

Recommendations for the use of Face Masks among Children to Contain Coronavirus Disease-2019 Pandemic

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Abstract

The coronavirus disease-2019 (COVID-19) pandemic continues to account for the disruption of health care and other welfare services. As the predominant mode of transmission of infection is through close contact or airborne mode, it is important to acknowledge that we should encourage the use of face masks in the community and workplace settings. Even though significant results have been attributed to face masks, we must realize that to optimize the impact, and we must ensure their appropriate usage, storage, cleaning, and disposal. To conclude, a face mask is an effective tool to reduce the incidence of infection among children and adherence to standard public health and infection control measures. However, the decision to wear face masks among children to stop the transmission of COVID-19 infection should be determined based on assessing the potential benefits, harms, and local epidemiological factors.

Keywords: Children, coronavirus disease-2019, face masks, pandemic

INTRODUCTION

The coronavirus disease-2019 (COVID-19) pandemic has impacted all sectors. Owing to the emergence of new causative virus variants, there has been a sudden rise in cases even among the immunized sections of the community.^[1] In fact, as of January 30, 2022, over 370 million confirmed cases and more than 5.6 million deaths had been attributed to the novel viral infection on a global scale.^[1] Under the current circumstance, wherein the virus continues to mutate and escape the immune defense, there is an immense need to strengthen and strictly adhere to the standard infection prevention and control measures (viz. physical distancing, isolation of confirmed cases, quarantine of the contacts, intensifying contact tracing activities, correct and consistent use of face masks, adherence to cough etiquettes and hand hygiene, etc.^[1,2]

FACE MASKS AND CORONAVIRUS DISEASE-2019

As the predominant mode of transmission of infection is through close contact or through airborne mode, it is important to acknowledge that strategies implemented by the public health authorities to encourage the use of face masks in the community and workplace settings play a crucial role

in interrupting the chain of transmission of the virus.^[3] The findings of the earlier studies carried out during the phase of containment of the severe acute respiratory syndrome infection in 2003 reported that face masks proved to be an effective tool for minimizing the community spread of the infection.^[4,5] On a similar note, definitive evidence has emerged during the ongoing pandemic to suggest that a face mask is an effective option to reduce the transmission of the infection.^[6,7]

Essential Considerations: Face Masks

Even though significant results have been attributed to face masks, we must realize that to optimize the impact, and we must ensure their appropriate usage, storage, cleaning, and disposal.^[8] This justifies the need to wash hands before putting the mask thoroughly, examine the mask for any damage, wear

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How to cite this article: Shrivastava SR, Shrivastava PS. Recommendations for the use of face masks among children to contain coronavirus disease-2019 pandemic. *Indian J Respir Care* 2022;11:190-2.

Received: 29-01-2022

Revised: 04-02-2022

Accepted: 07-02-2022

Published: 08-04-2022

Access this article online

Quick Response Code:



Website:
www.ijrc.in

DOI:
10.4103/ijrc.ijrc_25_22

the mask in such a way that it covers both mouth and nose without leaving any space, replace the mask once it becomes damp, remove the mask from behind, and disposing of the same in the recommended manner.^[3,6,7] In addition, we must not touch the mask while wearing it (and if touched, perform thorough handwashing), not reuse single-use masks, not remove masks while speaking, and not share masks with others. Further, fabric masks must be washed with soap or detergent using hot water daily.^[6-8]

Face masks and children

Before suggesting the recommendations about using face masks in children, it is vital to note that we should strongly advocate for the standard infection prevention and control measures and public health and social measures to reduce the risk of acquisition or transmission of infection in children.^[2,6,7] The World Health Organization and United Nations Children Fund have recommended that

- Children up to 5 years of age should not wear face masks for source control. However, the presence of vulnerable people or other local conditions should be considered while deciding about the use of face masks among children 5 years of age^[8]
- Children in the 6–11-year age group, it has been recommended to adopt a risk-based approach, which in turn depends on the nature of transmission in local settings, the incidence of the disease among children in the given area, sociocultural beliefs or behavior of local residents, the ability of the child to adhere to the appropriate use of face mask, presence of an adult to supervise, and the probable effect of mask-wearing on the learning and psychosocial growth of the children^[8,9]
- Children and adolescents 12 years and above should be based on the recommendations proposed for adults, and they should wear face masks in public places and workplaces.^[3,7,9]

Face shields and children

The international welfare agencies have advised that face shields can be used in settings where maintaining physical distancing becomes a cause of concern or not feasible (due to children suffering from hearing or another kind of disabilities).^[8,10] However, considering that it does not completely obstruct the space between the shield and mouth/nose, we must acknowledge that it is an incomplete physical barrier.^[8,11] The used face shield should cover the entire face, extend under the chin, and be adequately cleaned after every usage. Once again, there is an indispensable need to adhere to other standard prevention and control measures to enhance the effectiveness of face shields.^[10-12]

Implementing the recommendations of face mask usage

As already mentioned, the local epidemiological factors (such as nature of transmission, ventilation adequacy in indoor settings, and physical distancing) and adverse effect of using face masks, play a defining role while recommending face masks among children.^[3,6,7] The need of the hour is to ensure

and establish age-specific communication to augment the understanding about the purpose of wearing face masks, the merits it offers, and the do's and don'ts about the same.^[8] This communication should be provided by parents, guardians, teachers, and community leaders through speaking and practicing (role modeling). The public health administrators should design the awareness material based on children's local needs, interests, and changing evidence.^[8,9]

Moreover, we must also pay attention to the perception and concerns of children about wearing face masks and come out with appropriate explanations and justification.^[9] Other considerations include designing an age-appropriate mask, keeping in mind the quality of the fabric, breathability, design, color, and comfort level, which altogether plays a vital role in enhancing the acceptance of face masks among children.^[6-9] Further, the policymakers should also look to provide face masks to children free of cost and eliminate any possibility of financial factors limiting the use of the same, especially in low-resource settings.^[8] However, we must realize that we will not be able to sustain behavior change unless we take parents, family members, and other community stakeholders along with us and work together.^[8,9]

CONCLUSION

To conclude, a face mask is an effective tool to reduce the incidence of infection among children and adherence to standard public health and infection control measures. However, the decision to wear face masks among children to stop the transmission of COVID-19 infection should be determined based on assessing the potential benefits, harms, and local epidemiological factors.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

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