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## SCHOOL CLOSURE AND SOCIAL DISTANCING DURING COVID-19 IN KENYA

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**Abstract:** *Studies reveal that child abuse increases in times of economic or natural disasters. A study in the United States of America showed a decline in the number of hotline calls which dropped by 70%. There have also been cases of some health personnel and law enforcers attending to children's issues. There is no doubt that during the Coronavirus Pandemic, child abuse is increasing. This study focused on social distancing as a way of containing the pandemic, in view of exploring the possibility of it causing social isolation, particularly for children who may already be living in an abusive environment. The researcher adopted a desktop review of the literature. Search engines were used to collect data from articles between 2008 and 2020, most concentrated around 2019-2020. The study found out that many children had lost touch with schools, health personnel, child protection agencies, and other caring adults, which increased their chances of being abused. In conclusion, child abuse has increased during the pandemic, and efforts to protect children have diminished in the recent past. It is recommended that various stakeholders need to remain vigilant. For example, government agencies need to place child protection mechanisms that are contextually relevant in the changing environment to continue protecting children from abuse.*

**Keywords:** Social distancing, Social isolation, Child protection, COVID-19, Kenya

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## Introduction

Social distancing is an aspect of human behaviour significant to epidemiology because of its universality; everybody can reduce their contact rates with other people by changing their actions. Reduced human contact minimises the transmission of many diseases (Reluga, 2010). According to Lewnard, and Lo (2020), in the absence of any pharmaceutical intervention, the only strategy against COVID-19 was to reduce the mixing of susceptible and infectious people through early ascertainment of cases or reduction of contact. Isolation is the separation of people who have been diagnosed with a contagious disease from people who are not sick (Manuell & Cukor, 2011).

World Health Organisation officially declared coronavirus disease 2019 (COVID-19) outbreak that is caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) to be a pandemic on 12 March 2020 (Ghebreyesus, & Swaminathan, 2020). Studies reveal that child abuse increases during economic or natural disasters (Wasserman, Iosue, Wuestefeldb & Carli, 2020). A study in the United States of America showed a decline in the number of hotline calls which dropped by 70%, meaning child abuse interventions are minimal. There have also been cases of some health personnel and law enforcers attending to children's issues. There is no doubt that during the Coronavirus Pandemic, child abuse is increasing.

It is approximated that 862 million children and young people, roughly half the global student population, were affected as a result of school closure, whereby 107 schools were closed, an increase from a previous state of having 92 countries schools closed a week earlier as a result of the spread of COVID-19 (UNESCO, 2020). School closure was used as one strategy to curb the spread of COVID-19 among school children and teachers. However, studies on the COVID-19 pandemic supported the use of national school closure as part of a package of social distancing measures; the impact of this, as the only study to examine school closures as a separate intervention warned was relatively marginal, given the reasonable assumptions that household and community contacts would rise as a consequence. Evidence suggested that transmission in schools was very low or absent (Viner, Russell, Croker, Packer, Ward, Stansfield, & Booy, 2020).

Other studies showed that school closures' socio-economic harms were high (Radwan & Radwan, 2020). Previous studies, for example, in the UK, a study in 2008 suggested that approximately 16% of the workforce were the primary caregivers for dependent children and were at a very high risk of absenteeism if schools were closed, a proportion that rose to 30% in the

health and social care sectors. In the USA, unpublished estimates suggested that 29% of health-care workers had childcare obligations. UK national gross domestic product (GDP) per annum for school closure for 12–13 weeks was estimated at 0.2–1% (Cauchemez, Ferguson, Wachtel, Tegnell, Saour, Duncan, & Nicoll, 2009).

On the one hand, social distancing has proven to be a sure way of lowering the chances of infection from pandemics like COVID-19. However, distancing clashes with the deep-seated human instinct to connect with others. On the other hand, social isolation worsens the burden of stress and often produces deleterious mental, cardiovascular, and immune health effects. As such, distancing aggravates feelings of loneliness and could have negative long-term health consequences. Social connection regulates emotions, coping with stress, and remains resilient during difficult times (Luo, Hawkley, Waite & Cacioppo, 2012).

Policymakers and other stakeholders need to be aware of the equivocal evidence when proposing or implementing national or regional school closures for COVID-19. This is because they are associated with the high costs of lengthy school closures during pandemics and may bear children's development. However, in some previous coronavirus outbreaks, evidence suggested that transmission in schools was very low or absent (Viner, Russell, Croker, Packer, Ward, Stansfield & Booy, 2020). These actions appear primarily based on assumptions that the benefits apparent in influenza outbreaks are also likely to be true for COVID-19.

Scholars point to the need to identify how countries can safely return students to education and parents to work. Other studies observe that school social distancing interventions are much less disruptive than full school closure and might substantially contribute to maintaining this pandemic's control (Viner, Russell, Croker, Packer, Ward, Stansfield & Booy, 2020).

## **1. Materials and Methods**

A scoping review that involved searching on the internet using the google scholar search engine and scientific databases were the primary source of data. Keywords, including Coronavirus, COVID-19, Pandemic, social distancing, school closure, and social separation, guided the literature review. The researcher searched electronic databases for published papers driven by the aim of the study. This methodology was used to map the concepts underpinning the research area and the primary sources and types of evidence available (Arksey & O'Malley, 2005). A scoping review was adopted for the study since its focus was on a broad overview of the evidence about a

topic, irrespective of study quality, and it was helpful to examine pandemic situations concerning social distancing and the emerging issue of school closure (Peters, Godfrey, Khalil, McInerney, Parker & Soares, 2015). The researcher included articles from 2008 to the year 2020, although most articles concentrated around 2019 and 2020, the time COVID-19 emerged.

## **2. Results of the Study**

### **2.1 Pandemic Prevention Measures Adopted**

A previous study showed that control of pandemic influenza was by social-distancing measures, such as school closures. Mathematical models suggested that school closure reduced transmission among school-age children by more than 50% and that this was a critical factor in interrupting transmission (Earn, Loeb, Fonseca, Lee, & Dushoff, 2012). However, research on related pandemics revealed that actions like school closure exposes the assumptions that the benefits apparent in influenza outbreaks are also likely to be true for COVID-19. The case for COVID-19 may be various, bearing in mind that children contributed more to influenza transmission than did adults, as argued by earlier scholars like Wallinga, Teunis, and Kretzschmar (2006). Again, children appear to form a much lower proportion of cases than expected from their population. However, evidence for this is mixed, and some data suggest that children might be as likely to be infected as adults but largely remain asymptomatic or have a mild form of the disease.

The vulnerability of children during pandemics may be in the form of children being susceptible to other infections. Another risk factor that children may face is that of outbreaks disrupting growth and development environments conducive for children, such as in the case of mumps (Nouh, Elfagi, & Omar, 2020). Pandemic prevention measures were found to pose threats to children. Social distancing may cause isolation among children in the name of preventing infection and associated consequences of the pandemic (Nicola, Alsafi, Sohrabi, Kerwan, Al-Jabir, Iosifidis & Agha, 2020).

### **2.2 Communities with Disrupted Growth of Children**

To control and prevent pandemics, families where children develop, are affected. Family structures are affected as parents are taken into quarantine centres or are restricted from moving into places where their children are in case lockdowns happen before reunion between parents and their children. Income within a family may also be affected in cases where parents are retrenched,

loose jobs, or find themselves not making money in their businesses as they did before the pandemic (Nicola, Alsafi, Sohrabi, Kerwan, Al-Jabir, Iosifidis & Agha, 2020 in Lempel, Epstein & Hammond, 2009). Communities are valuable resources in managing the difficulties of family matters. For instance, parents' committees can work together to bridge students' needs with school requirements and advocate for children's rights to a healthy lifestyle.

Due to restriction in movement or where a family relocates to prevent infection, friendships and other networks the children enjoyed before may be affected. They may not be allowed to play with their friends as usual as a form of quarantine. The term quarantine was first used in Venice, Italy, in 1127 with regards to leprosy. The word was widely used in response to the Black Death, although it was not until 300 years later it was used correctly in the UK to impose quarantine in response to the plague (Newman, 2012)

Another one to be affected is communities. Children may be cut off from the other communities they have interacted with before through school closure. They lose touch with friends from other organisations they used to meet at a religious gathering or school. Schools have a critical role in delivering educational materials to children and offering an opportunity for students to interact with teachers and obtain psychological counselling and general development of children. This can be further substantiated by borrowing from the understanding that proof from observational research indicates that participating in an early childhood education program increases children's cognitive ability and socio-emotional ability. Children enrolled in preschool have higher scores in mental indicators than children not enrolled in preschool (Lassassi, 2020). Another critical role of the school is to promote a health-conscious schedule, good personal hygiene, encourage physical activities, appropriate diet, good sleep habits, and integrate such health promotion materials into the school curriculum.

### **2.3 Response and Containment Strategies**

It is widely acknowledged that pandemics are not accurately predictable. As such, attestations reveal that nobody can be fully prepared for a pandemic (Tufan & Kayaaslan, 2020). Immediately it was noted that COVID-19 was a pandemic, countries started taming precautions. One of the earliest was North Korea which prohibited the entry of all Chinese travellers. Kyrgyzstan closed its border with China, among others. Australia, Thailand, South Korea, Japan, India, Italy, Singapore, Malaysia, and Nigeria commenced temperature screening, symptom

screening, and/or questionnaires for arriving passengers from China. The containment of 2019-nCoV requires a coordinated international response (Phelan, A. L., Katz, R., & Gostin, 2020).

### **2.3.1 Biomedical-treatment-case work and case management**

China spares a ¥1 billion fund from China's Finance Ministry, which was used to facilitate two new hospitals in under two weeks in Wuhan. Local exit screening conducted by healthcare professionals at airports is currently recommended by the WHO (Eurosurveillance Editorial Team, 2020). Australia, Thailand, South Korea, Japan, India, Italy, and Singapore initiated temperature and symptom screening protocols (Phelan, Katz & Gostin, 2020). First-line treatment for fevers included antipyretic therapy such as paracetamol, whilst expectorants such as guaifenesin were used for a non-productive cough. Hypoxaemia or shock requires immediate oxygen therapy administration (Sohrabi, Alsafi, O'Neill, Khan, Kerwan, Al-Jabir & Agha, 2020).

Several pandemic intervention strategies, including various approaches to containment, mitigation, and suppression, have been investigated, deployed, and adjusted across the world in the last months. The literature points to some interventions aimed at containing the spread of the pandemic such as restriction on international arrivals ("travel ban"); case isolation; home quarantine of family members of the traced and isolated cases; social distancing for various population compliance levels up to and including 100% (complete lockdown); and school closures. Globally, studies reveal that 107 countries had implemented national school closures by 18 March 2020, which was adopted as a response to the coronavirus disease 2019 (COVID-19) pandemic (Viner, Russell, Croker, Packer, Ward, Stansfield, & Booy, 2020). However, it remains unknown whether school measures are effective in coronavirus outbreaks going by previous pandemics. Such measures have been tried out, like severe acute respiratory syndrome [SARS], Middle East respiratory syndrome.

### **2.3.2 Spatial-travel restrictions**

World Health Organisation and US Centers for Disease Control and Prevention (CDC) recommend avoiding travel to high-risk areas, contact with symptomatic individuals and the consumption of meat from regions with known COVID-19 outbreak as a way of containing COVID-19 (Sohrabi, Alsafi, O'Neill, Khan, Kerwan, Al-Jabir & Agha, 2020). Hong Kong suspended several public transport services across the border (Coronavirus, 2019). Europe was also keen to contain the pandemic. For example, the Czech Republic, Greece, and Italy suspended visa issuance

and air traffic from mainland China (Lera, NEWS & BLOG). Australia imposed a ban on all arrivals of non-residents, non-Australian citizens, from 9 pm of 20 March 2020, requiring strict self-isolation of returning citizens.

Quarantine has also been adopted as separation and restriction of movement of people who have potentially been exposed to a contagious disease to ascertain if they become unwell, reducing the risk of them infecting others. This has been applied in many countries at different levels like at an individual level or otherwise known a self-quarantine, at the community level as community-based quarantine and lastly as institutionalised quarantine where people are quarantined in an institution. Social Action, Community work and casework would be best-suited methods of intervention during a pandemic.

### **2.3.3 Behavioural change**

Behaviour change was found to reduce the rate of infection of pandemics like COVID. This involves handwashing, sanitiser use, social distancing, mouth covering while coughing (Gudi & Tiwari, 2020). Washing hands is the first line of defence against viruses such as coronavirus. Other effective strategies concerning human behaviour are practising suitable hygienic measures in hospitals, schools and other public places, that evidence shows could drastically reduce the spread and eliminate new cases. Appropriate social work methods are community work, community organising, group work (Pankajakshan, Prasannan & Chaudhary, n.d).

Since the disease was from contaminated food, appropriate cooking and food habits are a sure way of preventing it. A study showed that School closures are not found to bring decisive benefits unless coupled with a high level of social distancing compliance to reduce the mixing of susceptible and infectious people through early ascertainment of cases or reduced contact (Chang, Harding, Zachreson, Cliff & Prokopenko, 2020).

Studies reveal that the occurrence of the disease will leave some behavioural modification even at the National level. For instance, research records that China was enforcing a "round the clock closed management" system, Italy declared the "red zone" alert, France announced a "nationwide ban on gatherings." The USA implemented "containment areas", to mention but a few of what different countries were doing in ceasing the spread of COVID-19.

Governments had to device ways of cushioning their citizens in the wake of the pandemic.

For example, the government of Japan had to expand subsidies for people to maintain jobs during the health crisis. Bangladesh, government agencies took initiatives to ensure tax relief and financial help to the affected families. The United Kingdom (UK) government has allowed the VAT payments due from 20 March to 30 June to differ at the taxpayer's option, among other interventions (Zaman, Islam, Khan, Shweta, Rahman, Masud & Ullah, 2020).

### **3. Recommendation**

Productivity in adult life is deeply rooted in the early years. Therefore, it is recommended that all stakeholders protect children who are vulnerable to environmental risks, physical health, and mental health. To avoid long-term consequences among children, it is important to address the effects of COVID-19 pandemics that are social, economic, or physical. Governments and parents should ensure that the physical and mental impacts of the COVID-19 epidemic on children are addressed or kept minimal. Lastly, we should consider coronavirus as a chance to improve our facilities like schools and health care infrastructure and, above all, to learn how to be more ready for the subsequent emergency crises for the coming generations. There is a need for the government and stakeholders dealing with children matters to assess and mitigate the social and economic implications of COVID-19 containment measures like school closure.

### **Conclusion**

This study concludes that pandemics are unpredictable and difficult to control. Children are affected by pandemics in terms of abuse of various forms, including psychological and physical abuse (Sajo, 2020). To mitigate the consequences of home confinement, the government, non-governmental organisations (NGOs), the community, school, and parents need to be aware of the downside of the situation and do more to effectively address these issues immediately. Various strategies by various stakeholders, particularly the government and other agencies, rarely consider children or advance strategies that leave children vulnerable and more exposed to abuse. A strategy like social distancing has adversely affected children instead of addressing the need to protect them and affect their general development. The governments could adopt strategies like resource allocation in pandemic affected areas targeting children, including cash transfers.

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