

12 JUNE 2020

## RECOMMENDATIONS ON PROTECTING CHILDREN FROM THE IMPACT OF COVID-19: MEASURES TO REOPEN SCHOOLS AND PREVENT CHILD LABOUR AND ABUSE

Amnesty International India, in collaboration with the Institute of Social Education and Forum for Child Friendly Schools submit the following suggestions to the Government of India, in particular, the Ministry of Human Resource Development, Ministry of Women and Child Development, Ministry of Health and Family Welfare and Ministry of Home Affairs to protect the rights of children amid the COVID-19 pandemic.

The suggestions focus on ameliorating the increased susceptibility of children to human rights violations during the pandemic that has led to loss of livelihood and other economic crisis, thus leaving millions of children more vulnerable than ever.

India is party to the Convention on Rights of Children (CRC), and the International Covenant on Economic, Social and Cultural Rights (ICESCR). It is also a state party to the Optional Protocol to CRC on Sale of Children, Child Prostitution and Child Pornography and Optional Protocol to CRC on involvement of Children in Armed Conflict. India being a signatory to the Convention of the Rights of the Child, should keep the best of interest of the child at the core of any policies that are framed for the children in response to the COVID-19 pandemic.

The recommendations draw on the ongoing work of Amnesty International India, Institute of Social Education and Forum for Child Friendly Schools, which involves interactions with local and international non-governmental organizations, school-going children and their families, lawyers, governmental officials and individuals. The recommendations listed here are based on such interactions and the constitutional guarantees and standards set by various legal mechanisms at the national and international level. The concerns listed here are not exhaustive.

### CONCERNS:

**Children of migrant workers** - According to the Census 2011, more than 42.7 million children in India are already out of school.<sup>1</sup> Loss of livelihood and poverty from COVID-19 and the lockdown measures is likely to put young children of migrant workers - many of whom depend on the remittances from their migrant parents - at further risk of dropping out of school. This may force many children into the labour market to supplement the family income or barely survive. The Census 2011 already puts the number of working

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<sup>1</sup> International Labour Organisation, Child Labour in India, [https://www.ilo.org/wcmsp5/groups/public/asia/ro-bangkok/sro-new\\_delhi/documents/publication/wcms\\_557089.pdf](https://www.ilo.org/wcmsp5/groups/public/asia/ro-bangkok/sro-new_delhi/documents/publication/wcms_557089.pdf)



children between the age of 5-11 at 10.1 million.<sup>2</sup> The various policies and relief funds of the government in response to the COVID-19 pandemic do not heed to the protection of the children who have either migrated or whose parents have migrated in search of work.

**Child Abuse and Exploitation** - COVID-19 has led to an increasing number of children being subjected to abuse and exploitation both within and outside their homes. The Government-run helpline, CHILDLINE India reported 92,000 distress calls on child abuse and violence in the first 11 days of the nation-wide lockdown.<sup>3</sup> Loss of livelihood and economic hardships is likely to push more children out of schools and force them into child labour, further exposing them to sexual and physical abuse. According to the International Labour Organisation (ILO), children and more specifically girls are more likely to be burdened with household responsibilities.<sup>4</sup> School closures may aggravate this exploitation as is evident from the Ebola crisis in West Africa that witnessed spikes in child labour, neglect, sexual abuse and teenage pregnancies.<sup>5</sup> The current crisis may lead to increased incidents of child abuse, child marriage and child trafficking, leaving children who do not have access to safe reporting mechanisms - helpless. Incidences of child marriage during the lockdown have already been reported in certain states.<sup>6</sup>

**Adequate nutrition and health care:** The lockdown in India stopped many essential childcare services, thus denying children basic entitlements such as nutrition and immunization service and putting them at risk of contracting COVID-19. The hindered access to daily mid-day meals as exposed during the lockdown, coupled with rising hunger and poverty, will further decline children's access to nutrition and have an adverse effect on their growth. India's current standing in relation to hunger is dismal, ranking 102 out of 117 countries on the Global Hunger Index.<sup>7</sup> According to UNICEF, lockdown measures may aggravate the vulnerability of children to COVID-19 and/or other diseases as well as hamper their development and learning.<sup>8</sup> Children living in various kinds of government institutions such as shelter homes, observation homes, etc, slums, informal settlements and inadequate housing are at greater risk of contracting COVID-19.

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2 International Labour Organisation, Child Labour in India, [https://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/---sro-new\\_delhi/documents/publication/wcms\\_557089.pdf](https://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/---sro-new_delhi/documents/publication/wcms_557089.pdf)

3 The Hindu, Govt. helpline receives 92,000 calls on child abuse and violence in 11 days, 8 April 2020, <https://www.thehindu.com/news/national/coronavirus-lockdown-govt-helpline-receives-92000-calls-on-child-abuse-and-violence-in-11-days/article31287468.ece>

4 International Labour Organisation, COVID-19 impact on child labour and forced labour: The response of the IPEC+ Flagship Programme, 20 May 2020. [https://www.ilo.org/global/about-the-ilo/how-the-ilo-works/flagships/ipec-plus/WCMS\\_745287/lang--en/index.htm](https://www.ilo.org/global/about-the-ilo/how-the-ilo-works/flagships/ipec-plus/WCMS_745287/lang--en/index.htm)

5 UNICEF, COVID-19: Children at heightened risk of abuse, neglect, exploitation and violence amidst intensifying containment measures, 20 March 2020. <https://www.unicef.org/press-releases/covid-19-children-heightened-risk-abuse-neglect-exploitation-and-violence-amidst>

6 Tanu Kulkari, Rise in child marriage, physical abuse complaints during lockdown, The Hindu, 21 April 2020, <https://www.thehindu.com/news/national/karnataka/rise-in-child-marriage-physical-abuse-complaints-during-lockdown/article31400116.ece>

7 Global Hunger Index, 2019 <https://www.globalhungerindex.org/results.html>

8 UNICEF, Supporting Children's Nutrition During COVID-19, April 2020 <https://www.unicef.org/media/68521/file/Supporting-children%E2%80%99s-nutrition-during-COVID-19-2020.pdf>



**Mental health:** Mental health is key to the development of children. Early closure of schools and the uncertainty around its reopening can have an adverse impact on the mental health of children who may already be under stress due to the pandemic. The uncertainty around examinations in schools has also exacerbated the anxieties of children. According to a brief survey conducted by the Indian Psychiatry Society, mental health issues have risen by 20% affecting almost 1 in 5 Indians post the lockdown.<sup>9</sup> The Ministry of Health and Family Welfare has acknowledged that the outbreak of COVID-19 has adverse effects on the mental health of children as they grapple anxiety, nervousness and stress.<sup>10</sup> Moreover, as parents lose their jobs and with increased cases of domestic violence, children may find themselves in tense environments at home affecting their mental and emotional well-being.

**Access to Education:** When various states ordered schools to shut down, they allowed private institutions to proceed with online learning. While children from more privileged backgrounds had access to some form of learning during this period, children from rural areas, the urban poor and especially those who come from marginalised backgrounds, did not have access to online connectivity or electronic gadgets, leading to a learning gap. As physical distancing norms push us to accept and adapt to online classes, we must acknowledge that this leads to discriminatory access to education and can further widen the disparities in the quality of education that already exists. If not addressed, it can push many children out of schools, impact educational outcomes and may even cause extreme distress to children, as seen in the case of a Dalit girl in Kerala who committed suicide. In April 2020, the Committee on Economic, Social and Cultural Rights (CESCR) underlined the risks online learning carries of ‘deepening educational inequalities between rich and poor learners due to unequal access to affordable Internet services and equipment such as computers, smartphones and tablets’.<sup>11</sup> The Committee then urged the states to make available affordable internet services to all students, particularly those in poorer communities. The Committee on the Rights of the Child has urged states to make available alternative solutions for children who have limited access to the internet.<sup>12</sup> The CESCR further highlighted the burden women and girls may face due to the existing gender stereotypes in the society.<sup>13</sup> This was also acknowledged by UNESCO’s Assistant Director-General for Education who pointed out that the pandemic globally will “disproportionately affect access to education for girls, entrenching the gender-gap in education further”.<sup>14</sup>

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9 Moneycontrol, Mental illness cases rise in India after COVID-19 outbreak: Study, 14 April 2020 <https://www.moneycontrol.com/news/trends/health-trends/coronavirus-pandemic-mental-illness-cases-rise-in-india-after-covid-19-outbreak-study-5097231.html>

10 Ministry of Health and Family Welfare, Taking care of Mental Health of Children during COVID-19, <https://www.mohfw.gov.in/pdf/mentalhealthchildrean.pdf>

11 Committee on Economic, Social and Cultural Right, Statement on the coronavirus disease (COVID-19) pandemic and economic, social and cultural rights, 6 April 2020, <https://undocs.org/E/C.12/2020/1>

12 Committee on the Rights of the Child, Statement on COVID19, 8 April 2020, <https://www.ohchr.org/en/hrbodies/crc/pages/crcindex.aspx>

13 Committee on Economic, Social and Cultural Right, Statement on the coronavirus disease (COVID-19) pandemic and economic, social and cultural rights, 6 April 2020, <https://undocs.org/E/C.12/2020/1>

14 Indian Express, Over 154 crore students hit by schools, colleges closure, girls worst hit, says UNSECO, 22 April 2020, <https://indianexpress.com/article/education/coronavirus-over-154-crore-students-hit-by-schools-colleges-closure-girls-worst-hit-says-unseco-6374078/>



**Culture of Discrimination and Stigma:** Physical distancing norms and practices, if not understood from a purely health perspective, can in long run lead to discriminatory practices. In countries like India where caste-based discrimination is commonplace, this may further reinforce practices of discrimination and untouchability. Moreover, children who are infected with the virus, children of COVID-19 patients and children of frontline workers may be subjected to various forms of stigma. Amnesty International India has found that in the absence of any protective gear, many Accredited Social Health Activist (ASHA) workers are not only struggling to protect their family including children from the virus but also facing immense ostracisation from the community.<sup>15</sup> Most of the grassroots frontline workers and their families are not provided any government-sponsored health insurance for COVID-19-related illnesses. With their parents working in unsafe conditions and society viewing these workers as the one spreading the virus instead of curbing it, school closure leaves most of the children in situations of distress.

**Disproportionate Impact on Dalits, Muslims and Adivasis** - While children as a group are at higher risk during the pandemic, historic injustices of poverty, caste discrimination and cultural beliefs exacerbate the vulnerability of the children of marginalised communities such as Dalits, Muslims and Adivasis. Academics and scholars have estimated that most of the migrant workers, for instance, are Dalits and Adivasis who left their home to escape the inequalities, atrocities and violence.<sup>16</sup> In a detailed survey carried out by Madhya Pradesh government on the returning migrant workers, it found that over 60% belonged to the scheduled castes or scheduled tribes. Amnesty International India, through its 'Our Safety, Our Rights' campaign has found that children perceive good education to be a lifeline – a stepping stone to escape the cyclical perils they witness every day.<sup>17</sup> With school closures, inaccessible online education and rising economic hardships, children of such communities stand to bear a larger brunt of the adverse consequences, further pushing them back.

**Online Safety:** As classrooms shift online and children are regularly engaged with online tools and resources, including gaming and websites used for entertainment and leisure, online abuse is emerging as a potential risk. According to the India Child Protection Fund, a non-governmental organisation, there was drastic increase in child pornography searches in March.<sup>18</sup> The national lockdown was announced on 24 March 2020. This raises concerns over children's safety online and engenders measures to ensure that they do not fall prey to online abuse. State and private educational institutions have

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15 Amnesty International India, ASHA Workers Fighting COVID-19 At the Frontline: ASHA Workers Left Without Hope, 21 May 2020, <https://amnesty.org.in/the-women-warriors-fighting-covid-19-at-the-frontline-asha-workers-left-without-hope/>

Jeemon Jacob, 'I'm going': Kerala girl commits suicide after missing online class, 2 June 2020, <https://www.indiatoday.in/india/story/kerala-girl-commits-suicide-for-missing-online-class-1684595-2020-06-02>

16 Suraj Yengde, What makes injustice to migrant workers more acute is the fact that many of them are Dalits, 5 April 2020, <https://indianexpress.com/article/opinion/columns/dalitality-the-caste-factor-in-social-distancing-coronavirus-6347623/>

17 Milind Ghatwai, Madhya Pradesh: Of 7.3 lakh back to MP, 60% from SC/ST groups, 24% worked in construction, Indian Express, 9 June 2020, <https://indianexpress.com/article/india/madhya-pradesh-of-7-3-lakh-back-to-mp-60-from-sc-st-groups-24-worked-in-construction-6449448/>

18 Ambika Pandit, ICPF report warns of sharp rise in demand for online child pornography during lockdown, 14 April 2020, <https://timesofindia.indiatimes.com/india/icpf-report-warns-of-sharp-rise-in-demand-for-online-child-pornography-during-lockdown/articleshow/75127399.cms>



not yet conducted an effective analysis on the impact of online education on children's safety as well as its mental and behavioral impact that may arise in terms of lack of social skills, addiction to surfing etc.

## Recommendations

### General:

- A detailed child protection policy, guidelines and action plan must be designed to protect children from various forms of vulnerabilities emerging from the COVID-19 pandemic. This should be effectively implemented in coordination with various bodies, volunteers and civil society organisations.
- A standard and clear policy on learning and education during the pandemic must be prepared keeping in mind the best interests of all children and must be followed uniformly and without discrimination across government, aided and private schools/systems.
- The psychological and welfare needs of the children belonging to marginalised communities such as Dalits, Adivasis and Muslims must not be an afterthought.
- The Village Child Protection Committee Program under the Integrated Child Protection Scheme must be effectively implemented in partnership with school teachers and civil society organisations. This committee should ensure access to services, monitor and prevent violations like child abuse, child marriage, child trafficking and child labour and create awareness on the rights of children. Special attention must be paid to the children of marginalised communities such as Dalits, Adivasis and Muslims and migrant workers.
- Special child care protection must be provided to the children of migrant workers and all frontline workers including sanitation workers, ASHA workers and other essential workers.
- A monitoring system and periodic audits must be put in place to track the welfare of children in child care institutions and juvenile homes. Children in these institutions must have access to regular health screening and counselling services.
- The National and State Commission for the Protection of Child Rights along with gram panchayats must be empowered to monitor the implementation of the services and guidelines.
- Civil society organisations through their community service network must be empowered to monitor and report incidents of child rights violations and aid the government in effective functioning of Village Level Child Protection Committees.

## **Reopening of Schools:**

### **Prioritize Children's Physical and Mental Health:**

1. Ensure schools are only opened in the areas where the virus is fully contained.
2. Ensure adequate health awareness on the prevention measures is mandatorily provided to teachers, parents and children.
3. Ensure children's mental health is given priority, with mandatory training on mental health and proper access to professional counselling services.
4. Ensure schools are reopened keeping in mind the gap in education due to the lockdown, without pressure of academic performance and preferably with reduction of the school curriculum

### **Provide Safe School Environment and Safe Access to Schools:**

1. Ensure 'hotspot' areas are mapped along with the risk involved in transportation from such areas to schools.
2. Ensure schools are regularly sanitized and cleaned in line with the guidance of the World Health Organisation.<sup>19</sup>
3. Ensure proper water and handwashing facilities and regular cleaning of toilets in line with the guidance of the World Health Organisation.
4. Ensure physical distancing measures are implemented and there is a distance of at least 1 metre between the desks of children.
5. Ensure adequate provision of protective gear such as masks, sanitizers and soap to all children without discrimination.
6. Ensure adequate provision of nutritious meals and natural immunity boosters to all children without discrimination.
7. Ensure regular health screening of children and teachers to check for symptoms of COVID-19.
8. Ensure safe and separate transport facilities for children.

## **Track Out-of-School Children**

1. Track out-of-school children to ensure they are safe from abuse, trafficking, forced labour and exploitation.
2. Ensure children of migrant families are enrolled in schools.
3. Ensure school attendance is not made mandatory.

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<sup>19</sup> World Health Organisation, Water, sanitation, hygiene, and waste management for the COVID-19 virus, Interim guidance, 23 April 2020

### **Online Education:**

- Ensure universal and equitable access to internet to every child in the country
- Online learning must not be instituted in schools unless every child has access to online service facilities
- Conduct complete evaluation of the impact of online learning on students and their safety before instituting in schools.

### **Examinations and Assessments**

- Exams and assessments must not be made mandatory for all children.
- The 2019 amendment made to the No-Detention Policy of the Right To Education Act must be repealed.

### **Nutrition and Health Care:**

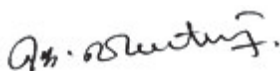
Basic child care services related to immunization, nutrition and the mid-day meal system must be restored. Given the current situation, innovative safe approaches must be explored to ensure that every child receives proper access to vitamin supplements and adequate nutritious food packages during and after the COVID-19 pandemic. Nutritious food packages based on the special needs of the children may be included along with the ration. Children of migrant workers who returned to their native homes must be included even if their names do not appear in the school enrollment list.

Adequate care and health care services must be provided to children with mental and physical disabilities and children with terminal illnesses. Children who are infected with COVID-19 and children of COVID-19 infected patients and deceased must be given adequate health care along with psycho-social counselling.



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