

EDUCATING AND PROTECTING CHILDREN AND YOUNG PEOPLE IN TIMES OF PANDEMIC

FINDINGS AND RECOMMENDATIONS FOR ACTION

August 2022

This brief presents core findings and recommendations from the Colombia research conducted for the three-country study, *The Impact of COVID-19 School Closures on Child Protection and Educational Inequalities in Humanitarian Contexts*.¹ The study was implemented by Fundación Centro Internacional de Educación y Desarrollo Humano (CINDE), with support from World Vision Colombia and the Norwegian Refugee Council (NRC) in four Departments: Cundinamarca, the Coffee Region, Norte de Santander, and Magdalena. In total, 271 children, caregivers, educators, social service workers, and key informants were consulted.

INTRODUCTION

When schools closed in March 2020 in response to the COVID-19 pandemic, thousands of Colombian children and young people saw their education drastically and suddenly interrupted. For almost two years, students faced a series of challenges and constraints in their education, the consequences of which are still present today. In addition, pre-existing challenges, such as poverty and inequalities, worsened. These compounded the impact of school closures, increasing risk factors and adverse outcomes for children and young people.

During this period there were multiple violations of children's rights: many children had no access to education or protection, including protection from violence and child labour. School closures and remote learning impacted students in diverse ways. Students felt they were forgetting what they had learned and were learning less, so they found it difficult to progress. It was not uncommon for the youngest students and students with disabilities to regress in their development. Children were overwhelmed by the responsibility to self-guide learning. Dropout rates increased and education inequalities widened. Evidence from this study and others show that these challenges were made worse by the impacts of the pandemic on mental health, nutrition, and the household economy.

To understand how COVID-19 school closures impacted child protection, well-being, and education inequalities, the study asked the question:

“What education inequalities, child protection risk and protective factors, and adverse outcomes have been amplified as a result of school closures in humanitarian contexts during the COVID-19 pandemic?”

Research findings inform the main objective of the study, which is to ensure that children and young people and their holistic well-being are at the centre of decision-making and planning processes, both in the current and future outbreaks, particularly in relation to school closures and re-openings.

With this objective in mind, researchers sought both to understand the consequences of school closures and to build strategies to promote the development and implementation of public policies aimed at improving children’s protection, well-being, and education. Over the longer term, this work can help to reduce inequalities within and between communities in Colombia .

RESEARCH METHODS

Fieldwork took place between September and December 2021 in Usme and Soacha (Cundinamarca), and Armenia (Quindío) and Pereira (Risaralda), two cities in the Coffee Region. Additionally, the NRC conducted questionnaires with children, parents, educators, and social service workers in Ocaña (Norte de Santander) and Santa Marta (Magdalena). The qualitative research methods were participatory and action-oriented, with participants sharing their experiences as well as their recommendations. Due to the pandemic, a hybrid modality was followed in which focus group discussions (FGDs) and participatory workshops were conducted face-to-face, interviews were conducted virtually, and questionnaires were conducted face-to-face and virtually.

Table 1. Research participants by method and location

Method & Participant Group	Cundinamarca	Coffee Region	Norte de Santander & Magdalena (Questionnaire)	TOTAL
Workshop: Elementary school children (age 10–13)	28	28	-	56
Workshop: Secondary school children (age 14–17)	24	26	1	51
Workshop: Out-of-school children (secondary aged)	6	3	19	28
FGD: Parents of children in study	9	12	20	41
FGD: Education stakeholders	11	16	15	42
FGD: Social service workforce—NGO	6	10	-	16
FGD: Social service workforce—Government	2	18	-	20
National Key Informant Interviews	9	8	-	17
TOTAL	95	121	55	271

KEY FINDINGS

Overall, school closures and remote learning increased risk factors and adverse protection and learning outcomes for children. There were multiple violations of children's rights. Many children had no access to education or protection, including protection from violence and child labour. At the same time, children, families, and education actors developed positive coping strategies and built on opportunities during school closures. Both outcomes are detailed in Table 2 and 3.

Children in all four research communities were very affected by school closures. Across communities, there was evidence of an increase in child labour as out-of-school children worked to help their families survive the economic hardships exacerbated by the pandemic. **In every context, children and young people who were marginal and vulnerable before the pandemic paid the highest price for school closures in terms of education and protection.**

There were also key differences between the communities. In Usme and Soacha, there was more evidence of institutional support from schools and teachers than in the other research locations. This helped to diminish some of the negative consequences of school closures. However, inequality within Bogotá (Cundinamarca) meant that these communities were desperately underserved throughout the pandemic. They had poor internet service and experienced an increase in violence. School dropout was high, and many families migrated to rural areas in hope of a better environment and better opportunities. In Ocaña and Santa Marta, where the NRC survey was implemented, education and child and youth protection systems were extremely weak. None of the 20 children and young people surveyed engaged in remote learning during closures, and when schools reopened, parents reported that only 14 of 54 children returned to school. Hunger was rampant and there was a reported increase in the risk that children and young people would be recruited by armed groups.



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Table 2. School closures increased risk factors and adverse protection and learning outcomes

Increased risk factors and adverse protection outcomes
<p>Recreation. Children had to give up their classes, clubs, and extracurricular activities as they did not have, for example, a musical instrument, the right equipment, or the space to play sports or dance due to school closures.</p>
<p>Mental health. The lack of socialisation and play, being confined in small spaces with family, fear of contagion, and the burden of domestic and academic work generated mental health challenges in children as well as family members and teachers. Several child suicide attempts or cases were attributed to mental health challenges related to closures.</p>
<p>Relational conflict and loss. Students lost contact with school friends and lost teacher support. This loss was felt acutely by children with difficult home lives and mental health challenges.</p>
<p>Increased child abuse, exploitation, violence, and neglect. For many, school closures and confinement contributed to the emergence or resurgence of intra-family violence and conflict. Parents who had to go out to work risked neglecting their children at home. Parents struggled to meet children’s basic needs due to added costs during school closures (to replace school meals, pay for learning resources) and economic precarity related to the pandemic.</p>
<p>Child labour and recruitment to armed groups. During school closures, some children reportedly left learning to work. In Ocaña and Santa Marta, recruitment to armed groups increased during school closures.</p>
<p>Remote learning—students. Children and young people recognised that virtual learning processes are not as effective as face-to-face classes. Students forgot what they learned and found it difficult to progress. The youngest students and those with disabilities experienced significant regression in their development. Dropout rates increased. Students stated that problems caused by distance learning—for example, lost learning and socialisation skills—are still negatively affecting their learning since returning to school.</p>
<p>Remote learning—teachers. Teaching staff and institutions tried to address some of the negative effects of school closures by adapting their teaching to remote methods (especially using WhatsApp) and asking for donations of internet devices and SIM cards for students. However, their efforts were not equal to the demands of remote learning.</p>
<p>Education inequalities. School closures and remote learning exposed and increased education inequalities. Most students did not have adequate (or any) access to the internet or cellular reception, learning devices, or phones. The following groups of children had less access to learning and were particularly disadvantaged by remote learning:</p> <ul style="list-style-type: none"> • Students with disabilities and/or special education needs, children who were internally displaced or migrants (mainly Venezuelans), and those living in rural and borderland areas • Students who had to share devices with siblings and parents. • Eldest siblings, who had to take care of and instruct younger siblings. • Students from poor households, including those whose caregivers could not afford to replace the school meal during closures. <p>These inequalities led to education being more precarious and increased dropout rates.</p>

Table 3. Positive outcomes and coping mechanisms during school closures

Positive outcomes and coping mechanisms
<p>Partners in learning. Home-based education allowed for increased cooperation between families and educational institutions. Both parties recognised the importance of having multiple actors and sectors contribute to children and young people’s growth and development. However, remote education revealed that there can be conflicts of interest and disagreements between different actors, which can lead to the fragmentation of support networks for children and young people.</p>
<p>Positive coping mechanisms. There was some evidence of positive coping mechanisms, opportunities, and actions during school closures, such as:</p> <ul style="list-style-type: none"> • Children learning new hobbies and helping others to prevent and diminish feelings of sadness, boredom, loneliness, and anxiety. • Increased coordination and cooperation between families and schools. • Neighbours tutoring each other’s children and sharing Wi-Fi and technological devices for educational purposes. • Digital literacy training that schools developed with the participation of families and caregivers. • Teachers adapting to remote learning by updating class content and innovating pedagogical practices. • Increased coordination between the health sector and educational processes.
<p>Family cohesion and new friends. In some cases, school closures and confinement generated greater family unity, with children becoming much closer to their parents/caregivers and siblings. Cut off from school peers, many became closer to students in their online classes and immediate neighbourhood.</p>

WHY IS THIS IMPORTANT?

The closure of schools due to COVID-19 made the structural and systemic inequalities that affect vulnerable children and young people in Colombia more visible and much worse. The precarity of education, combined with other vulnerabilities that children faced, produced significant and long-term negative consequences for children and families. Although children, families, teachers, educational institutions and many others made great efforts to maintain learning during school closures, their efforts were outmatched by challenges related to remote learning and the compounding effects of the pandemic. While schools have returned to in-person learning, the negative impacts of school closures have not been resolved.

Students, especially those identified as most affected by school closures, need additional support to overcome the impacts that remain from school closures and remote education during COVID-19.

CALL TO ACTION

This evidence must inform action to ensure that in current and future infectious disease outbreaks (IDOs), children and young people and their holistic well-being are at the centre of decision-making and planning processes, particularly in relation to school closures and re-openings. Actions must take a holistic and intersectoral approach that places children and vulnerable populations at the centre of policies and measures to be implemented. The following actions contribute to these goals:

1

Educational institutions and their workers must recognise the rights of children and young people and establish mechanisms to guarantee them. They must further acknowledge that school is not just a place where students acquire academic content, as its functions go far beyond teaching and assessment.

Children and young people have been facing enormous challenges for the past two years, and the return to face-to-face education will not remedy the negative impact of school closures, such as learning gaps, an impaired ability to socialise, an increase in feelings of sadness, anxiety, and loneliness, and family breakdown, among others. Educational institutions must establish a dialogue with students and out-of-school young people to identify how school closures and remote learning have impacted them, what is required to guarantee their learning processes and well-being, and how decisions related to school closures should be made in response to IDOs.

Following this, **teachers, psychologists, and social service workers** must identify the cases of students that are having problems with the return to school as well as family, socialisation, and mental health challenges. This will be a first step to addressing the negative impacts that school closures have had on children and young people.

2

Strengthen relationships between families and education and health institutions.

This will facilitate the streamlining of responses to improve the learning processes and well-being of children and young people in education in emergency contexts. Schools must create new ways to communicate with families and involve them in students' development and learning processes.

Furthermore, communication and interaction between education and health institutions needs to be built. The primary and direct contact that education institutions have with children and young people facilitates the identification of health issues that negatively impact these populations. This can be a starting point for prevention and response, including ensuring families can access medical services. There is also a need to increase the number of children and young people who have access to mental health professionals. Educational facilities are ideally placed for identification and service provision.

Participants' voices

"In urban areas, only 30% of families had adequate broadband. In rural areas, this percentage was lower. This greatly affected the education of boys and girls, and increased the gap of inequality and inequity." Decision-making actor, Coffee Region.

"There was more love, less food."
Boy, primary school, Bogotá.

"Children lost their friendships because some friends are no longer there or simply because of the pandemic they distanced themselves."
Caregivers focus group, mother, Eje Cafetero.

"... I know cases in which children did not come back to school because they had to work, in my courses (9th grade) 3 classmates had to work to help in their homes". Young woman, high school, Bogotá.

- 3 **Public policies should be collaboratively designed and implemented to reduce the inequalities exacerbated during the COVID-19 pandemic and school closures that prevented children from learning effectively.** Inequalities are related to income, geography, gender, ability, and group identity. They reduce access to essential learning resources, such as academic support, adequate internet access and technological devices, food, and safety. Dialogue and collaboration are required to engage policy-makers and communities in assessment, design, implementation, and evaluation of local and national public policies. Policy decision makers should work together with communities to identify the challenges and needs faced by children and youths. With this information, public policies can work to address the challenges.

The current pandemic is not over, and another will surely come. Thus, it is essential to recognise and learn from what did and did not work well during school closures to build a more holistic, child-centred pandemic response plan that supports all children in Colombia with equity. This is one of the most important challenges that the government faces: to look back in order to learn and to look forward in order to improve.

RECOMMENDATIONS:

- 1 **Keep schools open** during IDOs. If the decision is made to close schools, it must be for the minimum amount of time needed to plan for safe re-opening.
- 2 **Strengthen mental health support** for children and young people and the adults in their community of care.
- 3 **Create and enhance art and sports programmes** in schools and non-governmental organisations that are aimed at strengthening mental health and developing the talents of children and youth.
- 4 **Create and implement trauma-informed strategies to treat and reduce domestic violence**, both in governmental and non-governmental institutions in the education, health, and protection sectors.
- 5 **Strengthen virtual and digital literacy** workshops in schools for children, young people, parents/caregivers, and educators.
- 6 **Expand and improve internet coverage/services.** Increase provision of technological devices to the poorest students.
- 7 **Continue to strengthen cooperation** between families and health, protection, and education institutions so that public policies are developed and implemented based on evidence and recognition of contextual problems.
- 8 **Strengthen child and youth protection systems** in the territories and institutions, reducing administrative procedures so that care is more direct and relevant.
- 9 In the short term, **study and revise the implementation of public policies aimed at reducing inequality gaps** in health services, social support, and education for children and young people in vulnerable contexts, considering issues such as child and youth labour and nutrition.

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