

## VCHIP CHAMP VDH COVID-19

February 19, 2021 | 12:15-12:45pm Call Questions and Answers\*

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### **COVID-19 & Mental Health VT Children/Youth/Families – PACE Project, Andrea Villanti, PhD, and Valerie Harder, PhD, MHS**

*Andrea Villanti, PhD:* The PACE study is a population-level survey. There's a big team involved in this study, including folks at UVM and the Vermont Department of Health. This was originally a pilot study in 2019 funded through the Vermont Department of Health and the University of Vermont Cancer Center. We received funding from NIH to continue this work in 2020 and 2021. Our funding came in from the National Institution on Drug Abuse in April 2020, and we really pivoted to include COVID information in our survey. Even in a place where we have school in session and youth engaged, we have found a significant impact on mental well-being of youth.

### **COVID-19 & Mental Health VT Children/Youth/Families – Vermont Afterschool – Creating a VT Summer of Connection, Healing, and Learning, Holly Morehouse**

*Holly Morehouse:* We want to put forward a vision that as many people as possible help us get behind, especially the pediatricians in Vermont who have brought up the needs of children and youth in a meaningful way. We see summer 2021 as a critical time, given the data we've seen about where children are, schools being partially remote, and the stresses families are under. We want to focus on community connection and not have learning loss be the only focus. Last summer, programs couldn't access school buildings. I've heard a lot about short-day tutoring programs to help kids with learning loss. We are really focused on full-day, outdoor-based, adventure-based, social-emotional programming to regain much of what children and youth have lost. Food and access to food are huge in the summer. In a pre-COVID-19 year, Vermont serves 1 in 4 of children who qualify for free school meals. All-day programming in the summer with meals and snacks really helps meet that need. The biggest concerns in the field are staffing. School-day and childcare personnel are really tired at this point. Parents and families need to know now what programs will be in place, so they can make arrangements.

### **Questions/Discussion**

**Q: Does "fully" IP [in-person] mean 5 days/week or 4 days/week?**

*A: Breena Holmes, MD, VCHIP, VDH: Great question—I will find out since I don't know.*

**Q: The N numbers listed as 365 for fall 2019 and 211 for fall 2020, is that the total number of people completing the surveys?**

*A: Wendy Davis, MD, VCHIP: Yes.*

**Q: Do we know how many people were asked to complete the survey?**

*A: Andrea Villanti, PhD, VT Center on Behavior & Health: It's hard to tell because at Wave 3, it was people who completed follow-up. From Wave 1 to Wave 3, we had 78% retention in youth. In Wave 4, it*

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*was a brand-new survey. It was not a census sample. It was a convenience sample where people volunteer to participate in this study. Between Wave 4 and 5, we have 90% retention in this study.*  
*A: Wendy Davis, MD, VCHIP: I don't believe she told us—we'll ask.*

**Q: Can you break down those who were a little worse versus a lot worse? It seems most people might answer a little worse during the pandemic.**

*A: Andrea Villanti, PhD, VT Center on Behavior & Health: I don't have that data in here to share. We collapsed the two categories to give a big picture sense to how young people are responding.*

**Q: It's be interesting to see if the levels are higher in the counties with higher rates of COVID. It would be interesting to figure out if community supports helped at all. Education, mask wearing etc.**

*A: Andrea Villanti, PhD, VT Center on Behavior & Health: It's hard for us to get down to that level. I don't think we can do it in our data, but we might be able to do it in the YRBS, which has greater representation in each county.*

**C: It would be interesting to see if there were differences between ages, like age 12/13 is usually elementary school.**

*A: Andrea Villanti, PhD, VT Center on Behavior & Health: Yes, I agree.*

**C: For most of my families—learning loss is not their biggest concern. Opportunities for social-emotional connection, physical activity (no screens) is what parents are looking the most for... especially since the ban on gatherings in November has meant no playdates.**

*A: Holly Morehouse, VT Afterschool: It's true. Learning loss is not the biggest concern for families and youth. It's connection and loneliness. That's why I get concerned when schools talk about moving away from full-day programs and focus, instead, on short-time tutoring. I'm hoping we can turn that into an "and" instead of an "or."*

**Q: Hearing from primary care colleagues about young people being isolated and having a lot of anxiety (sometimes through parental anxiety) about going back to in-person. So, I think messaging about importance of summer programming can include "transitioning back to in-person learning."**

*A: Holly Morehouse, VT Afterschool: I'm making a note to add that to our messaging. Last summer, we talked a lot about seeking a new mindset for children, letting them practice to return to school. This is the other end of that, helping with a transition back and being out in the world again and all that kids carry at their ages.*

**C: Also thinking about those late middle school age kids—a bit old for "camp" but increased risk behaviors with less adult supervision. Might be a great group to utilize more for "junior counselors/big sibling." Agree social-emotional above academics at this time.**

*C: Holly Morehouse, VT Afterschool: That's the hardest age to find funding for because they've aged out of the traditional model. Kids don't want to be in camps. If you think about prevention, risks, and protective factors, it's the most important age group to be offering programming, role models, and healthy peer relationships.*

*C: Marshall "Buzz" Land, MD, Pediatric Medicine: Think about programs like DREAM, MENTOR Vermont, etc.*

*A: Colleen Moran, MD, Appleseed Pediatrics: DREAM mentors need to be college students.*

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*C: Susan Sykas DNP, Appleseed Pediatrics: Cross-age teaching is excellent for kids and maybe some college kids could have a middle school helper!*

**C: This is an opportunity to make learning fun—part of social and emotional gains! i.e., a benefit of outside hands-on learning. Being together to “learn” outside is benefit in and of itself.**

*A: Holly Morehouse, VT Afterschool: Exactly. There’s no valuation other than doing the tasks, hiking mountains, and taking advantage of that part of human development. I hate for kids to lose access to those landscapes and spaces. Summer has always been an issue pre-COVID based on what kids could participate in. We really need to pay attention and start planning this year.*

*A: Breena Holmes, MD, VCHIP, VDH: Last spring, schools started making decisions about whether or not schools were going to let summer programs use their buildings. I feel like I lost that advocacy opportunities. For you pediatricians, finding those decision-makers and making the point of the need to keep school buildings open to summer programs.*

*A: Holly Morehouse, VT Afterschool: Yes, it’s important to get out ahead of that. In some cases, for the childcare hubs, we found funding, scheduled programs, and then school boards got nervous and nixed it all. All it takes is one or two people who are concerned to do away with all that programming. It’s particularly hard for rural schools, where things are spread out and there’s not a lot of different options.*

**Q: Funding for summer programs: Children’s Miracle Network—UVM?**

*A: Wendy Davis, MD, VCHIP: I don’t know enough about the details of that but good thought, always.*

**Q: Could you let us know if there are specific districts that local pediatricians should reach out to who are not planning on summer programming or need help with how to implement more full-time programming? So we know where to focus our efforts?**

*A: Shannon Hogan, DO, UVMCH Pediatric Primary Care: Yes, and this age group 6th-8th, they are becoming more screen addicted as it is what they do 24 hours a day.*

**Q: Is there any consideration as COVID rates go down, to opening up school property to well defined non-school programs—to maximize facility use—i.e., on the school grounds.**

*A: Shannon Hogan, DO, UVMCH Pediatric Primary Care: Love that thought!*

*A: Leah Flore, FNP, Shelburne Pediatrics: We do have great Vermont Scientific data to support having schools open... after school programs, child care, etc.*