

ADVOCACY ACTIONS TO PROMOTE INCLUSIVE ACTION AND CHILD PROTECTION DURING SCHOOL CLOSURES DUE TO THE COVID-19 PANDEMIC

RECOMMENDATIONS FOR ACTION

August 2022

INTRODUCTION

To understand the impact of school closures in humanitarian settings due to COVID-19, primary data collection was organised in three countries, including Lebanon, Colombia, and the Democratic Republic of the Congo (DRC) in 2020–21.

In the DRC, this qualitative research showed the profound effects of the unilateral decision by the state to close schools on multiple occasions during the COVID-19 pandemic. In the DRC, prior to the pandemic, five million people were internally displaced, and one in three people suffered from acute hunger.ⁱ Amid this suffering, school closures due to COVID-19 affected over 27 million childrenⁱⁱ with 179 days of school being missed due to full or partial closure in 2020 and early 2021.ⁱⁱⁱ

With minimal to no access to remote learning, school closures served to deepen educational inequalities. Children in this study experienced learning loss, dropout, and many risk never returning to school. School closures both compounded and created risks to children's protection and well-being, including: mental health challenges; loss of relationships; loss of recreation; increases in child abuse, exploitation, violence, and neglect; increases in adolescent pregnancy and early marriage; and increases in child labour, especially worst forms of labour, such as recruitment to armed groups. Urgent measures are needed to support children impacted by school closures during COVID-19 in the DRC, particularly girls, internally displaced children, and children with disabilities. Collective action towards enhancing the centrality of child protection and well-being in future infectious disease outbreaks (IDOs) must be prioritised.

WHAT IS AT STAKE?

The overall objective of these advocacy actions is **to ensure that the education and well-being of children during and after COVID-19 or other IDOs is central to decision-making in the DRC.** This advocacy brief is intended to draw the attention of decision-makers to the issue of education and child protection in emergencies, particularly in preparedness for future IDOs, to promote their involvement in the implementation of strategies, standards, alternatives, and accompanying measures for the welfare of children during IDOs in humanitarian emergencies.

This brief calls upon the DRC government and humanitarian coordination mechanisms active in the DRC to:

- Support and resource a holistic response to children impacted by COVID-19-related school closures.
- Make decisions that better protect children and reduce inequalities in education during IDOs and school closures.
- Instigate change in the emergency management budget in the DRC to ensure sustainable education in crisis, including allocation of a significant portion of the annual budget for emergency management to prioritise children's education, protection, and well-being during IDOs and other crises (e.g., conflicts, natural disasters, etc.)

RESEARCH OVERVIEW: APPROACH AND PARTICIPANTS

The study explored the **education inequalities, child protection risk and protective factors, and adverse outcomes that have been amplified as a result of school closures in humanitarian/crisis contexts during the COVID-19 pandemic.** BIFERD, with support from Proteknôn Foundation for Innovation and Learning (on behalf of The Alliance for Child Protection in Humanitarian Action and Inter-agency Network for Education in Emergencies), conducted a qualitative and participatory research^{iv} study in two sites in North Kivu Province from December 2020 to February 2021 (see Box 1). The findings were validated by child and adult participants who also shared their recommendations for action by decision-makers. An **Advocacy Advisory Group** was formed at the outset of the study, led by the Ministry of Education, and consisting of members of the education cluster, protection cluster, state services, and representatives of organisations of people with disabilities, children's parliament, gender, and youth. This brief is informed by and reflects this participatory process.

Box 1. Summary of the research methods

- Research sites: the Territories of Rutshuru (Rutshuru centre and Kiwanja) and Masisi (Mweso) (180 participants total)
- 16 key informant interviews with global, national, and sub-national stakeholders in education, child protection, and the social service workforce
- Participatory methods and semi-structured interviews with children, including 24 primary aged (10 years and up), 23 secondary aged, and 22 out-of-school children (14 to 17 years)
- Focus group discussions with 24 caregivers, 24 educators, and 24 members of the social service workforce (government and non-governmental)
- Survey with children, parents, and the social service workforce

RESEARCH OVERVIEW: KEY FINDINGS

■ ■ ■ ■ ■ “[WHEN] WE WERE WITH OUR COLLEAGUES, WE STUDIED VERY WELL. BUT WHEN THE SCHOOL WAS CLOSED, WE REALISED THAT SOME OF THEM GOT MARRIED, OTHERS JOINED ARMED GROUPS. AND WHEN THE SCHOOL REOPENED, IF YOU HAD 32 STUDENTS IN THE CLASS, YOU WOULD FIND THAT THE NUMBER HAD DECREASED BECAUSE SOME OF THEM GOT MARRIED, OTHERS BECAME SOLDIERS, AND THE OTHERS DID NOT CARE ABOUT STUDIES.”

(Secondary student, Mweso, DRC)

Theme	Key Findings
<p>1. Education inequalities were amplified.</p>	<p>In the study sites, children experienced multiple and lengthy school closures, causing disruption to their learning, and increasing the number of failures in the end-of-year exams.</p> <p>The number of children returning to school has decreased due to children seeking paid work, joining armed groups, crossing borders to seek work in neighbouring countries (e.g., Uganda), marrying early, or becoming pregnant.</p> <p>In project sites, many children were not in school prior to COVID-19 due to conflict and displacement, and those interviewed shared that they are now even more unlikely to return, due to increased economic pressures at the family level and ongoing violence.</p> <p>In the humanitarian settings studied, most schools did not have personal protective equipment (PPE), including masks, or handwashing facilities.</p> <p>Many teachers were not paid during school closures and have had to seek other forms of paid employment. Schools also delayed reopening due to teacher strikes in early 2021.</p>
<p>2. Approaches to support learning were insufficient and inaccessible for children.</p>	<p>Distance learning alternatives have been implemented in the DRC but with little success due to 1) the lack of effective monitoring and evaluation mechanisms, and 2) inaccessibility to rural and humanitarian sites and to all children (based on gender and socio-economic status).</p> <p>Groups particularly marginalised from remote learning methods include pygmy and internally displaced children, and children with disabilities.</p>
<p>3. Children experienced adverse impacts and physical, mental, social, and emotional risk factors were amplified.</p>	<p>Violence and abuse of children increased in households, schools, and in the community during school closures. Specifically, there has been an increase in:</p> <ul style="list-style-type: none"> • Sexual abuse and exploitation—child prostitution and sex for money. • Child labour, including the worst forms of labour (children carrying out heavy labour in fields and factories, and small children collecting drinking water); forced recruitment of children by armed groups. • Early pregnancy and early marriage. <p>Children with disabilities were particularly impacted by school closures, as they also experienced ongoing and armed inter-ethnic conflict, flooding, volcanic eruption, and poverty.</p> <p>Neglect of children increased during the closure of schools, as parents left children at home when they went to find work.</p>

Theme	Key Findings
4. Factors that protect children's well-being were eroded.	<p>Children have experienced social isolation due to the absence of recreational spaces, the rupture of relationships with their peers, and the closure of community spaces (e.g., churches and community centres) that were meeting places for the children.</p> <p>The deepening poverty of families during the COVID-19 pandemic had grave impacts on the protection of children. Many parents lost their source of income, making it difficult for parents to do business activities to meet the needs of children, and with schools closed, many children worked to support household basic needs.</p>
5. The social service workforce.	<p>Social service workers identified intensified child protection risks and sought to follow up during school closures, but these actions were typically outside of a child protection system or another formal response mechanism.</p> <p>Teachers provided, at times, a link to social services, however, most children in this study had no access to remote learning, and thus had limited opportunity to access social services through educators.</p>

WHY IS THIS IMPORTANT?

This research is a call to strengthen the protection of children and ensure their access to inclusive quality education in a safe and protective environment. Resources need to be mobilised to strengthen the well-being and protection of children impacted by COVID-19 related school closures, and to ensure preparedness for future IDOs to prevent prolonged school closures and to make children central to decision-making.

■ ■ ■ ■ ■ “PEOPLE THINK ABOUT EDUCATION, BUT THEY DON'T THINK ABOUT PROTECTION IN THE CONTEXT OF A CHILD IN THE SCHOOL... PSYCHOLOGISTS ARE NOT REFERRED TO SCHOOLS. THERE ISN'T AN ACTION PLAN TO RESPOND TO THE PSYCHOSOCIAL SUPPORT NEEDS AT THE LOCAL, PROVINCIAL, AND NATIONAL LEVEL AS A RESULT OF THE PANDEMIC.”

(Key Informant)

CALL TO ACTION

All actors in education, child protection, and health, including policy makers, donors, humanitarian organisations, state services, and UN agencies, are called upon to mobilise to ensure that education and child protection is a priority and a right for all children, despite IDOs, armed conflicts, and disasters that can lead to the closure of schools. We are calling on the Congolese government to improve education and child protection during IDOs through involving children and other stakeholders in decision-making and planning processes. The government of DRC is urged to integrate in the national budget a line item specifically for protecting children and ensuring access to education during emergency response in the time of IDOs.

The Global Humanitarian Clusters and donors are urged to continue to mobilise funds to support education and child protection programmes based on an integrated programming approach, including Global Health, Mental Health and Psychosocial Support, WASH, Education, Disaster Risk Reduction, Food Security, Child Protection, and Climate Change.

RECOMMENDATIONS FOR ACTION

Recommendations to mitigate the impacts of COVID-19 related school closures and to better prepare for future IDOs—for the Ministry of Education (Primary, Secondary, and Technical Education), the Ministry of Health, the Ministry of Social Affairs and Gender, the Congolese government partners, and donors providing humanitarian aid—include:

Supporting the care of children impacted by COVID-19 related school closures

- Coordinate to ensure support for girls impacted by early marriage and pregnancy (and their children) during the closure of schools due to COVID-19, children engaged in armed groups, displaced children, and other vulnerable children; facilitate their access to psychosocial support and health services, remedial education, literacy, and vocational training centres.
- Mobilise funds to conduct participatory integrated assessments to assess child protection and the health status of children and to verify the number of children outside the education system. This also includes their level of schooling at the level of decentralised entities in the country as a result of COVID-19 related school closures and concurrent crises (e.g., Ebola outbreaks, ongoing armed conflict, etc.)

Decision-making regarding closure of schools

- During IDOs, only close schools in the most extreme of circumstances when all other options have been exhausted.
- When there is an IDO and it is deemed too risky to remain open due to the nature of the disease or unknowns, education ministries should close schools for a minimum amount of time as agreed to in the emergency response plan (see Box 2).
- Ensure accountability to children, families, and communities through transparent feedback mechanisms that are built into local governance decision-making structures and shared decision-making in planning and implementing IDO emergency response efforts.

Infectious Disease Outbreak Preparedness and Response

- Mobilise funds for programming to prevent harmful child protection outcomes in future IDOs.
- Integrate five percent of the state budget for emergency management to prioritise children's education, protection, and well-being, including improved hygiene measures and access to PPE, psychosocial support to families, support to teachers' mental health and well-being, etc.
- Strengthen the capacity of the established inter-agency and intersectoral advocacy advisory group, composed of the Ministry of Education, Action Aid, AVSI, Save the Children International, Norwegian Refugee Council (NRC), UNICEF, The Ministry of Social Affairs (MINAS), Ministry of Gender, Family, and Children, ALPHA UJUWI, Child Protection Working Group, Child Parliament, the Association of People Living with Disability, Village d'Espoir, and Compassion Albinos Association, to continue to follow up with these recommendations.
- Document cases of abuse and violence in schools and in the community during COVID-19 to establish responsibilities, damages, and reparations and to strengthen school-based complaint management mechanisms during future IDOs.

Safe reopening of schools during the COVID-19 pandemic and preparation for potential future IDOs

- Train teachers and social workers on psychosocial approaches with children during outbreaks, disasters, and other crisis situations.
- Provide COVID-19 prevention kits and materials to schools (including temperature devices, disinfectant, and hand washing supplies).

Box 2. Emergency response plans should be developed as part of IDO preparedness. These plans should:

1. Assess and mitigate the risks associated with continued in-person learning.
2. Be developed through consultation with student, parent, teacher, education, protection, and health and community representatives on how to continue in-person learning in a safe manner.
3. Outline a plan for a safe, inclusive, and equitable return to school, and how this will be resourced.
4. Outline how a safe return to school will be communicated and implemented.



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- i Human Rights Watch (2022). [World Report. Democratic Republic of Congo.](#)
 - ii The Cellule d'Analyse en Sciences Sociales (CASS) (2021). "Covid-19 School Closures in the DRC: Impact on the Health, Protection and Education of Children and Youth," <https://www.socialscienceinaction.org/resources/covid-19-school-closures-in-the-drc-impact-on-the-health-protection-and-education-of-children-and-youth/>
 - iii *ibid*
 - iv The research followed Proteknôn's PSEA and Safeguarding policy and practices, including the Code of Conduct and Research Ethics Protocol. The team carried out a Risk Assessment and had PSEA and local safeguarding referral protocols in place in case of a disclosure of abuse or researchers suspect abuse. Informed consent was sought from all participants and anonymity was assured.



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