

PSYCHOLOGICAL, PHYSICAL AND SOCIAL IMPACT OF COVID-19 PANDEMIC AMONG CHILDREN IN INDIA: A SYSTEMATIC REVIEW

* Nirmali Gogoi¹, Gitumoni Konwar², Anusuya Goswami³, Alonka Beypi⁴

¹Faculty of Nursing, Assam down town University, Assam

²School of Paramedical, Kaziranga University, Assam

³Faculty of Nursing, Assam down town University

⁴Faculty of Nursing, Assam down town University

Corresponding Author: *Prof.(Dr) Nirmali Gogoi, HOD, Faculty of Nursing, Assam down town University,
Mail add; nirmali.gogoi111@gmail.com.

Contact no: 984082452

Funding: None

Conflict of interest: None

Abstract

The emergence of COVID-19 has made life into almost a standstill, hindering almost every aspect of a human life. Lockdown, social distancing, quarantine policies were put into place restricting the daily activities of people worldwide, especially children. Schools and colleges have been closed since March 2020 that has led to deprivation of children from proper education, sport activities and meeting their peers. To emphasize on the impact of COVID-19 on the psychological, physical and social health of children owing to various factors. The literature for this systemic review was started from 20th May, 2021 and around 27 national articles were included in the study. Quantitative studies, systemic reviews, news reports, reports by WHO and UNICEF were reviewed for this article. Search was done mainly using search engines PubMed, MEDLINE and Google scholar and open access articles were reviewed. The topic selected for the articles and research studies were those related to India and some articles from WHO & UNICEF. Subthemes like “impact of COVID-19 on the psychological health of the children” where impact on young children, school-going children and adolescents were focused. In addition to this, subthemes like “impact of COVID-19 on the physical health of children” and “impact of COVID-19 on the social health of the children” were discussed in large. The current pandemic has no deadline. No one knows till when it will stretch. The younger population of the country are the most affected ones as the psychological and the physical problems faced by them might go unnoticed. Measures like counselling services, tele-health and provision of ration to the affected families need to be taken up by the government to battle the problems.

Keywords: Impact of COVID-19, psychological impact, physical impact, social impact, child marriage, child abuse.

Conflict of interest: None

Funding agency: None

INTRODUCTION

The emergence of corona virus disease 2019, COVID-19 in short, has made life into almost a standstill, hindering almost every aspect of a human life. Lockdown, social distancing, quarantine policies were put into place restricting the daily activities of people worldwide, especially children. These new policies of social distancing and lockdown has forced people to stay home restricting people to take part in leisurely activities like exercises (walking, running, going to gym, etc.) and playing outdoor games.¹

Schools and colleges have been closed since March 2020 that has led to deprivation of children from proper education,

sport activities and meeting their peers. Other than learning, the absence of schooling would also have a long-lasting effect on the health and nutrition of children. Lancker and Parolin point out that non-school factors are a primary source of inequalities in education. They believe that focusing on digital education, due to school closures, will definitely widen the learning gap between children from low and high socioeconomic backgrounds. In fact, they have described the combination of school closures and child poverty as a social crisis in the making.³ Altered examination pattern, postponed or cancelled as a result of the pandemic, some children could be anxious about their future. These issues could also delay further education or the start to their working life. The families were also deprived of their work; some parents lost their jobs while some have been in work without salary which has disrupted the family relationships due to stress of managing their household.

India being world 2nd most populous country next to China saw a rapid spread of the disease. With a total population of almost 1.3 billion, India had to be under strict lockdown to prevent the further spread of the virus.² Children were compelled to continue their education through online mode and India being a country with about 5.6 million villages,³ most of the children from remote areas could not get accessed to online classes which made these students feel left out. This has resulted in some serious concerns relating to the physical and psychological well-being of the children. It has been reported that despite the fact that children are less likely to be infected with the disease there may be adverse effects on their physical and mental health owing to various factors. UNICEF in their report mentions that around 56% of the world's children are living in multidimensional poverty as compared to 47% in the pre-COVID state and this is mostly based on access to education and health services. One third of the school children globally i.e., 463 million children were unable to access remote learning when COVID-19 shuttered their schools.⁴

One of the major consequences of lockdowns and school closures could be that some children will not be able to engage in outdoor physical activities, especially if they do not have access to outside space, which could increase weight problems and the disorders that are associated with them. Good nutrition also plays a critical role in children's cognitive development and academic performance, and this is a concern during the pandemic. This includes lack of Vitamin D, which is essential for bones and teeth. A review by Beard et al. also stated that there was evidence from interventional and observation epidemiological studies to suggest that vitamin D deficiency may lead to an increased risk of respiratory tract infections. The impact of nutritional deficiency is mostly seen in poor socioeconomic groups and school closures means that millions of children will not benefit from food programmes provided by their schools.⁵

Isolation, physical distance and loneliness are challenging situations for every human being. Children are bound to miss interacting with their own peer groups, and we fear that being deprived of their company for any length of time will lead to drastic behavioural changes. UNESCO has suggested that the COVID-19 pandemic will have a devastating impact on children in low socioeconomic communities, especially females.¹¹ We believe that widespread job losses and greater economic insecurity could lead to particular problems in poor areas of the world. These could include increases in child exploitation, such as child labour, domestic violence, early child marriages and sexual exploitation. Children could also lose family members and be orphaned.⁶

METHODOLOGY

The authors after an intensive review and from personal experiences due to the current scenario have seen that a lot of children are facing health issues due to lockdown which has been neglected as some of the problems are not quite visible, especially in a worst hit and developing country like India where most of the health care facilities are being used up to manage the spread of the disease. Keeping this in mind, the authors have conducted this systemic review with the aim to emphasize on the impact of COVID-19 on the psychological, physical and social health of children owing to various factors. The questions answered in this study were as follows:

1. What are the psychological problems faced by the children during this pandemic?
2. How COVID-19 has impacted the physical health of the children?
3. What are the contributing factors of these physical, social and psychological impacts?

Procedure and search strategy-

The literature review took place since 20th May, 2021 focusing mostly on open access articles, searched on PubMed, MEDLINE and Google scholar as support. The topic selected for the articles and research studies were those related to India. The following keywords were to search them- “COVID 19”, Impact of lockdown”, “physical impact” and “psychological impact” “factors affecting the impact of COVID-19” “adolescent and school going children”.

Inclusion criteria

- Articles related to physical impact of COVID-19 on children
- Studies related to psychological and social impact of COVID -19 on children
- Studies conducted were mostly by Indian authors.

Exclusion criteria-

- Studies which are qualitative in nature.
- Studies without full text and paid studies.

RESULTS

A total of 45 studies were shown in results after searching with the keywords and out of which only 27 articles were selected in this article based on the inclusion and exclusion criteria. Articles in English language only were included; however reports and advisories by WHO, UNESCO and various news reports were included. Articles and the findings of the articles on the psychological and physical impact of COVID-19 is being grouped in **Table 1** below.

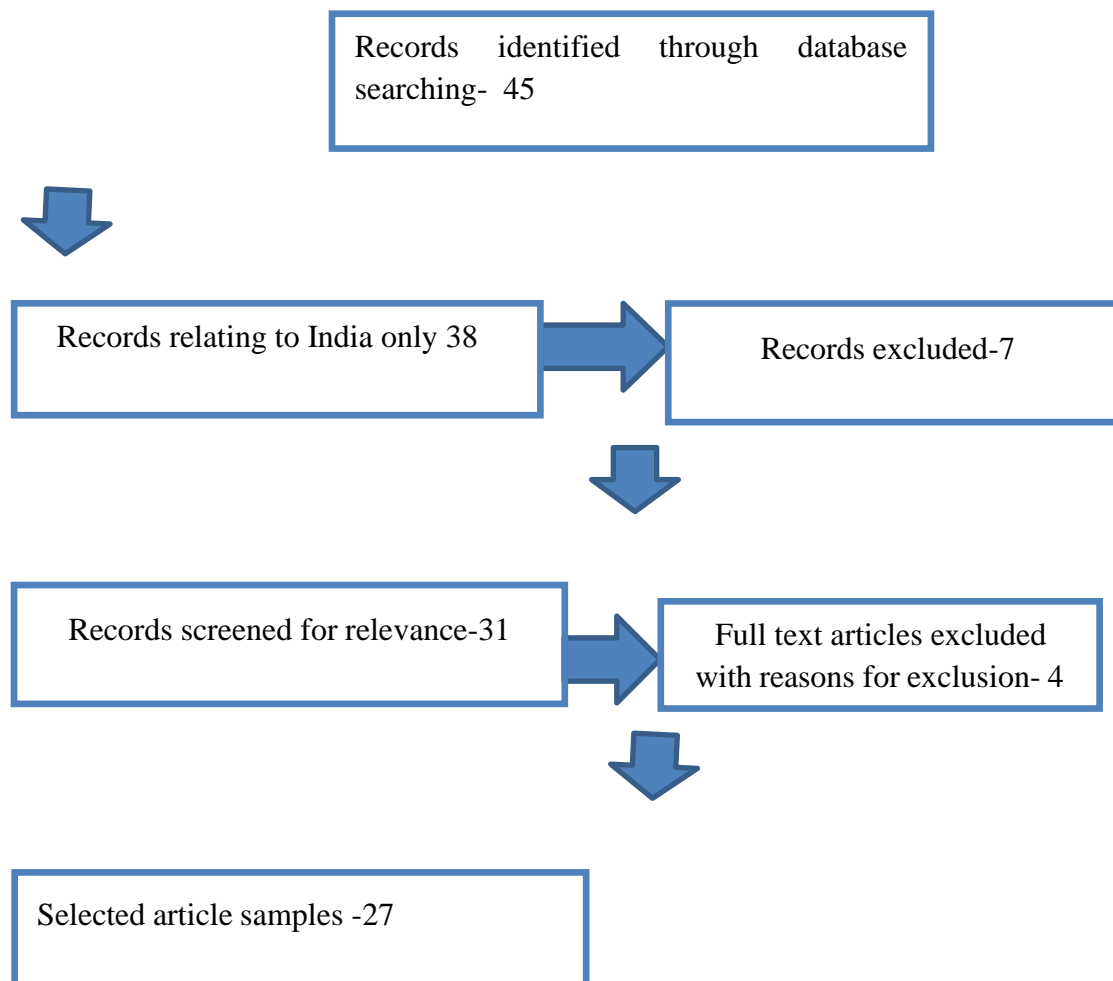


Fig. Prisma flow chart

Table 1: Findings of the articles on psychological, physical and social impact of COVID-19

Sl. No.	Author & Year	Articles	Findings
1.	<i>Govindan R, Ramu R (2021)</i>	Child and Adolescent Mental Health during COVID-19 Pandemic	Mental health of the children is affected due to COVID-19 and technology to be used in caution and supervision. The health care workers and parents need to be trained on how to identify the early signs of mental illness of children and what interventions to provide
2.	<i>Panda PK et al(2020)</i>	Psychological Behavioral Impact of Lockdown and Quarantine Measures for COVID-19 Pandemic Children, Adolescents and Caregivers: A Systematic Review and Meta-Analysis	and 34.5%, 41.7%, 42.3% and 30.8% of children were found to be going through anxiety, depression, irritability and inattention. A total of 79.4% children were affected negatively and 22.5% of children had significant fear of COVID-19 whereas 35.2% and 21.3% suffered from boredom and sleep disturbance respectively.
3.	<i>Shah S, Kaul A Shah R, Maddipoti (2021)</i>	Impact of Coronavirus Disease 2019 Pandemic Lockdown on Mental Health Symptoms in children	Out of 486 children, 130 (30.7%) had psychosocial problems, of which 107 (25.2%) had anxiety or depressive symptoms. 5.4% had the feeling of hopeless and 107 25.2% seemed to be having less fun. Also, 23.4% were feeling sad or unhappy, 24.3% were worrying a lot and 12.5% were feeling 'down on oneself.'

-
4. *Shweta S et al(2020)* Impact of COVID-19 lockdown on mental health of children and adolescent: A narrative review with recommendations The stress due to the COVID-19 pandemic that the children are facing is making them more vulnerable. Closures of schools or activity centres for longer periods expose them to debilitating effects on educational, psychological and development attainment as they experience loneliness, anxiety and uncertainty.
-
5. *Kumar MM, Karpaga PP, Panigrahi SK, Raj U, Pathak VK (2020)* Impact of COVID-19 pandemic on adolescent health in India With restrictions in learning, socializing and physical activity due to the pandemic the risks to the adolescents will increase.
-
6. *Venkat Ananthkrishnan (2021)* *SL, KR* Psychological impact of the COVID-19 lockdown in school- aged children and adolescents Karaikal- A longitudinal study Emotional and hyperactivity were seen significantly high ($P < 0.001$) in school- aged children while peer and conduct problems were seen higher ($P < 0.001$) in adolescents. Screen time 5 hours a day correlated with high and very high scores in both the groups ($P < 0.001$).
-
7. *Kumar A, Nayar RK, Bhat LD (2020)* Debate: COVID-19 and children in India Due to limited access to peers and schoolmates' children may experience boredom, angry and frustrated. The psychological problems identified in children suffering from adversities such as the current pandemic are seen to be having psychological problems such as mood disorders, conduct disorders, anxiety, substance abuse and suicidal tendencies.
-

-
8. *Patra S, PatroBK* COVID-19 and adolescent mental health in India Adolescents are experiencing acute and chronic stress as well as psychological distress due to parental anxiety, disruption of daily routines, increased family violence and home confinement with little or no chance for socialising or physical activity
-
9. *Gupta S, Jawanda MK(2020)* The impacts of COVID-19 on children Increase in weight problems and disorders associated with them, lack of Vitamin D and respiratory tract infections were identified due to lack of activity and sedentary lifestyles. Back pain, eye strain and disturbed sleep were also found due to prolonged use of computers.
-
10. *Bahl D, Bassi S, Arora M (2021)* The Impact of COVID-19 on Children Adolescents: Evidence in India 54% of kids spent an additional average of 5 hours on a screen every day and as the screen time is increasing their physical activity is decreasing which can lead to physical problems like, loss of muscular and cardio-respiratory fitness, weight gain and ophthalmic issues.
-
11. *Jeerson C Unni(2020)* Social effects of covid-19 pandemic on children in India Street children and children of migrant labourers are exposed to significant challenges in food security and health. And Significant increase in child abuse has been reported
-

DISCUSSION

Psychological impact

Children go through various growth and developments and childhood and adolescence are the critical stages for mental health. Development of cognitive and socio-emotional skills that shape the mental health takes place during this time and it is of utmost importance to let children grow in a healthy environment. Negative experiences such as violence, loss of parent, illness of parent,

poverty, etc. at homes, schools and social-media increase risk of mental illness in children and adolescents.⁷ Many children resorted to temper tantrums in order to attract their parent's attention. They become easily agitated with their siblings and also slowly developed the habit of not doing their homework. The present pandemic has increased these risks to many folds endangering the mental health of the younger population of the country to a great extent. Children are more vulnerable to mental health issues because they are unable to comprehend the entirety of a situation nor fully communicate their feelings to adults. This vulnerability was heightened as the pandemic disrupted their normal lives, deprived them of schooling and concomitantly, opportunities for socialization and physical activities.⁸ Govindan R, Ramu R has supported this factor. The priority of emergency, mental health care in children is very much diluted due to other immediate priority in general medical emergency and lack of awareness about mental health and illness.⁹

Reports suggest that the current pandemic will have long term adverse effects on children and adolescents. Ghosh R, Dubey MJ, Chatterjee S, Dubey S in their study reveals that although medical literature shows that children are minimally susceptible to 2019-Corona Virus Disease (COVID-19), they are hit the hardest by psychological impact of this pandemic. They also said that the incidences of domestic violence, child abuse, adulterated online contents are on the rise and hence provision of basic amenities, social security, medical care and minimizing the educational inequities among the children of different strata should be of foremost priorities.¹⁰ Panda PK et. al. concluded that anxiety, depression, irritability, boredom, inattention and fear of COVID-19 are predominant new onset of psychological problems in children with pre-existing behavioral problems in children during the COVID -19 pandemic.¹¹

Young and School-going children

When problems come it does not come with age limit. The young children be it newborn babies or toddlers they have also suffered from huge psychological effects during this pandemic. Pregnant mothers are already at a vulnerable state and on top of that the current pandemic has added another level of stress leading to depression and anxiety. The unborn baby is likely to suffer along with the mothers. Education system has been changed completely from the traditional classroom interaction to online interaction owing to the closures of the schools. The Indian PM Narendra Modi announced 21 days complete lockdown including closure of educational institutions, transportations, religious places, etc. and since then the educational system completely changed as the educational institutions especially the schools. The schools remain shut down completely for more than 9 months and when there was plan of going back to normalized school life the horrifying 2nd wave hit India in the worst possible way. The school children were deprived from mingling with their peers, outdoor games, group plays and were forced to stay home 24/7 which led to a greater impact on the psychological health of these children.¹²

Shah S, Kaul A, Shah R and Maddipoti S interviewed 423 school children and found that 130 children (30.7%) had psychosocial problems, of which 107 (25.2%) had anxiety or depressive symptoms.¹³ In a study conducted by Shweta S et al reveals that severe psychological conditions such as increased irritability, inattention, clinging to their parents can be in children irrespective of all ages. They also mentioned that children may experience disturbed sleep pattern, nightmares, poor appetite, agitation, inattention and separation related anxiety. They further added that 25% of interviewed children had anxiety and depressive symptoms.¹⁴

Adolescents

The adolescents are seen suffering the most of the psychological issues during this pandemic. Adolescents are already a vulnerable group of population be it COVID or not, however, the present scenario has added to it more. Kumar MM,

Karpaga PP, Panigrahi SK, Raj U and Pathak VK in their study pointed out the various psychological problems that the adolescents are at higher risk of suffering which are as follows, stress and other mental health disorders, smartphone dependence and early initiation of smoking, alcohol or drugs.¹⁵

In a study it was found that the psychological impact of lockdown on children and adolescents is high. Longer screen time and parental conflicts have serious impact on the behavior of children as well as adolescents. They observed that the emotional and hyperactivity scores were statistically significantly high in school-aged children ($p < 0.001$), while peer problems and conduct problems were higher in adolescents.¹⁶ Lockdown made the children to feel bored, angry and frustrated as they get very less or no opportunity of socializing with their friends as well as outdoor play. They also added that although the children are very active on mobile phones, there is possibility of them become more engrossed in social media and online entertainment.¹⁷

Patra S and Patro BM in their study mentioned that the adolescents may go through self-harm and suicidal behavior with psychological risks as a result of increased in the opportunity for using internet which makes it difficult for the parents to control this access.¹⁸

Physical impact

Even though there have been reports of children not getting affected by the disease as that of adults, the current scenario of staying indoors for a long time has caused some effects on the physical health of the children, mostly due to minimization of physical activities. The impact of COVID-19 in children may go far beyond health including psychosocially, economically and educationally and it would be interesting to observe how children, whether infected or uninfected, grow up in the post-COVID-19 pandemic world.¹⁹

The direct impact of the disease on children is seen to be far milder than that of the adult population and of all the children infected by the disease very few need critical care. However, nutrition became a serious condition as 368.5 million children across 143 countries who normally rely on school meals now need to look for other sources. An increase in teenage pregnancies may be anticipated in the year ahead if the current scenario persists. The indirect effects of the COVID-19 pandemic may result in increase of child deaths due to strained health systems and disruption in life-saving services such as immunization and antenatal care. As the pregnant women have less access to health services due to imposing lockdown and quarantine protocols, there is likely to increase the number of stillbirths and over the next year almost 2 million additional stillbirths may occur.²⁰

Patel NA carried out a systematic review on pediatric COVID-19 and found that in contrast to adults, most infected children appear to have a milder course and have better outcomes overall.²¹

In a study conducted by Gupta S and Jawanda MK highlighted that due to continuous indoor stay of children they may be facing Vitamin D deficiency which is very essential for bones and teeth. Vitamin D deficiency may also cause respiratory problems which make the children more vulnerable COVID-19 being a respiratory disorder. They also added that there is reduction in many routine services and parents are reluctant to attend any health facilities due to which the vaccination rates of children might be greatly affected. As the children need to continuously sit in front of computers for long hours, this may lead to issues like back pain, eye strain and disturbed sleep.

Children living in underdeveloped or developing countries may face higher infection rates as they live in close proximity with other children and also with limited access to health care facilities, clean water and sanitation, the infection rate of COVID-19 as well as other infections is likely to be higher. They have added that the COVID-19 pandemic will have a far-reaching, long-term impact on children worldwide. Although some of these may be positive, they believed that the negative impacts will be devastating and could affect millions of children in some way.²²

Research has shown that reduced physical activity and sedentary behavior are associated with adverse physical and mental outcomes, such as loss of muscular and cardio respiratory fitness, weight gain, psychosocial problems, poor academic achievement and ophthalmic issues. One of the major consequences of lockdowns and school closures could be that some children will not be able to engage in outdoor physical activities, especially if they do not have access to outside space, which could increase weight problems and the disorders that are associated with them.⁸ Due to school closures, many children will be actively encouraged to go online to continue their education. They will also want to keep in touch with their peers, and this could increase their use of social media, which could distract them when they are meant to be doing school work. They could also be exposed to inappropriate content and cyber bullying. Social media exposes

children to a greater risk of cyber bullying and that can lead to stress, anxiety, low self-esteem and even suicide attempts. The dangers of being online can also include inappropriate content and conversations, including sexual images and pornography. Social media could be a major source of getting addicted to various harmful substances for the children.

Families living in inadequate or crowded housing may experience heightened stress or conflict, which can affect the mental and physical health of children. Refugees, some indigenous communities and low-income families living with financial strain and food insecurity are particularly vulnerable. School cancellations may heighten food insecurity for children, who depend on meal programs and increase vulnerability with the loss of school as a safe place.

Social impact

Impact of COVID-19 on child population is manifold. In addition to the disease related health issues, it has caused damage in various sectors of life - economic, social, cultural and behavioural aspects. UNESCO has suggested that the COVID-19 pandemic will have a devastating impact on children in low socioeconomic communities, especially females. Widespread job losses and greater economic insecurity could lead to particular problems in poor areas of the world. These could include increases in child exploitation, such as child labour, domestic violence, early child marriages and sexual exploitation. Children could also

lose family members and be orphaned. Loss of parents, lockdown and quarantine are also some factors which need to be discussed.²²

Children of migrant labourers

The exodus of migrants from our cities has raised serious concerns. Children of migrant families are an invisible vulnerable population and may include the following groups. The first group consists of children left behind in the villages by parents who undertake employment elsewhere. They are dependent on remittances sent back home. The reduction or elimination of parent's wages due to the lockdown will have immediate effects on food intake and health outcomes of these children. The second group are those children who migrate with their parents who are often engaged in the construction sector, brick kilns and agricultural sectors. A study on informal worksites in seven Indian cities, revealed that 80% of the accompanying migrant children did not have access to education, 30% never enrolled in schools and 90% did not access ICDS services.²³

Almost all children were found to be living in hazardous and unhygienic conditions. The job losses encountered by the migrant workers in the current pandemic will only worsen the plight of these children. Thousands of these families left to their native places with infants and toddlers in tow, either by foot or transport arranged by state governments, exposing these children to unforeseen problems of hunger and illnesses. The third group is children who migrate for employment. Child rights activists have noted a range of issues ranging from loss of wages and physical abuse. Relief and transit camps in state borders as well as quarantine facilities should arrange safe and child friendly shelters that provide nutritious food, water and sanitation for families.²⁴

Child marriage

During the lockdown, the anti-child marriages programs were disrupted. Research has shown that a mere one-year delay in these measures, not only in India, compounded by the economy downturn, could result in 13 million more child marriages over the next decade (2020 to 2030) across the globe.²⁵ The risk of child marriage has heightened as a result of the pandemic's economic fallout, as vulnerable households could be forced to adopt coping mechanisms for stop they would need to find alternative sources of income or reduce their expenditure by reducing the size of the family and marrying of the child.²⁶ An article by UNICEF supported this factor highlighting that even before the COVID 19 outbreak, 100 million girls were at risk of child marriage in the next decade, despite significant reductions in several countries in recent years. In the last 10 years, the proportion of young women globally who were married as children has decreased by 15%, from nearly 1 in 4 to 1 in 5, equivalent of some 25 million marriages averted, again that is now on the threat. COVID-19 is profoundly affecting the lives of girls. Pandemic related trouble restriction and physical distancing make it difficult for girls to access the health care, social services and community support that protect them from child marriage, unwanted pregnancy and gender-based violence. As schools remained closed, girls are more likely to drop out of education and not return. Job losses and increased economic insecurity may also force families to marry

the daughters to ease financial burdens.²⁷

Child marriage is not only a violation of girls' human rights and their children's, but also represents a substantial economic burden for countries. Improving girls' educational attainment and health, as well as increased earnings, decision-making power and control over their reproductive rights are few of the positive consequences of ending child marriage, together with a positive impact on the reduction of maternal and infant mortality, and of intimate partner violence.²⁸

Domestic violence/ child abuse

Domestic violence and child abuse come under interpersonal violence.²⁹ Post-conflict situations or natural disasters like Covid-19 pandemic are a silent risk factor for such violence.³⁰

The most important reason for domestic violence is domestic labor. During lockdown there is a clustering of all the family members at home. The burden of household chores fall under the women's shoulders. There is more work at home and if the chores are not divided between family members, puts pressure on the women. The men either don't go to work or have lost jobs during this time leading to poverty, frustration, and violence. Not only men, but, women also lose their jobs during this lockdown, further increasing the chances of getting abused.³¹

Some of the risk factors for child abuse are social isolation, parents' and caregivers' stress, and uncertain access to food and housing. With schools and daycare centers closed for months, children are no longer in the watchful eyes of their teachers, counselors, extended family, and friends. They are physically separated and unable to provide the same social and emotional support.³² In India, nationwide lockdown was implemented since March 25th 2020 up to 1st June 2020. Two most talked about pandemics during this period were the Covid-19 pandemic and economic loss pandemic. However, at the bottom of the iceberg lied a third pandemic domestic violence and child abuse. Previously, according to the NHFS-4 data, every third woman in India suffers sexual or physical violence at home.³³ It brings havoc on women's physical, mental, and emotional health. The National Commission of Women (NCW) reported that the cases of domestic violence had doubled during lockdown compared to pre-lockdown days.³⁴ Between March 23 and April 16, the commission received 239 complaints, mainly through email and WhatsApp number messages. About 92000 calls were made to India's Childline 1098 helpline for seeking protection against abuse and violence on children between March 20-31, i.e. during the first week of the lockdown.³⁵

There has also been an increase in cyber-crimes against children, including cyber bullying, especially in urban areas. Current analyses attribute children's vulnerability to their heavy use of the internet and social media. There is ample evidence that cyber bullying creates a significant impact on both the victim's and their offender's self-esteem.³⁶ In support of this factor, an article by Khaitan S has reported that India urgently needs a higher child care and protection budget, a focus on child rights and more schemes to take care of children in an emergency. About 13% of girls reported to be facing sexual abuse during the pandemic according to a survey.³⁷

Under privileged children

Compared to adults, children are more likely to take a work for less pay, and be exposed to vulnerable conditions. Data also shows that in India, every third child suffers from one form of malnutrition (stunting, underweight or wasting).³⁸ The vulnerability would be higher in rural areas as most children rely on government programmes. These programs however, have not been able to function properly owing to the pandemic for example the mid-day meal programme. Sinha D supported this factor where it was reported that although data on malnutrition during this period are not available, the status of services that directly affect the food consumption of children such as school meals and Anganwadi services needs to be looked at. The supreme court ordered that mid-day meals in schools and supplementary nutrition from ICDS (Integrated and Child Development Scheme) for children, pregnant and lactating women must continue during the lockdown in the form of home delivery of dry ration or cash transfers. According to the provisions of NFSA (National Food Security Act) as well, if for any reason this entitlement is not delivered, then the compensation in the form of a food security allowance is to be paid. Moreover, the government has also state that given the crisis, mid-day meals should be continued during the vacation as well.³⁹

Loss of parent/parents

COVID 19 pandemic has indeed been a tough time for all heavily affected countries especially India. Complications of comorbidities attributed to COVID-19 had made all health facility services futile at one point of time until India started fighting back real hard. Many children loss their parents in this fight leaving them desolate and helpless for many. Children are too young to understand the gravity of their current situation and hardly ever expressed it logically. For them, when they lose their parents, their lives change all of a sudden with nothing left except the pangs of suffering and uncertainties of their future.

CONCLUSION

The current pandemic has no deadline. No one knows till when it will stretch itself. Although the government of every state in India is working to combat fiercely yet adversity of the people seemsto be no end owing to the disease and the younger population of the country are the most affected ones as the mental health issues like temper tantrums, clinging to parents, hyperactivity, depression, anxiety, frustration etc. that they are facing might have been neglected due to ignorance of the parents as well as with the existing health system concerning for mental health issues in India. Children tend to suppress it by finding pleasure in browsing online which is doing worse than good. Physical issues like obesity, eye problems, Vitamin D deficiency are of great concern due to lack of physical activities and staring at the computer or mobile screens for a long period of time. Counselling of parents as well as the kids needs to be implemented to rule out the problems and manage them at the earliest. Also, facilities of tele-health, providing ration to the underprivileged group of children and steps to minimize the cases of child marriage, child abuse need to be taken by the government which are increasing due to the current scenario. As this article describes in detail about all the concerns of the children, it will be helpful in serving as a literature and evidence for future reference.

ACKNOWLEDGEMENT: Authors would like to express their gratitude to Assam down town University and all the people who have directly or indirectly contributed in this study.

CONFLICT OF INTEREST: The researchers have no conflict of ideas to declare

SOURCE OF FUNDING: None

REFERENCES:

1. Niekerk WV. Physical Activity and COVID-19 [Internet]. United Kingdom: Physiopedia. Available from https://www.physio-pedia.com/Physical_Activity_and_COVID-19.
2. India Population [Internet]. India: Worldometer. Available from <https://www.worldometers.info/world-population/india-population/>.
3. Office of the Registrar General & Census Commissioner, India [Internet]. India: Ministry of Home Affairs, Government of India. Available from https://censusindia.gov.in/census_and_you/area_and_population.aspx#Top.
4. COVID-19 and children [Internet]. UNICEF Data. 2020 March. Available from <https://data.unicef.org/covid-19-and-children/>.
5. Sonia Gupta, Manveen Kaur Jawanda. The impacts of COVID-19 on children. <https://onlinelibrary.wiley.com/doi/full/10.1111/apa.15484>
6. Lancker WV, Parolin Z. COVID-19, School closures, and child poverty: a social crisis in the making. *Lancet Public Health*. 2020; 5; e243- e244. Crossref PubMed Web of Science@Google Scholar
7. Improving the mental and brain health of children and adolescents [Internet]. World Health Organization, Inc.; 2021 WHO. Available from <https://www.who.int/activities/improving-the-mental-and-brain-health-of-children-and-adolescents>.
8. Bahl D, Bassi Shalini, Arora M. The impact of COVID-19 on Children and Adolescents: Early Evidence in

- India. ORF Issue Briefs and Special Reports. 2021 March; 448. Available from <https://www.orfonline.org/research/the-impact-of-covid-19-on-children-and-adolescents-early-evidence-in-india/>. Accessed on
9. Govindan R, Ramu R. Child and Adolescent Mental Health during COVID-19 Pandemic. *Indian Journal of Psychiatric Nursing*. 2020; 17(2); 112- 13. Available from <https://www.ijpn.in/text.asp?2020/17/2/112/308831>.
 10. Ghosh R, Dubey MJ, Chatterjee S, Dubey S. Impact of COVID-19 on children: special focus on the psychosocial aspect. *Minerva Pediatr*. 2020 Jun;72(3):226-35. doi: 10.23736/S0026-4946.20.05887-9. PMID: 32613821. Available from <https://pubmed.ncbi.nlm.nih.gov/32613821/>. Accessed on
 11. Panda PK et.al Psychological and behavioral impact of lockdown and quarantine measures for COVID-19 pandemic on children, adolescents and caregivers: A systematic review and meta-analysis. *J Trop Pediatr*. 2021 Jan 29;67(1). Available from <https://pubmed.ncbi.nlm.nih.gov/33367907/>.
 12. India will be in complete lockdown for 21 days: Narendra Modi [Internet]. *The Economic Times*. 2020 Mar 25. Available from <https://economictimes.indiatimes.com/news/politics-and-nation/india-will-be-under-complete-lockdown-starting-midnight-narendra-modi/articleshow/74796908.cms?from=mdr>.
 13. Shah S, Kaul A, Shah R, Maddipoti S. Impact of Coronavirus Disease 2019 Pandemic and Lockdown on Mental Health Symptoms in Children. *Indian Pediatr*. 2021 Jan 15;58(1):75-76. Epub 2020 Nov 29. PMID: 33257601. Available from <https://pubmed.ncbi.nlm.nih.gov/33257601/>.
 14. Singh S, Roy D, Sinha K, Parveen S, Sharma G, Joshi G. Impact of COVID-19 and lockdown on mental health of children and adolescents: A narrative review with recommendations. *Psychiatry research*. 2020 Aug 24; 293 (113429). Available from <https://doi.org/10.1016/j.psychres.2020.113429>.
 15. Kumar MM, Karpaga PP, Panigrahi SK, Raj U, Pathak VK. Impact of COVID-19 pandemic on adolescent health in India. *J Family Med Prim Care*. 2020; 9 (11): 5484-9. Available from <https://www.jfmprc.com/text.asp?2020/9/11/5484/301767>. DOI: 10.4103/jfmprc.jfmprc_1266_20.
 16. Venkat SL, Ananthakrishnan KR. Psychosocial impact of the COVID-19 lockdown in school-aged children and adolescents in Karaikal – A longitudinal study. *Indian J Soc Psychiatry*. 2021 Aug 10; 37(1): 77-81. Available from <https://www.indjps.org/text.asp?2021/37/1/77/312857>.
 17. Kumar A, Nayar KR, Bhat LD. Debate: COVID-19 and children in India. *Child and adolescent mental health*, 2020 Jun 29; 25(3): 165–66. Available from <https://doi.org/10.1111/camh.12398>.
 18. Patra S, Patro BK. COVID-19 and adolescent mental health in India. *The Lancet Psychiatry*. 2020 Dec 01; 7(12): 10-15. Available from [https://doi.org/10.1016/S2215-0366\(20\)30461-2](https://doi.org/10.1016/S2215-0366(20)30461-2).
 19. Kutiatt VS, Abraham PR, Menon RP, Vaidya PC, Rahi M. Coronavirus disease 2019 in children: Clinical & epidemiological implications. *Indian J Med Res*. 2020; 152(1): 21-40. Available from <https://www.ijmr.org.in/text.asp?2020/152/1/21/290070>.
 20. Policy brief: The Impact of COVID-19 on children [Internet]. The United Nations Sustainable Development Group. 2020 April. Inc.; c 2021 United Nations Sustainable Development Group. Available from <https://unsdg.un.org/resources/policy-brief-impact-covid-19-children>.
 21. Patel NA. Pediatric COVID-19: Systematic review of the literature. *Am J Otolaryngol*. 2020 Jun 6;41(5):102573. Available from <https://doi.org/10.1016/j.amjoto.2020.102573>.
 22. Gupta S, Jawanda MK. The impacts of COVID-19 on children. *Acta Paediatrica*. 2020 Jul 14; 109(11): 2128-83. Available from <https://doi.org/10.1111/apa.15484>.
 23. Behera R, DnieIU, Minz R. Young lives at worksite. *The invisible children*. 19 - 30. Eds. India. MiRC, Aideet-Action. 2014.
 24. Jeesson C Unni. Social effects of covid-19 pandemic on children in India. *Indian Journal of Practical Pediatrics*. 2020;22(2) : 214
 25. Assessment of Issues faced by Adolescent girls and boys during COVID-19 and the lockdown [Internet]. New Delhi: Centre for Catalyzing Change. 2020 Sept. Available from

- [https://www.c3india.org/uploads/news/Youth_survey_\(low_Res\).pdf](https://www.c3india.org/uploads/news/Youth_survey_(low_Res).pdf).
26. Agrawal P. We must intervene now to check the COVID-19 induced Mental Health Pandemic. The Wire. 2020 May 16. Available on <https://science.thewire.in/health/we-must-intervene-now-to-check-the-covid-19-induced-mental-health-pandemic/>.
 27. Child Marriage [Internet]. UNICEF for every child. 2021 June. Available from <https://www.unicef.org/protection/child-marriage>.
 28. Child marriage: the unspoken consequence of COVID-19. Available from <https://blogs.worldbank.org/developmenttalk/child-marriage-unspoken-consequence-covid-19>
 29. WHO Definition and typology of violence. Available at: <https://www.who.int/violenceprevention/approach/definition/en/>. Accessed 1 May 2020.
 30. Violence against children Available at: <https://www.who.int/news-room/factsheets/detail/violence-against-children>. Accessed 1 May 2020.
 31. Prabhadevi Ravichandran, Anuradha Kunal Shah, Prabhu Ravichandran. Shadow pandemic: domestic violence and child abuse during the covid-19 lockdown in India. International Journal of Research in Medical Sciences | August 2020 | Vol 8 | Issue 8 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7945968/>
 32. Rosenthal CM, Thompson LA. Child Abuse Awareness Month During the Coronavirus Disease
 33. National Family Health Survey (NFHS-4) 2015-16 INDIA. 2017.
 34. National Commission for Women. Available at: <http://ncw.nic.in/>. Accessed 3 April 2020.
 35. Newsroom | childline India Foundation Available at: <https://www.childlineindia.org/a/newsroom/2020>. Accessed 1 May 2020.
 36. Jain O, Gupta M, Satam S, Panda S. Has the COVID-19 pandemic affected the susceptibility to cyberbullying in India? Computers in Human Behavior Reports. 2020 Sep 28. Available from <https://doi.org/10.1016/j.chbr.2020.100029>.
 37. Khaitan S. How COVID has put children at risk of abuse, labour, marriage [Internet]. India: Indiaspread. 2021 June 14. Available from <https://www.indiaspend.com/child-rights/how-covid-has-put-children-at-risk-of-abuse-labour-marriage-755065>.
 38. Malnutrition [Internet]. UNICEF Data. 2021 April Available from <https://data.unicef.org/topic/nutrition/malnutrition/>.
 39. Sinha D. Hunger and food security in the times of COVID-19. Journal of Social and Economic Development. 2021 Feb. Available from <http://dx.doi.org/10.1007/s40847-020-00124-y>.