**Children in orphanages and unaccompanied minors in the context of COVID-19 response in the WHO European Region**

**Situation**

Children and young people living in orphanages and other situations of mass accommodation, such as unaccompanied minors, are vulnerable to the spread of infection that might be introduced from outside. While infection control measures will increase health protection, new vulnerabilities are created, as they usually result in more restrictions of freedom, contact and social isolation.

This may result in mental and behavioural problems. Based on current evidence, the COVID-19 infection is relatively harmless for the paediatric age group, with little morbidity and mortality, however, these vulnerabilities are much more important than the primary vulnerability to the infectious agent. Children with disabilities, who are overrepresented in institutional care, are particularly vulnerable due to withdrawal of access to early childhood intervention services in some countries.

**Actions**

- Infection control measures in orphanages should be carefully considered, both regarding restriction of internal and external contact and physical distancing, and the need for personal protective equipment.
- They should not be implemented on a blanket basis. Human and children’s rights considerations, including informing national authorities and national oversight committees that they are put in place, are essential.
- The right to visit and a mechanism to express complaints need to be maintained.
- Where measures are needed for legitimate infection control purposes, they should be accompanied by strong social, psychological and mental support interventions.
- Mental health services need to be readily accessible.
- Children with disabilities are particularly vulnerable if intervention services are not continued; these need to be maintained by all possible means.
- Efforts to find family-based care need to be intensively pursued to move children out from orphanages. Adoption processes that have been initiated should be moved forward as a priority.
Published guidance:

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