Effect on Child Rights in India amid COVID-19

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Abstract: *India has been in a state of emergency for several months, despite variations in the lockdown's severity. The COVID-19 epidemic is still spreading over the world. By avoiding intimate contact with people, isolating ourselves, and putting ourselves in a quarantine zone, we can prevent the virus from spreading. In addition to the physical issues brought on by the disease, the coronavirus and the ensuing lockdown have had a severe effect on children's behaviour. Children are more susceptible to the epidemic's non-health effects even if they are less afflicted than adults by it. Children, especially those from low-income parents, may be harmed by stopping the pandemic.. Similar consequences on child protection have been seen with the Ebola and SARS-like pandemics, including increased rates of child abuse, neglect, family separation, and lower scholastic success. Working kids may be ejected from low-income households since there may not be enough money for food. Children who rely on school meals might not obtain the appropriate nutrition they require when schools are closed. It has been widely reported that numerous schools in India have closed and instructors are unable to deliver online classes. This phenomenon has led to the forced marriage of numerous adolescent girls. There have been several violations of children's rights to education and learning. Children from low-income homes and those who live in rural regions are more susceptible to the consequences of poverty. The long-term effects of this decline in educational attainment for India's youth are disastrous. Many young girls are getting married off at an early age as a result of rural families in such areas having a harder time providing for their children. The threat of abuse increased during the lockdown due to a lack of food and an increase in domestic violence. In this article, we'll be focusing on how the present epidemic impacts children's life. The current outbreak has parents worried about children's safety. Extra security measures are required for children's health and welfare during an epidemic like this one. Governments must actively participate in securing children during pandemics for the most vulnerable members of any disease-ravaged community.*

Keywords: Human Rights, COVID-19, Health, Child Rights, Lockdown, Pandemic

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1.Introduction

The onset of the coronavirus infection may have an impact on children's mental, physical, social, and cultural health (COVID-19). India's youth, who make up 40% of the population, must not be overlooked both during and after the pandemic. The wellbeing and health of children are impacted by these effects. The number of cases among children under the age of 12 has been significantly lower than in other age groups as a result of the new coronavirus in India. Child advocacy groups are worried that the stress and anxiety caused by COVID-19 would exacerbate children's mental health problems that already exist.

To address these issues, a variety of organisations and specialists throughout the world have begun offering counselling and psychiatric aid to children and teenagers. These services are often fragmented and fail to cater to the specific requirements of children [1]. India's mental health care system is understaffed and underfunded, yet the government nevertheless offers services like a toll-free helpline.

Many children haven't seen their classmates, schoolmates, or family in nearly two months due to lockdown. Children may become bored, irate, and agitated if they aren't engaged in outdoor play and activities. Beyond conversations and messages, mobile phones are utilised for other things. Smartphones are multipurpose gadgets that keep users engaged and connected. Recent studies reveal that consumers are continually hooked on social media, even whether they're online or using mobile apps. Overuse of mobile phones might reduce productivity, according to Indian media. Increased internet connections may lead to 'emotional contagion,' when one person's sorrow and panic spreads [2].

The outbreak poses a threat to kids who have lost both parents. Losing a loved one can be upsetting for children, especially if they weren't able to visit them before they passed away. Finances and health of parents may have an impact on children. Anxiety, hopelessness, sleeplessness, and anorexia could be experienced. PTSD can develop as a result of captivity, loneliness, or sorrow. Examine three groups of children: those whose parents are in quarantine, those whose parents passed away but were not placed in quarantine, and those whose parents are either in quarantine or have recently been released.

Mental health experts, parents, and other caregivers may help needy children. Parents must provide a sense of normalcy in the home via play, academics, family time, creative writing, and phone or video calls with friends and relatives. As the COVID-19 epidemic

continues, so do parents and children's mental health issues. They've spent months experiencing social isolation, financial difficulty, and dread of acquiring a lethal illness. IACAM suggests that parents and caregivers stay cool and encouraging, letting children know their feelings are normal, checking in on them, and monitoring both their own and their children's behaviour to reassure them that the problem will be handled [3].

A study found that the present epidemic or recent natural disasters could cause youngsters to develop long-lasting psychopathology. These kids struggle with mental health issues, substance misuse, anxiety issues, and suicidal thoughts. Children are becoming increasingly sedentary and prefer computer games and screen time to outside play. Due to this, many children are overweight. Some children who spend too much time on screens develop antisocial behaviour and mental health issues. Childhood obesity is caused by inactivity, a rise in the availability of unhealthy foods, and issues with technology. The mental health of children is impacted by these issues.

Children who are in school have missed a lot of time, so going back to a structured environment could be challenging. When the pandemic ends, parents, carers, and educators should give kids some time to adjust before resuming normal activities. Everyone will require some time to adjust to life after COVID-19. Children may suffer trauma from COVID-19. Children who are still alive may worry about the COVID-19 deaths. Children who worry about being sick worry that everyone close to them will pass away from the infection. On the best way to use vaccine to stop the COVID-19 epidemic, experts disagree. On the subject of immunising youngsters, the scientific community is divided. Children are at risk of contracting and spreading COVID-19, so vaccination programmes for them should be supported by data. The effectiveness of COVID-19 vaccinations in younger populations or how they might interact with other children's immunisations have not been sufficiently studied. The immunisation campaign for children has recently started.

2. Life of Children amid Covid-19

2.1 Impact On Child Sexual Abuse Victims

According to a research by Aarambh India Initiative, a Mumbai-based NGO, and ADM Capital Foundation, child sexual assault survivors in Mumbai have been increasingly isolated and socially rejected since the recent coronavirus epidemic, causing substantial challenges for child abuse victims' families [4]. 127 Mumbai families with at least one child sexual assault victim were interviewed for the study. Many of these families have encountered financial difficulties in making rent and other payments since the lockdown began. Many

homes are unable to afford energy or clean water as a result of the spread of COVID-19.

According to the report, lockdowns make it more difficult for survivors to seek out trauma-coping therapies. Many families that relied on emergency shelter services were unable to continue during lockdown due to infection risks (including other survivors). Many survivors reported increasing stress from living with sexually abusive family members, and some survivors had nowhere else to turn but home.

Child sex abuse in India has increased as a result of the lockdown. During the first 11 days of lockdown, the Childline India Foundation recorded a 50% increase in hotline calls. Their research identified 1,000 daily calls. This is not unexpected considering that children spend more time with their abusers and social distance standards prohibit them from speaking to other adults who may aid them [5]. Domestic sexual assault cases increased significantly during the lockout in 2020 and 2021. The vast majority of sexually abusive behaviour toward children is situational, which means that the abuser may not have a sexual preference for kids or even people of his or her own gender but acts in this way because of circumstances, especially when they are isolated from their typical social group. especially when there is incest. Self-quarantining at home sometimes means being in

close touch with the abuser, which may be emotionally demanding [6].

2.2 Impact On Indian Children in slum

Over 100,000 people call helplines every day, many of whom go to bed hungry as the nation closes down to combat the disease. Small roadways and flyovers in India are occupied by rag-pickers, traffic-light vendors, and other street kids. Anyone under lockdown is required to stay at home. What will become of the street children? Next, what? The coronavirus shutdown has resulted in a large number of homeless youngsters. The National Commission for Protection of Child Rights [7]. (NCPCR) has outlined steps the government might use to keep children off the streets when regular life returns. NCPCR recommends the Union government develop a database to monitor street children and connect them to social welfare programmes. Since there were no official statistics regarding the number of street children in India, the commission built the database.

These children were not included in important social programmes like education and aid because there was a dearth of official data. The NCPCR advocated registering street children and linking them to relief programmes until they may be rehabilitated [8].

2.3 Impact On Children With Disabilities

We have to protect our community from the COVID-19 pandemic. This is especially true for people who are at risk for COVID-19-related deficits or other problems. During the COVID-19 epidemic, the Ministry of Social Justice and Welfare's Department for the Empowerment of Persons with Disabilities (DEPwD) has developed numerous suggestions for people with disabilities. There is no mention of financial help for online, open enrollment, or home-based learning.

The Ministry of Human Resource Development (MHRD) sees to it that pupils have access to online educational resources through the Department of School Literacy and Education. The Digital Infrastructure for School Education (DIKSHA), which gives students access to 200 million pages of content, the National Repository of Open Educational Resources (NROER), and Study Webs of Active-Learning for Young Aspiring Minds (SWAYAM), the first "MOOCs platform" in the nation with more than 250 courses created by academic institutions, including DTH channels, are the three main platforms of the MHRDI. There is no discussion of the number of exceptional kids who would benefit from these programmes or how well they would meet their needs. Children with disabilities are isolated from their peers due to a pandemic, which presents additional challenges for their parents. These children must adapt because they are used to a structured school day and learning environment.

2.4 Impact On Migrant Worker's Children

Concern has been raised about the large number of migrants fleeing cities. The following kids have parents who are relocating. The young people in the community whose parents have left for employment come first. They depend on remittances to get by. The children's food and health will be impacted by the lockout. Second, kids whose parents relocate because they work in agriculture, construction, or brick kilns. A study of temporary job sites in seven Indian cities found that 80% of accompanying migrant children did not have access to Integrated Child Development Services (ICDS) [9]. Children were forced to live in dangerous and unsanitary situations.

The predicament of immigrant children will get worse as the virus spreads. Children under the age of three were exposed to sickness and malnutrition as tens of thousands of families returned home with them. Children who relocate for work come last. Activists for children's rights have drawn attention to the physical abuse and lost pay. Relief and transit camps should include secure, kid-friendly shelters, food, potable water, and hygienic amenities in addition to quarantine facilities at state borders.

2.5 Impact On Education of Children

Due to COVID-19, schools and institutions worldwide were shuttered. The most vulnerable were children. Children in many areas were unable to attend school for more than two years, and as a result, many of them left out due to financial hardships and poor living conditions.

Only 16 states and union territories offer qualified children and economically disadvantaged sections of unaided schools free private entrance, according to the National Commission for the Protection of Child Rights (NCPCR). NCPCR has issued a report on Section 12(1)(c) of the Right of Children to Free and Compulsory Education Act, 2009 (Right to Education Act) (RTE Act) [10]. Under this clause, private unaided schools must provide weaker children free education and reserve 25% of places for them [11]. India's RTE Act ensures that education is free and required for all children aged 6 to 14. Weaker components, according to the research, had lower enrollment. According to the research, enrollment of children from Economically Weaker Sections (EWS) is just 5.4% of total enrollment, which by 2009 should be at least 25%. In order to provide for their children's education, families whose budgets have been stressed by COVID-19 are turning to public schools. This is largely a result of private schools' high tuition costs.

In 2021–2022, 2.82 lakh Gujarati students would attend government schools, according to the state department of education. Government schools were attended by comparable numbers in Punjab, Telangana, Haryana, and Delhi. Statistics from ASER 2021 show that the percentage of students attending government schools increased from 65.8% in 2020 to 70.3% in 2021, while the percentage in private schools fell from 28.8% to 24.4% [12].

Covid-19 closed the schools. Online education has narrowed the pool of potential students. 37% of rural youth were unable to study, compared to 8% who could study [13]. About 60% of them live in rural areas in Assam, Chandigarh, Delhi, Gujarat, Haryana, Jharkhand, Karnataka, Madhya Pradesh, Maharashtra, Odisha, Punjab, Tamil Nadu, Uttar Pradesh, and West Bengal. About 60% of the households are Dalits or belong to tribal groups, preventing them from accessing online education due to the lack of smartphones. The epidemic is undermining children's right to education, as evidenced by the data, and making it more difficult for them to adhere to the Right of Children to Free and Compulsory Education Act.

2.6 Impact On Non-Covid Health Emergency Situations Arising Among Children

Kids feared hospitals even before the outbreak. Strange locations, cutting-edge technology, and bright lights are overwhelming. Parents fear hospitals as a result of pandemics. COVID-19 is something that many parents fear having or

knowing someone who has. Others worry that their child will contract COVID-19 from unintentionally infected staff members. Thus, many children do not receive essential medical care. Common illnesses like dengue and typhoid were delayed. Risks of infection transmission necessitated the use of RT-PCR on numerous hospitalised kids.

2.7 Impact On Child Psychology

Children have too much information about the epidemic, and the adults around them seem anxious. Self-quarantining, avoiding contact with others, and staying inside are all necessary during the COVID-19 epidemic. The development of children has changed, especially for those aged 2 to 9. The new COVID-19 criteria are causing preschoolers anxiety. Children who have this fear find it difficult to visit friends or family, go on playdates, or participate in activities.

In some cases, children's fears lead to aggression, clinginess, and separation issues. After recreation, kids who struggle with separation may find it difficult to go to school or a friend's house. Separation anxiety encompasses worries about being away from a sibling, close family member, or pet in addition to a fear of being alone or separated from one's parents. New is the coronavirus. Particularly scared are children. But talking to a loved one when we're scared is helpful. It's important to talk to our children about COVID-19 and how it might affect their lives in these uncertain times. It's crucial to maintain composure and be proactive when speaking with kids; ask them how they're doing frequently. They will experience frequent changes in emotion, and you must let them know that's okay [14].

3. Suggestions to Improve Children's Health During and after Covid-19 Pandemic

Any COVID-19 pandemic plan should prioritise safeguarding and supporting vulnerable children who need it, as well as ensuring that they have access to enough food and nourishment. Children with special needs, instability, and low income are more prone to acquire COVID. Addressing these issues is essential for the wellbeing of the present and future generations in order to prevent inequality from growing and to create shared prosperity.

To be effective, governmental, municipal, and non-governmental organisations must work together and make their response public. Local governments are essential to enhancing national aid and adjusting it to local needs. Authorities are essential. In order to provide the most effective response, family service providers link interventions with those who need them, identify and share available support and helpful advice, and promote provider swaps.

More help is required for COVID-19. Rapid and accurate identification of community needs lowers social unrest and the need for health and care services. A community can identify service and financing gaps using a resource directory or system mapping. Digital system mapping makes it easier for families to find services. Social business partners are essential for informing the community about the resources that are available and identifying unmet needs [15].

3.1 Ensuring the Support of Children Who Need Help and Protection Right Away

Family support and child protection organisations must be present in vulnerable children's households. COVID-19 must educate workers on safety procedures and reevaluate and modify case management strategies and supports.

Divorced or separated children may be stressed by arguments over child support and custody. Mediation agencies and organisations watch for non-compliance with child custody and alimony arrangements.

3.2 Reducing Mental Health Problems in Children and Teens, As Well As the Social Effects of Incarceration

More than a dozen countries and organisations are offering guidance to parents and guardians on how to explain the epidemic to their children in a way that is age-appropriate and less stressful in light of the COVID-19 pandemic.

3.3 Increasing Food Aid To Needy Children

Because COVID-19 no longer provides school meals and economic losses limit poor families' food access, food and nutrition aid must be increased immediately. In developing countries' value chains, legislation is essential to guarantee that all informal sector workers are considered crucial service providers to avert food shortages.

3.4 Making Sure That Learning Is Never Interrupted: Assisting Parents in Helping Their Children Succeed in School

Many educational systems have shifted to online and e-learning as a result of school closures. Wherever possible, nations have utilised already-existing online distance education courses while also developing their own tools and infrastructure. The public now has access to new digital enterprises' tools, and in locations with limited internet connection, education is also distributed via TV and radio. Additional efforts must be made to educate children from low-income homes in order to stop the achievement gap from growing.

It's critical to support parents who don't participate in their kids' schooling. Teachers and administrators should provide parents advice on how to help their children succeed at home and keep in touch with those who are at danger of falling behind or missing class. Children whose families lack the resources for online courses and those receiving special education assistance

should receive further consideration (For example, certain children with attention deficiency problems, impairments, migrant kids, and so on and so forth who have this problem).

3.5 Important Suggestions for Schools

* Classroom ventilation and cleanliness are essential for student safety.

* Diagnostic formative assessments of every student are required to monitor progress and reduce learning losses. For the benefit of underprivileged kids, special education services are required. Grade repetition on a large scale shouldn't be used to help the underprivileged.

* Safety: Pandemic may cause kids to have mental health issues, ranging from mild anxiety to PTSD (PTSD). Some kids might not have worked out when they were alone. Before resuming "regular life, 'the emotional and physical health of the students must be taken into account' [16].

3.6 Providing Children A Safe Digital Environment

In order to ensure that children can benefit from the digital world while being protected from its risks, all parties concerned in protecting children from COVID-19 must cooperate. Children are spending more time online than ever before thanks to COVID-19, so it's critical to offer a secure environment and give them access to digital tools and skills.

Children are protected from harm by teachers and parents, but they require specialised assistance at this time. This requires a high level of digital competency, literacy, and knowledge. Students need to be digitally literate in order to critically analyse information in light of COVID-19 and the resulting misinformation [17]. Authorities and internet service providers should think about taking action to protect children from abuse online as many children experience behaviour and contact hazards in the digital world and are expected to experience growing vulnerability to such dangers, including sexting, cyber bullying, and sexual exploitation. Hotlines, informational centres, and legal protections for children at risk will be more crucial as the COVID-19 pandemic is predicted to boost child sexual exploitation online.

4. Conclusion

India faces a number of problems. This outbreak will grow. As evidenced by COVID-19 and other contagious diseases, our current infrastructure is insufficient to handle a global pandemic. In order to improve response times, provide better care, and serve more patients simultaneously, we need higher health expenditures and a more streamlined health infrastructure. More telemedicine should be used

in non-emergency treatment. To be ready for pandemics and other disasters, regular crisis management training is required. Finally, in order to stop the spread of the illness or the introduction of new ailments, we must all undertake significant lifestyle changes, especially while travelling. With the growth of digitization, COVID-19 is changing. According to the OECD, the majority of children are active online. The effects of the crisis might be lessened by digital technology. Digital devices and the internet may be useful for parents, educators, carers, and kids. Additionally, digital tools might offer external social and psychological assistance. They assist kids in having online conversations and learning technology. Compared to traditional methods, digital technology place restrictions on social interactions and home schooling. Unsupervised internet use may increase cyber bullying and sexual exploitation. The majority of underprivileged kids are unable to access online learning or have a peaceful study space. The age gap could get worse as a result. This educational disparity could have a lasting effect. If COVID-19's legacy is not addressed, the divide between wealthy and poor children will widen.

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