

# Children and Masks: Tips for Child and Adolescent Psychiatrists

By David Fassler, MD and Christopher Streeter, MD

AMERICAN ACADEMY OF  
CHILD & ADOLESCENT  
PSYCHIATRY

WWW.AACP.ORG

Parents, teachers and children have lots of questions about masks. Here are a few facts and tips which may be helpful to child and adolescent psychiatrists:

1. The American Academy of Pediatrics (AAP) recommends that all teachers and students who are 2 years or older wear face masks unless medical or developmental conditions prohibit their use.
2. The CDC currently recommends that everyone older than 2 years wear a cloth face masks in these situations:
  - If you are not fully vaccinated and aged 2 or older, you should wear a mask in indoor public places.
  - In general, you do not need to wear a mask in outdoor settings.
    - In areas with [high numbers of COVID-19 cases](#), consider wearing a mask in crowded outdoor settings and for activities with close contact with others who are not fully vaccinated.
    - People who have a condition or are taking medications that weaken their immune system may not be fully protected even if they are fully vaccinated. They should continue to take all [precautions recommended for unvaccinated people, including wearing a well-fitted mask](#), until advised otherwise by their healthcare provider.
    - If you are fully vaccinated, to maximize protection from the Delta variant and prevent possibly spreading it to others, wear a mask indoors in public if you are in an area [of substantial or high transmission](#).
3. There's no evidence that wearing a mask leads to low blood oxygen, interferes with lung development or increases carbon dioxide levels.
4. Masks do not weaken or impair the immune system.
5. There is good evidence that masks do help reduce the spread of COVID-19.
6. Social distancing is still necessary when wearing masks.
7. Wearing a mask can affect the ability to express, read and understand emotions.
8. Most children and adolescents adjust and adapt to masks with minimal difficulties. However, consistent mask wearing may be more challenging for young people with attention deficit, developmental or autism spectrum disorders.
9. Expect varied responses and opinions concerning masks from children, adolescents and their parents. Acknowledge differing perspectives and beliefs. Share factual data from credible sources such as the CDC, the AAP and your local health department.

10. Insist on adherence to established policies concerning masks in your clinical setting.
11. Guidance regarding children and masks continues to evolve as more research becomes available. Child and adolescent psychiatrists should check with the CDC and their local health department for the most current recommendations.

For more information:

[AACAP Resource Library on Coronavirus](#)

[Face Masks](#) | American Academy of Pediatrics

[Talking to Children About Coronavirus](#)

[Face Masks for Children During COVID-19](#)

[Mask Mythbusters: Common Questions About Kids and Face Masks](#)

[Mask Up! Talking to Young Children about Wearing Masks](#)

[Your Guide to Masks](#) | CDC

[Activities, Gatherings & Holidays](#) | CDC

*Christopher Streeter, MD is a board certified child and adolescent psychiatrist working with young people at St. Luke's Children's Center for Neurobehavioral Medicine in Boise, Idaho. He is also an assistant professor of psychiatry at the Idaho College of Medicine, and an adjunct instructor for the University of Washington psychiatry residency programs.*

*David Fassler, MD is a child and adolescent psychiatrist practicing in Burlington, Vermont. He is also a Clinical Professor of Psychiatry at the University of Vermont Larner College of Medicine, and member of the Consumer Issues Committee of the American Academy of Child and Adolescent Psychiatry.*