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Authors

Efuribe, Chinwe
Barre-Hemingway, Madisen
Vaghefi, Evangelina
[et al.](#)

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Commentary

Coping With the COVID-19 Crisis: A Call for Youth Engagement and the Inclusion of Young People in Matters That Affect Their Lives

Chinwe Efuribe, M.D., M.P.H.^{a,*}, Madisen Barre-Hemingway^b, Evangelina Vaghefi, B.S.^c, and Ahna Ballonoff Suleiman, Dr.P.H.^d

^a Department of Pediatrics, Lone Star Circle of Care, Round Rock, Texas

^b Departments of Psychology and Modern Languages, Pitzer College, Claremont, California

^c Departments of Psychology and Nutritional Sciences, University of Texas at Austin, Austin, Texas

^d Independent Consultant, Davis, California



The novel coronavirus disease 2019 (COVID-19) is a serious pandemic that is affecting families and economies across the globe. Communities are facing unprecedented times and today, young people are among those being asked to make significant sacrifices to protect the health of older adults and other vulnerable populations. As we are writing this commentary, almost two million people around the world have received confirmed diagnoses of COVID-19 and over 125,000 have died from complications related to the virus. Initial data from China indicated that youth and young adults were less likely to be infected and were less likely to become seriously ill. As the disease has spread globally, this remains true, and today in the U.S., the CDC estimates that while youth under the age of 18 years comprise 22% of the U.S. population, they represent only 1.7% of current COVID-19 cases [1]. Although adolescents and young adults are least likely to be severely affected if they contract COVID-19, drastic measures are being taken that affect large populations of youth to slow the rate of infection. Young people adapt daily as schools, colleges, movie theaters, restaurants, and bars close; sports games, music concerts, dance recitals, graduations, and proms are cancelled; and shelter-in-place orders are becoming a way of life. These public health measures are critically important to protect individuals' health, reduce the burden on our health care system, and limit the number of people whose lives are cut short by COVID-19. At the same time, questions have emerged about whether costs to young people associated with the aggressive

disease prevention measures such as school closures are significant contributors to combating viral transmission [2]. Furthermore, it is unclear whether any of these decisions have included youth voice and participation.

The UN Convention on the Rights of the Child asserts that it is a fundamental human right for youth and young adults to participate in designing the programs and policies aiming to serve them [3]. This participation is important for young people to develop critical knowledge and skills, as well as for them to experience a sense of purpose. There are incredible examples of youth effectively engaging in changing the world around them—the Vietnam War, the Arab Spring, March for Our Lives—and meaningful youth engagement has clear benefits for overall health and well-being [4,5]. Young people are not solely beneficiaries of programs and policies—they are essential partners.

We recognize that there is no easy solution to cope with the current global pandemic. These extraordinary times require a coordinated, holistic public health approach that carefully balances costs and benefits to ensure the health and well-being of the population. We live in an interconnected world. Adolescent health and well-being are significantly impacted by social, political, economic, environmental, and structural factors [6]. While efforts to prevent further COVID-19 transmission will result in short-term benefits, they also threaten economic stability of families; increase food and housing insecurity; disrupt educational attainment; decrease exercise and physical activity; increase mental health issues; and will likely have lasting effects on adolescent development. As young people across the globe are stepping up to protect the vulnerability in unprecedented ways, they have the right to be involved in these decisions that are impacting their lives.

In recent years, SAHM has been working to increase youth participation in the planning and execution of parts of the annual

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* Address correspondence to: Chinwe Efuribe, M.D., M.P.H., Department of Pediatrics, Lone Star Circle of Care, Round Rock, TX 78665.

E-mail address: cefuribe@lscctx.org (C. Efuribe).

conference. The Youth Involvement subcommittee of the Program Committee, which includes undergraduate students and young professionals, has led efforts to ensure that presentations that include youth presenters receive priority during the conference and youth engagement is meaningfully structured in the professional development of SAHM members. Thirty-two adolescents and young adults (aged 14–23 years), from three U.S. states, participated in the SAHM Youth Involvement subcommittee activities during 2019–2020. When the 2020 SAHM Conference was canceled due to COVID-19, 14 members from this group of youth shared how this unusual time has personally impacted them. Through an informal, electronic survey, they described feeling helpless to protect loved ones; experiencing challenges maintaining friendships remotely; missing out on academic and extracurricular celebrations and milestones; and coping with school closures, transitions to distant learning, and the displacement from the school campus settings. Collectively, these feelings affect their overall health and well-being. When asked what mattered most after the outbreak has been reduced, the singular response from these youth can be surmised in one quote, “If possible, getting back all/or most of my missed opportunities.” While we can never turn back the clock for these youth, we view this as a challenge for SAHM and other youth-serving organizations as we look to the uncertain and unpredictable future.

Youths' passion to regain normalcy should be validated, while we encourage, empower, and engage them in forming creative solutions for a new normal. As a collective network of young people and adolescent health professionals, we must leverage this time, while young people are more available, to create sustainable mechanisms to meaningfully engage them in protecting

their health and well-being. The voices of young people are essential as we navigate this time of uncertainty. As we envision a new way of working and being in the world, we have an incredible opportunity to transform the way that young people engage with designing and implementing adolescent health programs and policies now and beyond COVID-19.

Let us not wait for adolescents and young adults to protest for their voices to be heard. Let us proactively acknowledge the impact the current changes are having on young people today and include their voices when assembling stakeholders in strategic plans for restructuring policies, systems, workflows, and communities affected by COVID-19. As we look back on 2020, we may see many things that went wrong, but let us also see this as the time of opportunity, when youth engagement took center stage.

References

- [1] Coronavirus disease 2019 in Children - United States, February 12–April 2, 2020. *MMWR Morb Mortal Wkly Rep* 2020;69:422–6.
- [2] Viner RM, Russell SJ, Croker H, et al. School closure and management practices during coronavirus outbreaks including COVID-19: A rapid systematic review. *Lancet Child Adolesc Health* 2020. [https://doi.org/10.1016/S2352-4642\(20\)30095-X](https://doi.org/10.1016/S2352-4642(20)30095-X).
- [3] Convention on the rights of the child. The United Nations Article 49. 1989. Available at: <https://www.unicef.org/child-rights-convention/convention-text>. Accessed March 19, 2020.
- [4] Anyon Y, Bender K, Kennedy H, Dechants J. A systematic review of YPAR in the United States_methodologies, youth outcomes, and future directions. *Health Educ Behav* 2018;45:865–78.
- [5] Caprara GV, Kanacri BPL, Gerbino M, et al. Positive effects of promoting prosocial behavior in early adolescence: Evidence from a school-based intervention. *Int J Behav Dev* 2014;38:386–96.
- [6] Viner RM, Ozer EM, Denny S, et al. Adolescence and the social determinants of health. *Lancet* 2012;379:1641–52.