

Study Shows How Masks Are Harming Children

Analysis by [Dr. Joseph Mercola](#)

✓ Fact Checked

STORY AT-A-GLANCE

- › Data from the first registry to record children's experiences with masks show physical, psychological and behavioral issues including irritability, difficulty concentrating and impaired learning
- › Since school shutdowns in spring 2020, increasing numbers of parents are seeking drug treatment for attention deficit hyperactivity disorder (ADHD) for their children
- › Evidence from the U.K. shows schools are not the super spreaders health officials said they were; measured rates of infection in schools were the same as the community, not higher
- › A large randomized controlled trial showed wearing masks does not reduce the spread of SARS-CoV-2
- › It is important to pay attention to the direction leadership is taking to protect your future and your finances

This article was previously published February 27, 2021, and has been updated with new information.

A late 2020 and early 2021 retrospective study shows that children have experienced great psychological, behavioral and physical harm from the mandates and lockdowns handed down during the COVID-19 pandemic. This harm affects the next generation of leaders and has dampened the spirits of people around the world. Yet, there is one place that appears to have side-stepped this damage.

Throughout the 20th and 21st centuries, there have been events that have changed the world. They include the two World Wars, the bombing of Pearl Harbor, the atomic bomb on Hiroshima, the fall of the Berlin Wall, the 9/11 attacks and the COVID-19 pandemic.¹

The current pandemic has undoubtedly been the most traumatic period for many people. The devastation that has been wrought on the world is incalculable, including things that aren't easily measured like mental health, food insecurity and physical abuse.

The harsh reality is that virtually none of it was necessary and the real damage has been the result of decisions made by global health and government officials who appear to have been acting in concert, according to some predetermined plan.

The fallout from this event will be experienced by many for the remainder of their lives. Suicide rates,² child abuse³ and drug deaths⁴ have risen dramatically. Prescriptions for anti-anxiety drugs had risen 31% and for antidepressants by up to 22% by mid-2020.⁵ But children, whose voices are not often heard, may be suffering the most.

Children Show Physical, Behavioral and Psychological Harm

A retrospective study,⁶ published online in late 2020 and updated periodically through early 2021, uses data from Germany's first registry showing the experience children are having wearing masks. Parents, doctors and others were allowed to enter their observations; the registry had recorded use by 20,353 people as of October 26, 2020.

Editors have since added disclaimers to the text claiming "this study cannot demonstrate a causal relationship between mask wearing and the reported adverse effects in children," as you can see, the data gathered on 25,930 children were specific and intriguing. The average time children were wearing a mask was 270 minutes each day.

There were 24 health issues reported that were associated with wearing masks that fell into the categories of physical, psychological and behavioral issues.⁷

Of the problems that children were having wearing masks, 68% of them were reported to the registry by parents. The researchers concluded the frequency of registry use and the variety of symptoms being reported indicated the importance of the subject. They recorded symptoms that:⁸

"... included irritability (60%), headache (53%), difficulty concentrating (50%), less happiness (49%), reluctance to go to school/kindergarten (44%), malaise (42%), impaired learning (38%) and drowsiness or fatigue (37%)."

Added to these concerning symptoms, they also found 29.7% reported feeling short of breath, 26.4% being dizzy and 17.9% were unwilling to move or play.⁹ Hundreds more experienced "accelerated respiration, tightness in chest, weakness and short-term impairment of consciousness."

Measurements of anxiety or depressive disorder jumped dramatically for adults between January 2019 through June 2019 and January 2021. According to data from the U.S. Centers for Disease Control and Prevention,¹⁰ the percentage of adults reporting symptoms of anxiety disorder and/or depressive disorder was 11% in the first quarter of 2019, but jumped dramatically to 41.1% across the nation by January 2021.¹¹

Evidence has shown that there is a positive relationship between a child's behavioral problems and mental health with maternal mental health¹² and parental mental health.¹³ This means that independent of their own stress and physiological harm from mask-wearing and lockdowns, children will also respond negatively to the rising rate of anxiety and depression exhibited by adults.

More Families Seeking Drugs to Manage Remote Learning

In spring 2020 began an unprecedented remote learning experiment for schools around the world. Suddenly, tens of millions of students were at home, plugged into their computer for their education. In one survey, Educators for Excellence¹⁴ reported 67% of teachers said their students' homework or assignments were completed "somewhat worse" or "much worse" than before remote learning was mandatory.

In another survey,¹⁵ teachers reported their sense of success dropped from 96.3% when teaching in the classroom to 73.1% teaching remotely. On average, the same teachers reported that only 60% of their students were engaged in learning activities.

Remote learning has been especially challenging for young children and for the 20% of students living in the U.S. who do not have access to the necessary technology.¹⁶ According to Education Week, 80% of teachers believed their students were having trouble focusing during the shutdown.¹⁷

Each of these factors may contribute to the growing number of parents who are seeking treatment for attention deficit hyperactivity disorder (ADHD) for their children. NBC News reported¹⁸ specialists are flooded with questions and requests for diagnosis and prescriptions for ADHD.

Dr. Melvin Oatis from the American Academy of Child and Adolescent Psychiatry believes that the pandemic has "been a tipping point that has pushed some families to get help."¹⁹

However, Dr. Arthur Lavin, who is a pediatrician with service on several national committees of the American Academy of Pediatrics, warns, "Our concern is that pediatricians and families be very careful to not simply list the symptoms of ADHD, but to look at the child's history and use differential diagnosis to make sure we have the best possible explanation for the symptoms."²⁰

The fuzziness surrounding a diagnosis of ADHD has also led to some over-identification of these issues. University of Minnesota psychologist Stephanie Carlson finds that students are often misidentified as having deficits in executive functioning skills when the behavior is within normal limits.²¹

For example, younger students are more likely to be labeled with ADHD than their older peers. Boys are labeled more often than girls, and black and Latino students have a lower probability of being diagnosed or taking medicine.

Schools Are Not Super Spreaders

Early data are now available from a study²² performed by the University of Warwick in the U.K. looking at information on school absences between September 2020 and December 2020. The researchers were interested in students who stayed home from school sick because of COVID-19 infections and how the number who became ill varied across time.

The study evaluated pupils and teachers and how those absences changed during November lockdown and in December when the lockdown was lifted. What they found was that the infection rate in the schools matched the wider community, indicating there was no evidence that schools were a driver in producing more cases of COVID-19.

As in the U.S., students in the U.K. have been offered remote learning options. Dr. Mike Tildesley is one of the researchers and a scientific adviser to the U.K. government. He suggests using a staggered approach as plans for reopening the schools are underway.²³

While the rates of infection between the schools and community were the same, the researchers could not comment if the students and teachers who did have COVID-19 caught it in the school or the community.²⁴ As would be expected with what is known about the virus, the rate of infection was lower in primary schools than secondary schools.

When speaking to a BBC reporter, Tildesley had a telling comment about how decisions to reopen schools should be made: "You could potentially think about doing early years first. But this is a political decision."²⁵

Face Masks Do Not Effectively Reduce COVID-19 Infections

The first randomized controlled trial evaluating the effectiveness of surgical face masks against SARS-CoV-2 was published in November 2020 in the *Annals of Internal Medicine*.²⁶

During the trial, researchers evaluated more than 6,000 individuals and found that masks did not statistically significantly reduce the incidence of infection of COVID-19.

Among the people who wore masks, 1.8% tested positive for SARS-CoV-2, compared to 2.1% among the control group.

When the researchers removed those who did not adhere to proper mask-wearing, the results remained the same – 1.8%. This suggests that in this group of 6,000 individuals, wearing a mask made no significant difference as to whether they would acquire COVID-19.

In the group that reportedly wore their masks "exactly as instructed," 2% tested positive for the virus as compared to 2.1% of the controls. Despite a lack of evidence that mask-wearing in the general public was effective, widespread mask mandates were rolled out.

At the end of December 2020, researchers from Rational Ground revealed results of data analysis evaluating the use of masks from all 50 U.S. states.²⁷ It was completed by data analysts, computer scientists and actuaries, who divided the information into states that had mask mandates and those that did not.

They evaluated data from May 1, 2020, through December 15, 2020, and calculated how many cases per day occurred by population with and without mask mandates. Among states without a mask mandate, 5,781,716 cases were counted over 5,772 days, which worked out to:²⁸

- No mask mandates – 17 cases per 100,000 people per day
- Mask mandates – 27 cases per 100,000 people per day

In other words, the evidence does not support the use of masks and school lockdowns. And, there is powerful evidence that masks and school lockdowns are causing significant damage to the physical and psychological health of children. Yet, these mandates and lockdowns have garnered support from schools and parents, likely driven by fear.

Sweden Bucks Countrywide Mandates Driven by Fear

In fact, fear seems to have been the force used to drive mandates the public would not have otherwise accepted – except, that is, in Sweden. In a 45-minute documentary, Claudia Nye shows how Sweden has approached COVID-19.

Under the guidance of chief epidemiologist Anders Tegnell, Sweden did not institute a universal lockdown, close small businesses or schools, or enact mandatory mask mandates. Instead, they chose to use enough reasonable strategies to protect their citizens. According to Tegnell, "We don't want to hurt anyone unnecessarily, but we want to have as good effect as possible."²⁹

Using this as the basis for their decision-making, only some schools were closed during certain periods of time and only office workers were asked to work from home to minimize crowding on public transportation. Retail shops, gyms and restaurants remained open, a vast difference from what happened in other countries around the world.

Businesses recommended social distancing and masks, but it wasn't a strict rule. Around the globe, people were told to stay home or face jail time. Yet, in Sweden people were asked to take commonsense precautions based on their individual circumstances.

It was recommended seniors and other high-risk individuals stay home, use social distancing and wear masks. All others were free to live as they normally would. Tegnell noted that in Sweden, "We have chosen a voluntary way and it's proven to be sustainable and it's proven also to be effective."³⁰

According to the Imperial College of London model, Sweden should have experienced a death toll of 80,000 by the end of June 2020 without a lockdown.³¹ However, the true number September 30, 2020, after no lockdowns, stood at 5,893,³² a vast majority of whom were elderly with comorbidities.

In fact, of those, only 872 were a direct result of COVID-19. The rest had one or more conditions that contributed to the death.³³ Nye tells more of this story in her engaging documentary that won the Outstanding Achievement Award in the Los Angeles International Indie Short Fest film festival in January 2021.

Fast-forward to September 2021 and evidence shows that Sweden ranks 40th in deaths per capita,³⁴ behind dozens of other countries that instituted strict lockdowns and mask mandates. Compare that to Los Angeles, which has had only 37 days where people were allowed to go maskless in the 530 days since the pandemic was declared. Their COVID death rates rank in the top 10 worldwide.

Then compare fully-vaccinated Israel to Sweden: in September 2021 Sweden was averaging about 90 cases per million. Israel was averaging 1,218. More specifically, the comparison is even more stark when you look at it this way, ZeroHedge points out: Between July 10 and September 7, 2021, Sweden reported 56 total deaths. Israel reported 56 just on September 8, 2021.

I believe without being aware of how your behavior is being influenced, the world will continue to become decidedly different and more difficult.

It may seem like science fiction, but just a year and a half ago you probably could not have imagined the world as it is today. Unless and until more people understand the direction that leadership is sending the world, it will only continue down the same path.

Sources and References

- ¹ [Biography Online, Events That Changed the World](#)
- ² [US News, September 11, 2020](#)
- ³ [JAMA, 2020;324\(7\)](#)
- ⁴ [Centers for Disease Control and Prevention, December 17, 2020](#)
- ⁵ [News GP, July 8, 2020](#)
- ^{6, 8} [Research Square, 2021; doi.org/10.21203/rs.3.rs-124394/v2](#)
- ^{7, 9} [Montana Daily Gazette, January 25, 2021](#)
- ¹⁰ [National Center for Health Statistics, National Health Interview Survey Early Release Program, Table](#)
- ¹¹ [Centers for Disease Control and Prevention, Anxiety and Depression](#)
- ¹² [Pars Journal of Medical Sciences, 2012;10\(1\)](#)
- ¹³ [JAMA Pediatrics, 2004;158\(8\)](#)
- ¹⁴ [Educators for Excellence, A Survey of America's Teachers on COVID-19-Related Education Issues](#)
- ¹⁵ [Teachers' Experiences Working from Home During the COVID-19 Pandemic](#)
- ¹⁶ [The Atlantic, December 2020](#)
- ^{17, 21} [Education Week, May 11, 2020](#)
- ^{18, 19, 20} [NBC News, February 16, 2021, A growing problem](#)
- ²² [Warwick News and Events February 15, 2021](#)

- ²³ iNews, February 15, 2021
- ^{24, 25} BBC News, February 15, 2021
- ²⁶ Annals of Internal Medicine, 2020; doi.org/10.7326/M20-6817
- ^{27, 28} The Blaze, December 20, 2020
- ²⁹ YouTube, January 30, 2021, Minute 40:30
- ³⁰ YouTube, January 30, 2021, Minute 26:50
- ³¹ YouTube, January 30, 2021, Minute 4:30
- ³² IndexMundi, Coronavirus-Sweden
- ³³ YouTube, January 30, 2021, Minute 36:40
- ³⁴ ZeroHedge September 17, 2021