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## Negative impact from school closures on children and parents in Vietnam during COVID-19

Public health measures remain an important pillar in mitigating COVID-19. School closures have become one of the most common restrictions in Asia, but reports on its negative impacts on the Vietnamese population are scarce. Although Vietnam has been through several COVID-19 waves and has successfully quashed previous outbreaks, it has struggled during the fourth wave with the emergence of the delta variant, leaving the country with a considerable death toll. The emergence of the highly infectious omicron variants also caused an increase in the number of COVID-19 cases.

At the beginning of the pandemic, Vietnam quickly closed all schools to reduce face-to-face interaction and to slow down the transmission of SARS-CoV-2, leaving students without in-person classes. There were two major continuous school closure periods nationwide. The first one lasted 3 months from February to May, 2020, during the first wave, followed by a 9-month period from May, 2021, to February, 2022. Online learning became the new norm in Vietnam, but problems arose when the digital transformation happened too fast without comprehensive preparations. For example, the majority of schools could not integrate distance learning due to inadequate digital technology infrastructure. Some educational sectors in mountainous or remote areas cannot afford stable internet access. Teachers often reported that they had low confidence in managing their online classes, despite the Ministry of Education and Training (MOET) providing training workshops, and felt overloaded due to the excessive online schedules and lack of teacher-student interaction.

In October, 2021, Vietnam adopted a so-called living-with-COVID-19 strategy. By early December, 5-year-old children, first grade students, and senior students (grades 9 and 12) in Ho Chi Minh City returned to in-person classes in a 2-week pilot programme for reopening schools, with the introduction of body temperature checks and positive-case protocols to mitigate the negative impacts of strict containment measures. The Minister of Health accelerated vaccination campaigns to increase the number of children with at least one COVID vaccine dose, laying the foundation for reopening schools. However, some localities were still not ready for school reopening. For instance, some educational institutions were not sufficiently prepared, without flexible plans to address positive cases emerging within classrooms; the response to one positive case was to switch all students, in the infected child's class, to online learning. Reopening schools depended on the disease progression at each locality, such as the number of cases or vaccination rates. Rising numbers of infections

meant children stayed at home with remote learning. They usually spent 1 to 2 weeks at home and then had to provide a negative COVID test before they could return to school. Additionally, the lack of a holistic approach from the government led to each region having different schedules for reopening schools. The increasing number of COVID-19-positive students, discrepant reopening schedule adjustments, and ineffective plans to manage positive cases caused many schools to struggle with the hybrid online-offline system. It was difficult for schools, especially teachers, to maintain a class in hybrid mode—doing face-to-face lessons while keeping track of online students. Not many schools were able to provide cameras or webcams for hybrid classes.

The academic performance of children was affected by school closures—primary school students showed a greater decrease in their academic performance compared with secondary school children largely due to being less able to self-study. Children with low socioeconomic status faced more challenges with online schooling than children with higher socioeconomic status, including decreased access to technology for online learning, inability to have personal tutoring in addition to the help provided by their usual teachers, and they experienced more stress-related effects, such as family financial concerns. An assessment by UNICEF showed an alarming 50% reduction in the time Vietnamese children spent learning, and 37% of parents reported that technical problems during online learning discouraged their children from participating in online classrooms regularly.

The pandemic affected the nutrition security of many households. Families were limited to buying certain

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For more on **school closures in Vietnam** see [www.unicef.org/vietnam/press-releases/unicef-representative-children-should-be-school-their-best-interests-%E2%80%8B](http://www.unicef.org/vietnam/press-releases/unicef-representative-children-should-be-school-their-best-interests-%E2%80%8B)

For more on **remote teaching** see *AsiaCALL Online* 2022; **13**: 1–21

For more on the **impact of COVID-19 on adolescent mental health** see <https://ettg.eu/corona-virus-covid19/impact-of-covid-19-on-adolescent-mental-health-in-viet-nam-and-tanzania/>

For the **UNICEF assessment** see [www.unicef.org/vietnam/sites/unicef.org/vietnam/files/2020-08/Covid%2019%20unicef%20ENG.pdf](http://www.unicef.org/vietnam/sites/unicef.org/vietnam/files/2020-08/Covid%2019%20unicef%20ENG.pdf)

For more on the **increased risk of drowning** see [www.huehelp.org/covid-19-how-vietnamese-children-are-drowning-because-of-covid-19](http://www.huehelp.org/covid-19-how-vietnamese-children-are-drowning-because-of-covid-19)

For more on **active travel to school in Vietnam** see *J Transp Geogr* 2021; **96**: 103191

For more on **increased alcohol use and other substances** see *Australas Psychiatry* 2020; **28**: 524–26



For the **UNICEF request** see <https://www.unicef.org/vietnam/press-releases/schools-all-age-groups-should-be-opened-viet-nam-irrespective-vaccination-status>

For the **statement from the Vietnam WHO Representative** see <https://vietnamnews.vn/society/1156835/benefits-of-attending-school-outweigh-covid-19-risks-who-viet-nam-representative.html>

ingredients of less variety and nutritional value due to the financial burden caused by rising food prices. Socioeconomically disadvantaged children suffered as subsidised school meals declined. The prevalence of psychological distress in children during school closures increased, particularly in adolescents. For example, feelings of isolation, anxiety about instability of finances, and the spread of misinformation via electronic media all contributed to increases in symptoms of anxiety, stress, and depression in adolescents. Senior secondary school students reported that they felt their futures and job opportunities were insecure due to the pandemic. A perhaps unexpected side effect of school closures was an increased risk of drowning in children, particularly in those with low economic status, whose family could not afford childcare or swimming lessons, and in those who lived near water, who played without adult supervision. Additionally, active school transport decreased even after schools reopened due to concerns of disease transmission; it decreased more sharply in urban areas and in places with larger distances between homes and schools.

COVID-19 has disturbed the daily life of parents as well as their children and has placed many families in a stressful situation. The UNICEF assessment reported that nearly half of the workers in Vietnam lost their jobs or had reduced income during the pandemic. Some employed parents worked from home to look after their children who were not in school and to help with their online learning. There was also an increased rate of domestic violence, sexual violence, and child abuse in households reported by women. This increase might have been due to job loss, reduced income, increased alcohol consumption, and

longer time spent at home, resulting in many cases of emotional and physical injuries that sometimes required medical attention. Reports of increased adult alcohol consumption during the pandemic might be an indication of worsening mental health in parents, which might be responsible for exacerbating domestic violence.

School closures implemented in response to COVID-19 have greatly affected parents and children around the world. Although many schools across several countries have reopened as part of the living with COVID-19 strategy, Vietnam continues to struggle with inconsistency in school reopening policies in various regions. UNICEF has requested that schools reopen for all students regardless of age and vaccination status, and Kidong Park, the WHO Vietnam Representative, suggested that the social, educational, health, and economic benefits of school attendance outweighed the risks from COVID-19 for children. Further research should be considered to fully understand the effect the COVID pandemic has had on the academic performance and wellbeing of students, and the financial and mental effects on parents.

We declare no competing interests.

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