



Nurturing the many growing children in our midst:

Have you thought about the COVID-19 pandemic's impact on the present and the future of children currently in their early childhood?

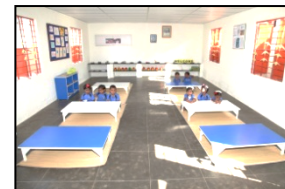
I promise that I will continue my educational journey with enthusiasm.

I pledge to you and to myself that I will not stop to learn throughout my life...!

This was part of a pledge that 52 children echoed loud and clear as they graduated on 21st April 2021 from Shanti Ashram's 30-year-old Bala Shanti Programme, an Early

Childhood Development (ECD) intervention. Their voice was moving, the content soul stirring! The children and their teachers were dressed for this graduation ceremony - a milestone - that marked their successful completion of the 2-year ECD programme and their entry into formal education. Most countries, including India, start formal education at Grade One, the first year of primary school.

It might at first glance look amusing - after all it is a graduation ceremony for a child! But when one takes a deeper look, one recognizes the gravity of the milestone: In addition to being the first public moment for the children, the graduation is also an occasion for us to publicly gauge if our investments in the well-being of children have been adequate in the most crucial phase of their growth and development. We create a platform to conduct a sensitive viewing of our social sector investments, whether it is in nutrition, cognitive stimulation, preventive health interventions or just a safe and nurturing environment for a child to grow and thrive in. It is a recognition that the wellbeing of 'a child' is not just the responsibility of the parents alone but is in fact the collective responsibility of the entire society. Everybody has a role in ensuring this obligation.



This was the 29th Convocation of our Bala Shanti Programme, and this particular milestone was also observed 400 days into the COVID-19 pandemic. Alongside these wonderful 52 children from 9 different villages of rural South India, many other children around the world might have looked forward to such a celebration, a family celebration. But the pandemic has made these celebrations impossible. Many critical programmes like the early childhood interventions have been pushed into the back burner directly or indirectly as a consequence of the pandemic. We must retrieve and reposition these interventions as part of our COVID-19 response.

The mention of a 'child' or 'childhood' immediately evokes images, emotions and experiences, most of them positive and hopeful. In the last eight decades, experts - from the field of Paediatrics to Child Development, Theology to Psychology, Arts to Archived experiences - have studied this important phase of the life cycle more deeply. While the United Nations describes anyone between the age of 0-18 as a child, these fields and their systematic research provide enough evidence to further sub classify these stages as the first 1000 days, early childhood, middle childhood and then adolescence. It is only then that adulthood sets in. This scientific evidence from various fields is worthy of our deeper reading, reflection and understanding. I believe that in doing so, we give ourselves real chances to augment our efforts in child development, both through policy & practice, and its vital intersection praxis. In difficult times, such as the current COVID-19 pandemic, it will also help us see why declaring early childhood services as an essential service is critical!

My aim in this short reflection is to revisit the earliest stage of childhood, to observe the wonders of a ‘developing brain’ and the first 1,000 days of life as defined by the World Health Organization (WHO). I also hope to present the acute disruption this pandemic has caused to the lives of our children, robbing them of their early childhood experience and support, potentially scarring them for their entire life. I do so with the hope that a deeper understanding of this phase will add voice to the global call to declare ECD (early childhood development) services an essential service. This informed reflection is a contribution to that united effort to make ‘CHILDREN’ a priority during this COVID-19 pandemic and beyond.

Every child deserves a hopeful and healthy start to life! Of this I am convinced!

Why so much consideration to this phase of life called ‘childhood’?

The critical or sensitive periods of brain development susceptible to specific nutritional deficiencies are increasingly well documented, making prevention of long-term deficits with well-timed nutritional interventions during the foetal period and first years of life a true possibility. Interventions based on the knowledge of these critical windows have the potential to exert a profound global impact, as correction of nutritional deficits alone has been estimated to have the capacity to increase the world’s intelligence quotient by 10 pointsⁱ.

It is in this backdrop that I want to revisit WHO’s rationale in making the **first 1,000 days of a child’s life** a priority. These crucial 1000 days roughly span the time between conception and the child’s second birthday – it is a unique period of opportunity when the foundations of optimum health, growth, and neurodevelopment across the lifespan are establishedⁱⁱ. This period, when extended to age 5 or 6, is defined as early childhood. Yet, too frequently in developing countries, poverty and its attendant condition, malnutrition, weaken this foundation, leading to earlier mortality and significant morbidities such as poor health, and more insidiously, substantial loss of neurodevelopmental potentialⁱⁱⁱ. The toxic stress of deprivation, particularly poverty, affects disproportionate numbers of children in India and globally.

The COVID-19 pandemic has shown us that a major impact of this public health crisis is the dropping of a further 150 million people into poverty. The World Bank, while presenting this estimate, reminded us that this number includes children and adults in equal numbers. Yes, 50% affected are children below 18 whose brains, bodies, and lives are being shaped today. With the pandemic persisting and worsening in some parts of the world, in particular India, this number will only worsen. Can we stop with good analysis? NO. We have to do something, we have to begin somewhere.

At least 200 million children living in developing countries fail to meet their developmental potential. Along with undernutrition, concomitant influences of infectious disease, environmental hazards, and societal & household violence contribute to this loss of potential. Unlike many other influences that are immutable or tremendously difficult to change, some elements of early childhood care can be influenced and even controlled. We are seeing this even now during the



pandemic where partial restoration of nutritional interventions has happened under the ICDS programme in India. In a difficult moment like now, can we realign the way we work keeping the needs of children central to our cooperation and provide them uninterrupted access to early childhood development solutions? For if we do so, the developing brain of a growing child might be supported, and the assault to the multi-dimensional growth and development process minimized.

The story of the Developing Brain and its 100 billion neurons:

I read an insightful book during this pandemic titled ‘Disciplinary Dialogues on Social Change’. One of its chapters discusses **the Developing Brain**^{iv}. It details the scientific understanding of a developing brain and brings forth the wonder of this process, the impact it has on a child, on children throughout their life. Below is an excerpt from it:

“The Human brain is the most effective living structure on earth and it contributes to all aspects of our lives. Even then, most of us are unaware as to how this part of our body grows and works. The ‘Functional Magnetic Resonance Imaging’

ICPH – Shanti Ashram / May 2021 / Dr. Kezevino Aram

Nurturing the many growing children in our midst: [What are the implications of this COVID-19 pandemic in their present and their future?](#)

Page | 2

(fMRI) and Position Emission Tomography (PET) techniques have, lately, enabled neuroscientists to measure activity in the brain and map its growth. The process of brain development begins in the third week of gestation and continues into early adulthood. The formation neural tube initiates the formation of the brain and spinal cord. The brain cells called neurons and their supporting cells are produced in the neural tube, and from there they migrate to form major parts of the brain, growing at an astounding rate of 250,000 cells per minute.

Synaptic Connections: The formation of functional circuits starts in the third trimester and continues after birth. Human brain at birth has about 100 billion neurons that have not yet been connected to functional networks. Coordinated neural activity changes the shape of the brain and creates patterns that enable the child to do complex activities and impacts quality of learning in later life. Over production of neurons ensures that the young brain will be able to cope and meet demands of the body within a particular environment in which child is born, and this is referred to as tuning of network. Also, there is a programmed cell death, and this pruning makes space for new connections.

Describing the influence of stimulation on the process of wiring and sculpting of the brain, Hebb as early as in 1949 said, “neurons that fire together, wire together”. The long-lasting synaptic connections are dependent on frequency of the stimulation received by neurons (Hebb 1949). Stimulating activities move genetic pathways in the brain which produces protein that strengthens the synapses. Scientists have confirmed that both biological and psycho-social environment, known as epigenetics, directly affect expression of genes that control development of brain and nervous system.”

This amazing process of a developing brain happens in early childhood, where the innate nature of a child is combined with the nurture society can collectively provide in the life of a child and in the progress of children. The dividends of this process have the combined potential to be transferred to the next generation.

A child living in the days of COVID-19:

For children under the age of two, this pandemic has been a very excruciating experience. They have been under the siege of this virus invisible to the naked eye for nearly 400 days now. Their everyday encounters have changed, their routines modified, their play areas shrunken, their interactions with educators and child development professionals almost nil and most of all, their opportunities to interact with their friends reduced to a happy memory. This is only an indication of the complex experience children are undergoing at the moment. WHO’s definition of health has never been as important and relevant as it is now, right in the middle of the pandemic, and provides for us a template to audit the health and wellbeing of children. Every dimension of this definition of health has been affected for our children during this ongoing pandemic.



Health is a state of mental, physical, social and spiritual wellbeing - WHO

Have you thought about the COVID-19 pandemic’s impact on children’s present and their future?

India recently crossed the 20 million total infections number^v and as we speak, the country is setting a daily global record on case numbers. Between 1st March and 4th April, nearly 80,000 children in the five worst-affected states – Maharashtra, Chhattisgarh, Karnataka, Uttar Pradesh and Delhi – tested positive, of which nearly 13,000 (c. 16%) were under the age of 5^{vi}. Lockdown measures are being introduced to curtail the spread of the virus, but every time the idea of a ‘lockdown’ is proposed, especially now as India experiences its second spike, my mind shudders. As a child health practitioner and a leader, I see the ECD agenda sliding down as a priority as more competing needs for creating additional medical infrastructure, protecting the economy, jobs and earnings arise. As grave as the aforementioned challenges are, what is real and unfortunate in this second spike is that ‘CHILDREN’ are also affected. They are testing positive, so are entire families, with some being admitted to hospitals. This, however, is the only visible and tangible impact we are accounting

for. The intangible, the immediate and the long-term consequence of the COVID-19 pandemic, including the toxic stress of disease, deprivation and poverty, are yet to be measured fully and responded to with the same urgency.

Even in the midst of such a crisis, I do not want to give up the opportunity to present this case, the case for our children's wellbeing. We have to be cognizant of the silent pandemic that is affecting our children and we must speak up for them.

Let me illustrate this massive disruption with two telling examples:

The first lockdown that was imposed in India at the stroke of the midnight hour on 25th March 2020 surely delayed transmission of the virus. It was an extraordinary decision in an unprecedented moment in history. Many attribute this step as one of the main factors that contributed to successful management of the first wave in a country as populous as India. But there were a few collateral damages: The sudden lockdown did not give us time to look at the whole childcare and child development agenda and prepare adequately. All early childhood services, including the world's largest government run Integrated Child Development Services (ICDS) came to an abrupt halt. 158 million children were dependent on this critical government programme for the nutritional supplements, cognitive stimulation, immunization, growth monitoring and early detection of diseases it provided. Almost all of these 158 million children came from families living in poverty and were spread across every state, district, and neighbourhood in India. The ICDS program and its systematic response had in many ways become a meaningful way to partner with families in childcare, to respond to the structural factors that contribute to the perpetuation of child poverty and to create a social safety net that was both local and universal at the same time. The ICDS programme was launched on 2nd October 1974 to mark the birth anniversary of Mahatma Gandhi. His wise words ring in my ears, *"If you want real peace in the world you have to begin with children"*. 158 million children are dependent for their survival rights and their needs on the government and on us, the citizens of this wonderful nation India, to stand up for them, for their present and their future. This abrupt closure in March 2020 and the potential lockdowns this year mean that we have to prepare better for our children and keep the child development agenda going.

The other example is the maturing, the pro-equity approach in public education spending and its indirect link to health and wellbeing. There are key reasons why the odds are stacked against the poorest children getting their 'fair share' of public education spending. Firstly, they are less likely to ever have access to school, and when they do, they generally drop out sooner, directly missing out on education resources. Secondly, the poorest children are more represented in lower levels of education where the provision of services costs the least (lower public spending per capita). Children from the poorest households also tend to live in remote and rural areas that are generally underserved. Deliberate efforts to make public education spending more equitable benefits education systems as a whole. Our analysis shows that there is a strong association between equity of resource allocation and achievement when it comes to basic education. Children who are at a disadvantage at very early stages in the learning cycle face increasing challenges as they move through grades. The data here highlights that in both pre-primary and primary education, countries with higher levels of equity in resource allocation performed better than those with lower levels. In the midst of the pandemic, there is suddenly another common challenge: online learning. In the absence of the physical, social and spiritual components of learning, learning itself has become a challenge for our children^{vii}.

The schools in India also serve as an animated health promoting infrastructure and many of our vaccination programmes, screening programmes (like RBSK), health promoting programmes, and micro-nutrient supplementation programmes (like giving of Vitamin A, Folic Acid, Zinc and Iron) have all been disrupted due to school closures. Ensuring the provision of 500 calories and high protein supplements are also not fully functional yet. In combination, all of these components provide the social safety net as well as the nurture that the developing brain and growing child needs. For millions of our children, this phase of early childhood development is at the crossroads. Their growth and development can be interrupted. This is not just a possibility; this is a reality that confronts OUR children.



Let us stand up and call upon our governments to not forget the agenda of child development in the midst of this once in a century pandemic. Let us advance the dialogue to declare early childhood development service as an essential service. The existing body of scientific evidence on the ‘developing brain’ and the growing child already supports the case for such interventions; this pandemic and its unfolding impact only strengthen the call further.

But the pandemic has also reminded us so deeply about our personal obligations. This culture of ours, this ancient culture of ours, speaks to us on this. Childhood has a critical importance from the religious perspective as well. This is when children are introduced to their families’ religious beliefs and practices, and immense care and love is given to nurture their spirituality. In the Hindu tradition, there are 16 samskaras or rites of passage to create a lasting impression on the minds of children. Out of these 16 samskaras, two are performed during the mother’s pregnancy and eight are performed during early childhood. The purpose is to create a positive impact on the child, and to remind adults to acknowledge that the life of a child is something precious to take care of^{viii}.

Let us - as citizens, as responsible adults - do our bit too, for we can each choose to serve our children, to look out for the children in our neighbourhood alongside the child in our family. This is the time to stand in solidarity, to do our bit so that every child, EVERY CHILD, is reminded that they are not left behind, they belong to a community that dares to care. For we are ‘mindful of the growing child in our midst’^{ix} and mindful that their present and their future is ours to shape.



Dr. Kezevino Aram

President, Shanti Ashram and ICPH (International Center for Child and Public Health)



Shanti Ashram & the International Center for Child and Public Health (ICPH) have taken active steps to respond to, develop and implement comprehensive interventions for vulnerable children in the midst of the pandemic. Over the last year, we prioritized and worked consistently to ensure the wellbeing and development of children living in extreme poverty, children raised by single mothers, children raised by elders and children living with HIV. An innovative hybrid model was developed and implemented both on the field and online to focus on the areas of education, health, nutrition, leadership and peace building for children. We have been able to reach over 30,000 vulnerable children and have partnered with 112 organisations across the government and private sector that share our vision and focus. Apart from within India, we have worked with individuals and organisations from 28 different countries across the world. As the pandemic continues to impact the lives of children in the coming year, our commitment to come together in solidarity to ensure the well-being of vulnerable children is only strengthened.

Website: icphhealth.org | Facebook: ShantiAshram

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Image Credits: Mr. C Satish Kanna

ⁱ The first 1,000 days of life: The brain’s window of opportunity by Sarah Cusick, PhD and Michael K. Georgieff, MD. <<https://www.unicef-irc.org/article/958-the-first-1000-days-of-life-the-brains-window-of-opportunity.html>>

ⁱⁱ Ibid

ⁱⁱⁱ UNICEF Archives

^{iv} Disciplinary Dialogues on Social Change: Gender, Early Childhood and Theatre/ Edited by Nitya Rao

^v 21,491,598 total infections according to Johns Hopkins data as of 7th May 2021

^{vi} Union Health Ministry data reported by NDTV

^{vii} Addressing the learning crisis: An urgent need to better finance education for the poorest children: UNICEF

^{viii} Conceptual Framework of Nurturing Spirituality in Early Childhood/ Early Childhood Consortium to nurture Spirituality/ Arigatou International

^{ix} India Cares Oration 2021 by Dr. Bhoomikumar Jegannathan, International Center for Child and Public Health archives/ ICPH 2021

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Nurturing the many growing children in our midst: [What are the implications of this COVID-19 pandemic in their present and their future?](#)

Page | 5