

COVID-19: HEALTH THREATS AND OPPORTUNITIES FOR THE NEXT GENERATION

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Even though children are believed to be less susceptible to the COVID-19 virus, the global pandemic has nevertheless had a profound effect on two key metrics of child wellbeing — immunization programs and access to good nutrition. Discouraging as this has been, it also presents an opportunity, through strengthening data-driven responses by governments and other organizations. Technology-driven initiatives have played a crucial role in effective responses to the crisis; they point the path to strengthening community resilience, and protecting the next generation from the long-term impact of COVID-19.

Children are widely considered less susceptible to the direct symptoms and illness resulting from the COVID-19 virus that halted the world for most of 2020. However, they are the group most exposed to the ripple effects which will linger for years to come. Initial discussions around the pandemic were focused on the preparedness of health care systems and protective stockpiles to help fight the spread of the virus, and development practitioners played a role as first responders. With the

reallocation of resources to the global response, the availability of routine health services, health workers, and supplies were compromised. As a result, the ability of governments, health systems, and development and humanitarian organizations to respond to other major causes of poor health was compromised. The United Nations International Children's Emergency Fund (UNICEF) warned that the secondary effects in all countries would be unprecedented due to the lack of access to time-specific infant



Photo: Mohammed Zaaroun

Beach refugee camp, Gaza City

and childhood immunizations and reductions in nutrition programs under lockdown orders.¹ The combination of the disruption to vaccinations and decreased access to food has indirectly impacted child mortality due to malnutrition. The most generous model forecast that low and middle-income countries would experience an estimated 253,500 additional deaths for children under the age of five.² While this information is discouraging for the development field, it highlights the impact of the secondary effects of resource allocation and control measures during a public health crisis. The administration of immunizations for children is a critical part of the Sustainable Development Goals (SDGs) endeavor to build community resilience against the multitude of issues caused by poverty and inequalities. As many as 38 high-risk countries that have experienced recent outbreaks of measles scaled back or shut down

vaccination campaigns altogether while border closures contributed to vaccine shortages in at least 21 low and middle-income countries. The lack of medical access during the lockdowns means that at least 80 million children in 68 countries are now at risk of contracting diphtheria, measles, polio, and other preventable diseases.³ The decrease in administration of immunizations is anticipated to cause an estimated 6,000 child deaths every day from preventable causes for a six-month period.⁴ In order to combat these issues, an evidence-based framework for operationalizing guidelines to restart routine vaccination campaigns, and to prepare national immunization programs to intensify their efforts, is suggested. The Global Routine Immunization Strategic Plan (GRISP) organizes strategies to strengthen already existing systems; the WHO and the Global Polio Eradication Initiative have expanded

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their guidelines to help countries intercept the projected impacts of COVID-19.⁵ These guidelines suggest the remote training of service providers in advance of restarting campaigns, and the integration of all immunization services.⁶ By investing in technology now, drawing from the lessons learned during the peak of COVID-19, governments can increase case monitoring, contact tracing, and other telehealth interventions down the road.

The use and expansion of technology for basic services provides quick access to the data needed by governments and other sectors to respond to future crises. The UN recently created a portal to provide a space for the global statistics community to share their best practices, guidance, and other tools used during COVID-19. This will remain in place after the pandemic is brought under control.⁷ This system provides a great opportunity to further inform policy makers and development practitioners in coordinating efforts in the future and will help to achieve SDG 17 to revitalize partnerships.

When it comes to engaging communities, culturally appropriate media strategies can create demand for the return to routine services. It is necessary to communicate risk mitigation strategies to prevent the further spread of

COVID-19 and to address vaccine hesitancy and false perceptions. Then, it will be possible to strengthen monitoring and reporting systems for polio, measles, and other preventable diseases, which should coincide with COVID-19 infection tracing programs.⁸

In addition to the loss of childhood immunization programs, the lockdowns meant reduced access to nutritious food through school meals for 368 million children worldwide. Logistical difficulties in moving large amounts of food to poor rural areas worsened hunger and nutrition issues for families reliant on food assistance. Given that nearly half of all deaths of children under five are due to acute malnutrition, and the vulnerability that this creates for other illnesses, COVID-19 intensified an existing problem.⁹ COVID-19 indirectly set back the “Zero Hunger” goal, as the number of people exposed to acute hunger doubled to an estimated 265 million people. Necessary interventions for humanitarian relief to prevent an increase in malnutrition can be done through short-term food distribution and by cash and voucher transfers.¹⁰

For example, during the initial outbreak of COVID-19, the World Bank preemptively provided \$7.5 million to Liberia to fast-track government action to ensure that supply food

chains were sustained. Through a Smallholder Agriculture Transformation and Agribusiness Revitalization Project (STAR-P), the government supported smallholder farmers in increasing food production and meeting the food needs of the vulnerable during the outbreak.¹¹ This is a good example of coordinated efforts between the development sector, government, and the local community to combat the initial but indirect threats of a pandemic.

Development organizations must continue to provide credit to small-scale farmers and support for savings groups in order to move towards a sustainable, long-term approach to combating malnutrition.¹² This effort will help achieve SDG 2, support farmers in increasing agricultural productivity and food production to help alleviate the impact of hunger, and help developing countries stay on track for their long-term goals in the aftermath of COVID-19. Considering the reach of the threats made by the pandemic on future generations, policies

should not try to return to a pre-COVID “normal.” Rather, it is time to broadly adopt and incorporate sustainable practices for food security, and to expand the technology used during the pandemic to address the emerging threats. Future policies must address the inflated cost of food and key health items.¹³ These actions will help in the development of more resilient economies, capable of reducing the likelihood of future shocks, and is the only way to safeguard the next generation from the indirect and long-lasting impact of COVID-19.

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¹ United Nations. 2020. “The Impact of COVID-19 on Children.”

² Food Security Information Network (FSIN). 2020. “Global Report on Food Crises.”

³ UN News. 2020. “COVID-19 Putting Routine Childhood Immunization in Danger.” UN Health Agency.

⁴ Conceição, P., Jahic, A., Hall, J., Kovacevic, M., Nayyar, S., Ortubia, A., Pavez, F. 2020.

“Covid-19 And Human Development: Assessing the Crisis, Envisioning the Recovery.” UNDP.

⁵ Olorunsaiye, C.Z., Yusuf, K. K., Reinhart, K. & Salihu, H. M. 2020. “COVID-19 and Child Vaccination: A Systematic Approach to Closing the Immunization Gap.” *International Journal of MCH and AIDS*. 9(3), 381–385.

⁶ Ibid.

⁷ United Nations. “Sustainable Development Goals – United Nations Sustainable Development. (n.d.)”

⁸ Olorunsaiye, C.Z., Yusuf, K. K., Reinhart, K. & Salihu, H. M. 2020. “COVID-19 and Child Vaccination: A Systematic Approach to Closing the Immunization Gap.” *International Journal of MCH and AIDS*. 9(3), 381–385.

⁹ World Vision. 2020. “COVID-19 & Risks to Children’s Health and Nutrition.”

¹⁰ Ibid.

¹¹ Ibid.

¹² Ibid.

¹³ Cornia, G. A., Jolly, R. & Stewart, F. 2020. “COVID-19 and Children in the North and in the South.” Innocenti Discussion Paper No. 2020–02. United Nations Children’s Fund.