

COVID-19 Pandemic and Care of Vulnerable Children in India

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Abstract

For the child living in institutions or in foster care homes, the continued Covid-19 pandemic had a major effect and posed many challenges. It includes a scarcity of access to health & oral health care, lack of schooling, poor infrastructure maintenance, lack of nutrition and healthy diet, similarly, as well as lack of emotional and social support, all of which leads to increase prevalence of mental illness among them. If these problems are ignored any further and not detected or managed early, can have a greater impact on overall wellbeing and development of the child. For the event of personality and emotional resilience in any person's life, Childhood is that the significant time for overall development and health. It's the responsibility of each nation to take care of the children the marginalized and underprivileged. During the current challenging Covid-19 Pandemic, we must always take the commitment of reducing its impact on institutionalized children by addressing the factors and taking measures for overall development of this vulnerable group. The current review was an attempt of addressing the factors or concerns that can arise due to Covid-19 pandemic situation and measures recommended for improving the overall health and wellbeing of the child living in institutions in India.

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MAIN TEXT

Vulnerable Children are children under the age of 18 whose safety, well-being, and/or growth are jeopardized due to a lack of adequate care, security, or access to critical services.

These children are the result of rising poverty and unemployment, family disintegration, neglect, harassment, and crime, violent conflicts, natural and man-made disasters, dwindling resources in rural areas, and the allure of cities [1]. Infectious disease, chronic disease, mental illness, and difficulties caused by social deprivation, parental inadequacy, and emotional disturbances are all risks they face.

In India 30 million approx. are orphan and abandon children as per UNICEF report. In 2011 study by SOS village, these children constitute 4% of India's child population and around 470,000 of these children are under institutional care as per Childline India Foundation in 2017[2]. Individuals with physical, mental, and/or developmental impairments receive institutional care in a crowded living arrangement

aimed at fulfilling their functional, medical, personal, social, and residential needs.

Many children worldwide fall into this category, and each nation makes an effort to care for and protect these children through a variety of interventions such as institutionalization like CCIs (Child Care Institutions), foster care homes, adoption, and so on. In India, the traditional solution to children in challenging situations has been institutionalization, as described by the Juvenile Justice Act of 2015[3].

The various concerns that may arise due to Covid-19 Pandemic on these vulnerable children are as follows-

- a) Lack of adherence to Covid-19 appropriate behaviours- Because the social distancing mandates were enforced, non-resident CCIs workers would be deficient, and residential caregivers at institutions would be burdened with an increased workload of keeping the children involved through art and music, reading and games, tutoring, and counselling. Due to the space constraint, arranging additional quarantine space for infected CCI

residents is another problem. They struggle to follow safety precautions such as regular handwashing, wearing masks, and maintaining a safe distance.

- b) Access to essential health services and basic amenities might be compromised- Most health care facilities are focused on Covid-19 management because they are overburdened with it. As a result, the burden of other healthcare and oral healthcare issues in them has increased, resulting in a decreased overall quality of life [4]. CCIs offer a healthy environment for children while still meeting their basic needs.

However, the COVID-19-induced lockout had put a halt to their normal operation. As supply logistics were disrupted, obtaining basic commodities, menstrual hygiene products, medications, oral hygiene aids, and teaching materials became difficult. Problems in providing quality health care and protection to children with special needs because of lack of staff, lack of adequate infrastructural support in getting the online health and oral health consultation for these children resulting in major impact on their quality of life

- c) Inadequate infrastructure for isolating and containing children infected with Covid- 19- The COVID-19-induced socio-economic crisis, as well as school closures and insufficient income, will result in massive school dropouts, child labour, forced child marriages, child trafficking, and child abuse, resulting in a massive increase in rescue and rehabilitation needs, as well as admissions into CCIs. Furthermore, due to a drop in family income, the reunification of children into foster care or facilities will be hampered. Inadequate administrative support and a lack of Funding have dwindled as resources are reallocated to other urgent needs such as Covid-19 care, leaving vulnerable children exposed and without much support.
- d) Increase in the prevalence of child abuse and exploitation-As reported by Childline foundation (The Economic Times, 2020), the United Nations (UN) estimates an additional 13 million child marriages in the next decade (Hindustan Times, 2020) and the escalation of exploitative practises synonymous with the COVID-19 pandemic has necessitated the growth and expansion of CCI facilities. Furthermore, in this sort of situation, the rehabilitation of children into family and social environments is not feasible, making it much harder for CCIs to cope with accommodating additional children. This has heightened the vulnerability quotient of the children further [4]. Because of the COVID-19-induced impoverishment, the children would indeed be subjected to significant traumatic experiences that further amplified their security vulnerabilities. The circumstance is far worse for care-leavers (who left institutions when they reached 18 years of age),

with many seeking employment, shelter, and food [5].

- e) Rising mental health issues- The COVID-19-imposed unpredictability has instilled anxiety, fear, and trauma in CCI children [6]. Social distancing can reinvigorate feelings of loneliness, abandonment, and other psychosomatic symptoms. Incidence of situational peer violence, bullying, abuse, and physical harm, aggressive behaviour, and attention deficit hyperactivity disorder are expected to spontaneously combust due to a lack of interpersonal interaction and recreational sessions, as a result of a regimented routine.

The responsibility of each and every country to take care of these institutionalized/vulnerable children in each & every way either health, oral health, mental health, education, secure or healthy environment.

To counter with above mentioned challenges during COVID-19 pandemic there are some recommendations: -

- i. Orientation and Sensitization training in CCIs- Regular virtual meetings with other CCIs and administrators to align services and ensure that children receive the appropriate care. COVID-19-specific health education material should be disseminated via an online mode for in-house staff and children, with regular reinforcement.
- ii. Training of caregivers, welfare officers, and other staff should be done for early diagnosis, management, and referral of health, oral health, and mental health problems affecting children in institutions.
- iii. Health Access and Equity- The distribution of WASH (water, sanitation, and hygiene) facilities and oral hygiene aids must be phased and regular in these institutions [6]. Telemedicine and Tele-dental consultations must be mobilised in these institutions to produce regular healthcare, oral health, and psychological state care to children living in CCIs [7]. There's an urgent have to train staff in identifying children with mental state issues and initiating early interventions. The CCIs' provision of mental healthcare resources, like collaboration with counsellors and psychiatric practitioners, is completely essential. It's vital to conduct regular counselling while monitoring and supervising children's daily activities. Tele-counselling and online monitoring are two initiatives that may be launched as a part of a psycho-social network for CCIs. The taboo problems with sexual and reproductive health (SRH), abuse, hormonal imbalances, and emotional/mental health for CCI caregivers and youngsters must be addressed.
- iv. COVID-19 related aspects- Offering financial funds for the acquisition of essential items and other sorts of reinforcement of healthy lifestyle practises. To effectively manage children and staff

diagnosed with COVID-19, isolation facilities and infrastructure must be established.

As the COVID-19 pandemic spreads in India and round the world, one thing is certain: this outbreak will have a major impact not only on the health and economic situation, but also, on the psychosocial well-being of societies worldwide. The consequences are going to be felt differently by different populations. Among these, the vulnerable group like Children living in CCIs will face additional challenges in understanding, absorbing, and coping with the changes led by COVID-19 in India as well as Globally.

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