

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES  
BY DEPUTY R.J. WARD OF ST. HELIER  
QUESTION SUBMITTED ON MONDAY 19th JULY 2021  
ANSWER TO BE TABLED ON MONDAY 26th JULY 2021**

**Question**

Will the Minister advise what data or research are currently being used to determine the impact of Covid-19 on children, in terms of –

- (a) mortality rates, including whether these are calculated as a percentage of infected cases or the total population of children;
- (b) the long-term effects on children arising from different variants of Covid-19;
- (c) the long-term effects on children based on the severity of symptoms; and
- (d) the different effects of Covid-19 on primary, secondary and tertiary-education aged children?

**Answer**

- (a) mortality rates, including whether these are calculated as a percentage of infected cases or the total population of children;

The evidence is clear that COVID-19 in children is associated with a considerably lower burden of morbidity and mortality compared to that seen in the elderly<sup>1</sup>. Deaths in children and young people (CYP) (i.e. people < 18 years of age) following COVID-19 infection are rare<sup>2,3,4</sup>. Recently published data using a high quality unique national mortality dataset linked to national hospital and SARS-CoV-2 Public Health England testing data, in-conjunction with clinical review, identified 25 CYP who died of SARS-CoV-2 infection during the first pandemic year (March 2020 to February 2021). This corresponds to 2 deaths per million across the CYP population in England<sup>5</sup>. There have been no recorded COVID deaths in CYP in Jersey to date.

- (b) the long-term effects on children arising from different variants of Covid-19;

A small study conducted at King's College London considered the effect of the then new SARS-CoV-2 variant B.1.1.7 (Alpha variant) on children and young people (CYP). They found no evidence of more severe disease having occurred in CYP during the second wave, suggesting that infection with the alpha variant did not result in an appreciably different clinical course to the original strain. These findings are in keeping with early national data. Severe acute respiratory COVID-19 remains an uncommon occurrence in children and young people<sup>6</sup>.

The long-term health implications for some children who have been infected with COVID-19 remains uncertain. Evidence on the long-term effects from different variants and particularly of newer variants such as Delta will take longer to emerge.

---

<sup>1</sup> [COVID-19 - research evidence summaries | RCPCH](#)

<sup>2</sup> [Risk factors for intensive care admission and death amongst children and young people admitted to hospital with COVID-19 and PIMS-TS in England during the first pandemic year | medRxiv](#)

<sup>3</sup> [Deaths from COVID 'incredibly rare' among children \(nature.com\)](#)

<sup>4</sup> [Latest evidence on impacts of COVID-19 in children: March 2021 - POST \(parliament.uk\)](#)

<sup>5</sup> [Deaths in Children and Young People in England following SARS-CoV-2 infection during the first pandemic year: a national study using linked mandatory child death reporting data | Research Square](#)

<sup>6</sup> [Effect of the new SARS-CoV-2 variant B.1.1.7 on children and young people - The Lancet Child & Adolescent Health](#)

(c) the long-term effects on children based on the severity of symptoms;

Most children are asymptomatic or will exhibit mild symptoms from COVID-19 infection. However, a small number (5/10,000) have been identified who develop a significant systemic inflammatory response, paediatric inflammatory multisystem syndrome temporally associated with COVID-19 (PIMS-TS or PIMS)<sup>7</sup>. Although not specifically looking at children, studies to date have not shown a correlation between the severity of initial symptoms and the development of long-term symptoms<sup>8</sup>. There is preliminary evidence that long COVID can affect children<sup>9,10</sup>. The Office for National Statistics estimates that approximately 8% of those aged 2 – 16 years will go on to experience long COVID (i.e. 1 in 12)<sup>11</sup>.

(d) the different effects of Covid-19 on primary, secondary and tertiary-education aged children?

Childhood is a delicate and fundamental period of life, critical for acquisition of social, behavioural and educational development. The impacts across these varying developmental stages will therefore vary greatly. Consideration to the different age cohorts has been reflected in the Public Health Guidance, Safer Travel Policy and testing regimes afforded to different age cohorts (e.g. under 11s exempt from border testing; lateral flow testing for students in Years 11 and above).

A pre-print study by Harwood et al described pre-existing factors associated with severe disease, primarily as reflected by admission to critical care, and death secondary to SARS-CoV-2 infection in children and young people (CYP) in hospital. They found that infants (ie children aged up to 1 year old) had an increased odds of admission to critical care and death compared with CYP aged 1-4 years. Odds of death was also increased amongst CYP over 10 years and >14 years<sup>12</sup>. Overall risk remained low.

Children are at lowest risk of death from covid-19, however concerning signals remain about the overall effect of the pandemic on their well-being and mental health, which are unevenly experienced across different age groups and socioeconomic circumstances<sup>13</sup>. COVID-19 may result in heightened feelings of anxiety and worry and could exacerbate low-mood and other mental health conditions<sup>14</sup>. Restrictions on freedoms from lockdowns and isolation will be felt more greatly in the older age cohorts as this coincides with the developmental stage of gaining independence from family members. The overall effect on interrupted schooling in both the short and long term as well as the effect on safeguarding must also be considered.

---

<sup>7</sup> [Paediatric multisystem inflammatory syndrome temporally associated with COVID-19 \(PIMS\) - guidance for clinicians | RCPCH](#)

<sup>8</sup> [Post-COVID syndrome in non-hospitalised patients with COVID-19: a longitudinal prospective cohort study - The Lancet Regional Health – Europe](#)

<sup>9</sup> [Preliminary evidence on long COVID in children - Buonsenso - 2021 - Acta Paediatrica - Wiley Online Library](#)

<sup>10</sup> [Long COVID and kids: scientists race to find answers \(nature.com\)](#)

<sup>11</sup> [Prevalence of ongoing symptoms following coronavirus \(COVID-19\) infection in the UK - Office for National Statistics \(ons.gov.uk\)](#)

<sup>12</sup> [Which children and young people are at higher risk of severe disease and death after SARS-CoV-2 infection: a systematic review and individual patient meta-analysis | medRxiv](#)

<sup>13</sup> [Mental health of children and young people during pandemic | The BMJ](#)

<sup>14</sup> [the-impact-of-covid-19-on-children-and-young-people-briefing.pdf \(childrenssociety.org.uk\)](#)