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COMMENT

Children should never have been locked down

There was no scientific justification for imposing restrictions on the young, and there still isn't

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Nowhere has the injustice of lockdowns been more apparent than in what they have required of children. We have obliged them to forgo more than a year of schooling and endure the uncertainties imposed by test, track and isolate policies, not to mention the dystopian atmosphere of masks, Perspex barriers and all the crude and corrosive accoutrements of social distancing. Now, even with other lockdown restrictions ending, they will still be subjected to regular testing. I have heard it proposed that children are innately resilient and will not sustain any significant long-term damage from these experiences. Time will tell if that is the case, but the short-term damage, particularly to children from disadvantaged backgrounds, is already apparent.

Was this avoidable? We knew at the outset that the risk of severe disease and death to children from SARS-CoV-2 was far too low to argue that any individual benefit might accrue to them from halting its spread. But what of the benefit to the community? It was not unreasonable to assume that children would play a disproportionate role in spreading the virus, although the weight of evidence suggests otherwise.

But even if children were the ultimate vectors of viral spread, was it justified to inflict these harms upon them? The trick was to break the link between infections and deaths. There were many of us who suggested this might be achieved by selectively shielding those at risk each time a wave occurred, and now we have vaccines which make this possible. We would never have been able to do so perfectly, and cannot even with all the excellent vaccines available, but children should not have to suffer for this; nor indeed should they have to pay the price for an NHS that has been so underfunded that it buckles under when hospitalisations mount among the adults needing care to survive the infection.

Every year, thousands of people die from community-acquired infections. Never before have we asked children to carry the guilt of having infected these unfortunate individuals. It is part of the social contract that we distribute this guilt across society at large rather than locating it to the individual.

To ask children, in particular, to take on board this guilt is hugely damaging and in violation of our responsibilities towards them. As we come to terms with the idea that we will live in endemic equilibrium with the virus, children must be absolved from the guilt of potentially “killing granny”.

One reason for this is that, for this state of endemic equilibrium to prevail, we have to accept a certain level of infection in the community – including among children – just as we do with other pathogens. There is no point in subjecting children to continuous testing, as this opens up the possibility that paranoid teachers and parents will impose further restrictions on them.

Will there still be a small risk to those in close contact with them if they are infectious? Yes, but far smaller than what we tolerate for other viruses such as influenza. In any case, it has always been my opinion that, even in its epidemic phase, SARS-CoV-2 did not pose enough of a risk to a healthy adult to absolve us from the responsibility of protecting children and young adults from the harms of lockdowns. I considered it my duty to hold in-person classes at all times, while insisting those of my colleagues who were vulnerable (or lived in close contact with someone who was) to have the option to deliver their lectures and tutorials remotely.

What about vaccines? Shouldn't we just jab all these kids to stop them being a “threat” to us? While vaccines almost certainly provide protection against severe disease and death, their ability to block infection is incomplete and likely to be transient. The vaccines we have are excellent at delivering focused protection to the vulnerable but cannot deliver herd immunity unless we are prepared to roll out annual mass vaccination. We therefore have to rely on cycles of natural infection to maintain a wall of protection. As the world wrestles with the ethics of vaccinating children given that the potential risks do not outweigh the individual benefits, we would do well to recognise that there is no long-term collective benefit here either.

What about new variants? The public consensus appears to be that new variants are significantly more transmissible than earlier variants – even though standard epidemiological theory would suggest that any advantage they have is more likely to be marginal. The new variants may indeed be capable of more easily re-infecting people but the beauty of focused protection, particularly as achieved through vaccination, is that it doesn't matter. Even if a monstrous new variant causes a surge in cases, it is unlikely to breach the barriers against severe disease put in place by the vaccines.

But what if the new variants are more transmissible in children and leave them with long Covid? Such speculations do not stack up against the obvious harms of restrictions. Indeed if there is any indication that children are becoming more vulnerable to SARS-CoV-2, I would suggest that it is because we have deprived them of the protection that recent infection with seasonal coronaviruses provides against infection and disease. By plucking them out of their normal lives, we have failed them in many more ways than just neglecting their basic needs.

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Should children no longer be subject to any Covid restrictions? Tell us in the comments section below

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