identification of distinctive segments of text that encapsulated the essence of participants' narratives. Raw data from interviews was transcribed and organized into a format suitable for analysis. This involved cleaning the data, anonymizing participant information, and ensuring accuracy in transcription.

Step two: Systematic coding was then employed to generate initial codes, identifying features, patterns, and potential themes within the dataset. The coding process was meticulous, with codes applied to specific segments of text to capture the richness and diversity of participants' responses. Themes and patterns within the data were identified through open coding, where segments of text were assigned descriptive labels to capture key concepts and ideas.

Step three: These generated codes were subsequently collated into potential themes, representing overarching patterns that encapsulated concepts or ideas central to the research objectives. Codes were organized into a codebook outlining definitions and examples for each code. This facilitated consistency in coding across the dataset and allowed for easy reference during analysis.

Step four: A continuous process of comparison and contrast refined and consolidated these themes, ensuring they accurately reflected the diversity of participants' experiences and perceptions. Codes were then grouped into broader themes based on similarities and relationships. This involved reviewing coded segments and identifying overarching themes that emerged from the data. This iterative refinement involved a comprehensive review of themes in conjunction with the raw data, guaranteeing the themes' fidelity to the participants' lived realities.

Step five: The next step involved the development of a coherent narrative that presented the findings in a structured manner. Themes were refined through iterative review and discussion. Similar themes were merged, and additional sub-themes were identified to capture nuances within the data. This narrative wove together excerpts from the data to illustrate each identified theme, offering a compelling and contextually rich depiction of the psychosocial impacts of COVID-19 on children.

Step six: The organization of the narrative was aligned with each research objective, providing a comprehensive overview of the psychological and social dimensions uncovered during the study. Themes were interpreted in relation to the research objectives and synthesizing findings into a coherent narrative. This process involved identifying key insights, drawing connections between themes, and discussing implications of the findings.

Throughout the analysis process, reflexivity was diligently maintained, acknowledging, and addressing the researcher's biases and preconceptions. Rigor was further ensured by documenting the decision-making process and continuously aligning analytical choices with the overarching research objectives. Finally, the results were reported in a clear and transparent manner, providing a rich description of the identified themes supported by verbatim quotes from the participants. This approach ensured the fidelity of the research findings and contributed to a comprehensive understanding of the multifaceted psychosocial impacts experienced by children in the context of the COVID-19 pandemic in the Gauteng province.

3.8 Method of Data Verification

In the data verification process of this qualitative study, the researcher focused on ensuring trustworthiness through four key components: credibility, transferability, dependability, and confirmability (Shenton, 2004).

Credibility: To establish credibility, it is important to ensure that the way research participants' socially constructed realities are represented aligns with their original intentions (Saunders, 2016). The researcher prioritized building rapport with participants to establish an open and comfortable environment that encourages honest communication. Using a well-developed interview protocol allowed for systematic coverage of relevant topics while remaining flexible to participants' responses. Throughout the interviews, the researcher employed probing and clarification techniques to deepen their understanding of participants' perspectives. Neutrality and objectivity were maintained as it was crucial to accurately capture responses without bias. Engaging in reflexivity helped the researcher to critically examine their biases and assumptions, fostering awareness of potential influences on the data collection process. Thorough documentation and transparency, such as detailed notetaking and audio/video recordings, promote credibility by facilitating accurate data analysis and scrutiny of the research process.

Transferability: Transferability refers to the degree to which research findings can be generalized to broader populations and different contexts (Saunders, 2016). To enhance transferability, the researcher provided detailed contextual information about the study participants and setting. This includes describing the characteristics of the participants, the research environment, and any relevant contextual factors that may influence the findings. Additionally, the researcher compared the findings to similar studies conducted in different settings to assess the generalizability of the results.

Dependability: Dependability in interviews means making sure that the research process is consistent and reliable (Saunders, 2016). The researcher achieved dependability by using the same methods and procedures for all interviews within the same study with the same participants. This includes using clear and consistent interview guidelines to collect data in a structured way. Keeping detailed records of all research activities helped ensure transparency.

Confirmability: Confirmability in interviews as a data collection method refers to ensuring that the findings and interpretations are based solely on the participants' responses and experiences, without being influenced by the researcher's biases or preferences. As a researcher, I strive to achieve confirmability by maintaining objectivity throughout the interview process. This involves reflecting on my own perspectives and potential biases before, during, and after the interviews. I focus on accurately transcribing and analysing the data to capture participants' viewpoints as they were expressed.

3.9 Ethical Considerations

Ethical clearance: Ethical clearance refers to the formal process through which research protocols and procedures are reviewed by an ethics committee or institutional review board to ensure that they meet ethical standards and guidelines for conducting research involving human participants (Israel & Hay, 2006). The initiation of the research process adhered to a rigorous ethical framework, beginning with the crucial step of obtaining ethical clearance from the University of the Witwatersrand. This foundational approval set the ethical parameters for the study, ensuring that the research would be conducted in a manner that upholds the well-being, rights, and confidentiality of the participants.

Informed consent: An informed consent refers to a detailed written consent form that comprehensively outlined the research's purpose, procedures, expected duration, and potential risks (Israel & Hay, 2006). Before embarking on data collection, a meticulous process of obtaining informed consent was undertaken. Participants were presented with a written consent form that comprehensively detailed key aspects of the research project. This information encompassed a clear description of the research's purpose and procedures, offering participants a transparent understanding of their involvement. The consent form further provided explicit details regarding the expected duration of the study, potential risks associated with participation, and emphasized the voluntary nature of their engagement. This comprehensive approach aimed to empower participants with the knowledge needed to make informed decisions about their involvement in the research.

Confidentiality and Anonymity: Confidentiality in research refers to the protection of participant information from unauthorized access or disclosure, ensuring that identifiable data is kept private and secure (Israel & Hay, 2006). Anonymity involves ensuring that participants' identities remain unknown and untraceable throughout the research process, with researchers collecting data without any means of linking responses back to specific individuals. Participants were assured of the utmost confidentiality and anonymity throughout the research process (Israel & Hay, 2006). To safeguard their identities, pseudonyms were employed, replacing real names in all research documentation. This measure aimed to reinforce the commitment to protecting the privacy of the participants, ensuring that their voices and experiences could be shared without compromising their individual identities.

Avoidance of harm: Avoidance of harm in research ethics refers to the ethical obligation of researchers to minimize potential risks and prevent harm to participants involved in a study

(Israel & Hay, 2006). This principle underscores the importance of prioritizing participant well-being and safety throughout the research process. The researchers ensured that questions are phrased sensitively to avoid causing distress or discomfort to participants. Additionally, the researcher provided clear information about the purpose of the interview, potential topics of discussion, and confidentiality measures to obtain informed consent and address any concerns related to participant well-being.

Data security: Data security refers to measures implemented to safeguard the security of participant data (Israel & Hay, 2006). All audio recordings, considered sensitive information, were stored on a password-protected laptop. Additionally, the transcribed material derived from these recordings underwent the same level of security, being stored with password protection. These safeguards were instituted to mitigate the risk of unauthorized access and uphold the integrity of the participants' data.

This comprehensive ethical framework, encompassing ethical clearance, informed consent, confidentiality measures, and secure data storage practices, underscores the commitment to conducting the research in an ethically responsible manner. Such ethical considerations are paramount not only for the integrity of the study but also for the protection and well-being of the participants involved in the exploration of the psychosocial impacts of the COVID-19 2019 pandemic on children.

3.10 Reflexivity

Reflexivity involves the critical examination of a researcher's own assumptions, beliefs, and practices throughout the research process, exploring how these factors may have shaped the study. Finlay (1998) draws a distinction between positionality and reflexivity, stating that while positionality pertains to what we know and believe, reflexivity focuses on how we engage with that knowledge. Acknowledging my role as a research student, I recognize that my personal experiences, beliefs, and values can influence the interpretation and analysis of the collected data. It is essential, as a researcher, to consciously separate my own reactions and perspectives and approach the study with the mindset of an objective investigator. Given my firsthand encounters with the direct impacts of COVID-19 and witnessing the challenges faced by younger siblings, the interview questions in the schedule are shaped by both my experiences and insights drawn from the existing literature.

3.11 Conclusion

This study adopts a qualitative research design, specifically employing an interpretive paradigm to explore the psychosocial impacts of COVID-19 on children in the Gauteng province. The selection of qualitative methodology allows for an in-depth examination of participants' experiences, aligning with the study's aim to unravel the nuanced dimensions of children's perceptions during the pandemic. The sampling strategy involves seven diverse participants, selected through snowball sampling, and recruited via social media platforms, ensuring a comprehensive exploration of the psychosocial impacts. Ethical considerations are paramount, with rigorous measures in place to safeguard participant confidentiality, obtain informed consent, and ensure secure data handling. The data analysis employs thematic analysis, following a systematic process to identify, analyse, and report patterns within the qualitative data, contributing to a nuanced understanding of the psychological and social impacts of COVID-19 on children in the specified region.

CHAPTER 4: RESULTS

4.1 Introduction

In this pivotal Chapter, the focus shifts towards a meticulous analysis and interpretation of the collected data, offering a nuanced exploration into the psychosocial impacts of COVID-19 on children in Gauteng. Thematic analysis serves as the chosen methodology, guiding a rigorous

examination of patterns and themes within the qualitative data obtained through in-depth interviews. Through this process, the chapter aims to unravel the diverse and complex experiences and perceptions expressed by participants, providing valuable insights into the psychological and social dimensions of the pandemic's effects on children in the specific context of Gauteng Province.

The results of the thematic analysis provide a comprehensive exploration of the multifaceted impacts of the COVID-19 pandemic on children, elucidating their psychological and emotional responses, coping mechanisms, and adjustments in the face of unprecedented challenges. Through an in-depth examination of seven distinct interviews, a rich tapestry of themes has emerged, offering valuable insights into the nuanced ways in which children navigated the evolving landscape of the pandemic. Braun and Clarke (2006) thematic analysis was used to analyse the data and six main themes emerged namely: psychological, and emotional impact, fear and anxiety, adjustment to changes in routine and social contact, changes in everyday functioning, impact on learning and education, and changes in behaviour and emotions post-lockdown.

In this chapter, the identified themes and their corresponding subthemes will be thoroughly presented and analysed. The overarching findings, encapsulated in Table 2, provide a comprehensive summary of the main themes and their nuanced sub-themes. This table serves as a condensed yet informative overview, facilitating a clear and structured understanding of the intricate dimensions explored within the thematic analysis. The subsequent sections will delve into each theme and sub-theme, unravelling the complexities of children's experience.

Themes	**Sub-themes**
1. Psychological and Emotional Impact	1.1 Loneliness due to extended periods of indoor confinement
2. Fear and Anxiety	2.1 Consistent mask-wearing as manifestation of fear
	2.2 Frustration as a response to challenges in understanding the pandemic.
	2.3 Surprising optimism and focus on safety guidelines
3. Adjustment to Changes in Routine and Social Contact	3.1 Challenges in adapting to lockdown restrictions.
	3.2 initial struggles to the loss of social contact
	3.3 Negative impact on social life and hindrance in learning through play
4. Changes to Everyday Functioning	4.1 Disrupted sleeping patterns
	4.2 Disrupted eating habits
	4.3 Impact on daily lives and habits

5. Impact on Learning and Education	5.1Academic pressure 5.2 challenges in transitioning from online to regular classes 5.3 Decline in performance during lockdown
6. Changes in Behaviour and Emotions Post-Lockdown	6..1 Cautious reconnection with social activities 6..2Relief and excitement in returning to engagement

Table 2. Summarizing the main themes and Subthemes.

4.2 Theme One: Emotional Impact

Emotional impact refers to the influence or effect that an event, situation, or experience has on an individual's emotions and psychological state. It encompasses a range of emotional responses, including feelings of joy, sadness, anxiety, fear, loneliness, and stress, and can significantly affect a person's mental well-being and behaviour (Wenzlaff & LePage, 200). delves into the multifaceted emotional responses of children to the challenges posed by the COVID-19 pandemic, focusing particularly on the experience of loneliness.

One sub-theme emerged from the Psychological and Emotional Impact Theme, namely loneliness due to extended periods of indoor confinement.

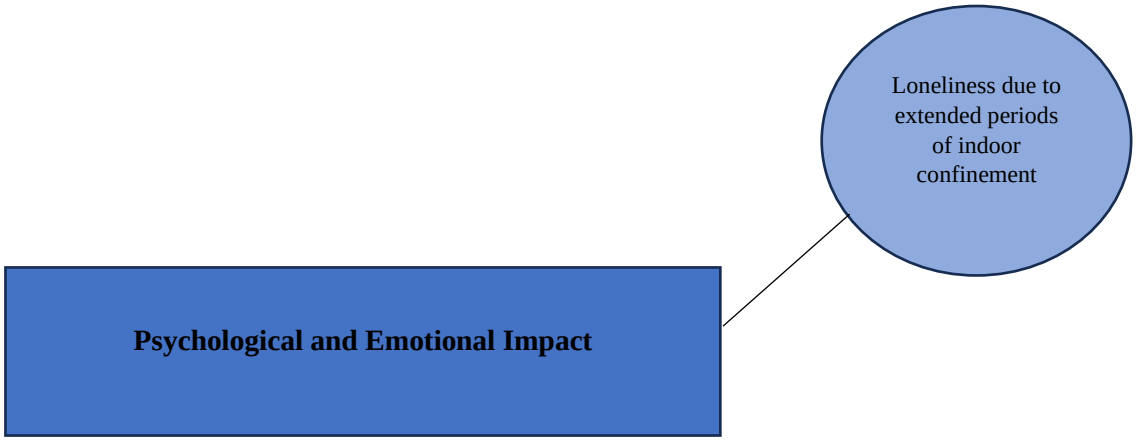

Figure 1: Representation of Psychological and Emotional Impact

4.2.1 Loneliness due to extended periods of indoor confinement

The thematic analysis illuminated a diverse range of emotional responses in children during the COVID-19 pandemic. Parents consistently reported varied emotions among their children, and a prevailing sense of profound loneliness emerged as a dominant sentiment. This emotional

state was notably linked to extended periods of indoor confinement, a consequence of the imposed lockdowns and social distancing measures. Parents expressed that the absence of routine social interactions, including school attendance, playdates, and family visits, significantly contributed to an intensified feeling of isolation and loneliness in their children.

participant A noted, "he was just lonely because of staying indoors".

Participant B also mentioned, "I picked up that he was more sad. Not seeing his friends and dad more often as he usually does, so he was emotional during that period."

Encapsulating the emotional strain experienced by children due to the disruption of their social routines. This resonates with a broader theme of the pandemic's impact on children's psychological well-being, underscoring the pivotal role of social connections and external stimuli in shaping their emotional experiences.

4.3 Theme Two: Fear and Anxiety

Within the overarching theme of fear and anxiety, a varied range of responses emerged among the children. This theme explores the psychological responses of children to the uncertainties and disruptions caused by the COVID-19 pandemic. This theme delves into the heightened feelings of apprehension, worry, and distress experienced by children as they navigate the challenges posed by the pandemic, including fears about their health and the uncertainty of the future. Three sub-themes emerged from this theme. Each Subtheme is discussed below.

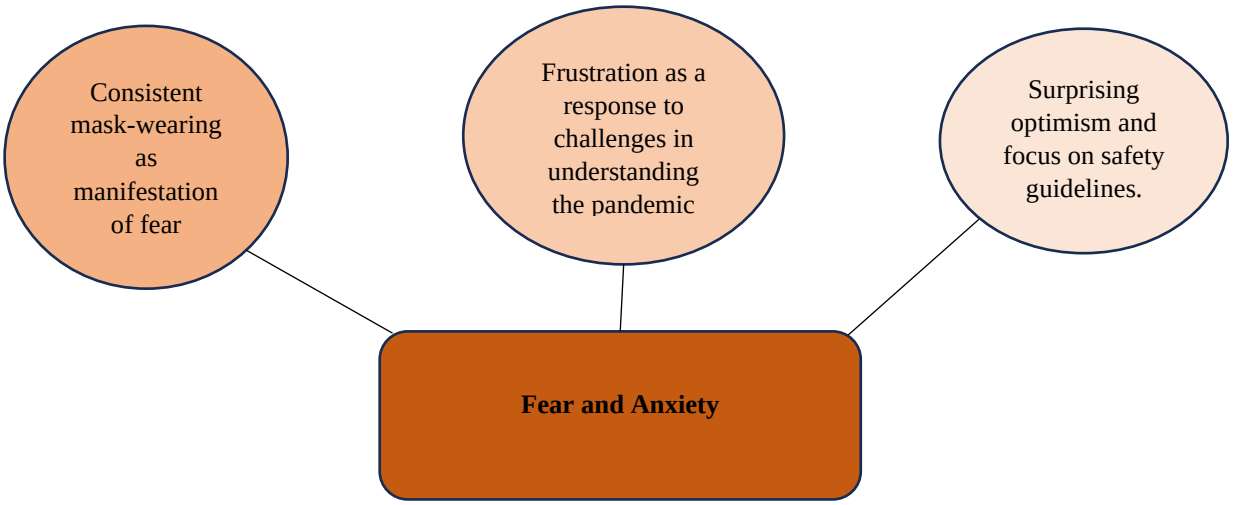

Figure 2: Representation of Fear and Anxiety

4.3.1 Consistent mask-wearing as manifestation of fear

Three participants indicated that their children explicitly displayed signs of fear, evident in their consistent adoption of precautionary measures, such as wearing masks even indoors. This conduct serves as a tangible expression of heightened anxiety concerning the potential threat of the virus, representing a coping mechanism focused on self-protection.

Participant E recounted, "My kid started always wearing a mask, even when it was not needed". Participant D also stated, "Yes, she was extremely frightened. She always wore a mask, even inside the house," emphasizing the child's evident fear and the measures taken to alleviate it. Participant G also mentioned "My son would insist on keeping the mask on all the time".

4.3.2 Frustration as response to challenges in understanding the pandemic

Conversely, another subset of children expressed signs of frustration, possibly stemming from the challenges in comprehending the complexities of the pandemic. This frustration likely arose from disruptions to their routine, limited social interactions, and the overarching uncertainty surrounding the situation. Although not explicitly stated, hints of this frustration were discerned in parents' descriptions of changes in their children's behaviour during the pandemic.

Participant D shared, "my sister had a hard time in the beginning. The pandemic changes were tough for her to understand, and this made her feel frustrated". Participant G also shared, "my child got upset because his normal routine was messed up, he couldn't see his friends anymore and everything was just uncertain".

4.3.4 Surprising optimism and focus on safety guidelines

Surprisingly, a positive dimension emerged as well, with some children showcasing optimism and a proactive approach in adhering to safety guidelines. This resilience and adaptability, despite the challenging circumstances, suggest an ability among certain children to cope positively with the adversities presented by the pandemic. The theme of fear and anxiety thus reflects the intricate emotional responses of children, ranging from explicit expressions of fear to frustrations and, unexpectedly, a resilient optimism.

Participant C recounted, "it was difficult, but my niece made sure that she followed the safety rules, she even reminded everyone in the house about them. Every time a person was going out and saw they were not wearing a mask she would remind them to wear one". Participant F also mentioned, "that is when I saw that he would grow up to be responsible because he paid attention especially to the safety rules, he always had a must and sanitizer in his pocket".

4.4 Theme Three: Adjustment to Changes in Routine and Social Contact

The theme of adjustment shed light on the considerable challenges children faced in adapting to the transformative changes in routine and social contact imposed by the COVID-19 pandemic. Three subthemes emerged from this theme. Each subtheme is discussed below. Some parents indicated that their children had challenges adapting to lockdown restrictions, while others had initial struggles to the loss of social contact. Other children were reported to have experienced a negative impact on social life and hindrance in learning through play.

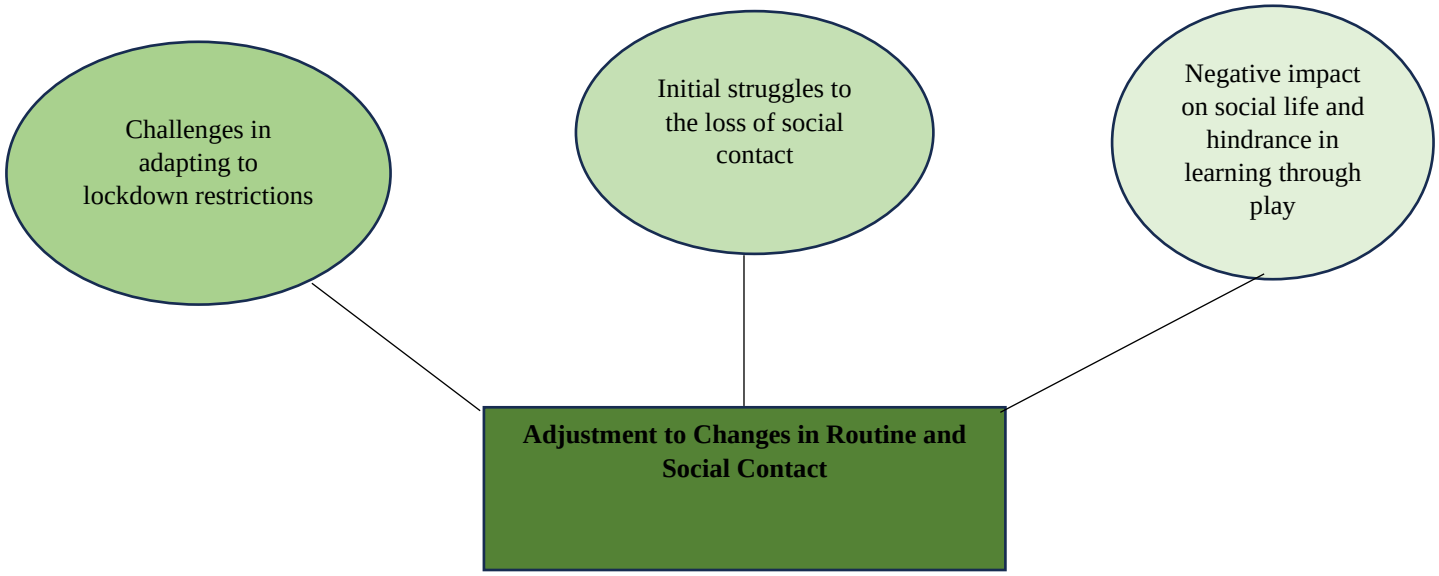

Figure 3: Representation of Adjustment to Changes in Routine and Social Contact

4.4.1 Challenges in adapting to lockdown restrictions

Parents consistently reported that their children found it challenging to navigate the altered landscape brought about by lockdown restrictions. The difficulty was particularly evident in the initial stages of the pandemic, where confusion and questioning of the abrupt changes in routine were common among the children.

Participant B shared, “it was really hard for him to adjust to the lockdown restrictions, he didn’t understand why she couldn’t go out like before, everything just suddenly changed”. Participant E also mentioned, “the lockdown was difficult for him to handle because he couldn’t play with his friends or even go to school”. Participant C share, “It was too tough for her. She just couldn’t comprehend why she couldn’t visit her grandparents”.

4.4.2 initial struggles to the loss of social contact

The loss of social contact emerged as a significant struggle for many children. In the interviews, parents noted that their children had trouble in coping with the sudden absence of interactions

with friends, teachers, and extended family members. This loss of social contact, especially in the context of playdates and face-to-face interactions, had a notable impact on the children's emotional well-being and overall social development.

Participant A stated, “Initially, he struggled a lot with not being able to meet with his friends, sometimes he would cry and beg to go on a weekend play dates with friends”. It was hard for him to cope”. Participant G also noted, “On the first days he always asked that why mommy why am I not going to school, I want to go to teacher”.

4.4.3 Negative impact on social life and hindrance in learning through play

One common thread across interviews was the negative impact on the social life of the children. The absence of regular social interactions hindered learning through play, a crucial aspect of childhood development. Parents expressed concerns about the limited opportunities for their children to engage with peers, which could have potential repercussions on their social skills and overall growth.

Participant D mentioned, “The first few weeks were really hard on her, and it affected her mood. She felt lonely and she didn’t know how to deal with it”. Participant B also shared,

> Yho! It was hard. Sometimes I had to call his friends' parents and tell them that my child wanted to speak to their child. COVID-19 changed everybody's lives, especially kids because they had to adjust to whatever that we were telling them to do. So, it affected him, and it affected him negatively because his social life had to stop for him to not be infected.

4.5 Theme Four: Changes to Everyday Functioning

The examination of changes in everyday functioning revealed noticeable disruptions in the established routines and habits of children throughout the COVID-19 pandemic. An overarching impact was observed in sleeping and eating patterns, suggesting a profound influence of the pandemic-related alterations on the daily lives of children. Children Were reported to have experienced disrupted sleeping patterns, disrupted eating habits as well as an impact on their daily lives and habits.

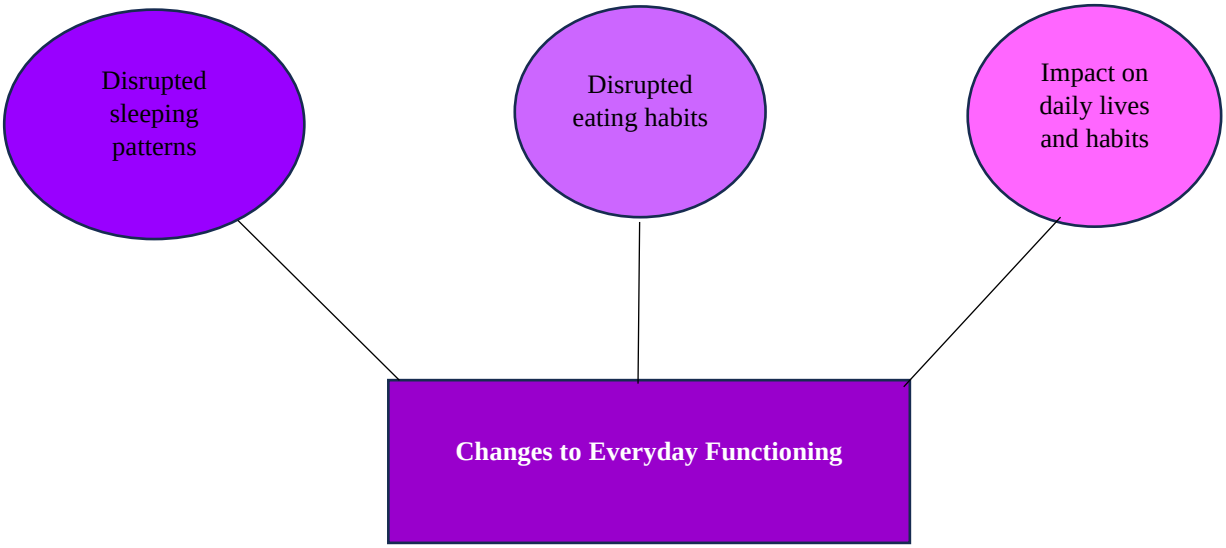

Figure 4: Representation of Changes to Everyday functioning

4.5.1 Disrupted sleep patterns

Interviews consistently highlighted alterations in sleep patterns, with children experiencing either increased or decreased sleep duration. The effects of disrupted routines were evident, as described by Participant B

> Yeah, it did because when he was in school there was a sleeping routine, but because now they had nothing to do and was one thing over and over again, he slept less or even more because there is only one routine.

Participant G also shared,

> Because of being indoors, he was always eating, always hungry every 2 minutes 'am hungry' so he was eating a lot. Then the sleeping pattern changed, he used to sleep in the afternoon more in the afternoon. Then at night yho! It would be a problem for him to sleep.

This statement underscores the interconnectedness of disrupted routines, with changes in eating habits contributing to shifts in sleep patterns.

4.5.2 Disrupted eating habits

Changes in eating habits were prevalent, with parents reporting shifts in their children's dietary routines. The impact of pandemic-induced changes is elucidated by Participant G: “Because of being indoors, he was always eating, always hungry every 2 minutes 'am hungry' so he was eating a lot”.

Participant A mentioned, "Remember during COVID we had to buy in bulk and then you would find out that he is eating noodles in the morning and then in the noon he wants noodles."

This reflects the challenges faced by parents in maintaining healthy eating habits for their children during a period of uncertainty and restricted activities. Adding to the discourse Participant E shared, “My son started loving snacks a lot. Being home all the time and the messed-up routines changed how he eats”.

4.5.3 Impact on daily lives and habits

Examining the repercussions on daily lives and habits during the COVID-19 lockdown, participants illuminated significant disruptions in routines, particularly pertaining to altered sleeping patterns and eating habits. Participant E shed light on the difficulties their child faced, emphasizing shifts in sleep routines and increased food consumption, stating,

“During lockdown, our daily routine changed, affecting how my child slept and ate. It was challenging to keep a healthy lifestyle with these disruptions."

The child's once-structured routine encountered substantial changes, presenting challenges in sustaining a balanced lifestyle. Similarly, Participant C acknowledged alterations in their child's habits during lockdown and demonstrated adaptability by enforcing a consistent routine as a parent, regardless of uncertainties surrounding school attendance. As Participant C expressed,

"It changed, but then as a parent, I had to stick with a routine and say that whether we are going to school or not. This is what is supposed to be done and this is how you are going to do it."

This resilience in adhering to a structured routine reflects proactive measures employed by parents to mitigate the pandemic's impact on their children's daily lives and habits. Despite the challenges, participants' responses underscore the adaptability and coping strategies within households to foster resilience and well-being.

In essence, the theme of changes in everyday functioning highlights the tangible repercussions of the pandemic on the daily lives of children, affecting fundamental aspects such as sleep and eating habits. The interconnected nature of these disruptions emphasizes the need for a holistic understanding of the challenges faced by children during this unprecedented period.

4.6 Theme Five: Impact on Learning and Education

The exploration of the theme regarding the impact on learning and education unveiled multifaceted challenges faced by children amid the COVID-19 pandemic. The experiences shared by parents across interviews underscored the substantial effects on various aspects of children's academic lives. Three subthemes emerged from the theme of Impact on Learning and education, namely Academic pressure, challenges in transitioning from online to regular classes, and decline in performance during lockdown.

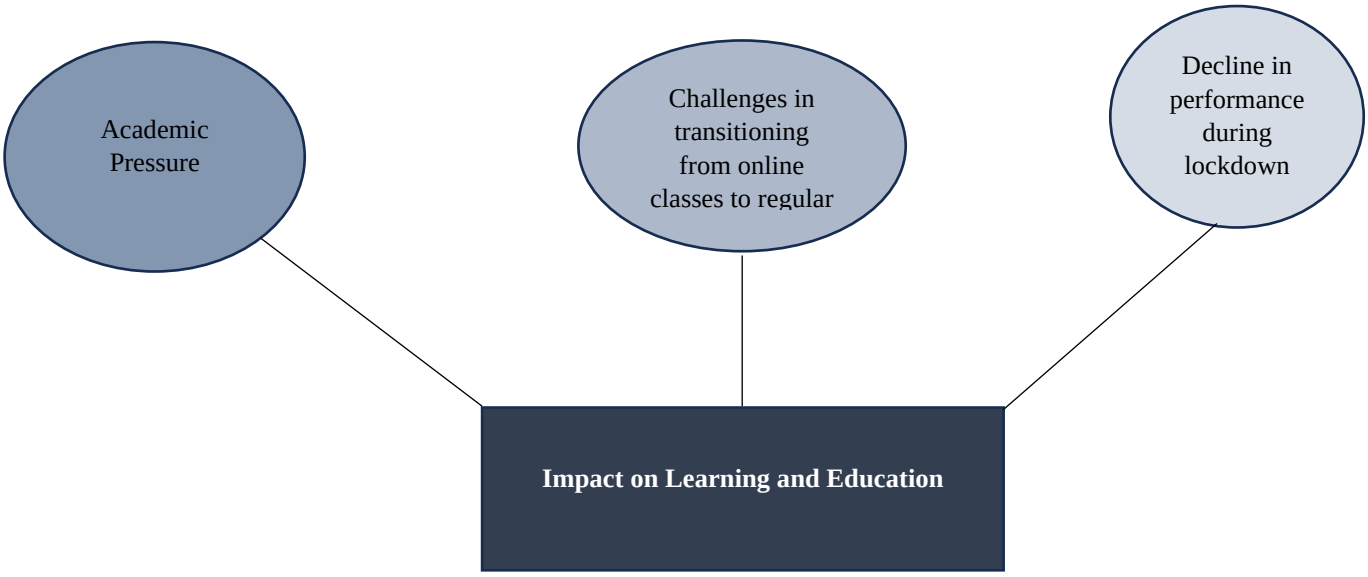

Figure 5: Representation of Impact on Learning and Education

4.6.1 Academic Pressure

A significant aspect highlighted was the increased academic pressure faced by children after the lockdown. The shift from sporadic attendance to regular classes induced a feeling of stress, as articulated by Participant G, who remarked,

"He seems like he is under pressure because he was used to going two days a week or not going to school at all. Now, doing grade 5, he feels like he is under pressure."

This emphasizes the challenges associated with adapting to a more demanding academic routine and underscores the psychological impact on the child. Participant A shared parallel concerns regarding academic pressure during the lockdown, stating,

"My child felt a lot of pressure with schoolwork. Switching to online classes was hard, and there was too much to do. It was tough to keep up with everything and meet the expectations."

This further highlights the difficulties children encountered in managing academic demands and adjusting to shifts in the learning environment.

4.6.2 Changes in transitioning from online to regular classes

The challenges associated with transitioning from online to regular classes were a recurring theme in the interviews. Participant E emphasized this difficulty, stating,

> Moving from classes in person to online was hard for my child. Even when they went back to regular classes, they had some problems. They had to get used to new ways of learning, figure out new tech stuff, and adjust to how teachers were teaching.

Participant B shared similar sentiments, expressing, "The adjustment from online to regular classes was tough. During lockdown, we had to teach basics at home, and when back in school, the performance declined because he had to go through all of that at home".

The struggle to adapt to evolving educational formats reflects the broader disruptions in education triggered by the pandemic.

4.6.3 Decline in Performance during Lockdown

A common thread in the interviews was the decrease in academic performance during the lockdown. Participant B mentioned,

"The performance declined because he had to go through all of that at home."

The lack of regular classes and the shift to home-based learning resulted in a drop in academic success, underscoring the importance of traditional classrooms in children's education.

Participant C expressed, "The lockdown messed up her school routine, and switching to home learning was hard, but it got better over time".

In essence, the theme of the impact on learning and education highlights the intricate challenges faced by children in adapting to new academic norms during the pandemic. From heightened pressure to difficulties in transitioning and a decline in performance, these challenges collectively underscore the profound effects on the educational journey of children in the face of unprecedented disruptions.

4.7 Theme Six: Changes in Behaviour and Emotions Post-Lockdown

The theme of Changes in Behaviour and Emotions Post-Lockdown delves into the evolving responses of children as they navigated the transition to a post-pandemic normalcy. Following

the easing of lockdown restrictions, children displayed a spectrum of adjustments in both behaviour and emotions. Two subthemes emerged namely, cautious reconnection with social activities, and relief and excitement in returning to engagement.

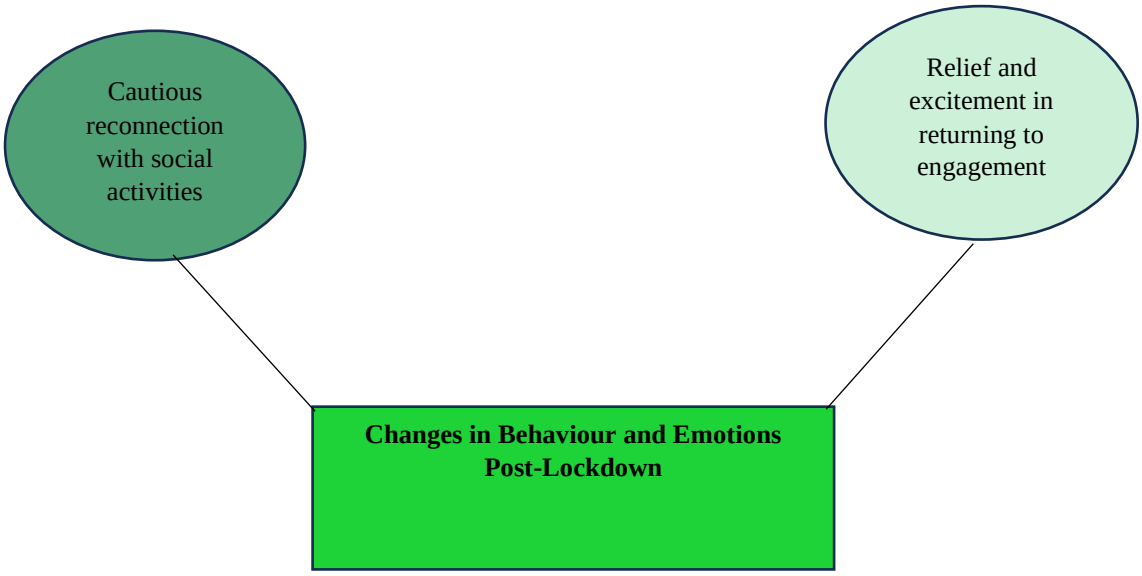

Figure 6: Representation of Changes in Behaviour and Emotions Post-Lockdown

4.7.1 Cautious reconnection with social activities

The examination of participants' experiences revealed a common thread of cautious reconnection with social activities following the relaxation of lockdown restrictions. Participant F shared insights, stating, "As the lockdown restrictions were reduced, my grandchild became more cautious rather than exhibiting drastic changes in behaviour. They remained conscious of the ongoing risks."

This quote emphasizes the child's careful approach, showcasing a heightened awareness of the persisting risks associated with social interactions. The child's ability to navigate the post-lockdown social landscape demonstrated a thoughtful and measured response, acknowledging the ongoing uncertainties.

Similarly, Participant A's narrative contributed to this theme, expressing, "As that lockdown restrictions were reduced, he gradually became more interactive with friends and engaged in recreational activities, although he was still a bit cautious".

This quote highlights the gradual nature of the child's reconnection with social activities. Despite the absence of lockdown restrictions, the child exhibited a lingering sense of caution, showcasing a discernible level of carefulness. The child's engagement with friends and participation in recreational activities resumed, but with a discernible level of carefulness.

4.7.2 Relief and excitement in returning to engagement

A significant number of children expressed relief and excitement in returning to a state of happiness and engagement with friends and loved ones. The interviews captured moments of joy and enthusiasm as children resumed regular activities, highlighting their resilience in adapting to the changing circumstances.

Quotes from the interviews resonated with these subtle shifts in behaviour and emotions. For example, Participant E expressed, "As things got better, my child felt happy and relieved, going back to being excited and spending time happily with friends and family".

This captures the positive transformation observed in children's attitudes as they welcomed the opportunities for social interaction after the lockdown. Participant B similarly remarked,

"The excitement changes because now it was back to normal, we were all happy so you can just imagine how kids were. He was happy to be engaged with his friends, with his loved ones again. He was more relieved."

In essence, the theme portrays the intricate dynamics of children's responses during the post-pandemic phase, emphasizing the importance of understanding and supporting their evolving emotional and behavioural landscapes.

4.8 Conclusion

The thematic analysis of interviews investigating the impact of COVID-19 on children has unveiled a nuanced panorama of their psychological, emotional, and behavioural responses throughout the pandemic. Among the spectrum of emotions observed, a significant theme that emerged was the pervasive feeling of loneliness, primarily attributed to prolonged indoor confinement. Fear and anxiety were palpable, expressed through various manifestations, ranging from the explicit act of consistently wearing masks to unexpected resilience and optimism in adhering to safety guidelines. The challenges associated with adapting to changes in routine and social contact underscored the profound influence on children's social lives and learning experiences. Disruptions in everyday functioning, evident in altered sleep and eating patterns, further emphasized the pervasive impact of the pandemic on children's daily lives. Additionally, discernible effects on learning and education were noted, with academic pressure and transitional challenges from online to regular classes influencing children's performance. Post-lockdown observed changes in behaviour and emotions reflected the dynamic nature of their responses to evolving circumstances. These findings underscore the imperative of

comprehensively understanding children's experiences during crises, highlighting the importance of addressing psychological aspects (such as loneliness, fear, and frustration) and psychosocial aspects such as (adjustments to changes in routine, social contact, and the complexities of learning and education) to foster their overall well-being.

CHAPTER 5: DISCUSSION

5.1 Introduction

Chapter 5 marks the culmination of this study, synthesizing the thematic findings from in-depth interviews on the psychosocial impacts of COVID-19 on children in Gauteng. In the ensuing discussion, we delve into a thorough analysis of the emergent themes, exploring the nuanced interplay between the pandemic and children's well-being.

5.1.1 Profound Impact of Extended Indoor Confinement on Children's Psychological Well-being during the COVID-19 Pandemic

The thematic analysis unveiled a poignant exploration of the psychological and emotional impacts experienced by children during the COVID-19 pandemic, with a particular emphasis on the overwhelming sense of loneliness due to extended periods of indoor confinement. The findings resonate with existing literature highlighting the importance of social connections in shaping children's emotional well-being (Loades et al., 2020; Prime et al., 2020). The disruption of familiar social routines, encompassing school attendance, playdates, and family visits, emerged as a critical factor intensifying feelings of isolation among the children.

Research has consistently shown that social interactions are integral to children's psychosocial development, contributing significantly to their emotional regulation and overall well-being (Wang et al., 2020). The imposed lockdowns and social distancing measures severed these essential connections, thrusting children into an unfamiliar and isolating environment. The poignant statement by participant A, "he was just lonely because of staying indoors," encapsulates the emotional strain experienced by children due to the disruption of their social routines.

The emotional impact of prolonged indoor confinement aligns with previous studies that have identified loneliness as a significant psychological challenge for children during the pandemic (Ellis et al., 2020; Loades et al., 2020; Rodríguez-Pose, 2024). The absence of routine social interactions became a poignant marker of the disrupted social fabric, intensifying the children's sense of isolation. This resonates with the broader theme of the pandemic's impact on children's psychological well-being, underscoring the pivotal role of social connections and external stimuli in shaping their emotional experiences.

Parents consistently reported varied emotions among their children, highlighting the diversity of responses to the altered social landscape. The significance of these findings extends beyond the immediate impact on emotional well-being, as loneliness in childhood has been linked to long-term psychological and physical health implications (Matthews et al., 2016). It underscores the urgency of addressing the emotional needs of children in times of crisis, emphasizing the importance of targeted interventions to mitigate the adverse psychological effects of disrupted social routines.

To further contextualize these findings, the research aligns with the broader literature on the psychological impact of pandemics on children. Studies conducted during previous pandemics,

such as the H1N1 influenza outbreak, have highlighted the psychological vulnerabilities of children in the face of health crises (Lateef et al., 2021; Sprang & Silman, 2013). The current findings contribute to this body of knowledge by offering nuanced insights into the specific emotional responses triggered by the unique circumstances of the COVID-19 pandemic.

5.1.2 Coping Mechanisms and Resilience: Understanding Children's Adaptive Responses to Fear and Anxiety during the COVID-19 Pandemic

The thematic analysis of children's experiences during the COVID-19 pandemic revealed a nuanced spectrum of emotional responses, particularly in the themes of "Psychological and Emotional Impact" and "Fear and Anxiety." The emotional strain of prolonged indoor confinement resulted in a prevailing sense of loneliness among children, emphasizing the pivotal role of disrupted social connections (Loades et al., 2020; Prime et al., 2020). The theme of Fear and Anxiety showcased a diverse range of responses, from explicit signs like consistent mask-wearing, reflecting heightened anxiety, to unexpected resilience and optimism in adhering to safety guidelines (Sprang & Silman, 2013).

Recognizing the psychological vulnerabilities of children during health crises is imperative for developing targeted interventions and support systems aimed at mitigating the potential long-term impact on their mental well-being (Sprang & Silman, 2013). The adoption of consistent mask-wearing by children can be seen as a tangible coping mechanism, reflecting their attempt to navigate the perceived threat of the virus (Martinelli et al., 2021;Sprang & Silman, 2013). Participant E's account, "My kid started always wearing a mask, even when it was not needed," highlights the child's palpable fear, translating into a proactive safety measure. This response aligns with literature suggesting that the adoption of consistent mask-wearing can be seen as a coping mechanism, reflecting children's attempts to navigate the perceived threat of the virus (Martinelli et al., 2021;Sprang & Silman, 2013). .

Amidst the intricate emotional responses of children during the COVID-19 pandemic, a notable aspect was the emergence of frustration, largely originating from the challenges associated with comprehending the complexities of the pandemic. The disruptions to routine, limited social interactions, and overarching uncertainty contributed significantly to this emotional turmoil (Sprang & Silman, 2013). This frustration found expression in altered behaviour, underscoring the necessity for support in navigating the emotional challenges associated with comprehending unprecedented events (Sprang & Silman, 2013).

In contrast to overt signs of fear and frustration, an unexpected dimension surfaced where certain children exhibited optimism and a proactive approach in adhering to safety guidelines. Despite the formidable challenges presented by the pandemic, these children demonstrated resilience and adaptability, directing their focus towards responsible behaviours (Sprang & Silman, 2013). This positive response suggests that certain children can channel their energy into constructive coping mechanisms, accentuating the importance of acknowledging diverse emotional responses. The unexpected dimensions of resilience and optimism highlight the adaptive capacity of some children, emphasizing the dynamic and individualized nature of their emotional responses (Bronfenbrenner, 1979). The findings align with the theoretical framework of child development, emphasizing the importance of recognizing diverse emotional landscapes shaped by individual differences, social environments, and coping mechanisms (Bronfenbrenner, 1979). This theoretical perspective advocates for targeted interventions tailored to these unique factors to comprehensively support children's mental health.

5.1.3 Exploring the Impact of Changes to Everyday Functioning on Children during the COVID-19 Pandemic

The theme focusing on the adjustment to changes in routine and social contact highlights the considerable challenges faced by children amidst the transformative shifts brought about by the COVID-19 pandemic. The findings emphasize the difficulties in navigating the altered landscape due to lockdown restrictions, with the initial stages marked by confusion and questioning of abrupt changes in routine. This aligns with existing literature that underscores the impact of disruptions on children's routines, leading to heightened stress and emotional distress (Brooks et al., 2020).

The adjustment to changes in routine and social contact during the COVID-19 pandemic posed substantial challenges for children. The implementation of lockdown restrictions disrupted familiar routines, presenting children with an abrupt shift in their daily lives (Prime et al., 2020). Adapting to new limitations on outdoor activities, school closures, and changes in social interactions proved to be a significant hurdle. Children, accustomed to structured schedules and social engagement, encountered difficulties in navigating the altered landscape imposed by lockdown measures.

The initial phase of the pandemic witnessed pronounced struggles among children as they grappled with the loss of social contact. The abrupt cessation of in-person interactions,

including playdates, school attendance, and visits to friends and family, contributed to a sense of isolation and longing(Loades et al., 2020; Prime et al., 2020) . Children, inherently social beings, found it challenging to cope with the sudden absence of face-to-face connections, leading to heightened emotional responses and behavioural changes.

The loss of social contact emerged as a significant struggle for many children, as the absence of interactions with friends, teachers, and extended family members posed a pronounced challenge. This loss, particularly in the context of playdates and face-to-face interactions, had a notable impact on emotional well-being and overall social development. Research by Loades et al. (2020) supports these findings, indicating that disruptions in social interactions contribute to increased feelings of loneliness and anxiety in children during pandemics.

Furthermore, the negative impact on the social life of children, hindering learning through play, represents a crucial aspect of childhood development. Concerns expressed by parents about limited opportunities for their children to engage with peers underscore potential repercussions on social skills and overall growth (Prime et al., 2020). The challenges in maintaining social connections resonate with prior studies on the psychological effects of social isolation on children's well-being (Orgilés et al., 2021).

The participant's account of reaching out to other parents to facilitate virtual interactions among children illustrates the innovative ways parents navigated these challenges. This adaptive response aligns with the concept of resilience, reflecting an active effort to mitigate the negative impacts of disrupted social routines. The importance of these findings extends to the identification of strategies that can be incorporated into interventions aimed at supporting children during times of crisis.

In essence, the theme of adjustment underscores the profound influence of altered routines and diminished social contact on children's lives during the pandemic. Recognizing the significance of social connections for children's well-being emphasizes the need for targeted interventions and support systems to facilitate adaptive adjustments and mitigate the adverse effects on their psychological and social development.

5.1.4 Exploring the Far-reaching Impacts: How Disruptions in Sleep, Eating Habits, and Daily Routines Reflect the Comprehensive Influence of the COVID-19 Pandemic on Children's Lives

The theme of disruptions in daily functioning reveals significant changes in the established routines and behaviours of children in the context of the COVID-19 pandemic. Notably,

alterations in sleep and eating patterns reflect the profound impact of pandemic-related changes on children's day-to-day lives. These outcomes are consistent with existing literature that underscores the interconnectedness of disruptions, where shifts in eating habits are linked to changes in sleep patterns (Marelli et al., 2021).

Parents consistently reported changes in sleep patterns among children, including both increased and decreased sleep duration. The tangible effects of disrupted routines highlight the close relationship between alterations in eating habits and shifts in sleep patterns. Such changes carry implications for the overall well-being of children and align with research emphasizing the bidirectional influence of sleep and nutrition on health outcomes (Wang et al., 2020).

Modifications in children's eating habits during the pandemic, as narrated by parents, underscore the challenges in maintaining healthy dietary practices. The necessity for parents to adapt to the disrupted environment sometimes led to unconventional dietary choices for their children. This aligns with studies discussing the impact of environmental changes on dietary habits, particularly during crisis periods (Goldfield et al., 2022).

The broader impact on daily lives and habits encompasses a range of changes, including disruptions to routines, limited outdoor activities, and altered family dynamics. Children faced challenges in adapting to the 'new normal,' with restrictions influencing their social interactions and recreational pursuits (Prime et al., 2020). The cumulative effect of these changes highlights the need for comprehensive support systems to navigate the complexities of altered daily lives.

The theme of disruptions in everyday functioning highlights the tangible effects of the pandemic on essential aspects of children's lives, such as sleep and eating habits. The interconnected nature of these changes underscores the importance of a comprehensive understanding of the difficulties faced by children during this unparalleled period. These findings contribute to the broader conversation on the diverse impacts of the COVID-19 pandemic on children's daily routines, emphasizing the necessity for customized interventions to address the specific challenges arising from these disruptions.

5.1.5 Navigating Educational Challenges: Exploring the Impact of COVID-19 on Children's Learning and Academic Well-being

The theme of the impact on learning and education reveals multifaceted challenges faced by children amid the COVID-19 pandemic. Heightened academic pressure emerged post-lockdown, as the transition from limited attendance to regular classes created a sense of

pressure. The transition to remote learning during the pandemic introduced a new layer of academic pressure on children. The abrupt shift from traditional classrooms to online platforms posed challenges in maintaining focus, adapting to virtual teaching methods, and coping with technological limitations (Loades et al., 2020; Prime et al., 2020). The blurred boundaries between home and school exacerbated academic pressure, as children struggled to delineate leisure spaces from study areas. This heightened pressure was further exacerbated by uncertainties surrounding the pandemic, contributing to elevated stress levels among children (Loades et al., 2020; Prime et al., 2020). The fear of falling behind academically, coupled with the challenges of adapting to a new learning format, intensified the psychological burden on students.

Additionally, a consistent theme was the decline in academic performance during the lockdown period, emphasizing the pivotal role of traditional classroom settings in the educational development of children. These findings align with existing research on the adverse effects of disrupted education during pandemics, emphasizing the need for targeted interventions and support systems (Viner et al., 2020; Xie et al., 2020). The lockdown period witnessed a decline in academic performance among some children, reflecting the multifaceted impact of the pandemic on education. Limited access to resources, disruptions in daily routines, and the challenges of online learning contributed to this decline (Prime et al., 2020). The digital divide, where not all students had equal access to technology and a conducive learning environment, further exacerbated educational inequalities.

The shift from online to in-person classes during the reopening of schools posed distinctive challenges for students. This transition demanded adaptation to a more structured and socially interactive learning environment, representing a significant departure from the autonomy afforded by remote learning (Loades et al., 2020; Prime et al., 2020). Students encountered difficulties in re-establishing routines, engaging in face-to-face interactions, and navigating the expectations of traditional classroom settings. These challenges extended beyond the academic realm, encompassing social and emotional aspects. Addressing and acknowledging these multifaceted challenges are imperative for ensuring a seamless and positive return to regular classes.

The challenges associated with adjusting to a more rigorous academic routine echo the psychological impact on children during these transitions. Difficulties in adapting to changing modes of education underscore broader societal challenges in ensuring a seamless educational

experience for children during crises. These challenges extend beyond the immediate academic realm, impacting the overall well-being of children and their ability to navigate the educational landscape effectively.

The exploration of this theme highlights the need for a comprehensive understanding of the nuanced challenges children faced in adapting to new academic norms during the pandemic. It emphasizes the importance of considering not only the academic pressure but also the psychological and emotional toll associated with educational disruptions. The findings underscore the imperative of tailoring interventions that address the multifaceted dimensions of children's educational experiences during unprecedented disruptions like the COVID-19 pandemic.

5.1.6 The Dynamic Journey: Understanding and Nurturing Children's Emotional and Behavioural Responses in the Post-Pandemic Era

The cautious reconnection with social activities post-lockdown reflects a nuanced approach adopted by children in response to the evolving circumstances. As the lockdown restrictions were reduced, children, while eager to reengage with their social worlds, exhibited a degree of caution. This cautiousness may stem from the lingering concerns about the pandemic or a heightened awareness of safety measures. It is essential to recognize the delicate balance struck by children between the desire for social interaction and the continued need for vigilance. Parents play a crucial role in guiding and supporting this process, ensuring that children navigate social reconnection with a sense of responsibility and awareness.

The relief and excitement experienced by children upon returning to engagement with friends, family, and activities highlight the positive impact of eased restrictions. The resumption of familiar social routines contributes to a sense of normalcy, offering emotional relief to children who endured a prolonged period of disruption (Prime et al., 2020). This relief may manifest in heightened enthusiasm, increased happiness, and a renewed sense of connection with the world around them. Understanding and acknowledging these positive emotional responses are crucial for fostering the well-being of children during the transition to the new normal.

The theme exploring changes in behaviour and emotions post-lockdown reveals the nuanced responses of children as they transition to a post-pandemic normalcy. Children exhibited a spectrum of adjustments, including initial apprehension and fear, showcasing awareness of ongoing risks. However, a significant number expressed relief and excitement, emphasizing resilience and adaptability. Quotes from interviews highlighted the positive shift in attitudes,

contributing to the existing literature on children's psychological responses during and after crises, such as the insights provided by (Pfefferbaum, 2021). Pfefferbaum's insights highlight that amidst the pandemic, some children experienced improved mental health outcomes, potentially attributed to factors like increased family time and access to treatment resources. Recognizing the heterogeneity of experiences, tailoring interventions to address diversity becomes crucial for promoting positive adjustment and well-being.

5.2 Conclusion

In summary, Chapter 5 encapsulates a comprehensive exploration of the psychosocial impacts of the COVID-19 pandemic on children in Gauteng. The thematic findings reveal the profound repercussions on various aspects of children's lives, from the emotional strain of extended indoor confinement to the nuanced responses in the post-pandemic era. The chapter underscores the necessity for tailored interventions that address the multifaceted challenges faced by children, emphasizing disrupted social connections, adaptive coping mechanisms, and the intricate influence on daily routines.

CHAPTER 6: LIMITATIONS AND RECOMMENDATIONS

6.1 Introduction

In this chapter, we delve into the nuanced exploration of limitations and essential recommendations arising from our thematic analysis on the psychological and social repercussions of the COVID-19 pandemic on children. We navigate through key constraints such as self-reporting bias and temporal limitations, setting the stage for a practical discussion on strategies encompassing technology integration, policy advocacy, collaboration among

stakeholders, and diversified research methodologies to address the multifaceted impact on children's well-being.

6.2 Limitations

Despite the valuable insights gained from the thematic analysis, it's crucial to acknowledge certain limitations in this study:

Self-Reporting Bias: The data heavily relies on self-reported information from parents or guardians, introducing the possibility of response bias. Participants may not accurately recall or report their children's experiences, leading to a potential distortion of the findings. Future research could incorporate multiple data sources, such as direct observations or children's self-reports, to enhance the validity of the results.

Temporal Limitation: The study's findings are specific to the time frame of the interviews and may not capture the evolving nature of the pandemic's impact on children. Longitudinal studies could provide a more in-depth understanding of how children's experiences change over time, considering the fluctuating nature of the pandemic and associated public health measures.

Contextual Factors: The study does not delve deeply into contextual factors such as the specific regions, school environments, or healthcare infrastructures in which the children lived. These contextual nuances can significantly influence children's experiences during a crisis. Future research could explore how regional or environmental variations contribute to diverse responses among children.

Parental Influence: The interviews primarily rely on parental perspectives, and while parents play a crucial role in understanding their children's experiences, their views may not fully capture the child's subjective experience. Children's voices and perspectives should be directly incorporated into future research to provide a more holistic understanding.

Impact of Interviewer: The interviewer's presence and interaction style may have influenced participants' responses. Interviewer bias and the potential for social desirability could impact the accuracy and depth of information provided. Future studies might explore different data collection methods to mitigate such biases.

6.3 Recommendations

Based on the findings of the study, several recommendations emerge to address the psychological and social impacts of the COVID-19 pandemic on children:

6.3.1 Technology Integration

Technology integration in education offers diverse avenues to enhance learning experiences and address challenges like those posed by the COVID-19 pandemic. Incorporating online learning platforms, virtual classrooms, and interactive educational apps ensures continuity in education during disruptions, accommodating various learning styles. Digital resources and libraries provide accessible research materials, fostering independent inquiry and critical thinking. Social interaction platforms and virtual clubs promote collaborative learning, extending beyond physical classrooms. Digital literacy programs educate students on responsible technology use, emphasizing online safety and information evaluation. Augmented and virtual reality offer immersive learning experiences, enhancing comprehension of complex concepts. Parental involvement platforms facilitate communication, while ongoing professional development ensures educators effectively leverage digital tools. Initiatives for equitable access to technology promote inclusivity, ensuring all students benefit from these advancements, preparing them for a digitally evolving world.

6.3.2 Policy Advocacy

Advocating for policies that prioritize children's well-being during crises is paramount. Ensuring that emergency response plans and public health measures consider the unique needs of children is essential for effective crisis management. By actively engaging in policy advocacy, stakeholders can contribute to creating an environment where children's well-being is at the forefront of decision-making.

To effectively advocate for policies that prioritize children's well-being in response to the impacts of COVID-19, it is imperative to align advocacy efforts with the identified research objectives. Policy advocacy can play a pivotal role in addressing the findings related to parents' perceptions of the pandemic's psychological and social impacts on children. By leveraging these insights, advocates can push for policies that prioritize mental health support for children and families, ensuring access to counselling services, educational resources, and community programs that promote resilience and well-being.

Additionally, policy advocacy can address the challenges identified in children's adjustment to lockdown restrictions by advocating for child-centred policies that safeguard children's rights and developmental needs during emergencies. This may involve advocating for policies that support equitable access to education, promote safe environments for play and socialization, and provide targeted support for vulnerable populations. Moreover, post-pandemic policy

advocacy efforts can focus on ensuring a smooth transition for children back into regular routines and social activities, emphasizing the importance of continuity in mental health services and educational support.

6.3.3 Collaboration Between Stakeholders

Promoting collaboration among parents, educators, mental health professionals, and policymakers is imperative for holistic child development. This multifaceted approach allows stakeholders to share insights, align strategies, and implement cohesive support systems. Regular communication ensures a unified understanding of children's needs, facilitating timely interventions and tailored support. By fostering collaboration, a synergistic effort is established, maximizing the impact of initiatives, and creating a supportive environment that addresses the diverse challenges children encounter, especially during crises like the COVID-19 pandemic.

To enhance children's psychological and social well-being in line with the study's objectives, collaboration between stakeholders must be clearly defined and action oriented. This collaborative approach begins with identifying key stakeholders such as parents, educators, healthcare providers, community leaders, policymakers, and mental health professionals, fostering a comprehensive understanding of children's needs and challenges during and after the pandemic. Through this collaboration, stakeholders can develop targeted interventions that address specific issues identified in the study, such as parental concerns about children's well-being, challenges faced by children during lockdowns, or the transition back to normalcy post-pandemic. By working together, stakeholders can implement supportive policies and programs aimed at promoting children's psychological and social well-being, advocating for increased funding for mental health services, ensuring access to quality education and social activities, and integrating trauma-informed practices into community services. Furthermore, ongoing monitoring and evaluation of these interventions will enable stakeholders to assess effectiveness, make necessary adjustments based on outcomes, and ensure that advocacy efforts lead to measurable improvements in children's well-being amidst and beyond the COVID-19 pandemic. This collaborative and action-oriented approach ensures that recommendations are specific, practical, and aligned with the study's objectives, ultimately fostering meaningful impacts on children's overall well-being and resilience.

6.3.4 Research

Diversity in Data Collection

To gain a comprehensive understanding of the pandemic's impact, research methodologies must be expanded to encompass a diverse range of participants. This includes children from various socioeconomic backgrounds, cultural contexts, and geographic locations. A diverse participant pool ensures that the unique experiences of different demographic groups are considered in formulating strategies and interventions.

Longitudinal Studies

Tracking the long-term effects of the pandemic on children's development requires conducting longitudinal studies. This approach allows for a nuanced understanding of how children's experiences evolve over time. By observing recovery trajectories, researchers and policymakers can tailor interventions to address persistent challenges and promote sustained well-being.

6.4 Conclusion

In conclusion, the examination of limitations and recommendations in this chapter provides a nuanced understanding of the challenges inherent in studying the psychological and social impacts of the COVID-19 pandemic on children. The outlined practical strategies offer a foundation for future initiatives to address these challenges, fostering a holistic approach that considers the diverse dimensions of children's well-being during unprecedented times.

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APPPENDIX A

Ethical Clearence Certificate

UNIVERSITY OF THE WITWATERSRAND JOHANNESBURG

SCHOOL OF HUMAN AND COMMUNITY DEVELOPMENT ETHICS COMMITTEE
CONSTITUTED UNDER THE UNIVERSITY HUMAN RESEARCH ETHICS COMMITTEE (NON-MEDICAL)

CLEARANCE CERTIFICATE	**PROTOCOL NUMBER: MASPR/23/03**
PROJECT TITLE:	The Psychosocial Impacts of COVID-19 on Children: A Parent's Perspective.
INVESTIGATOR	Macingwane Nontokozo (2731162)
SCHOOL/DEPARTMENT OF INVESTIGATOR	SHCD/Psychology
DATE CONSIDERED	01 June 2023
DECISION OF THE COMMITTEE	Approved unconditionally
RISK LEVEL	Minimal Risk
EXPIRY DATE	31 December 2025
ISSUE DATE OF CERTIFICATE 03 June 2023	**CHAIRPERSON** _____ (Dr Aline Ferreira Correia)

cc: Dr Mpho Mathebula (Supervisor)

DECLARATION OF INVESTIGATOR

To be completed in duplicate and **ONE COPY** returned to the Chairperson of the School/Department ethics committee.

I/we fully understand the conditions under which I am/we are authorized to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure be contemplated from the research procedure as approved, I/we undertake to submit an amendment of the protocol to the Committee.

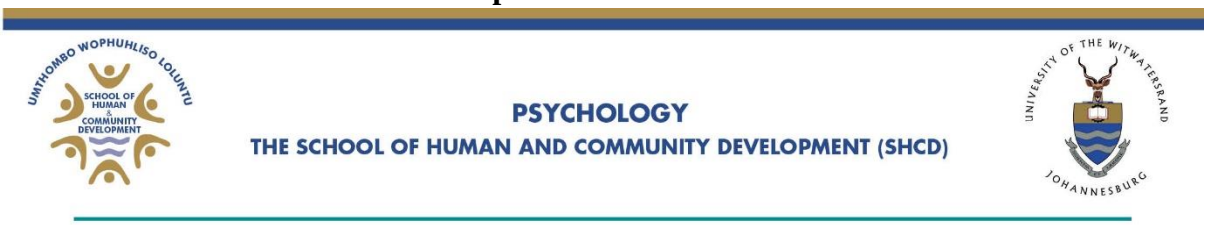
_____ **13/07/2023**

Signature **Date**

PLEASE QUOTE THE PROTOCOL NUMBER ON ALL ENQUIRIES

APPENDIX B

Participant information sheet



Dear Sir/Madam

My name is Nontokozo Macingwane a Social and Psychological Research master's student at the University of the Witwatersrand. As part of a requirement in my studies, I must do a research report on the psychosocial impacts of COVID-19 on children drawing from the experiences and opinions of parents or legal guardians of children and adolescents ranging between the ages of 6-17 years. The aim of the research study is to explore the psychological and social impacts of COVID-19 on children aged 6-17 years in Gauteng, South African.

I am inviting you to participate in this study and therefore inviting you taking part in an interview by answering questions about the psychological and social impacts of COVID-19 on children. The interview will take approximately 45 minuites-1 hour and the interview will include 16 questions. The questions in the interview involve your opinions/views on the social and psychological consequences of COVID-19 on children. An audio of the interview will be recorded using a digital device but with your permission.

Participation on the study is completely voluntary and participants may withdraw at any time. No identifying information such as names will be used to ensure that anonymity is maintained. The information shared by participants will not be shared with anyone else, but the interview recordings and transcripts may be shared with the supervisor. In the final research report, pseudonyms will be used to show your participation in the research study. Audio recordings will be kept in a password protected laptop and all transcribed material will be password protected.

There are no benefits in participating in the research study and a person cannot be penalised for not participating. If you need support or counselling services, these are provided free of charge at the University of the Witwatersrand at the Emthonjeni Centre. You can email or call the administrative officer Paballo Lepota at the Emthonjeni centre at

Paballo.Lepota@wits.ac.za / 011 717 4541. You can also visit the EC at 1 Jan Smuts Avenue, Braamfontein 2000, Johannesburg, South Africa.

If you have any questions regarding this research, you can contact me on the using the contact details provided below. This research will be written as a research report and the summary of the research report will be sent to participants upon request.

Yours sincerely

Student Researcher: Nontokozo Macingwane Supervisor: Dr Mpho Mathebula

Student e-mail address: 2731162@students.wits.ac.za Supervisor e-mail address: Mpho.Mathebula@wits.ac.za

APPENDIX C

Consent form

PSYCHOLOGY
THE SCHOOL OF HUMAN AND COMMUNITY DEVELOPMENT (SHCD)

Private Bag 3, Wits, 2050 • Tel: 011 717 4541 • Fax: 011 717 4559 • E-mail: psych.SHCD@wits.ac.za

Title of project: The psychosocial impacts of COVID-19 on Children: Parents' Perspective

Name of researcher: Nontokozo Macingwane

I, ……., agree to participate in this research project.

I agree to the following:

(Please circle the relevant options below)

The research study was explained to me. I understand what this study is about.	YES NO
I understand that I can volunteer to take part in the study	YES NO
I agree that the interview may be audio recorded	YES NO
I agree that direct quotations from my interview/ may be used by the researcher in their research report/ manuscript/book chapter	YES NO
I agree that my participation will remain anonymous (my name will not be used by the researcher in their research report/manuscript/book chapter)	YES NO
I agree that other researchers may use the information I provide in my interview/focus group/other activity (depending on their own ethics clearance being obtained) but my name and any personal information will not be used or passed on	YES NO

…… (Signature)
…… (Name of participant)
…… (Date)

…… (Signature)
…… (Name of researcher/person seeking consent)
…… (Date)

APPENDIX D

Interview Schedule

1. Had the child been in close contact with someone who was infected with COVID-19, if yes, did this affect the child in any way?
2. Did the child loose a loved one jbecause of COVID-19 infection, if yes, what was the relationship between them and how did this affect the child?
3. Did the child present any behavioural changes since the beginning of COVID-19?
4. Were there any emotional changes that you picked up on the child since the start of the COVID-19 pandemic?
5. Did the child show any signs of fear in contacting the virus, if so, how did the child manifest this fear and if not, what was the child's reaction/opinions towards COVID-19 infection?
6. With the lockdown strict restrictions that were implemented, how was the child's adjustment from contact to online OR attending class once/twice a week and how was the child performance at school?
7. With the lockdown strict restrictions that were implemented, how was the child's adjustment and reaction to the loosing contact with the social world (friends and teachers)?
8. Did loosing contact with the social world (teachers and friends) have any impact on the child?
9. Were there any changes in everyday functioning such as sleeping patterns, eating habits, or engaging in recreational activities during lockdown?
10. Did the child witness or experience any kind of violence during lockdown?
11. As the lockdown restrictions were reduced, did the child show any changes in their behaviour?
12. As the lockdown restrictions were reduced, did the child show any changes in the child's mood/emotions?
13. Was there any signs fear of contracting the virus even after the lockdown restrictions were reduced and vaccines were authorised (for 12–17-year-old children)?

14. Is the child vaccinated and what was the child's initial reaction to vaccines and getting vaccinated?
15. Now that lockdown restrictions are 'non-existent' and social contact interactions are allowed, is the child still interactive with friends and involved in recreational actives as before the COVID-19 pandemic?
16. How has the child adjusted from online learning OR attending school once/twice a week to attending every day of the week?