

Fact Sheet

Child Welfare and Pandemics



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TORONTO

POLICY BENCH

Fraser Mustard Institute for
Human Development

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Fraser Mustard Institute for Human Development

Policy Bench Co-Leads:

Barbara Fallon, Ph.D.
Professor
Factor-Inwentash Faculty of
Social Work
University of Toronto

Steven Miller, M.D.
Head of Neurology
Division of Neurology
The Hospital for Sick Children

Policy Bench Advisory Committee:

Catherine Birken, M.D.
Staff Pediatrician
Pediatric Medicine
The Hospital for Sick Children

Steven Miller, M.D.
Head of Neurology
The Hospital for Sick Children

Avram Denburg, M.D.
Staff Oncologist and Clinical
Scientist
The Hospital for Sick Children

Faye Mishna, Ph.D.
Professor
Factor-Inwentash Faculty of
Social Work
University of Toronto

Barbara Fallon, Ph.D.
Professor
Factor-Inwentash Faculty of
Social Work
University of Toronto

Marla Sokolowski, Ph.D.
Professor
Department of Cell and
Systems Biology
University of Toronto

Jennifer Jenkins, Ph.D.
Professor
Department of Applied
Psychology and Human
Development
University of Toronto

Suzanne Stewart, Ph.D.
Professor
Ontario Institute for Studies in
Education
University of Toronto

Joel Levine, Ph.D.
Professor
Department of Biology
University of Toronto

Principal Researcher:

Marina Sistovaris, Ph.D.
Research Associate
Factor-Inwentash Faculty of
Social Work
University of Toronto

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Child Welfare and Pandemics

This is a brief summary of the literature scan that was conducted on child welfare and pandemics which focused on potential policy solutions that could mitigate the impact on children in the care of Canada's child welfare system. It is intended to accompany the full scan, please see <https://cwrp.ca/publications/child-welfare-and-pandemics-literature-scan> for the document.

Background

COVID-19, declared a pandemic by the World Health Organization on March 11, 2020, has already had widespread health, economic, political, and social effects. Governments around the world are working to contain the virus and mitigate its effects on populations. Organizations such as child welfare agencies are responsible for helping the most vulnerable members of society and providing necessary supports and services in the face of this pandemic. Failure to assist children and families who rely on social systems for support might result in suffering.

Children in the care of the Canadian child welfare system are a particularly vulnerable group. When compared to other developed countries, Canada has an exceptionally high rate of children in care (Brownell, Chartier, Au et al., 2015) and a disproportionate number of Indigenous (Statistics Canada, 2016) and visible minority children in care (Contenta, Monsebraaten and Rankin, 2014; Fallon, Black, Van Wert et al., 2016; McMurtry and Curling, 2008; Mosher and Hewitt, 2018; Ontario Human Rights Commission, 2018; Peel Children's Aid Society, 2013; Residential Services Review Panel, 2016; Turner, 2016; United Nations Committee on the Rights of the Child, 2012). Children in care have often faced numerous challenges, including the loss of a parent, difficult socioeconomic circumstances, behavioural issues, abuse, and neglect (Esposito, Trocmé, Chabot et al., 2013; Sherlock and Culbert, 2015). Once in the care of the child welfare system, these children may experience additional challenges, such as breakdown of placements and discontinuity of care.

Impact on Families and Children

Prevention and intervention efforts must acknowledge the importance of addressing risk and protective factors that affect children at multiple, nested levels (Centers for Disease Control and Prevention, n.d.). These levels include the individual child, their

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relationships, the community they live in, and the wider society (Alliance for Child Protection in Humanitarian Action 2019a; Centers for Disease Control and Prevention, n.d.; National Research Council, 1993). Pandemics and the measures taken to control the spread of disease drastically alter the environments in which children live. Examples of ways children's environments are altered include: school/child care closures, increased stress among caregivers and community members, limited access to services, quarantine measures, and lost or reduced family income (Alliance for Child Protection in Humanitarian Action, 2019b). These concerns have a disproportionate impact on more disadvantaged and marginalized groups and can result in increased risk to children for physical and emotional maltreatment, gender-based violence, mental health and psychosocial distress, child labor, being unaccompanied or separated from caregivers, and social exclusion (Alliance for Child Protection in Humanitarian Action, 2019b).

Service Considerations

Given the increased risks to children that pandemics and their responses pose, child protection strategies during COVID-19 and other pandemics should be made considering the following:

Responses should be multi-sectoral and child-specific (children's needs are not isolated to a single system's response, and sectors responsible for child welfare, education, food security, livelihood, health, nutrition, water, sanitation and hygiene, and shelter need to coordinate their responses in order to protect the well-being of children).

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- Strategies should consider individual children, promote strengthening of family and caregiving environments, and engage children's communities.
- Case management practices should be informed by current knowledge of COVID-19 and specifically targeted for the most vulnerable children and communities.

- Alternative care strategies should be safe, child-centered, and family-based (if possible), as well as promote reunification (Alliance for Child Protection in Humanitarian Action, 2019b).

Residential Care

Youth in the care of the Canadian child welfare system living in residential facilities are at a heightened risk for infection with viruses that are easily transmitted, such as COVID-19, because of communal living arrangements, a situation which is even more dire for children and youth with pre-existing health conditions (Fecteau, 2020; Hyslop, 2020; Kelly and Hansel, 2020). Group homes and other institutions need to be prepared for dealing with complex situations that arise including quarantine of youth or staff, relocation of youth, and provision of emergency medical care if needed (Fecteau, 2020; Hyslop, 2020; Kelly and Hansel, 2020).

Conclusion

In the face of pandemics such as COVID-19, it is essential that child welfare systems have the capacity and resources to respond to increased demands for supports and services, minimize the effects on vulnerable populations, and ensure continuity of care. Children in the care of the Canadian child welfare system are particularly vulnerable to the deleterious impacts of pandemics and require a coordinated, child-centred response to meet their increased needs.

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