

NETWORK OF ORGANIZATIONS FOR CHILDREN OF SERBIA MODS

# BEING A CHILD DURING THE COVID-19 PANDEMIC



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Analysis of a study of the impact of emergency measures on  
children during the COVID-19 outbreak in Serbia

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## INTRODUCTION

After the COVID-19 pandemic was globally declared, and the state of emergency was introduced in Serbia, the Network of Organizations for Children of Serbia conducted a survey to find out how children were affected by the emergency measures.

The survey included **1571** 5 to 18 years old children from all over Serbia through an online questionnaire. The data were collected anonymously and on a voluntary basis.

In an online survey children answered how they had dealt with the crisis so far and how emergency measures affected them; what they cared most about and what they missed.

The Analysis of the study of the impact of emergency measures on children during the COVID-19 outbreak in Serbia "Being a child during the COVID-19 pandemic" is available [here](#) in Serbian.

The data were collected during the fourth week of the state of emergency in Serbia (30 March to 3 April 2020). The largest number of responses, over 70%, came within the first two days of distributing the questionnaire, which may be an indication of how important it is to children for their voice to be heard.

### Research aim

The research is conducted intending to gain children's insights about how the state of emergency due to the COVID-19 pandemic affects themselves and how they adapted to the new circumstances provoked by new measures.

The crisis caused by the COVID-19 pandemic exceeds the boundaries of only the health crisis. It influences all aspects of living (social, economic, political, cultural, psycho-social...) and affects different population groups, irrespective of their age and life circumstances. The full scope of consequences of the measures taken in order to manage the crisis cannot be foreseen yet, globally nor at the national level.



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It is therefore important to monitor how these measures influence different population groups, especially children. The state as well as parents, caregivers, and all the others in charge of childcare have a great share of responsibility in how children will come out of this crisis, how much we can help them develop psychological resilience and leave this traumatic crisis with as little harming experience as possible.

For a healthy development of the child, a safe environment, carrying predictability and safety, space, movement and play, is essential. Namely – everything that has become questionable in the crisis setting. At the moment, children’s development is affected by the measures limiting the possibility for the development to be smooth. The freedom of movement is limited, there is no predictability, every day new measures are expected, new constraints, children fear for their lives and health of those who should otherwise be their caregivers.

In this study, we started with a presumption that the restrictive character of the emergency state measures (limited freedom of movement, separation from peers) together with prolonged fear from objective direct danger of spreading the virus jeopardizes psychological resilience of children, their adaptability to difficult circumstances, and their ability to cope with traumatic experiences and stress.

Given the circumstances, children are, more than usual, in need of a safe environment that can provide safety and warmth and help them go through the crisis with least possible amount of negative consequences. All things considered, the main aim of this study is to assess the adaptation of children to the current crisis situation.

We assume that children with more supportive family environment are better adapted to the crisis.

## **Methodology**

The children filled in an online questionnaire, providing answers about how they cope with the crisis, how the state of emergency measures affect them; what worries them the most and what they miss. The adaptation to the new situation is assessed through how informed they are (how they found out about the coronavirus, who explained it to them), how they



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spend their free time (are there different activities, what activities, how they communicate with their peers), what they miss the most, what worries them, with whom they can share their worries, whether they are satisfied with the time their parents/guardians communicate with them. We have also asked children about the novel activity of distance teaching, what worries them about the school and teaching during the state of emergency due to COVID-19 pandemic.

The questionnaire was distributed with the help of colleagues from organizations members of the MODS, and parents were asked to enable for younger children to answer the questions with their help in fulfilling the online questionnaire. The data was collected anonymously and voluntarily. The data is collected during the fourth week of the state of emergency in Serbia (since March 30 to April 3, 2020). Most answers, more than 70%, were collected within the first two days of distribution, which could indicate how important it is for children for their voices to be heard.

In total **1571** children from the whole territory of Serbia participated, of which **58.1% girls**. The age ranged from **5 to 18 years**, with the mean age of 13.35 (SD = 2.48). Most families have **two children**. One fifth of the sample lives in areas with less than 100,000 people (19.4%). The rest live in bigger urban environments.

Most of the children live with both parents, guardians or foster parents (81.9%), 15.1% with one parent, foster parent or guardian, 2% lives in an extended family and five of them (0.3%) live alone, with siblings or in an orphanage.



## Results

### BEING INFORMED ABOUT THE CORONAVIRUS

Children heard about the existence of the coronavirus in different ways (Figure 1). It can be noticed that the highest percentage heard about the existence of the virus from **television or internet** (around 65%), while (only) a fifth of them heard about it from parents. Younger children are more satisfied with the level of being informed about the coronavirus ( $r = -.070, p < .05$ ).

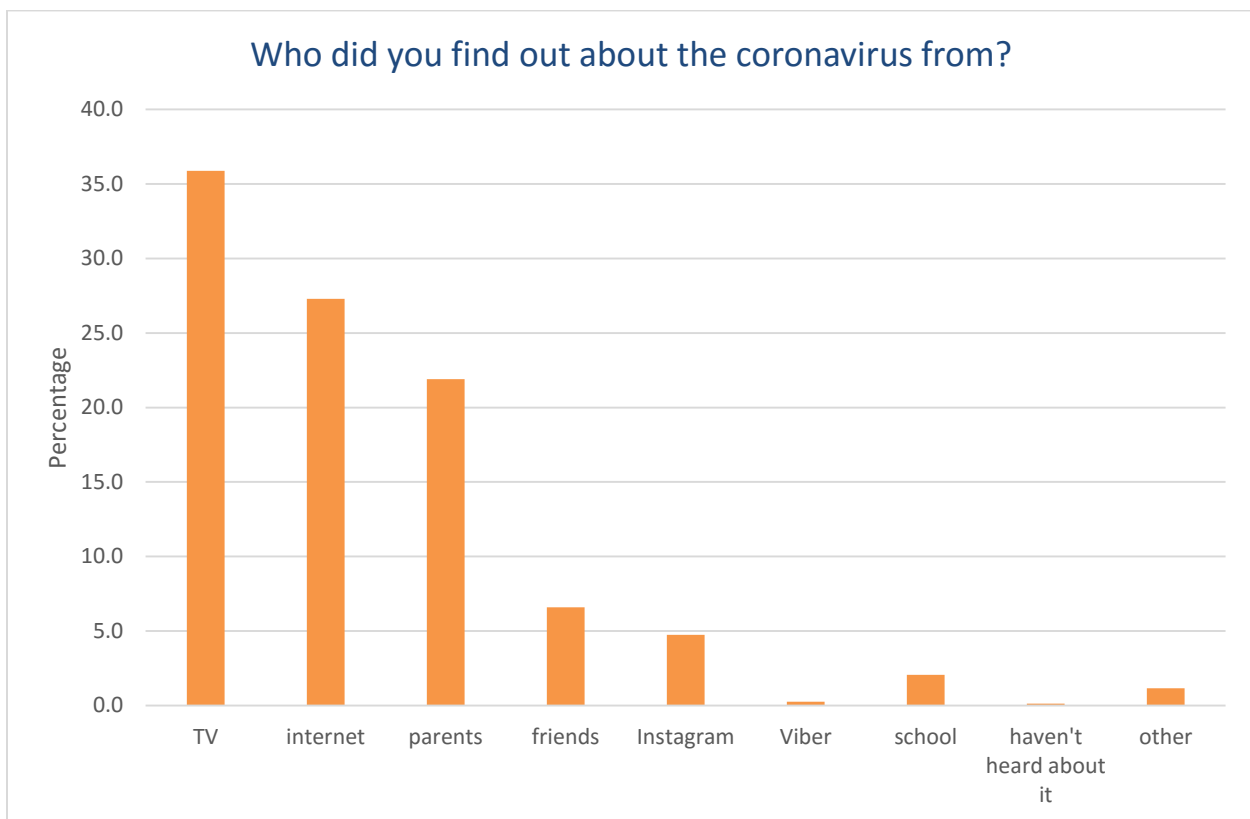


Figure 1: The prevalence of different sources of realisation about the coronavirus.



Almost all children (**95.5%**) reported that **someone explained to them what coronavirus was**. Different sources of information are presented in Figure 2. Children are satisfied with the level of information about coronavirus ( $M = 4.05$ ,  $SD = .95$ , range 1-5). The children that were explained what coronavirus was by a person (parents, teachers, friends) are more satisfied with the level of information that those who informed themselves over television or internet ( $Z = -3.447$ ,  $p < .001$ ). Children who have their personal PC are more satisfied with the level of information ( $F(2, 1560) = 6.563$ ,  $p < .01$ ).

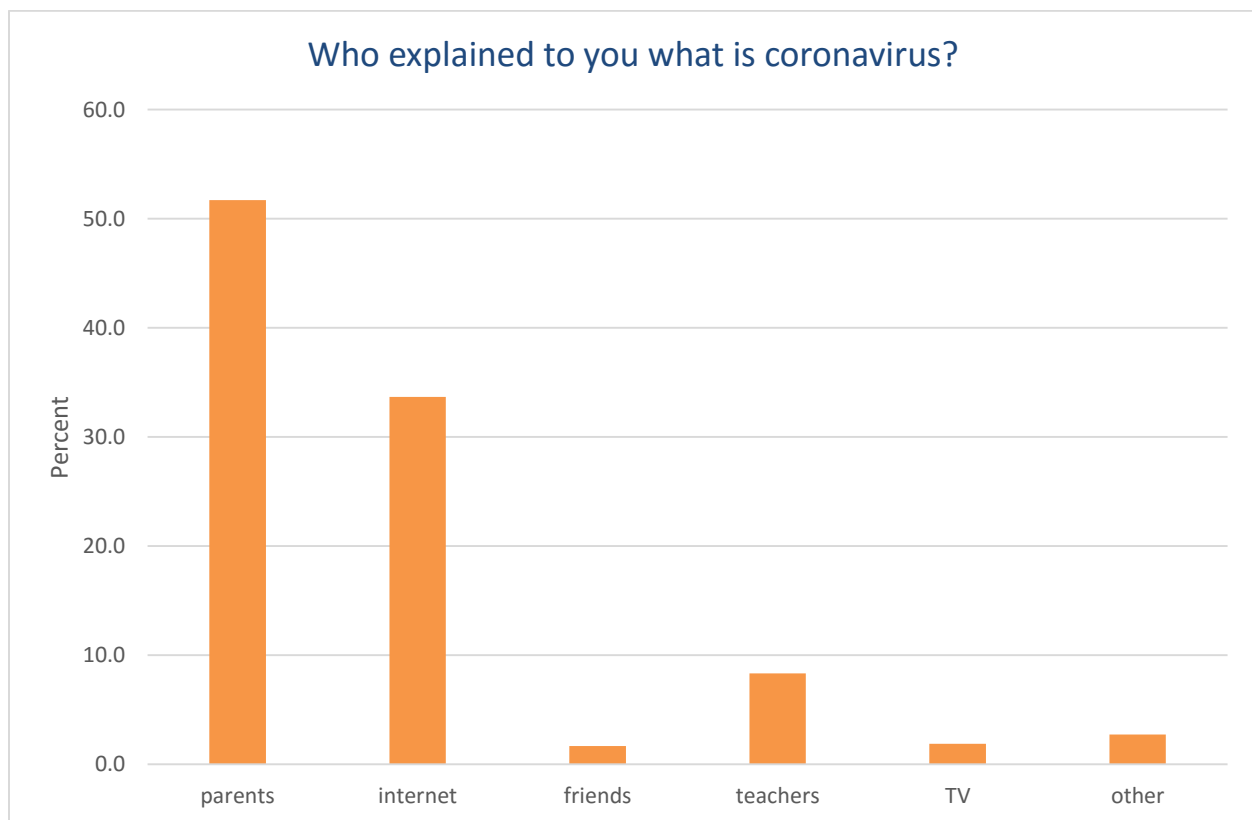


Figure 2: The prevalence of different sources of information on coronavirus.





## FREE TIME

Children spend the least of their free time in house chores, watching TV or being bored. They mostly spend their time **creatively (painting, drawing, writing, constructing), watching movies/series and playing video games.**

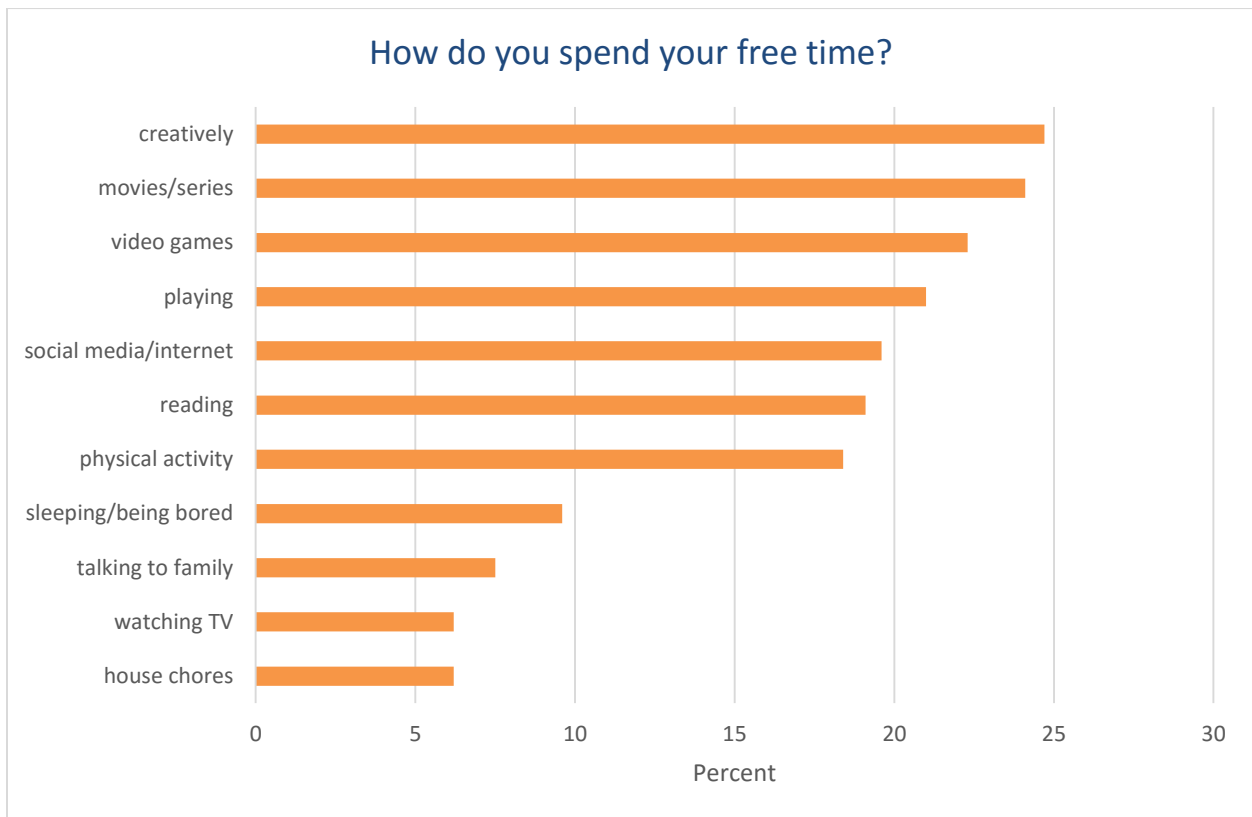


Figure 3: Prevalence of children spending time in different activities.



## COMMUNICATION WITH PEERS

Children keep communication with peers in different ways (Figure 4), mostly on **Instagram and Viber**. Also, children tend to talk on the phone often.

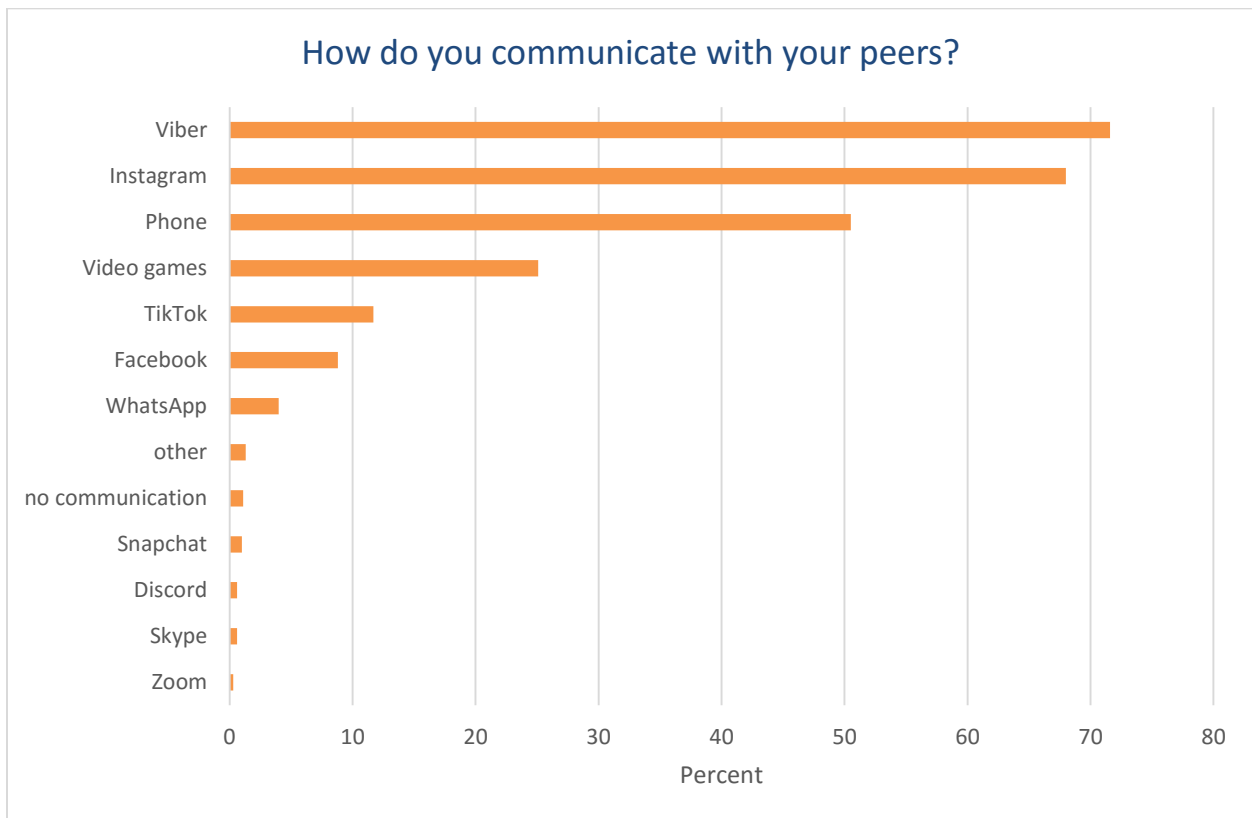


Figure 4: Communicating with peers during the pandemic.



## WHAT CHILDREN MISS

When asked what they miss the most during this period, children report on missing **social activities** (friends, spending time together, peers, going out) and **freedom** the most. Around 15% of children report on missing **school or kindergarten**; however, we assume that what they miss is the social aspect of these facilities and not educational, which can be concluded based on some of their answers (e.g. *I miss school, not the part where we study, but the part where we spend time with our friends*).

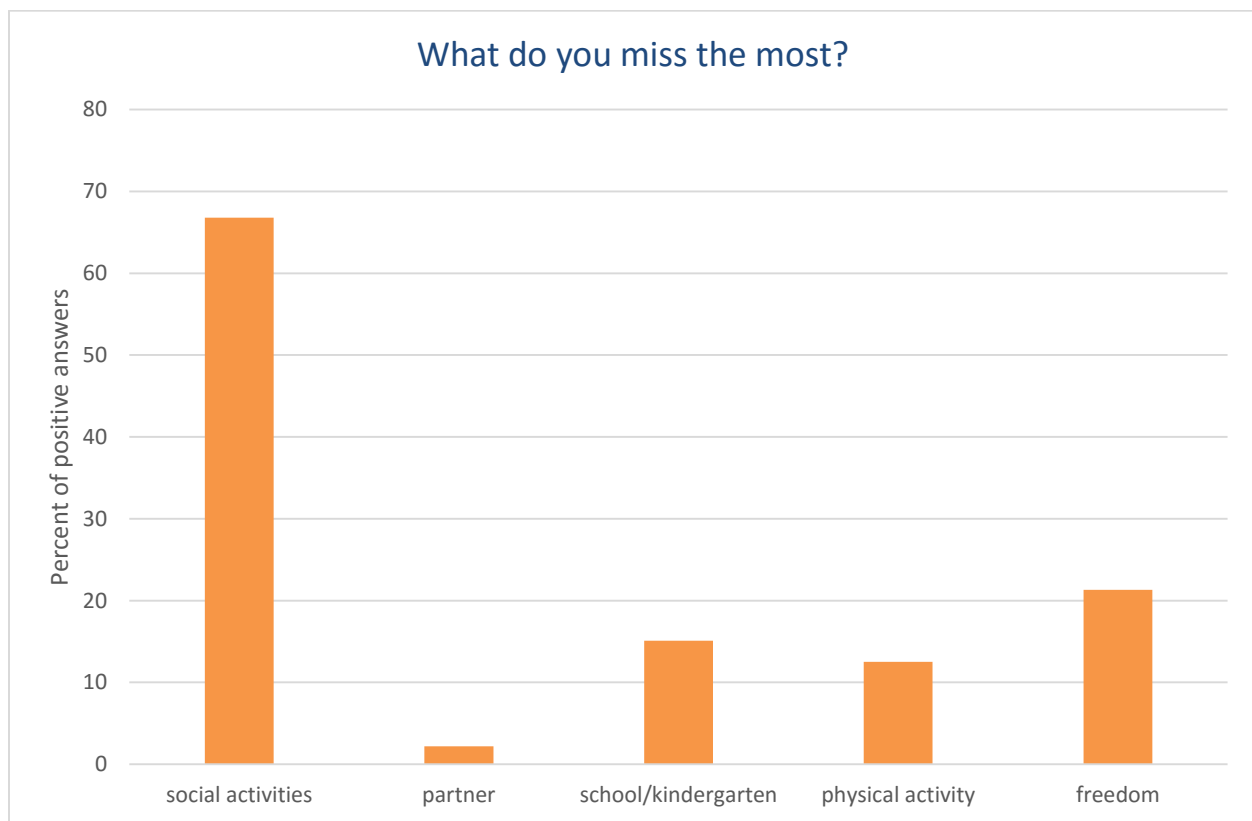


Figure 5: Prevalence of activities children miss.



## WHAT WORRIES CHILDREN

Children have their worries about the COVID-19 pandemic (Figure 6). They are mostly worried by **uncertainty** in the current state: how long it will last, when they will see other people, how they will get graded, whether they will take entrance exams etc. They are also worried about the **health of family members or other people**, including worrying that some of them might die. A certain percent of children is worried about the **existential questions** (whether they will have enough money, food) and possibility of **additional freedom constraints**, like introducing stricter freedom of movement constraints. Some children fear that they could spread the virus to the people in their environment, especially their family. In other words, they are worried that they would be *guilty* if someone from their family gets sick. Girls are more worried than boys for personal ( $\chi^2(1) = 4.161, p < .01$ ) and the health of other people ( $\chi^2(1) = 8.697, p < .01$ ). Girls are also more often worried than boys about the uncertainty of the situation ( $\chi^2(1) = 12.840, p < .001$ ).

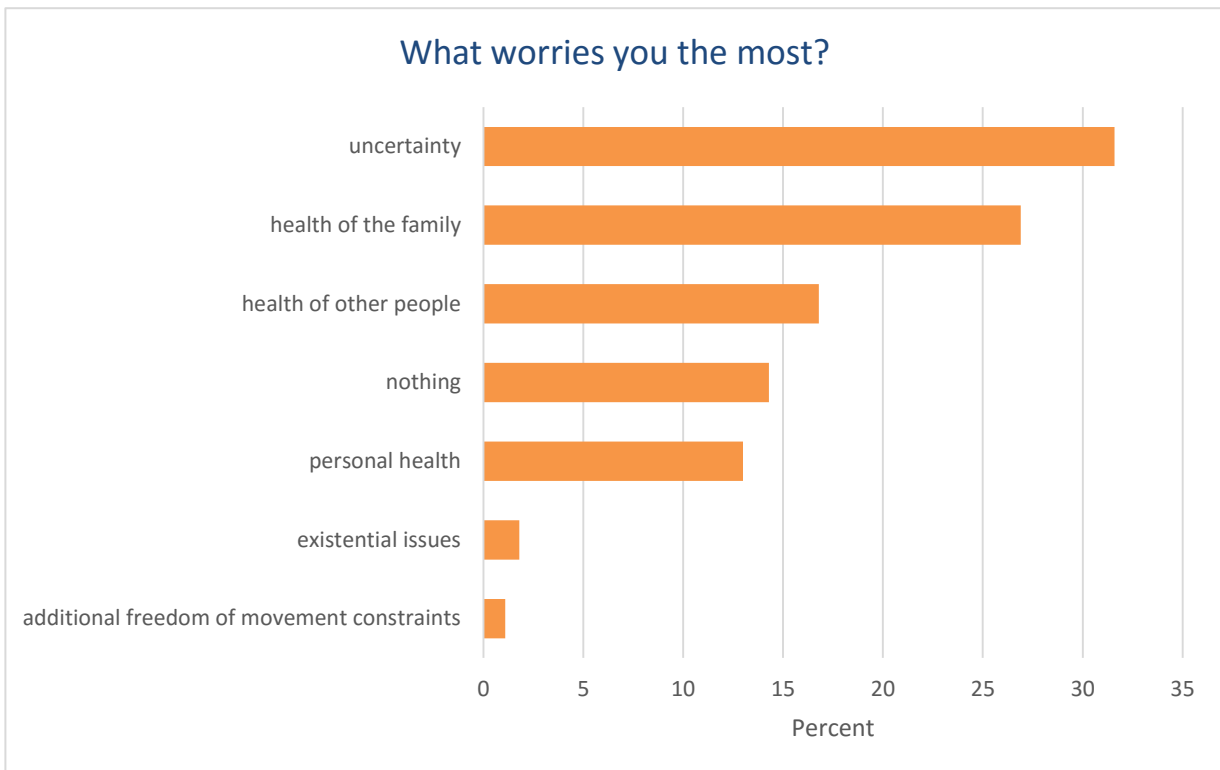


Figure 6: Prevalence of different worries in children.



Children share their worries with different people. Mostly with **parents** (Figure 7), followed by **friends** and **other family members**, and in the end with teachers. However, a small percentage of them does not share worries with anyone or they do not have any. Children are mostly satisfied with the amount of time parents spend with them ( $M = 4.45$ ,  $SD = .87$ , range 1-5). However, older children are less satisfied with this amount ( $r = -.053$ ,  $p < .05$ ).

There are significant differences in satisfaction with the time parents spend with them with regard to whether they live with one or both parents/foster parents/guardians ( $Z = -2.127$ ,  $p < .05$ ), such that those living in two-parent families are more satisfied. The children are also more satisfied with the online teaching ( $Z = -2.047$ ,  $p < .05$ ) and the level their parents can help them with school materials ( $Z = -2.790$ ,  $p < .01$ ).

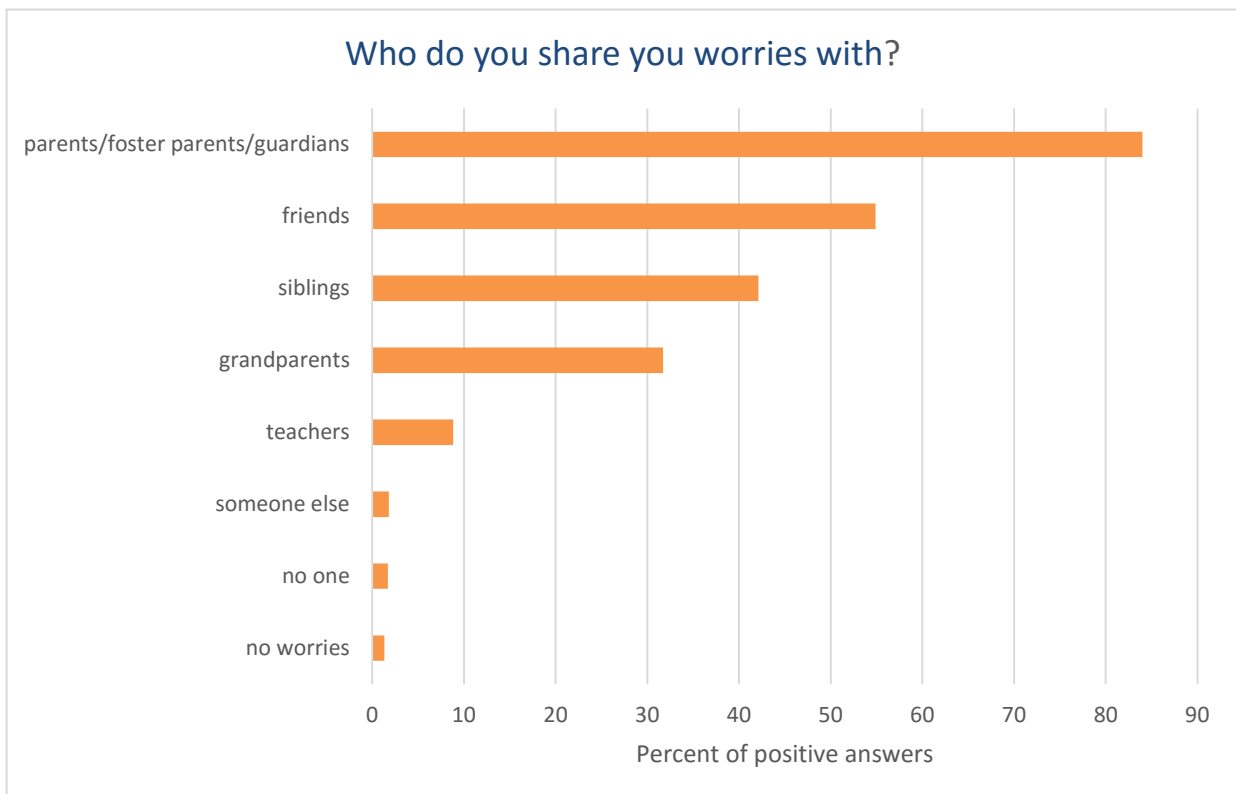


Figure 7: Prevalence of different people children share their worries with.



## DISTANCE TEACHING

Almost half of children have their personal PC (48.3%), 37% share a PC with their family members, and **14.7% does not have access to a computer**. Most children (83.3%) reported having no issues with distance teaching, and the average satisfaction is 3.22 (SD = 1.18).

Teachers use different tools for distance teaching (Figure 8). They mostly use **Google classroom and Viber**, while other apps are less represented, but their presence can indicate that there is unevenness of use of different distance teaching tools.

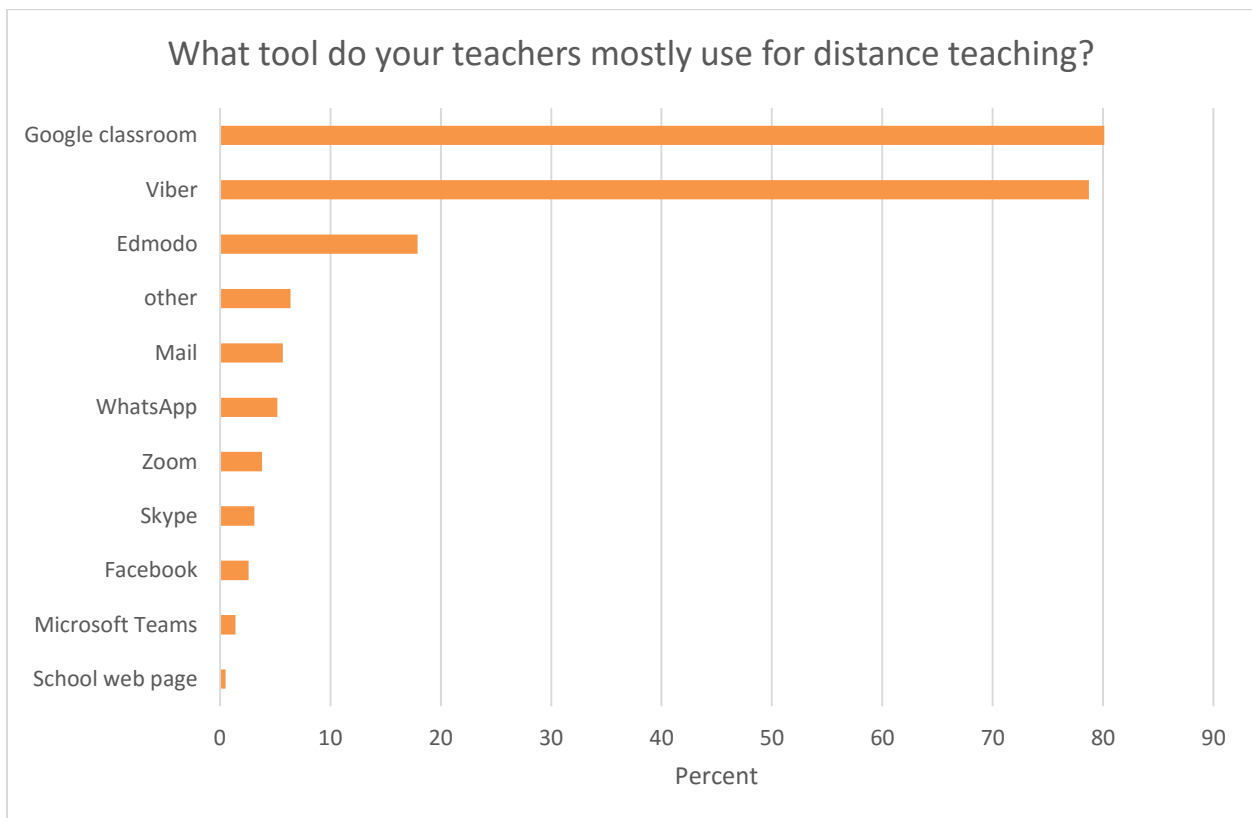


Figure 8: Prevalence of different tools for distance teaching.



Children are mostly satisfied with communication with teachers ( $M = 4.11$ ,  $SD = .91$ ), but slightly less satisfied with the level in which parents/guardians can explain parts of curriculum they do not understand ( $M = 3.78$ ,  $SD = 1.23$ ). Younger children are more satisfied with distance teaching ( $r = -.218$ ,  $p < .01$ ) and the level in which their parents/guardians can help them with the curriculum ( $r = -.480$ ,  $p < .01$ ). They are also more satisfied with communication with teachers ( $r = -.228$ ,  $p < .01$ ). There is a significant difference in the level of parents' help with the curriculum with regard to gender ( $Z = -4.019$ ,  $p < .001$ ), such that boys are more satisfied. Children take private lessons in 18.2% of cases.

In general, children who are more satisfied with distance teaching consider their parents/guardians can help them with parts of the curriculum more ( $r = .269$ ,  $p < .01$ ) and they are more satisfied with the communication with teachers ( $r = .401$ ,  $p < .01$ ). There is a significant difference in satisfaction with teacher communication between children from urban and other environments ( $Z = -3.328$ ,  $p < .01$ ), such that children from smaller environments are more satisfied.

Significantly bigger issues with distance teaching are present in children who are less satisfied with teacher communication ( $Z = -9.365$ ,  $p < .001$ ). Similarly, children who are less satisfied with distance teaching report having more issues with it ( $Z = -11.016$ ,  $p < .001$ ).

Children reported many problems with distance teaching: poor internet connection, difficulties with connecting to the internet when they need to submit homework; some children do not have home internet line and they quickly run out of the cellphone internet; there is no one to explain what they do not understand in new lessons; no one to ask when something is unclear to them; teaching on TV is too fast; they can't get assignments from TV; they can't read the slides on TV because they have an old TV set; if teachers use different applications they run out of memory space on their smartphones.



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## THE CONCLUSIONS OF THE STUDY

- Restrictive measures introduced during the state of emergency significantly affect children: kindergartens and schools have stopped working; mobility has been restricted; their ability to see their peers is limited and not recommended; teaching is conducted online through various applications and over RTS (Radio Television Serbia) public broadcast service.
- Children continually experience fear of being infected with coronavirus.
- Children with a more supportive family environment are able to better adapt to the crisis and emergency.
- Most children have learned about the coronavirus on TV or online, with only a fifth of them learned about it from their parents. However, in most cases their parents are the main sources of information on the COVID-19 pandemic.
- Children report that they mostly miss social activities (companionship, socializing, friends, going out) and the freedom of movement. A significant percentage of them stated that they missed school but, according to some answers, they primarily missed the social aspect of these institutions, rather than the educational one.
- The prolonged restrictive measures, the state of emergency, and the continued fear from COVID-19 are related to children's concerns due to uncertainty (how long the state of emergency and COVID-19 outbreak will last, how it will progress, how they will be graded, how they will enroll in high school). They primarily worry about the health of loved ones, family members and other people, including worrying that one of them may die.
- A certain percentage of children want answers to existential questions (whether the family will have enough money, whether they will have enough food) and are in fear of further restrictions on freedom and new restrictions on movement.
- Of particular concern is that children appear to recognize the potential stigmatization of people with COVID-19. This is reflected in the responses of children who are afraid of not transmitting the virus to loved ones, because then they will be "guilty" if one of them becomes ill.
- Most often, children share their concerns with their parents, then with their friends and other family members, and finally with the teachers.





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- Most children (83.3%) stated that they had no problems with online teaching.
  - Almost half of the children have their own personal computer (48.3%), 37% share the computer with the household, and 14.7% of the children do not have access to a computer at all.
  - Children are notably satisfied with the communication with their teachers, but somewhat less satisfied with the extent to which parents / guardians can explain them parts of lessons they do not understand.
  - Children who are less satisfied with communication with teachers have significantly greater problems with teaching.
  - Regarding distance learning, children reported having a problem with the Internet (internet access, poor connection); with not having anyone to ask for clarifications about the lessons; with the quick succession of slides on TV so they cannot always read everything; *with* teachers who use different applications so they run out of memory space on their smartphones.



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## RECOMMENDATIONS

- The engagement of social psychologists and other social science professionals responsible for managing the COVID-19 crisis outbreak into the Crisis Staff should be taken into consideration. Experts in these profiles can help prepare announcements for the public, which is largely made up of children.
- It must be remembered that children are also being informed about the spread of COVID-19 and the measures taken to prevent it and that they need clear information. Parent guides must be available on how to talk to children about the COVID-19 outbreak.
- Messages and announcements on planned measures and the progress of the COVID-19 pandemic must also be tailored to children, and these notices should not cause unnecessary anxiety in children.
- COVID-19 patients should not be stigmatized.
- Prepare a joint health and social protocol and instructions on children protection when one or both parents are referred to hospital treatment due to COVID-19. The cooperation of health and social care professionals in the preparation of this protocol and instructions is essential.
- Fully and timely inform parents and children of the protocol that would be applied with the full participation of children if one or both parents are referred to hospital treatment due to COVID-19.
- Relevant services should identify single-parent families at risk and be prepared to provide appropriate support if a parent becomes ill with COVID-19 and the child is temporarily out of care.
- Prepare timely and, as far as possible, complete information for children, which would reduce uncertainty about teaching, scoring, and entrance exams for high schools.
- The relevant ministry and teachers should take all necessary measures and activities to provide and facilitate learning and teaching for children who do not have access to a computer and Internet.
- Provide food packages and disinfectants for families with children in difficult socio-economic situations.
- During the COVID-19 emergency, ensure that no family is left without electricity, water, telephone and access to other basic utilities.
- Provide free internet access to school-age children from families in difficult socio-economic situations.

## **WHAT DO CHILDREN WORRY ABOUT?**

### **Human casualties**

(boy, 12)

**I worry that if my mom gets infected I will be left alone**

(girl, 11)

**That my family may get infected with the virus (and  
that the teacher may get infected)**

(girl, 8)

**Children with no home might die**

(boy, 11)

**I'm worried because I don't have my phone, I'll have to  
get one, but for now I can't answer the teachers on  
Edmodo, that's what worries me the most.**

(girl, 14)

**The scenario from Italy**

(girl, 18)

**I worry about the scene in the hospitals we watch  
every day on television. I'm worried about  
experiencing it.**

(girl, 13)

**Entrance exams and all that because I don't know how  
to practice alone because honestly nothing from this  
online class is clear to me**

(girl, 14)

**That my mother who works downtown every day gets  
infected with a virus**

(boy, 14)

