DATA TO INSIGHTS FOR A BETTER CANADA

The impact of the COVID-19 pandemic on Canadian families of children with disabilities

by Rubab Arim, Leanne Findlay, and Dafna Kohen

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The impact of the COVID-19 pandemic on Canadian families of children with disabilities

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This article provides disaggregated data to better understand the impact of COVID-19 on specific groups. Visit the <u>Gender, Diversity and Inclusion Statistics Hub</u> for more analysis, including disaggregated data on labour, public safety, health and more.

Despite the various resources that are available for families of children with disabilities (see the *CanChild*, Child-Bright Network, and Children's Healthcare Canada websites for examples), relatively little is known about the impacts of the COVID-19 pandemic on families of children with disabilities. The impact of the COVID-19 pandemic may have been particularly hard for these families because of school closures, reductions in services, and the additional challenges related to caring for children with disabilities (see Hango, 2020), including – but not limited to attending clinic and therapy appointments, receiving respite and rehabilitation services, and obtaining medical equipment, which may have been further amplified during COVID-19. The purpose of this report is to examine differences in experiences between families of children with and without disabilities⁴ during the COVID-19 pandemic as reported by parents or guardians of children aged 0 to 14 years.

Results from this study are based on a crowdsourcing data collection, and therefore cannot be generalized to the overall Canadian population. Readers should note that a greater proportion of crowdsourcing participants who voluntarily completed this online questionnaire between June 9 and June 22 were female, born in Canada, and had a Bachelor's degree or above. In addition, it is important to note that if participants had more than one child, they provided an overall average for their children. Thus, the observed differences, particularly in children's activities, cannot be interpreted as differences between children with and without disabilities per se.

Almost one in five (19%) crowdsourcing participants indicated that they had at least one child aged 0 to 14 years in their home with at least one type of disability (hereinafter termed children with disabilities). The largest proportion (84%) of these participants indicated a cognitive, behavioural or emotional disability such as attention deficit hyperactivity disorder (ADHD), while 4% indicated a permanent physical disability such as deaf or hard of hearing, 7% indicated another type of disability, and 6% indicated a combination of at least two of these types of disabilities.

^{1.} CanChild Resources, My COVID Disability Q

^{2.} Child-Bright Network, COVID-19 Resources

^{3.} Children's Healthcare Canada, COVID-19 and Canada's Kids

^{4.} In this report, families of children with disabilities include at least one child aged 0 to 14 years in their home with at least on type of disability based on crowdsourcing participants' responses to the online questionnaire.

^{5.} A benchmarking factor based on demographic projections of the number of families with children aged exclusively 0 to 5 or 6 to 14 years or a mixture of both age groups by province as of January 2020 was used for every participant to compensate for the over- or under-representation of the participants. Please refer to the Methodology section for further information on this crowdsourcing data collection initiative.

^{6.} Note that it is not possible to distinguish whether one child had multiple disabilities or multiple children had different types of disabilities.

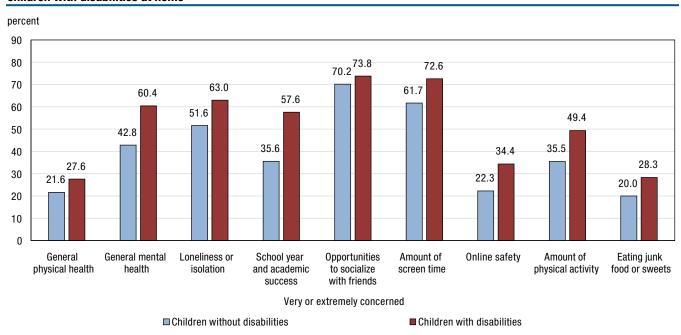
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Many parent participants are concerned about their children but a higher proportion of parents of children with disabilities are very or extremely concerned

When asked about various concerns for their children, about 7 in 10 participants were very or extremely concerned about their children's opportunities to socialize with friends regardless if a child with disabilities was in the household. However, notable differences were observed for other concerns. For example, about 7 in 10 parents of children with disabilities were very or extremely concerned about the amount of screen time their children were engaging in compared with 6 in 10 parents of children without disabilities. About 6 in 10 parents of children with disabilities were very or extremely concerned about loneliness or isolation for their children compared with about 5 in 10 parents of children without disabilities (Chart 1).

The largest difference among participants was observed for school year and academic success: while 58% of parents of children with disabilities were very or extremely concerned for their children's school year and academic success, the figure was at 36% for parents of children without disabilities (see Reid & Greenlee, 2020 for additional results on supporting learning at home during the COVID-19 pandemic). Finally, a greater proportion of parents of children with disabilities reported to be very or extremely concerned for their children's mental health compared with parents of children without disabilities (60% vs. 43%).

Chart 1
Crowdsourcing participants' concerns for their children aged 0 to 14 years due to the COVID-19 pandemic, by presence of children with disabilities at home



Notes: Percent calculations exclude both "not applicable" and "not stated" responses. The pattern of results was similar when "not applicable" responses were included. Source: Impacts of COVID-19 on Canadians - Parenting During the Pandemic: Data Collection Series (5323).

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Crowdsourcing participants were also asked about various concerns for their family. One notable difference was observed between parents of children with and without disabilities. Just over three quarters (76%) of parents of children with disabilities were very or extremely concerned about managing their children's behaviours, stress levels, and anxiety and emotions compared with 57% of parents of children without disabilities (Table 1). This difference is expected since a large proportion of participants (84%) indicated a cognitive, behavioural or emotional disability, which are often associated with stress, anxiety, and other mental health problems (Ogundele, 2018).

Table 1
Crowdsourcing participants' concerns for their family due to the COVID-19 pandemic, by presence of children with disabilities at home

	Children without disabilities				Children with disabilities			
	Not at all	Somewhat	Very	Extremely	Not at all	Somewhat	Very	Extremely
	percent							
Staying connected with family or friends	9.0	48.1	32.6	10.3	8.4	48.3	34.0	9.3
Getting along and supporting each other	22.4	41.4	26.9	9.3	17.9	39.7	30.6	11.8
Balancing child care, schooling and work	6.9	19.8	30.1	43.1	6.0	16.9	29.6	47.5
Managing your child's or children's behaviours, stress levels, anxiety								
and emotions	8.9	33.9	34.0	23.2	3.2	21.3	36.9	38.6
Feeling lonely in your own home	35.8	35.5	18.2	10.4	29.3	36.3	20.6	13.8
Having less patience, raising your voice, scolding or yelling at your								
children	14.9	40.1	27.0	18.0	13.6	38.4	27.5	20.5

Note: Percent calculations exclude "not stated" missing responses.

Source: Impacts of COVID-19 on Canadians - Parenting During the Pandemic: Data Collection Series (5323).

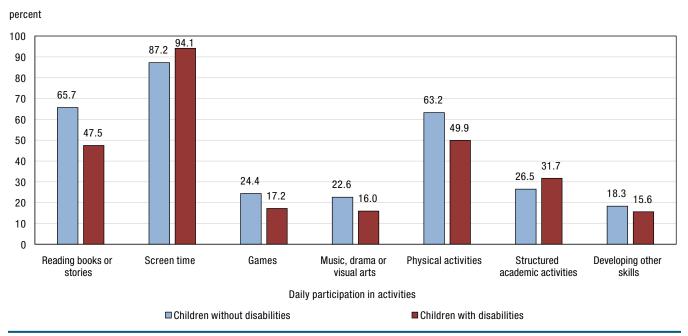
About half of the parents of children with disabilities said that their children are reading and also engaging in physical activity on a daily basis

Crowdsourcing participants indicated that their children were engaged in a variety of different activities during the COVID-19 pandemic. About 9 in 10 indicated that their children were engaging in screen time daily or almost daily regardless of whether a child with disabilities was in the household. However, two differences were noted. About half of parents who had children with disabilities indicated that their children were reading books or stories daily or almost daily compared with just under two-thirds of parents of children without disabilities. About half of parents who had children with disabilities in the household also indicated that their children were engaging in physical activity daily or almost daily compared with about 6 in 10 children without disabilities (Chart 2).⁷

These results should be interpreted with caution given that the prevalence of disabilities is often higher in older than younger children (Arim et al., 2015) and if participants had more than one child, they provided an overall average for their children who may not all have disabilities.

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Chart 2
Children's daily participation in activities during the COVID-19 pandemic, by presence of children with disabilities at home



Notes: Percent calculations exclude both "not applicable" and "not stated" responses. The pattern of results was similar when "not applicable" responses were included. Source: Impacts of COVID-19 on Canadians - Parenting During the Pandemic: Data Collection Series (5323).

Overall, while crowdsourcing participants' various concerns for their family were similar between parents of children with and without disabilities, a higher proportion of parents of children with disabilities were very or extremely concerned for their children's amount of screen time, loneliness or isolation, general mental health, school year and academic success.

Methodology

Results for this study were drawn from Statistics Canada's crowdsourcing data collection series *The Impacts of COVID-19 on Canadians: Parenting during the Pandemic*. From June 9 to June 22, 2020, over 32,000 participants voluntarily completed the online questionnaire that was designed to collect information from parents of children aged 0 to 14 about their concerns for their children and families as well as the activities of their children during the COVID-19 pandemic. Readers should note that crowdsourcing data are not collected under a probability-based sampling design. As a result, the findings cannot be applied to the overall Canadian population. Please refer to Findlay and Arim (2020) for additional results about parents from this data collection initiative.

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