Effects of Covid-19 on the Health and Well-Being of Young Children

Introduction and Rationale

Children under the age of 18 make up 0.6% of the total global mortality rates. Primarily, 27% of these deaths have occurred in children under the age of 9 years and 42% occurred in youth aged 20-24 years (UN Inter-Agency Group for Child Mortality Estimation Child Mortality, 2021). Previous pandemics 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 OECD countries came out with a short-term policy focused on minimising the psychological and physical damage on young children especially to support and take necessary action for access to necessary services which shape individual outcomes during childhood (specifically formative years 0-3 years). 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 within cities. (World Bank, 2021).

According to a survey carried out by the ITCN capacity building programme, 97% of the respondents agreed to the fact that pandemic imposed restrictions have impacted the overall health and well-being of young children (0-6 years). As we witness decreasing outdoor activities and increasing screen time of young children is associated with heightened sedentary behaviour which could have adverse physical and mental health outcomes such as loss of muscular and cardiorespiratory fitness, weight gain, psychosocial problems, poor academic achievements and ophthalmic issues (Observer Research Foundation, 2021).

Young children are far more susceptible to mental health issues because they are unable to comprehend the situation and fully communicate their feelings to adults with most social communications being dominated by the pandemic. In addition, the heightened disruption of outdoor activities for young children results in bearing psychological effects on young children, in turn impacting their perceptions of normal during early years (UNICEF, 2020). For instance, depriving them of schooling opportunities, socialisation and physical activities in public areas and play spaces could result in altered ideas of interactions.

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1 These figures are based on COVID-19 young children mortalities, based on UN’s global working group estimations as comprehensive data on precise numbers are still not clear.
3 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.
5 Based on a study carried out titled “The psychological impact of quarantine and how to reduce it: rapid review of the evidence” comparing post-traumatic stress symptoms in parents and children quarantined with those not quarantined found that the mean post-traumatic stress scores were four times higher in children who had been quarantined than in those who were not quarantined.
Subsequently, the pandemic has proved a different narrative on disruptions in their continuous access to public facilities and services adding to their vulnerability in city spaces. Based on a survey\(^7\), carried out on essential services difficult for young children and their caregivers to access as a result of the COVID pandemic, 12% of people mentioned public transportation services, 42% agreed to health facilities being disrupted and 46% felt open areas and play spaces being inaccessible. As evident from the results of the survey, young children are most at risk with the pandemic disrupting essential care and support services. Also, resulting from suspensions in transportation systems, access to clinics, schools, social workers, water, sanitation and child protection services were affected which was harmful to the ITCs health and well-being (UNICEF, 2020). The emphasis on care and protection for young children has also been emphasised by the Ministry of Child and Women Development, Government of India for children adversely impacted by COVID while following the protocol as mandated under the JJ Act, 2016.

The ITCN programme through its objectives aims to look at the formulation of city policies and aligned programmatic interventions, based on the Urban95\(^8\) philosophy focused on the development needs of young children in the age group 0 – 6 years since the health and well-being of young children reflect the well-being and health of society. A young child and family-friendly city ensure an enabling urban environment that is healthy and safe for young children, develops their faculties, and fosters their love for community and nature.

Based on inputs from various sector experts as part of the ITCN capacity building an increase in neighbourhood scale planning of essential services and play facilities is essential to make cities ITC friendly. As part of the ITCN capacity building various sector experts have emphasised concepts such as 15-minute neighbourhood, popsicle tests as methods to increase and improve neighbourhood scale planning of essential services and play facilities which is much needed as they cater to young children's nurturing and development. Additionally, World Health Organization recommends 9 m square per capita of public space in cities, which are functional, safe and accessible to qualify as sustainable and healthy (World Health Organization 2021). Furthermore, COVID-19 demonstrated the need to set targets for social distancing needs with a surge in cases. In addition, spaces and their service provision targets need to be set at the neighbourhood scales to make cities more resilient to any future risks or crises of a global magnitude. (Wray and Gilliland, 2020)

Also, the concept of integrating children as key urban stakeholders is relatively new and emerging, as recent government schemes drive the effort with flagship programmes such as Smart Cities Mission and the Atal Mission for Rejuvenation and Urban Transformation (AMRUT). Fostering the participation of children in city planning and design strengthens Indian cities becoming age-inclusive especially for young children through safe, resilient infrastructure and policies.

### Issues and Concerns

Public health programs meant to deliver maternal and child health services were either paused or reduced in scale due to COVID. There has been a dramatic reduction in immunization services during the pandemic. Additionally, the nutritional needs of infants were immensely affected as a direct result of economic repercussions, especially for low-income families. As per a study conducted in one of the districts in Uttar Pradesh state, more than a 20% decrease was observed for all vaccines except for BCG. (Impact of COVID-19 pandemic on maternal and child health services in Uttar Pradesh, India, January 2021).

During the Covid-19 period, children often faced psychological distress. High stress in families due to social isolation, economic hardship and loss of livelihood increased risks of domestic violence and child abuse, including violence on young children. Importantly, school closures and movement restrictions only added stress and anxiety with a lack of any physical play areas. (Napier-Raman S, et al. BMJ Paediatrics Open, 2021)

As a direct result of the pandemic, looking at built environment for young children is an essential component as low-income communities face increased marginalisation. Reduced outdoor activity combining with “punitive measures for attempting access to public outdoor spaces” (Luscombe and McClelland, 2020.)

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7 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 51 respondents.
8 https://bernardvanleer.org/solutions/urban95/
The purpose of the Knowledge Needs Assessment Study carried out under the ITCN Capacity Building Programme was to assess the objectives of the study but not restricted to it. Some states started their 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.

In a post-COVID era, the pandemic has opened us to harsh realities that most vulnerable groups such as young children face. The pandemic has additionally shown how various city stakeholders with continuous action can ensure as a step to improve resilience for young children to thrive. It also demonstrates the value spaces and facilities have in promoting built and natural forms of health for young children’s health and well-being.

**Conclusion**

The Knowledge Needs Assessment Report carried out a comprehensive analysis of the impact of COVID-19 on children and adolescents going through various city stakeholders with continuous action can ensure as a step to improve resilience for young children to thrive. It also demonstrates the value spaces and facilities have in promoting built and natural forms of health for young children’s health and well-being.

**References**


ii. Bernard van Leer Foundation, 2020) "Five ways Covid-19 economic recovery plans must invest in the next generation"

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"


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