Article

Mitigating COVID: Impact of COVID-19 Lockdown and School Closure on Children's Well-Being

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Abstract: As governments around the globe rushed to contain the spread of the deadly COVID-19 pandemic, the imposed lockdowns led to the closure of several sectors of economy and educational institutions including schools. People were advised to stay at home and maintain social and physical distancing. The destructive socio-economic effects of the pandemic were felt worldwide. Amid these traumatic times, several studies explored the impacts of lockdown on the well-being of the general population. However, very few investigated the devastating effect of COVID lockdown on children, and even fewer talked about the lived experiences of this vulnerable group of our society. This study reports on what the children went through during lockdown by focusing on the research and data available about the impact of COVID-19 lockdown on children. The study analyses children's experiences of this lockdown in light of the United Nations Convention on the rights of the child. The findings reveal that as a result of the mitigating measures implemented to control the spread of COVID-19, many children's rights are being neglected. The lockdowns and school closures have disproportionately affected children's well-being and have heightened huge disparities that exist between the advantaged and the disadvantaged. There is a need to understand how children are being impacted by the ongoing restrictions and to safeguard rights of all children. The study's findings are to be considered while devising policy around children who are unable to make their voices heard by those whose decisions impact their well-being.

Keywords: lockdown; children; school closure; mental well-being; physical well-being; resources; children and violence; children and food

1. Introduction

In December 2019, the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), a novel coronavirus, emerged in China. COVID-19, the disease caused by the new virus rapidly spread throughout the world and was declared a pandemic by the World Health Organisation (WHO) on 11 March. To curb the spread of COVID-19, lockdowns were implemented around the world. In addition to many sectors of economy, schools were closed, and learning was abruptly moved online.

The measures implemented to control the spread of this unprecedented virus have demanded sacrifices from our global society. While the economy and face-to-face education came to sudden halt, healthcare workers and related professionals had to place themselves at risk to protect the rest (Jolie and Azoulay 2020).

The pandemic affected everyone around the world and will continue to have effects for many more years. The problems of family income, access to healthcare, housing and schooling are especially prominent in developing countries marked by huge income inequalities and where people living in poverty do not possess disposable funds to fulfil basic needs. Support systems in these countries are already stressed by hunger, malnutrition and disease. "Poverty can fuel contagion, but contagion can also create or deepen impoverishment" (Organisation for Economic Co-operation and Development (OECD 2020, p. 5)).

When it comes to the medical impacts of the pandemic, "children aged between 1–18 years have much lower rates of hospitalisation, severe disease requiring intensive

hospital care, and death than all other age groups" (European Centre for Disease Prevention and Control (ECDC 2021, p. 1)); (Harvard Health Publishing 2021). Although not medically in the risk group for severe disease, children have been deeply impacted by the pandemic (OECD 2020). The strategies to control the spread of COVID-19 have completely changed children's daily lives and put a whole generation of children in danger. Financial and social challenges resulting from the spread of and the control of this spread will significantly impact "on children's right to survive, learn and be protected" (Edwards 2020, p. 14). Ashing (2020, p. 12) points out that "the most deprived and marginalized children are being hit the hardest by the pandemic, exacerbating existing inequalities and pushing the most vulnerable children even further behind."

Lockdowns and social distancing measures have elevated the health crisis to an economic crisis. Countries are experiencing economic recession and millions of households have lost income. This impact is greater for poor families struggling to make ends meet. While some families are facing poverty, others are sliding into deeper poverty. The burden on social services has reduced access to healthcare and nutritious food, putting children's well-being at risk. About 90 per cent, or 1.6 billion children have been affected by school closures. Lockdown across the globe has impacted children's right to learn and develop. Children from marginalised communities are unable to make use of distance learning initiatives because they lack the resources needed for the implementation of these initiatives. School closures increase the risks of violence at home, child labour and child marriages, meaning that some children may never return to school when they reopen (Edwards 2020, pp. 15–16).

The OECD (2020, p. 3) affirms that children's day-to-day lives are being transformed through the spread of COVID-19. It has aggravated the risk of poor nutrition, maltreatment and exposure to violence. Lockdown and school closures have directly affected children's education, care arrangements, leisure activities organised by schools and other organisations. It is important to recognise that some groups of children will be hit by the pandemic's impact harder than others. These children include "children living in poverty, children with disabilities, children in out-home care, children in detention, and also refugee children and children at risk of child labour. Furthermore, the pandemic has the potential to create new vulnerable children and countries must prepare to respond to growing needs for support" (OECD 2020, p. 3).

Poverty, unemployment and the associated mental health problems intensify domestic violence. Under social and economic pressures, parents or caretakers are unable to meet children's physical and social needs, undermining their growth and development. The confinement measures mean that the vulnerable will not be able to receive critical, outside help when they need it most (Bartlett and Vivrette 2020, p. 1).

While discussing the unique challenges brought about by the severe acute respiratory coronavirus 2 (SARS-CoV-2), Snape and Viner (2020) draw attention to the fact that children and adolescents are at much lower risk from symptomatic COVID-19 than other age groups, which is uncommon for a respiratory viral infection. Closing of schools appears to be a rational decision in reference to other respiratory virus outbreaks where children would play a major role in transmission. For COVID-19, however, "emerging evidence suggest that this is most likely not the case. A minority of children experience a postinfectious inflammatory syndrome, the pathology and long-term outcomes of which are poorly understood" (Snape and Viner 2020, p. 1).

Steinman et al. (2020, p. 1) note that studies from North America, China, Italy and Spain reveal that children are far less likely to need hospitalisation than adults. The children that did exhibit severe symptoms had pre-existing medical conditions or comorbidities.

Similarly, it is indicated in the OECD report (2020) that the probability of children becoming infected with COVID-19 and presenting severe symptoms is much lower than adults. They may exhibit flu-like or gastrointestinal symptoms. Very few have respiratory problems and require intensive care (OECD 2020, p. 4). The reason behind children showing milder symptoms might be that children's natural immune response is much

more effective than adults (ECDC 2020, p. 5). At the same time, Van Bruwaene et al. (2020, p. 1) contend that "although severe disease is possible, it is rare and mortality is negligible when compared with other childhood diseases in Africa."

Yet, this virus, especially in the form of lockdown and school closures, has unduly affected children in innumerable ways, influencing physical, mental and social facets of their lives.

2. Methodology

The objective of the study is to determine the impact of lockdown and school closures on children. The study aimed to achieve this objective by reviewing the existing literature and by analysing data about the experience of children from South Africa. For this purpose, a systematic review of literature has been conducted and data comprising children's views of the pandemic-induced lockdown have been analysed.

The EBSCOhost database was used to look for peer-reviewed, academic articles published from 2020–2021 on the topic of the impact of COVID-19 lockdown and school closure on children. Out of the 48 studies found, studies reporting on the impact of COVID-19 on teachers, women, adults and the workplace were not included. In addition, impact on the higher education sector was also excluded.

Only a limited number of academic articles that were relevant to the topic were identified. As a result, manual search for appropriate and reliable material was also performed. The studies selected included both qualitative and quantitative studies. The United Nations Convention on the Rights of the Child was also examined to understand if children's rights are being neglected during the lockdown period and the resultant school closures.

To understand how children viewed lockdown, the study analyses lived experiences of children from South Africa. These experiences were derived from an article by highly acclaimed child's rights activists, Robyn Wolfson Vorster and Talia-Jade Magnes. This article was published on 8 June 2020 in a prominent daily online newspaper, Daily Maverick and reported on stories of 22 children aged 1 month to 17 years (Wolfson and Magnes 2020). The data were used with permission from the authors and is available in public space.

The two authors collected data from children from different provinces of South Africa. Initially, they reached about 800–1000 children. However, for their article, they narrowed down the sample to 100 participants. The children were of different races, social classes and ages. Some of these children were living in Early Childhood Development and Youth Care Centres while others were staying with their families. Data were collected with the assistance of parents, key social workers and Child Protection Organisations. The children were interviewed, and in the case of very young children, interviews were conducted with their caregivers.

The data for the study are qualitative and were examined with an inductive and deductive approach. After becoming familiar with the data, they were coded and categorised. Thereafter, themes emanating from the codes were generated. Next, the themes and codes were reviewed with the help of a colleague (Nowell et al. 2017).

The United Nations Convention on the Rights of the Child

In 1989, an international legal framework, the United Nations Convention on the Rights of the Child, was adopted by world leaders. This treaty, which has been ratified by 196 countries worldwide, is about the acknowledgement of the human rights of children The treaty recognises children as individuals under 18 years of age (United Nations International Children's Emergency Fund (UNICEF 2021a)). Some of the convention articles taken from UNICEF (2021b) have been presented and used to analyse research findings in Section 6.1. The analysis will determine whether children's rights espoused in these articles are being upheld or neglected during the lockdowns and school closures.

Below is a summary of the findings of the literature review on how lockdown and school closures impacted the physical, mental and educational well-being of children.

3. Findings

3.1. Impact on Physical Well-Being

Save the Children conducted a global survey in 46 countries about the impact of the COVID-19 pandemic on children and their parents or caregivers. The survey explored how the pandemic was affecting finances, safety and access to healthcare and education. A total of 13,477 children between 11–17 years participated in the study (Edwards 2020, pp. 5–6). Eighty-nine per cent of respondents reported that their access to healthcare and medicine had been affected by the pandemic. This figure was even higher for children with disabilities or those with chronic health conditions. Sixty-two per cent of respondents found it difficult to provide their families with nutritious food because of the high cost of food. A report by the OECD (2020) describes similar findings.

3.2. Vaccine Disruptions

Lockdowns to control the spread of coronavirus have disrupted immunisation programmes around the world (Snape and Viner 2020). This disruption has put around 80 million children under the age of one at risk of contracting diseases such as measles. "Data from the WHO, UNICEF and Gavi, the Vaccine Alliance, showed routine immunization services against diseases including polio and diphtheria had been affected in at least 68 countries" (Whiting 2020, p. 1).

In addition to the vaccine disruptions, "the COVID-19 pandemic and associated public health restrictions have disrupted routine health services, including tuberculosis (TB) services, in many countries" (National Institute for Communicable Diseases (NICD 2020, p. 2)). In South Africa, Level 5 lockdown resulted in an estimated 308,000 fewer TB tests from April to July 2020.

3.3. Poor Nutrition

A United Nations report (2020) presents the picture of children suffering prior to the pandemic. "A child under age 15 dies every five seconds; where one in every five children is malnourished (stunted); over half (53%) of 10-year-old children in low- and middle-income countries (as high as four in five children in poor countries) cannot read and understand simple stories; and one child in four under the age of 5 does not have their birth registered" (United Nations (UN 2020, p. 5)). With the ongoing COVID-19 crisis and the struggling economies, these numbers will keep increasing. In countries facing conflict, child recruitment, sexual exploitation and abduction are a real danger.

Good nutrition is crucial for a strong immune system (Hendriks and Olivier 2020). A lack of nutritious food and illness can cause wasting, which decreases children's immunity and may be life-threatening or result in long-term developmental delays. School closures around the globe have meant that 370 million children did not receive free school meals. For many children, those meals were the only sustenance they received each day (Whiting 2020, p. 1).

On the other hand, Steinman et al. (2020, p. 6) point out that social distancing and reduced activity could lead to lowered immunity and obesity among children.

3.4. Violence

"Violence against children was already at pandemic proportions before the outbreak of COVID-19; globally, 1 billion children aged between 2–17 years old experienced physical, sexual or emotional violence or neglect each year" (Edwards 2020, p. 9). Violence against children, especially women and girls, tends to increase during a crisis because poverty and anxiety increase, and families resort to negative coping methods. Stressed parents and caregivers can become aggressive and abusive towards children. Closure of schools and restricted access to social services mean the children cannot escape the violent spaces they find themselves in. Family poverty may also result in child labour and child marriage. One-third of the respondents of Save the Children survey reported physical or emotional

violence during the pandemic. The violence was twice the normal rate during school closures (Edwards 2020, pp. 6–16).

When schools close, children lose the safety net that can notice and report child abuse. Other negative health impacts of these closures include "mental health disorders, sexually transmitted infections, unwanted pregnancies, and substance abuse" (ECDC 2020, p. 4).

A school is a place for far more than just learning. "For millions of children and youth, schools are a lifeline of opportunity as well as a shield. Classrooms offer protection—or at least a reprieve—from violence, exploitation and other difficult circumstances" (Jolie and Azoulay 2020, p. 1).

3.5. Impact on Mental Well-Being

Sound mental health in childhood is important to good mental health as adult. The anxiety surrounding COVID-19 has significantly affected children's mental health. Stress about the outbreak, quarantine measures, school closures, social distancing and anxiety about school exams are affecting children profoundly (OECD 2020, p. 15).

In their study about the impact of COVID-19 and lockdown on the mental health of children and adolescents, Singh et al. (2020, pp. 8–9) found out that school closures have adverse educational, psychological and developmental effects on children. Stress, clinginess, disturbed sleep, poor appetite and inattentiveness can also be observed among young children.

Panda et al. (2020, p. 10) report on the psychological and behavioural impact of lockdown and quarantine on children, adolescents and caregivers and found out that "stress, sadness, boredom, depressive symptoms, sleep disturbance and fear for the situation are the predominant behavioral/emotional problems" in children.

Jansen (2020) conducted a study with 620 primary and high school children aged six to nineteen years old. These children were from privileged as well as underprivileged schools. They were asked to describe their experience of learning under lockdown. It was found that all these children experienced emotional distress during the lockdown. They were feeling lonely after being separated from their friends and teachers. Some of them were away from their parents because their parents were essential workers. They also missed seeing their grandparents who were isolated because of their vulnerability. The children's stress increased further with the passing of loved ones.

A survey conducted by the University of Oxford (2020, p. 1) about children's mental health during the pandemic reported that parents/caregivers of children aged between 4 and 10 saw an increase in their children's emotional problems over a month period in lockdown. These problems included feelings of unhappiness, being clingy, worry and symptoms related to worry. It was also reported that the children's behaviour worsened over time with an increase in outbursts, arguments and disobedience. The children exhibited agitation and had difficulty concentrating during the reporting period.

Children are not used to being confined in their houses. They are naturally playful and active social beings. They enjoy being with their friends and lockdown has put a stop to this pastime. They are unable to play with their friends or visit their relatives. At the same time, it is difficult for parents or caregivers of children to balance working from home while taking care of children and home-schooling them. This situation is stressful for the parents as well as their children (Nisa 2020; Akpan et al. 2020). Bartlett and Vivrette (2020, p. 2) agree that emotional and behavioural challenges are likely to arise during the pandemic as children try to adjust to changes in their everyday routines. These challenges will include feelings of clinginess, anxiety, anger and sadness.

As reported by Snape and Viner (2020, p. 3), many countries are observing that the mental health of youths is being negatively affected by school closures and lockdowns, leading to an increase in suicide.

Like adults, children are also prone to feeling anxiety and panic in time of uncertainty and insecurity, although they might be able to conceal it better than adults, contributing to the assumption that children are resilient and will not be greatly affected by the ongoing

crisis. Mphahlele (2020) argues that this attitude can hinder any attempts to assist the children process what they are experiencing.

Extended lockdown will increase the existing pressures and disparities and will give rise to a number of challenges when schools reopen. The routine of going to school and focusing on their studies has been broken for many children and might result in them dropping out of their schools (OECD 2020, p. 17).

3.6. Special Needs Children

Sancho et al. (2021) explored the well-being of children with special needs during the COVID-19 lockdown and found that children with special needs felt more nervous, angry and sad than usual. These children also exhibited greater unhealthy habits, for example, overeating and overusing technological devices. They scored lower for general well-being than children without special needs.

Shah et al. (2021) evaluated the problems faced by children with Attention-deficit/ hyperactivity disorder (ADHD) and their families during lockdown. They found that ADHD symptoms either worsened or persisted during lockdown in the form of increased activity level, irritability and disruptive behaviour.

Panchal et al. (2021) found that COVID-19-related lockdown gave rise to psychological distress among children and adolescents, especially those with existing mental health difficulties.

3.7. Exposure to Digital Technologies

School closures and lockdowns have resulted in more exposure to digital environments for children. Children are relying on digital technologies for their education, socialisation and entertainment. While digital platforms present an important opportunity for children to learn, they are associated with real risks. Through these environments, children might be exposed to harmful and illegal content. Disinforming, violent and pornographic material can cause significant damage to their well-being.

In addition, their own online behaviour can make them susceptible to exploitation and cyberbullying. These risks are more pronounced for girls than boys. Girls may feel more anxiety about their body image when comparing themselves to others and experience cyberbullying.

Extended hours spent on screens may lead to poor sleeping and eating patterns, furthering the mental and health risks for children (OECD 2020, pp. 20–21).

"Digital technology can affect weight, mood, thoughts of suicide and self-harm" (Royal College of Psychiatrists 2020, p. 10). Children with mental health problems may be more vulnerable to the harmful impact of digital environment.

Araújo et al. (2020, p. 6) found that with the decrease in physical and outdoor activity, the use of electronic devices increases impacting sleep patterns and child development.

Faize and Husain (2021, p. 7) found that electronics and social media create fear and anxiety. Restricted socialisation increases stress levels in adults and children. Distance learning puts additional pressure on parents and caregivers. In under-resourced countries, learning activities dependent on the Internet and computers have resulted in a closure of all teaching and learning. School closures have meant malnutrition for many children, while an increase in obesity for others.

According to Marie Dahl, Head of Save the Children's Mental Health and Psychosocial Support Unit, "While children are resilient, we cannot underestimate the impact the pandemic is having on their mental wellbeing and overall health. Children in a stable environment are likely to fare better, but many children are not so fortunate. Those who are living in poverty, who are experiencing violence at home, or are otherwise vulnerable can really be pushed over the edge by long lasting lockdowns—in the worst cases if left unaddressed this could escalate to depression and other mental health concerns. The mental health impacts of COVID-19 could be seen far beyond the life of the pandemic" (Save the Children 2020, p. 1).

3.8. Impact on Education

According to United Nations Educational, Scientific and Cultural Organization (UNESCO 2020), children in 165 countries have been affected by school closures. Shifting education to distance and online learning was the key response to these closures. Families and caregivers have become responsible for children's instruction in conjunction with virtual assistance. However, remote-learning opportunities are not equitably available to all children. Not all households have the facilities and financial resources to carry out online learning and teaching, and not all parents possess the skills and knowledge or even the will to assume the role of a teacher. It is also not possible to teach all curricula remotely (Jolie and Azoulay 2020; Bangani 2020).

Research cited in ECDC (2020, p. 4) confirms that children living in difficult situations have experienced challenges with distance learning. These challenges include digital deficiency and the inability of parents to help children in their learning. The nature of the home environment is vital to the success of remote learning. In addition, poor families struggle with issues of quality nutrition, housing, sanitation, and space for studying. Children with disabilities face more problems with online learning because they require individualised education and personal care which the schools may not be able to provide virtually, leading to added pressure for parents to deal with (OECD 2020; Otai 2020).

Digitisation is meant to minimise the loss of education following school closures. Digital tools can be valuable for children, parents, caregivers and schools to continue learning and teaching. However, children in impoverished surroundings are not likely to have access to digital resources. The disadvantages that children living in poverty face affect their outcome in life. COVID-19 is expected to further limit their opportunities and widen existing disparities between children. If not addressed, the education gap between advantaged and disadvantaged children will widen even more in the long-term (OECD 2020).

A survey was conducted by the United Nations Educational, Scientific and Cultural Organization (UNESCO), the United Nations Children's Fund (UNICEF) and the World Bank in 149 countries to capture government officials' understanding of their responses to COVID-19. Remote learning among low-income countries was not found to be very effective or an adequate alternative to official school days. While lockdown has been lifted in numerous countries, "hundreds of millions of students still face extended school closures. This uncertainty poses serious problems given the persistent inequalities associated with distance learning, which particularly affect vulnerable populations. The risk of dropout increases, children experience decreased quality of learning, and negative social and economic impacts are high" (UNESCO et al. 2020, p. 42).

Henderson et al. (2020) conducted a survey with a nationally representative population sample of 2155 American parents. They were asked about the learning experiences of their 3762 children in kindergarten to Grade 12. While parents of most children are generally content with the teaching and engagement for the children, parents of 60% of the children report that their children were not learning as much as they would have been learning prior to the lockdown. "Satisfaction levels are highest—and reports of learning loss least common–for students attending school in person. The hybrid model appears to offer no advantage over fully remote instruction" (Henderson et al. (2020, p. 1)).

A similar survey conducted in China by Dong et al. (2020, p. 2) revealed that parents had negative views about the value of online learning and favoured traditional methods of learning for young children. The reasons for their dislike of online learning included deficiencies of online learning, problems with self-regulation by the children and the parents' own lack of sufficient time and knowledge to assist their children.

The results of a Save the Children survey indicate that more than eight in ten children believed that they were hardly learning anything. This number was even greater for children from impoverished households and girls. Fewer than one per cent of children living in poverty had access to the Internet for remote learning, while 60 per cent of national learning programmes required online access. Forty per cent of the children reported that

they needed assistance with their learning, but they did not have any help available. More than half of the parents and caregivers reported that their children had not been contacted by the teachers during the school closures (Edwards 2020, p. 7).

Jansen's (2020) survey of South African children also revealed that they found it hard to study in isolation and required the structured space of a classroom. The more they battled, the more their work accumulated, increasing their anxiety about being left behind. For underprivileged children, the stress was much higher because of overcrowded environments and constant disruptions. These findings are confirmed by Spaull and Van der Berg (2020, p. 7).

With new waves of this virus likely to occur in the future, schools will be pressured to close; Snape and Viner (2020, p. 3) advise apprehension when deciding to close schools "the role of children in transmission of SARS-CoV-2 remains unclear; however, existing evidence points to educational settings playing only a limited role in transmission when mitigation measures are in place, in marked contrast to other respiratory viruses. Pandemic mitigation measures that affect children's wellbeing should only happen if evidence exists that they help because there is plenty of evidence that they do harm." (ECDC 2020, p. 17).

Spaull and Van der Berg (2020) hold a similar view that school closures are not in the best interests of children. In reference to the information about the impact of COVID-19 on children, the ongoing disruption to children's education and welfare is no longer justifiable.

3.9. South African Context

3.9.1. Unemployment

Consumption expenditure data reveals that despite 25 years of democracy, South Africa remains one of the most unequal countries in the world. In fact, inequality has increased since the end of apartheid in 1994. High unemployment continues to be a major challenge for the country as it struggles to create sufficient jobs. On the other hand, a skilled workforce is difficult to find due to the lack of resources, underdeveloped transport, crime and the poor state of the government-run educational system (World Bank 2018). Manning (2021) identifies several factors contributing to hunger and food insecurity in South Africa. These include poverty, an increasing population, climate change and deforestation.

A study of 3469 South Africans revealed that around three million people lost their jobs in 2020, adding to the increasing unemployment rate of the country. Forty-six per cent of adults agreed that they often had to go hungry during the COVID-19 pandemic because they did not have sufficient money for food (Ispos 2021).

3.9.2. School Education

In relation to lockdowns, the spread of COVID-19 affected South Africa the same as most of the world. Schools were closed for all learners on 18 March 2020. Shepherd and Mohohlwane (2021, p. 2) report that about "650,000 to 750,000 children aged 7 to 17 years old were not attending school by May 2021. This represents an increase in the number of absent learners of approximately 400,000–500,000 when compared to 'normal' times, and a decline in the attendance rate amongst this age group from 98% to 93.4–94.2%." Children not returning to school is attributed to parent anxiety over sending their children to school, household location and poverty. It is estimated that between March 2020 and June 2021, primary school children lost 70 per cent of to one whole year of learning. In addition, household and child hunger is reported to be double the pre-pandemic levels.

"Realistically, for the poorest 80% of learners in South Africa, virtually no curricular learning is taking place during lockdown. Apart from the fact that parents and caregivers are not trained or equipped to teach their children . . . at most, 5–10% of learners can continue learning at home given their access to computers and the internet" (Spaull and Van der Berg 2020, p. 7).

Learners from poor areas attend public schools where education is free. However, these schools have dilapidated infrastructure, a lack of resources, overcrowding, few qualified teachers and high dropout rates. Extreme levels of inequality in the South African

society means that children from disadvantaged backgrounds will be the most affected by the disruptions to schooling and food security. The disparities of resources and quality of education existing between private and public schools affect the success or failure of children. This impact is especially pronounced for children with disabilities or underlying health conditions. Lack of access to therapy and support will have long-term effects on these children (Bangani 2020).

3.9.3. Violence and Children

A comprehensive study was conducted in 2016 to determine the annual occurrence and lifetime prevalence of sexual abuse and maltreatment of children in South Africa. "The study results revealed that of the young people interviewed in schools, 35.4%—one in every three young people—had experienced some form of sexual abuse at some point in their lives" and "42.2% of respondents had experienced some form of maltreatment" including sexual, physical or emotional ill-treatment. In addition, 82 per cent of participants reported experiencing criminal victimisation or violence" (Optimus Study South Africa 2016, p. 11).

The reasons cited behind the high risk of sexual victimisation include children living with neither or only one biological parent, parents being away due to hospitalisation or illness, substance abuse of parents, disability of children and congested sleeping spaces. Victims of sexual abuse experienced mental health problems that affected their schoolwork and school attendance.

The COVID-19 lockdown further exacerbated the violence experienced by children and disrupted services that could prevent abuse or support the victims. Childline South Africa reported an increase of more than 36.8 per cent in the calls received for help during August 2020 as compared to August 2019 (UNICEF 2020).

3.9.4. Child Abandonment

Approximately 3500 babies are abandoned in South Africa every year. The reasons for deserting children include poverty, lack of family support, fear of judgement and unwanted pregnancies (Law for All 2021). Children's organisations working in the country observed an increase in abandonment of new-born babies as well as older children during the pandemic (Monama 2020).

4. Findings of Qualitative Analysis

It is important to note that this data was collected in 2020. However, South Africa is currently under level 4 lockdown and a National State of Disaster due to the third wave of COVID-19. Schools in South Africa were opened towards the second half of 2020. However, the children attending public schools attended on alternating days to allow for social distancing (Govender 2021).

The findings of the thematic analysis of the qualitative data based on 22 children's experiences have been presented in Tables 1–3 below. "P" in the data stands for participant.

Findings of Process Analysis

An analysis of the different processes in the text reveals that the children are associated with mostly mental or behavioural processes. They are feeling the negative impacts of the COVID-19 lockdown. They are not participants of any active or material processes causing any significant change to any recipient:

- "I long to be at school."
- "I do not like lockdown."
- "I miss all the things we do in school."
- "That night, I cried and cried."

Instead of being the initiators of actions that would affect others, they themselves are the victims of others' actions.

- "He hit me and threw me out the house."
- "We are not allowed to share toys anymore.

- "My therapy was stopped because of lockdown and I have been battling with own feelings."
- "My mama lied on my clinic card . . . she put me in a hole next to the highway in Johannesburg."
- "Lockdown is making me sad. It's taking too long."

Table 1. Mental Impact of COVID-19 Lockdown and School Closure.

Theme	Explanation	Evidence/Extracts
Impact of COVID-19 Lockdown on Menatl Well-being of Children	Children missed their school, their friends, the sports they played, their learning, the school meals, their families.	"I am sad because I miss my friends, my teacher and my school" (P9). "I want to go to creche because I miss my teachers and my friends. I miss all the things we do in school. I also miss going to my granny and my grampa and going to my family and my cousins" (P13).
	It was harder for children with illnesses.	"I am healthy, but I am also HIV+. My mom has been so worried about me catching the virus. I have not been allowed to see any friends or family, or even go to the shops. I really like being around people, so I have found this very hard" (P22).
	They were uncertain about what the future held, whether this would go on forever, would the year be wasted, would they ever make up for the lost time.	"I did not know it was going to be a lifetime" (P1). "This virus is making me miss many opportunities. What is upsetting me is that no one knows if we will have to repeat the same class next year. However, I know that the time we have wasted will never be regained" (P16). "Children must go to school so they can learn and represent us well. We want to see ourselves graduating one day. I am a learner, but the schools are closed, so I have lost some knowledge because I am not getting taught by a teacher, but by myself" (P21).
	They felt trapped, stuck in situations they wanted out of. Many of them had adoption processes delayed, therapies stopped, court procedures halted.	"They still do not have the form because the government was not issuing them during lockdown. So now I have to stay here at the Children's Home. All I want is a family, but I do not know when I will be able to go home to them" (P10). "Because of lockdown, I cannot be admitted to a place that can care for my needs right now. I am trapped, they do not want me here, and things are just getting worse and worse" (P6). "My therapy was stopped because of lockdown and I have been battling with my own feelings" (P8). "My mother's boyfriend was arrested, but they let him out on bail. Because of the lockdown, the case will only go to court in August. The man who raped me is not in jail" (P14).
	They were sad, feeling isolated, angry, acting out, bored, afraid.	"Lockdown has been so hard for me. I feel isolated and alone, more than ever. I am feeling really bad, I am angry all the time and it's making me want to hurt myself and the people around me. I have been acting out, and now the home wants to move me again" (P6). "It's very boring at home and I miss school" (P7). "When I feel stressed, I chew my fingers. Sometimes they bleed. Some days I feel very angry that my life is not the same anymore" (P11)
	They would like their opinions to be heard.	"However, I want to talk to him, I do not think he knows how hard it is for us . . . I told my mom that I wanted to talk to the president and ask him if he knew what lockdown was doing to kids" (P11).

Table 2. *Physical* Impact *of COVID-19 Lockdown* and School Closure.

		Explanation	Evidence/Extracts
Impact of COVID-19 Lockdown on Physical Well-being of Children		They talked about their parents not having jobs, having no food to eat about being abandoned because of poverty.	"I am often left alone for a whole day without any food or anyone to care for me". "Then, finally, the social workers did come this week, but they only spoke to my mom from the gate. My mom told them everything was fine, so they went away. Everything is not fine" (P5). "My mama had no money for food . . . My mama asked a nice lady in the queue out-side the Spar to take care of me while she went shopping. The nice lady waited and waited, but my mama did not come back" (P2).
		They talked about the violence they experienced at the hands of parents.	"My father is a very big man. He can be very scary at times, and sometimes he is very abusive towards my mother, my brothers, and I. At the start of lockdown, my father had a fight with my mother. He got very angry and hit her. I tried to protect my mother, and my father and I ended up fighting. He hit me and threw me out the house" (P19). "I do not remember being hurt, but I have scars on my back. My mama said they would keep me safe from evil" (a very young child participant).

Table 3. Impact of COVID-19 Lockdown and School Closure on Education.

Theme		Explanation	Evidence/Extracts
Impact of COVID-19 Lockdown on Education of Children		The children found it hard to study at home and are worried about falling behind in their studies.	"I am struggling with my schoolwork" (P8). "I cannot go to school. I am left behind with my studies" (P16). "However, I do not like lockdown because I do not like learning at home" (P18).
		For these children, school is not only a place to study. It is their sanctuary.	"I miss my friends, my teacher and my school. I miss the park where I used to play with my friends. I miss my teacher's food at school" (P9). "I miss school and especially my teachers and friends. Sometimes I feel sad and cannot make myself feel better. I used to suck my thumb when I was a little kid. I did not for a long time, but now I've started sucking my thumb again" (P18).
		In addition, children voiced the difficulty of living in small spaces that they shared with many others.	"There are many people living in my house, and it is very small. It is hard to be in the house all day. Our school is not giving us anything to do during this time . . . I long to be at school, especially learning maths" (P20).
		Even where the children have resources or those who like doing their schoolwork seemed to be at a loss. They were struggling with their schoolwork. They would prefer to be at school.	"I do not like lockdown. I love my schoolwork, but I do not like learning at home. I miss my friends and my teacher" (P11).

5. Limitations

The study is based on review of the literature about the impact of COVID-19 lockdown on children. To date there is a limited number of studies available on this topic. In addition, the data used for the qualitative analysis has been sourced from another author. The reason for this limitation is that obtaining ethics clearance for the collection of data from children is a complex and time-consuming process.

6. Discussion

As shown in Figure 1, findings of the research indicate that the lockdown measures including the closure of schools implemented to control the spread of coronavirus have resulted in food insecurity for millions of families.
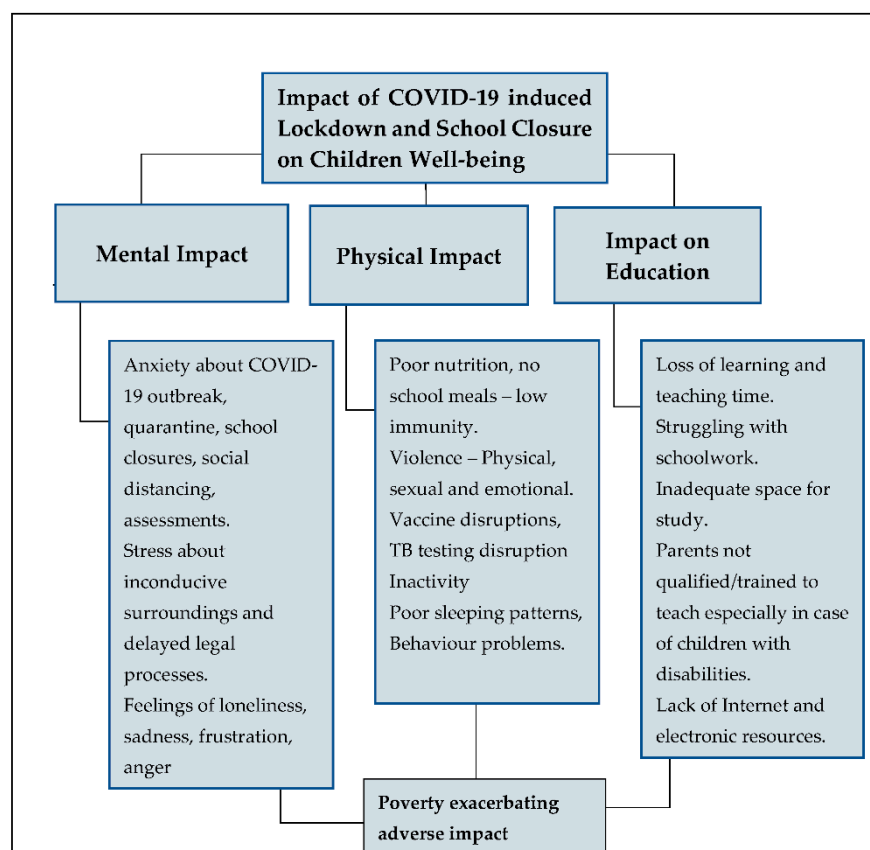

Figure 1. The Impact of COVID-19 Lockdown and School Closures on Children's Well-Being.

Parents or caregivers of children have lost their jobs and are unable to provide for their families. Poor nutrition will impact the immunity of children and adults against harmful diseases, including COVID-19. Closure of schools has meant that a majority of children from disadvantaged background will not have recourse to school meals.

The unprecedented lockdowns and loss of income have tended to increase the stress levels in households. Children are already a vulnerable group of society with little control over their living conditions. The lockdowns mean that the defenceless children will not have an outlet from any violence they might be experiencing at their homes. While assisting their families with domestic and outside jobs, many of these children will not ever return to their schools. Child marriages and pregnancies are a real risk to the well-being of the powerless children.

Vaccine disruption implies that a large number of children are at risk of contracting life-threatening diseases.

The ongoing crisis has increased anxiety among children. Many are facing emotional and behavioural challenges. The continuous use of digital devices is harming their mental and physical health. They have lost stability of their daily routines that they had prior to the pandemic, adding to their unease.

Loss of learning during the lockdowns has not only impacted the children's present, but it also carries significant repercussions for their future. This loss has been inequitably borne by children from underprivileged backgrounds. With millions of households struggling to make ends meet, the technology-driven online learning has meant that impoverished children will have no alternative to study. Even the children from well-resourced

homes are finding it hard to study without the structure of a school classroom and the reassuring presence of a qualified teacher.

The responses of the children from the qualitative analysis confirm the above findings, as shown in Tables 1–3. The lockdowns and school closures have impacted the children's mental and physical well-being. In addition, the closing of schools has jeopardised their learning and, in turn, their future.

In many homes, the parents are not working, and the children are facing a shortage of food and resources. As described in the section about the South African context, South Africa has a high unemployment rate. This situation was worsened by the pandemic lockdowns, with about three million people losing their jobs. This aspect has also been highlighted by Snape and Viner (2020) and ECDC (2020).

The data reveal that many children are facing violence and rejection by their parents and caregivers, as suggested by Bartlett and Vivrette (2020). As stated earlier, many children in South Africa experience violence, maltreatment or sexual abuse in their lives. Many of them live in overcrowded spaces or child-headed households, making them susceptible to violence and abuse.

As a result of pandemic-related poverty, some parents have simply abandoned their children. As mentioned earlier, child abandonment is a challenge that South Africa grapples with due to poverty and unwanted pregnancies.

School closures have taken away vulnerable children's coping mechanisms—friends, teachers and play—as indicated by Jolie and Azoulay (2020). They fear not only getting infected themselves, but also infecting others. They also miss being away from their grandparents and other family members.

Children are also facing delayed court procedures, for example, adoptions and prosecution of criminals. The children in childcare facilities desire to be in a home with loving parents.

Children, especially in higher grades, are battling with schoolwork. They are feeling sad, bored and demotivated, as mentioned by Nisa (2020).

As stated in Spaull and Van der Berg (2020), for the poor majority in South Africa, hardly any learning is taking place. Access to computers and the Internet is inadequate.

However, children from both rich and poor demographics are anxious about what the future will be like and whether they will be able to pass their exams. Lockdown is especially challenging for children with special needs because they find it even more difficult to cope when confined indoors, as mentioned by the OECD (2020).

Children with underlying conditions are at a greater risk of severe COVID-19. That is why parents are being extra cautious with their social distancing. For adults aged 15–49 years, an estimated 19.5% of the population is HIV positive (Statistics South Africa 2021). In 2019, 340,000 children between 0 and 14 years of age were living with HIV in South Africa (World Bank 2021). The isolation of the lockdown is difficult for these children.

It is clear from the data that children are perturbed by the continuing lockdowns and school closures and want to have their old lives back. They want to inform the government about their plight and want to know when this will be all over, as confirmed by Edwards (2020).

6.1. Children's Rights at Risk

The findings of the qualitative analysis and the literature review reveal that due to the mitigating measures of lockdown and school closures, children's basic human rights are being overlooked. The list below details the specific rights that are at risk. These rights have been specified in the Convention on the Rights of the child.

Not all children benefit from the level of care and resources that privileged children have. This has been especially evident during the pandemic when these disparities have been highlighted and will affect the underprivileged children for years to come. The impoverished are bearing the brunt of lockdown and school closures and they do not have an alternative.

According to Article 2, "States Parties shall respect and ensure the rights set forth in the present Convention to each child within their jurisdiction without discrimination of any kind, irrespective of the child's or his or her parent's or legal guardian's race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status" (UNICEF 2021b).

According to Article 28, "States Parties shall promote and encourage international cooperation in matters relating to education, in particular with a view to contributing to the elimination of ignorance and illiteracy throughout the world and facilitating access to scientific and technical knowledge and modern teaching methods. In this regard, particular account shall be taken of the needs of developing countries" (UNICEF 2021b).

The Convention on the Rights of the child allows all children to have access to advanced teaching methods and scientific and technical knowledge. However, within communities, huge discrepancies exist. Not all children are enjoying these rights. The pandemic has further increased these incongruities, which will likely intensify the vicious circle of unemployment and poverty.

Children do not have a say in the matters affecting them directly. Decisions affecting them are being made either by the governments or their caregivers.

According to Article 12, "States Parties shall assure to the child who is capable of forming his or her own views, the right to express those views freely in all matters affecting the child" (UNICEF 2021b).

According to Article 13, "The child shall have the right to freedom of expression; this right shall include freedom to seek, receive and impart information and ideas of all kinds, regardless of frontiers, either orally, in writing or in print, in the form of art, or through any other media of the child's choice" (UNICEF 2021b).

The children are bearing the consequences of the pandemic-related lockdown and school closure. It is their right to receive correct information about the situation and to be involved in the decision-making process. They are entitled to express their views about how they are being impacted by the lockdown.

Children are experiencing mental and physical harm.

According to Article 19, "States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child" (UNICEF 2021b).

The findings of this study verify that children are experiencing mental and physical harm during the lockdown. Many children experienced emotional and/or physical abuse prior to the pandemic, especially by their parents and caregivers. The situation has worsened as a result of enforced confinement. World Health Organization (2020a) identifies certain risk factors that increase the likelihood of children being maltreated. These include children having special needs or being unwanted or failing to fulfil parents' expectations. Abused children are at a greater risk of behavioural, physical and mental health problems.

Regular access to schools and childcare services are critical for protecting the well-being of vulnerable children.

Not all children are enjoying the same health facilities. Their immunisation against dangerous diseases is being compromised.

According to Article 24, "States parties recognize the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. States parties shall strive to ensure that no child is deprived of his or her right of access to such health care services" (UNICEF 2021b).

The disruption in immunisation against life-threatening diseases can be more dangerous to children's health than COVID-19. A World Health Organization (2020b) survey completed by 155 countries in May 2020 reports severe disruption of prevention and treatment services for noncommunicable diseases.

Special care needs of disabled children have also been affected where the parents find it hard to deal with the responsibility of caring for them without any outside support. Lack of training and resources is amplifying the plight of these children.

According to Article 23, "Recognizing the special needs of a disabled child, assistance shall be provided free of charge, whenever possible, taking into account the financial resources of the parents or others caring for the child, and shall be designed to ensure that the disabled child has effective access to and receives education, training, health care services, rehabilitation services, preparation for employment and recreation opportunities in a manner conducive to the child's achieving the fullest possible social integration and individual development, including his or her cultural and spiritual development" (UNICEF 2021b).

Children are unable to participate in cultural and leisure activities (Article 31).

According to Article 31, "States parties shall respect and promote the right of the child to participate fully in cultural and artistic life and shall encourage the provision of appropriate and equal opportunities for cultural, artistic, recreational and leisure activity" (UNICEF 2021b).

The Convention on the Rights of the child allows for all children to not only have access to contemporary resources of learning and teaching, but it also advocates for the provision of recreational activities. These activities have been ignored due to lockdown and need to be restored to promote children's well-being.

The above discussion reveals that the mitigating measures to curtail the COVID-19 spread of lockdown and school closures have aggravated the non-observance of children's rights. These rights are vital for children's growth and development. In the absence of these rights, it will be difficult for these children to attain their full potential as responsible human beings. It is imperative for the policy makers and implementers to ensure that children's rights are protected universally regardless of their origin, race, sex, language or status.

7. Conclusions

In conclusion, the mitigation measures undertaken to stop the spread of COVID-19 have impacted children's education, social interaction, food security and mental wellness (Harvard Health Publishing 2021). While children fare better with the medical impact of COVID-19, they are disproportionately affected by the measures implemented to mitigate its spread (African Child Policy Forum and Plan International Report 2020). The health, educational and social costs being borne by children under lockdown outweigh the benefits of lockdown and school closures (ECDC 2021). Hunger and malnutrition are likely to have been exacerbated by the lockdown because informal workers lost jobs and children could not access school meals. The disruption in immunisation, testing and treatment of life-threatening diseases will have long-term impacts on the health of children (Spaull and Van der Berg 2020). With the school closures, learning and teaching have shifted online. This move has worsened the existing inequalities between the advantaged and disadvantaged and has threatened the future of the children. Many schools, teachers and parents simply do not have the resources or training to manage remote learning. For children facing abuse at their places of residence, lockdowns have meant the absence of safety networks. Restricted access to free school meals has seen many vulnerable children go hungry. In other words, the closing of schools has robbed children of their right to physical, mental and social well-being and development. Lockdowns and school closures impacting the rights of children are neither sustainable nor justified.

In view of these harms to children's well-being, it is important for policy makers to establish the impact of their decisions, especially on the defenceless members of our communities. While making decisions that impact children, policy makers and governments need to consult them. This is all children's right. According to UNICEF (2021c), "children's views go unheard on the many important issues that affect them now or will affect them in the future. Children are neither the property of their parents nor are they helpless objects

of charity. They are human beings and are the subject of their own rights." Their views need to be heard and considered when deciding on important issues that affect them.

In addition, we should consider the COVID-19 crisis as an opportunity to focus on the inequities existing in our health, social justice and education systems and make the world a better place for all. These challenges should be addressed at national and global levels to save our children. We need to reach out to the communities and caregivers in need of financial, nutritional, medical, or educational assistance. Children are the future of our societies, we must work together to safeguard their well-being, we must listen to them.

Data Availability Statement: The qualitative data of the study is available in the public domain and can be found at https://www.dailymaverick.co.za/article/2020-06-08-how-the-covid-19-crisis-has-affected-sas-children.

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