

# COVID-19

## LITERATURE REPOSITORY

### The Global Health Impact of COVID-19 on Children

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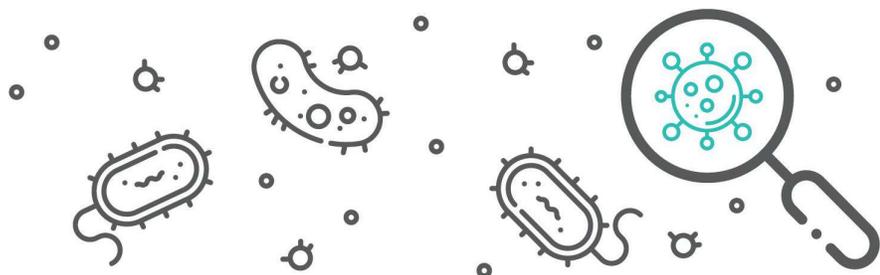
**Discussion**

The COVID-19 pandemic has created a global state of emergency. While healthcare resource allocation has been directed towards managing the immediate response, a rise in community anxiety regarding the safety of attending healthcare facilities has occurred across the globe. This has resulted in a significant decline in health care utilisation in many health care settings and a subsequent increase in morbidity and mortality due to health service interruption and delayed access to care.<sup>1</sup> There is growing international concern that our fight against COVID-19 will undermine the long-term progress in our fight against many other diseases, reversing the hard-won gains in child mortality rates that have slowly been achieved over the past three decades.

Despite children constituting a minimal number of COVID-19 cases and even fewer hospitalisations,<sup>2</sup> they remain at risk of a significant morbidity and mortality burden due to the second-, third- and fourth-wave effects caused by the social and financial impact of COVID-19.<sup>1</sup> Prior pandemics have taught us that the indirect effects of outbreaks can be far more devastating than the disease itself: the 2014 Ebola epidemic in West Africa, for example, resulted in a surge in maternal, infant and child mortality due to a reduction in access to safe infant deliveries as well as disrupting routine health care, increasing food insecurity, and reducing vaccination coverage.<sup>3</sup> In Liberia alone, 15,000 children died from measles due to the interruption to immunisation coverage caused by the epidemic.<sup>4</sup>

There is now clear evidence that COVID-19 is disrupting immunisation services across both resource-rich and resource-poor healthcare settings, impacting 80 million children across 68 countries.<sup>5,6</sup> Global supply chains are interrupting access not just to immunisations but also essential medicines; while transport limitations, curfews and fear are limiting patients and their families' ability to reach health care facilities in a timely manner.<sup>1</sup> In fact, the worldwide restrictions on population movement are impacting not just health care but also entire economies, resulting in lost employment, lost income, and an increased cost of basic necessities and food in local markets, pushing vulnerable populations into poverty.<sup>7</sup>

Prior to COVID-19, global health inequalities were vast, with one child under 15 dying every 5 seconds from predominantly preventable causes and 20% of children worldwide being malnourished.<sup>8</sup> These inequalities are set to rise secondary to COVID-19, and the harmful effects of the pandemic are most likely to impact the poorest countries and the poorest neighbourhoods, inflicting the most damage on already disadvantaged and vulnerable children. It is estimated that the number of people living in extreme poverty will rise from 84 to 132 million in 2020.<sup>8</sup>



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There will also be impacts on education outcomes (one of the few interventions that allows children to escape inter-generational poverty). Currently, almost 2 billion children are out of school, including almost all of the continent of Africa. With schools closed, it is estimated that 368 million children, who would normally rely on school meals as their only reliable source of daily nutrition, are at risk of severe acute malnutrition.<sup>8</sup>The subsequent mortality risks that this may result in will be immense.

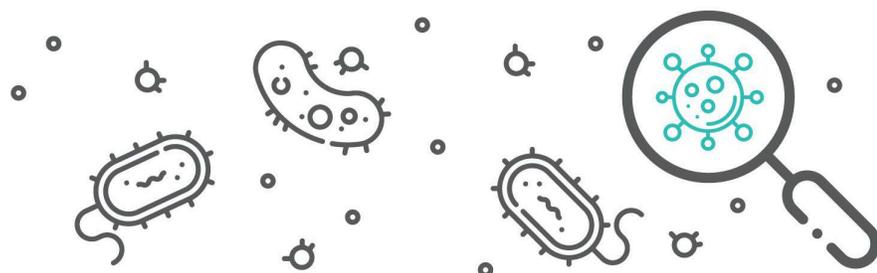
A recent modelling paper considering the impact of COVID-19 on maternal and child mortality in 118 LMICs revealed that over the next 6 months, up to 1.2 million excess child deaths as a consequence of the COVID-19 pandemic may occur. The majority of these will be secondary to an increase in childhood malnutrition due to the impact of COVID-19 on poverty, access to food and school closures.<sup>6</sup>

### Conclusions

While the current evidence suggests that COVID-19 (caused by the virus SARS-CoV-2), plays a minimal role in infecting and affecting children, the secondary morbidity and mortality burdens will be immense. The social and financial impacts of the virus are estimated to be far greater for children than adults, and will disproportionately impact the most vulnerable and disadvantaged societies. It is important that any public health policy takes this into account to minimise excess deaths occurring as a consequence of the COVID-19 pandemic, and to avoid further exacerbating global inequalities in child health outcomes worldwide.

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