Effects of COVID-19 on the Health and Well-Being of Young Children and their Caregivers

Introduction and Rationale

For the last two years, COVID-19 has had a devastating impact on vulnerable groups within cities, especially young children and their caregivers and various inequalities and deprivations have been exposed as a result of disproportionate management mechanisms due to the sudden pandemic crisis within cities (World Bank, 2021).

Young children (0-6 years) around the world are not getting healthcare, nutrition, play and love they need to thrive. Caregivers often face stress from income loss and social isolation. Locked down children are often missing outdoor play and interaction with others. Services from vaccinations to home visits have been interrupted during the COVID-19. The effects on young children and their development will last for years.

Previous epidemic episodes apart from COVID-19 show that steps taken to control the outbreak, notably quarantine measures and school closures, especially when prolonged, can reduce children’s mental wellbeing. The Organization for Economic Co-operation and Development (OECD) countries came out with a short-term policy focused on minimising the psychological and physical damage on young children. This was to provide guidance to national governments on actions for improving access of young children to necessary services which shape individual outcomes during childhood (specifically the formative 0-3 years).

According to the survey of December 2021 by NIUA under the ITCN capacity building programme, pandemic-induced restrictions have impacted the overall health and well-being of young children (0-6 years), as opined by 97% of the 68 respondents. The restrictions on reduced outdoor activities and the resultant increase in screen time is associated with heightened sedentary behaviour amongst young children. This could have adverse physical and mental health outcomes such as loss of muscular and cardio-respiratory fitness, weight gain, psychosocial problems, poor academic achievements and ophthalmic issues (Observer Research Foundation, 2021).

Key Issues and Recommendations

1. Infant, Toddler and Young Children: Child Population in regard to Census of India is described as population of children in the age-group 0-6 years. They are further classified as Infants in the age group of 0-1 year, Toddlers 1-3 years and Young Children 3-6 years. https://www.cdc.gov/ncbddd/childdevelopment/positiveparenting/toddlers.html


4. A questionnaire was floated to urban practitioners and general audience on their perception of ITC challenges faced during COVID. The analysis is based on a sample size of 68 respondents.

Young children are highly susceptible to mental health issues because of their inability to fully comprehend the situation and communicate their feelings to adults. In addition, the heightened disruption of outdoor activities for young children affects them psychologically, in turn impacting their perceptions of the “normal” during early years (UNICEF, 2020). For instance, depriving them of early schooling opportunities, socialisation and physical activities in public and play areas could result in altered ideas of interactions. At a household level, the loss of employment, reduced access to markets, and the fraying of social bonds due to continuing social distancing increased potential disruption of ECD (evidence based response to ECD during COVID-19 crisis, 2021).

The pandemic has provided a different narrative on disruptions in the young children’s continuous access to public facilities and services adding to their vulnerability in city spaces. In the survey under the ITCN capacity building programme to identify the essential services which have become difficult to access for young children and their caregivers due to the COVID19. 12% of the respondents mentioned public transportation services, 42% health facilities and 46% open areas and play spaces. This clearly shows that young children are most at risk with the pandemic disrupting essential early childhood care and support services. Also, resulting from suspensions in transportation systems, access to clinics, pre-primary schools, day care centers, anganwadis, social workers, water, sanitation and child protection services were affected which was harmful to the Infant, Toddler and Caregiver (ITC’s) health and well-being (UNICEF, 2020).

The emphasis on care and protection for young children has been emphasised by the Ministry of Women and Child Development, Government of India for children adversely impacted by COVID-19 while following the protocol as mandated under the JJ Act, 2015. The act consolidates and amends the law related to children alleged and found to be in conflict with the law and children in need of care and protection by fulfilling their basic necessities through proper care and nourishment, protection, treatment, social integration, trainings and also by adopting a child-friendly approach.

Issues and Concerns
- Public health programmes for maternal and child health services were either paused or reduced in scale due to COVID-19. There has been a reduction in immunization services during the pandemic. As per a study conducted in one of the districts in Uttar Pradesh, more than 20% decrease was observed in child vaccination except for BCG. (Impact of COVID-19 pandemic on maternal and child health services in Uttar Pradesh, India, January 2021).
- The nutritional intake of infants has been adversely affected by the fall in household income level as a result of COVID-induced economic slowdown, especially for low-income families.
Nurturing care is the set of conditions that provide for children’s health, nutrition, security and safety, responsive caregiving and opportunities for early learning. Nurturing children means keeping them safe, healthy and well nourished, paying attention and responding to their needs and interests, encouraging them to explore their environment and interact with caregivers and others.

Nurturing care is not only important for promoting young children’s development, it also protects them from the worst effects of adversity by lowering their stress levels and encouraging emotional and cognitive coping mechanisms.

- Children often face psychological distress during the on-going pandemic. High stress in families due to social isolation, economic hardship and loss of livelihood has increased the risks of domestic violence and child abuse, including violence on young children. Importantly, school closures and movement restrictions add stress and anxiety due to lack of access to any physical play areas. (Napier-Raman S, et al. BMJ Paediatrics Open, 2021)

- Closures of Early Childhood Education (ECE) centres such as AWCs, Balwadis and Creches have severely disrupted early learning for children (3 to 6 years of age) and has deprived children of cognitive stimulation and socio-emotional development, which fundamentally support their future learning and development. Governments across the country have tried to reach out to the children through different distance measures to keep the learning going (evidence-based response to ECD during the COVID-19 crisis, 2021).

Recommendations

- Improve access to long-term child-centric services, in particular the mental health and psycho-social services and community-based child protection programmes.
- Care support for children with disabilities, which has been disrupted due to the pandemic, needs to be strengthened. Although some state departments have provided mental health facilities for young children and adolescents during the pandemic, the efforts have been sporadic. Some states have also started outreach mechanisms, such as Kerala which launched ‘Kutty Desk’ a student-run helpline as part of a larger programme called ‘Our Responsibility to Children' (ORC). Over 200 children were selected and trained to run the programme.
- Life-saving maternal, new-born and child health services, and routine vaccinations services must be maintained. Measures should be taken to reduce the families’ apprehensions of getting exposed to the infection while availing care at a public health facility and reinvigorating the demand for routine care among the general public. Children should be kept healthy and well-nourished by providing support services. Continuous facilities for healthcare, nutrition, social protection, early years’ health, child services should be continued.
- Integrate research and systematize cross-disciplinary investigations to assess the impact of the pandemic-induced disruptions on physical movement and activity in young children’s overall development.
- There is the need to focus on spatial planning for infants and toddler’s health and well-being. City development should focus on tracking and investigating long-term health and well-being trajectories of the young population as impacted by the pandemic. “Future analyses should explore the interplay between actions and theories in evaluating the outcomes for social and health equity that occur from these policy and program decisions.” (Wray and Gilliland, 2020).
- Make use of the wealth of new data being generated by the crisis and invest in data systems to better target vulnerable families with young children in future pandemics and disasters.
- Strengthen focus on all the components of nurturing is required. While planning for young children, it is important to consider all the aspects that impact their development and learning. It includes all the components as highlighted in the nurturing care framework - nutrition and health, responsive caregiving and opportunities for early learning.

Nurturing Care

https://nurturing-care.org/

The purpose of the Knowledge Needs Assessment Study carried out under the ITCN Capacity Building Programme was to assess the understanding of the ULB officials on spatial planning parameters and existing urban environment needs of young children and their caregivers at the city and, more importantly, at neighbourhood level and how it is currently being implemented. This was one of the main objectives of the study but not restricted to it.
Spatial accessibility is one of the key enablers for young children in their development years. The planning and design provisions must catalyse efficient and seamless transit of young children with their caregivers to services and facilities during their foundational years. There is need for playful environment for early stimulation of young children for their holistic development.

The Knowledge Needs Assessment Report evaluated the existing database being used to map and visualise the integration of ITCs within programmes. The study revealed COVID-19 disrupted city-level database development and practices. There is the need to equip ULB officials with data mapping, visualization and analytical skills to better understand and correlate impacts of the urban environment on the overall development of ITC through comprehensive training and capacity building.

Conclusion

In the COVID era, the pandemic has revealed the harsh realities faced by most vulnerable groups such as young children. The pandemic has additionally shown how various city stakeholders by continuous action can improve resilience of young children to thrive. It also demonstrates the value spaces, facilities and services have in promoting for young children's health, services and well-being.

References


iii. Bernard van Leer Foundation (2020). “Five ways health and social services can support babies, toddlers and the people Who care for them through the COVID-19 pandemic”


