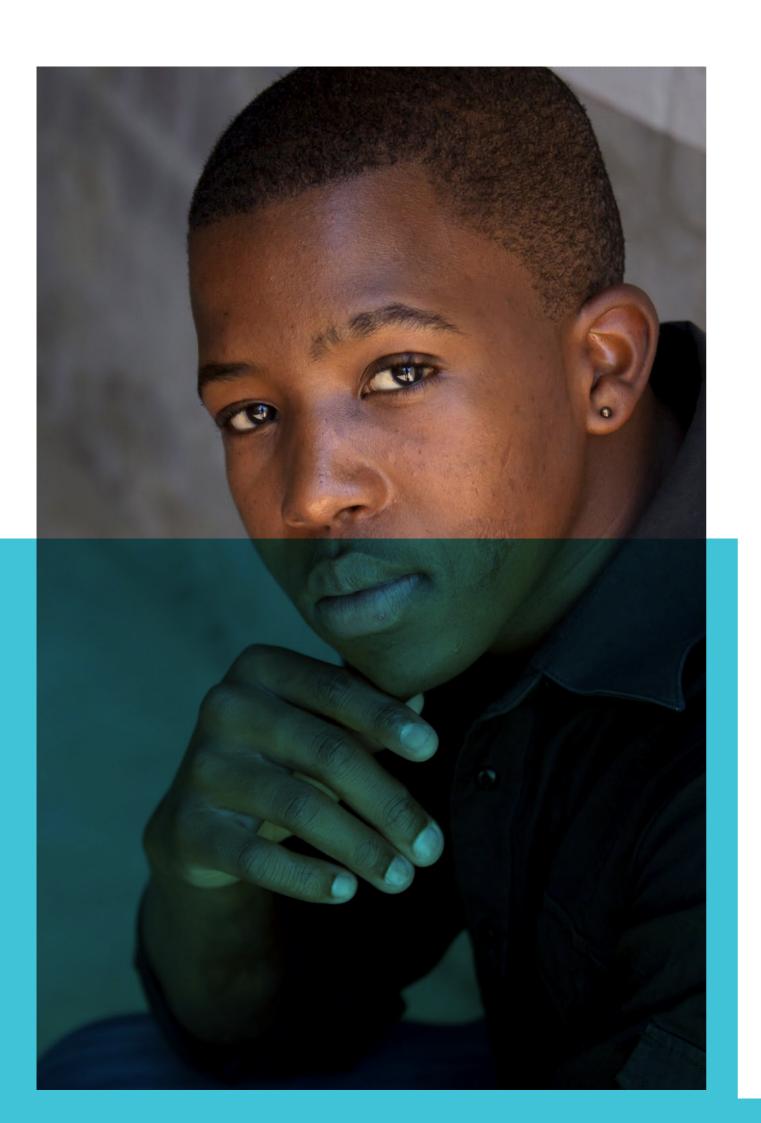




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About the COVID 4P Log Project

COVID-19 has abruptly thrust the rights and wellbeing of children and families into greater risk around the world. The impact of COVID-19 on children continues to be vast. Risks posed to children's survival and development, to their special protections, education, health and access to food, for example, are being greatly compounded not only by COVID-19, but also by government responses.

With roughly a third of the global population estimated to be under age 18, children¹ account for a huge proportion of our population. Successful delivery of the 17 UN Sustainable Development Goals (henceforth 'SDGs'), which relate to all ages, heavily relies on our ability to effectively and robustly respond to the distinct needs and rights of children. Even prior to COVID-19, our global task to achieve these global goals by 2030 seemed daunting. In the light of COVID-19, achieving the SDGs is even more challenging.

To effectively mitigate the impact of COVID-19 in the light of protecting children's wellbeing, and ultimately for our collective societal future, policy and practice responses must be distinctively designed to address children's wellbeing needs.

Policymakers, and those working with children, are at the heart of pandemic responses as they continue to support children's wellbeing, rise to many new challenges, and respond in new, innovative and, in some cases, unprecedented ways. To address the impact of COVID-19 on children in the long term, the COVID 4P Log Project sought to better understand the changing demands on these policies and practices across different cultures and contexts, in 22 countries and five continents.



The Institute for Inspiring Children's Futures is a joint initiative at the University of Strathclyde, Scotland, with a collective vision of ensuring that children and young people have what they need to reach their full potential, particularly those who face adversity.

We work in partnership with a wide range of partners nationally and internationally. Children's human rights and the UN Sustainable Development Goals are the heart of our work.

^{1.} The term 'children' is used throughout to describe all those under the age of 18 years, in line with the CRC's definition of a child. Where 'young person' is used in the Report, this is reflecting that specific age group only.



The COVID 4P Log is an Android and iOS smartphone app, free-of-cost to app users, that collected the real-time, anonymous views and experiences of practitioners and policymakers who were working across the globe to support children's wellbeing in the light of COVID-19. In answering a series of questions, these volunteer respondents helped us to better understand the ways practitioners and policymakers were responding to those challenges.

During the last quarter of 2020, practitioners and policymakers were invited to download the app to log a 2-minute response to one main question every day, for eight weeks. The questions were both practice and policy-focused, and based on the '4P' children's human rights framework of Protection, Provision, Prevention, and Participation, in order to better understand the ways practitioners and policymakers around the world were protecting children, providing for their unique needs, enabling their participation in decisions that affect them, and preventing harm, during the COVID-19 pandemic.

RESEARCH THEMES

The smartphone app explored respondents' views of several core areas:

- 1. Learning from the pandemic so far
- 2. Protection: Ending violence against children
- 3. Provision: Access to food, health, education
- 4. Collaborations, flexibility, transparency and trust: Applying evidence from past emergencies to COVID-19
- 5. Prevention: Children's social and emotional wellbeing
- 6. Special considerations: Justice, alternative care and disabilities
- 7. Participation: Responding to #COVIDUnder19-children and young people's findings
- 8. Preparing to rebuild post-COVID

OUR KEY PARTNERS

Our 17 international Key Partners range from capacity-building organisations, to international advocacy NGOs and service delivery partnerships, to the UN and other inter-governmental agencies. Their support and close engagement enabled the **Institute for Inspiring Children's Futures** to gather these important insights through the COVID 4P Log smartpone app. Their mention here does not imply endorsement of these findings.





































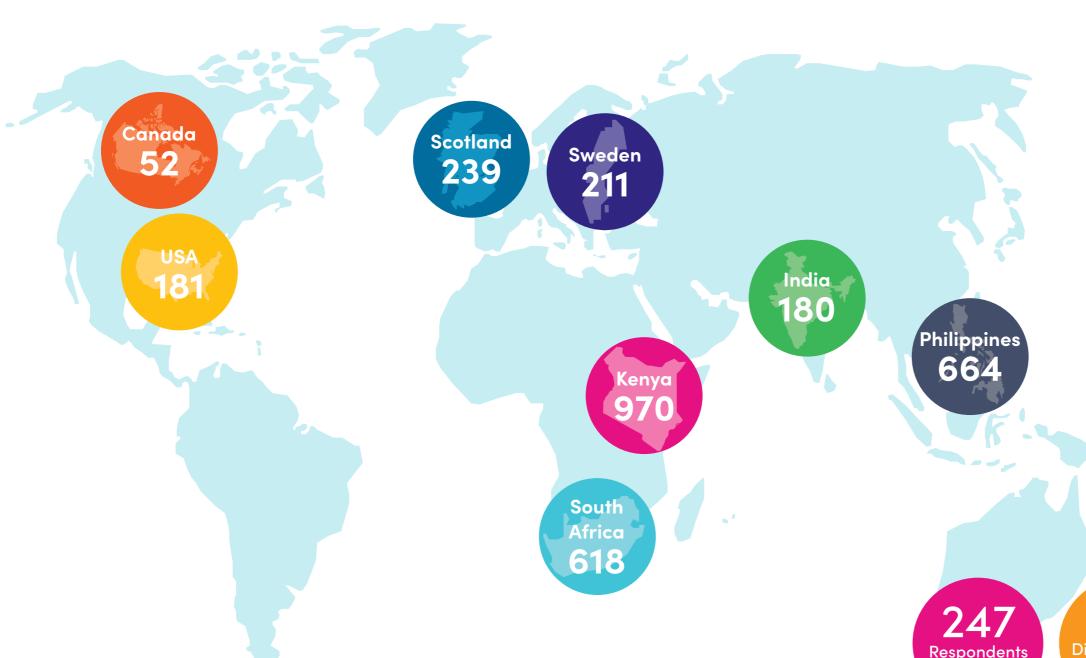
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Respondents and Countries Represented in the Eight-Week COVID 4P Log Project

3339 Responses

22 **Countries** **Continents**

TOP 8 COUNTRIES BY NUMBER OF RESPONSES



Overall, 247 respondents from 22 countries - including 139 direct service providers, 66 service managers and 42 policymakers contributed to at least one main app question between the last quarter of 2020 and the first quarter of 2021. 173 respondents were women; 68 - men; 5 - prefer not to say; 1 - other.

The represented countries were (in alphabetical order) Australia, Bangladesh, Belgium, Canada, Ethiopia, Greece, India, Israel, Italy, Kenya, Lebanon, Malawi, Mexico, the Netherlands, Palestine, the Philippines, the Republic of Montenegro, South Africa, Sweden, United Kingdom (England), United Kingdom (Scotland) and the United States of America (USA).

The top eight countries by highest number of respondents were Kenya (60), the Philippines (48), South Africa (41), Scotland (32), India (14), the USA (12), Canada (11), and Sweden (8).

A total of 3339 responses were generated across the eight weeks of questions - with eight countries, Kenya (970), the Philippines (664), South Africa (618), Scotland (239), Sweden (211), the USA (181), India (180), and Canada (52) - accounting for 93% of all responses.

The remaining countries had the following numbers of respondents and responses, respectively: Malawi (2/52), England, UK (1/52), Israel (1/40), the Republic of Montenegro (1/27), Greece (5/13), Belgium (1/10), the Netherlands (2/10), Ethiopia (2/4), Lebanon (1/4), Palestine (1/4), Australia (1/2), Bangladesh (1/2), Italy (1/2), and Mexico (1/2).

169 (68%) respondents worked for NGOs; 31 (13%) - for the government; 22 (9%) - for civil society organisations; 11 (4%) in the private sector; 10 (4%) - other; and 4 (2%) - unknown.

Respondents represented a range of sectors such as child and youth care, advocacy, community-based services, sexual and reproductive health, mental health, child rights, children and family services, education, social services, working with refugees, juvenile justice, maternal and child health, housing, and others.

Respondents

Direct Service Providers

66 Service **Managers** **Policymakers**



Report Summary: Protecting Children from Violence

The in-depth findings from the analysis of the COVID 4P Log Week 2 responses are reported in three main parts. Part One provides an overview of respondents' accounts of **good practices** in protecting children from violence during the pandemic. Examples from good practices in day-to-day service provision, health care, justice, advocacy, education and others are offered. The impact of gender-based violence services on children's wellbeing is also discussed.

Part Two addresses the reported **challenges** to protecting children during COVID-19, as well as respondents' views of the **impact** of those challenges on children. The most frequently discussed challenges relate to protecting children's safety at home, disrupted service delivery and the ineffective child protection laws, policies and service responses.

Part Three is dedicated to **how practices have changed** in response to child protection challenges, including accounts of policy and service innovations, as well as barriers to their success.

The data presented here were collected in the last quarter of 2020.

This report aims to generate new insights, and spark new questions and ideas, to inform, equip and strengthen policy, service and practices for and with children and their families. This report is part of a series of Learning Reports documenting the COVID 4P Log App findings from responses across the eight weeks of questions. This COVID 4P Log Learning Report Series aims to inform and equip those who seek to 'respond to children's distinct needs, and realise their full range of rights and opportunities, to achieve peaceful, just and inclusive societies for all'. ²

2. Davidson, J.; Elsley, S.; Giraldi, M.; Goudie, A.; Hope, K.; Lyth, A.; Van Keirsbilck, B. (June 2019): Justice for Children, Justice for All: The Challenge to Achieve SDG16+ Call to Action. Glasgow: CELCIS - Inspiring Children's Futures, University of Strathclyde. https://www.justice.sdg16.plus/justiceforchildren



Increased Risks for Children's Safety and Rights During COVID-19

The COVID-19 pandemic has put children at an increased risk of neglect, violence and other rights violations. The overwhelming majority of respondents reported their sectors had experienced challenges in protecting children from violence.

Delays in Reporting Abuse and Pursuing Justice

Delays in the reporting of abuse and pursuing justice, constrained service capacity, ineffective child protection policies and insufficient coordination among stakeholders often perpetuated those risks for children. Detection of cases of child abuse and other violations had been hindered during the COVID-19 pandemic as a result of movement restrictions, limited home visits, infection risks, connectivity issues and service disruptions. This necessitated urgent and flexible responses to ensure cases of abuse were promptly assessed, reported and addressed.

Challenges to Reaching All Children

Reaching all children and families, particularly those living in poor and/or rural areas, was often challenging due to the lack of connectivity and resources.

Good Practices

Despite the challenges, the majority of respondents identified good practices that had been implemented to protect children from violence during the pandemic. Good practices in child protection during the pandemic were reported in several crucial domains: advocacy and signposting; justice; health care; education and awareness-raising; children and community involvement; and virtual service delivery.

Service Innovations

Innovations in service delivery included leveraging virtual communication platforms; helplines for children in distress; community networks; optimised and integrated health services; safe spaces for children; and others.

Gender-Based Violence Services

Gender-based violence support was delivered through helplines, shelter and alternative care, life skills training, early intervention, supportive policing and paralegal support, and benefitted both women's and children's wellbeing.

Policy and Organisational Challenges to Protecting Children

The ineffectiveness of child protection laws, policies and service responses often hindered the implementation of effective practices in promoting child safety and wellbeing. Respondents felt a stronger focus on assessment, prevention and early intervention was needed.

Engaging with Children and Upholding the Full Spectrum of their Human Rights

Listening to children's concerns and creating awareness of child protection issues were recognised as important. Ensuring children's wellbeing and continued access to essential rights such as health, safety and justice was dependent upon responsive and well-coordinated systems and structures.

Involving the Community

Community partners were involved to ensure a holistic and efficient approach to child protection.

www.InspiringChildrensFutures.org

Summary of Main Findings: Responses to Protect Children from Violence During the COVID-19 Pandemic

- The vast majority of respondents had observed good practices to protect children from violence during the pandemic. Those practices were addressing a range of issues – such as physical, sexual and emotional violence, neglect and deprivation.
- The most commonly reported examples of such best practices were:
 advocating against gender-based violence, as well as providing helplines for
 children in distress; educating children and caregivers about children's rights;
 and following up on, and referring, child protection cases promptly to ensure
 justice was served.
- Examples of facilitating access to health care by, for example, organising multidisciplinary child protection units in hospitals, were also given.
- Respondents also shared good practices in the provision of basic needs to families, and the protection of their rights, and online support and services.
 Examples included: child protection checks via WhatsApp; online consultation with children; using social media to report cases of abuse and other violations; and facilitating child-friendly activities online.
- Respondents stressed the importance of connecting with, and listening to, children in order to understand their concerns and escalate any issues swiftly.
- A range of positive outcomes of gender-based violence services for children were also recognised – from the provision of shelter and the reduction of violence to life skills training and psychosocial support.
- While respondents noted these good examples of practice despite the challenges in the pandemic, there were still serious barriers to effectively protecting children from violence, and deep concerns raised about the impact on children.



Yes there is a programme that was designed to assist child and youth care workers while working under lock down situations. It was called Child and Youth Care Workers Response to Covid19 [...] It provided tools that the child and youth care workers could use while connecting with families via social media platforms and also had built in methods for counselling children in private. Some of the tools included budgeting, parenting skills and how to keep the young people busy. Children were assisted with school work and also provided with means to request time for counselling. This programme prevented a child from suicide.

Direct Service Provider, NGO, South Africa





All those who work with children eg CHVs and case workers have sole responsibility to monitor any form of Violence to children by linking them to law enforcement based at the community level. Cases reported are followed up to ensure justice is done

Direct Service Provider, NGO, Kenya





Summary of Main Findings: Challenges and Impact on Children

- Numerous child protection challenges during the pandemic were reported.
 The majority of those responses can be categorised as:
 - o Ineffective child protection laws, policies and service responses;
 - o Violence against children in the home;
 - o Barriers specific to carrying out home visits and monitoring children;
 - o Service delays and disruptions;
 - o Health system pressures;
 - o And poverty and unemployment.
- In addition, ineffective law enforcement; delayed and uncoordinated responses; limited resources; civic space restrictions – were all reported as persistent barriers to effective child protection practices. In some cases, those challenges had resulted in difficulties pursuing justice, unsuitable placements for children, the lack of access to services, among other negative outcomes.
- Barriers to home visits and child and family monitoring were most often related to movement restrictions, the lack of cooperation by caregivers and COVID-19 fears.
- Collectively, those challenges were associated with a range of negative outcomes for children, specifically relating to: accessing essential services; reporting cases of abuse; and accessing safe spaces.



During covid19 we were unable to do home visits so we couldn't engage and work in the life space of our beneficiaries, yes we did virtual connections to check up on them but that was not enough to assess the situation they're in during this global pandemic. In our work line we only experience challenges to protect them when they relocate to another place without informing you because you can't tell if they are safe and not experiencing violence

Service Manager, NGO, South Africa

"



We repeat concerns to child welfare agencies and sometimes feel surprised to hear that children will still be returned to living with the family members or caregivers we had reported about. We struggle to accept that child welfare has deemed certain placements as suitable when we often have concerns around emotional, physical and verbal abuse and neglect

Direct Service Provider, Government, Canada

"



Summary of Main Findings:

Innovative Practices in Response to Child Protection Challenges

- Most respondents had seen new practice innovations to child protection challenges in response to COVID-19. Those innovations were addressing different types of violence against children such as emotional, physical and sexual violence, and deprivation and neglect, across a range of age groups.
- Respondents shared several innovative solutions that had been implemented to address some of the service delivery challenges during COVID-19, such as:
 - o Hotlines for reporting cases of abuse;
 - o Alternative ways to communicate with children and families (for example, televisits);
 - o Child-friendly justice practices;
 - o Child protection policies;
 - Positive parenting training and improving community awareness of children's rights;
 - o Multi-drug dispensing; and mobilising neighbours and community networks.
- Overall, several types of positive outcomes of those changed practices
 were reported, including: more effective service delivery leading to better
 engagement of children and families; ensuring frequent contact between
 children and families; and reaching the harder-to-reach such as families in
 rural areas.
- A number of persistent challenges to sustaining and scaling up innovations and good practices were reported: systemic and structural issues (such as poverty, corruption and the lack of funding); movement restrictions and limited home visits; communication with caregivers and children; community awareness and acceptance; staff sickness; and the premature release of perpetrators of violence.
- Systemic and structural barriers included poverty, corruption, the lack of funding, insufficient services, cultural practices, poor implementation of programmes, the inadequate focus on prevention, and others.



The youth are now involved in disseminating information on child abuse and where/who to report cases that they know of. They advocate messages online with their peers

Service Manager, NGO, Philippines

"



Learning modules for parents, specifically positive discipline in everyday parenting, was revised to adapt key messages and tips for parents on how to support their children given the pandemic

Service Manager, Civil Society Organisation, Philippines

99



Poverty, cultural practices and corruption are among the barriers

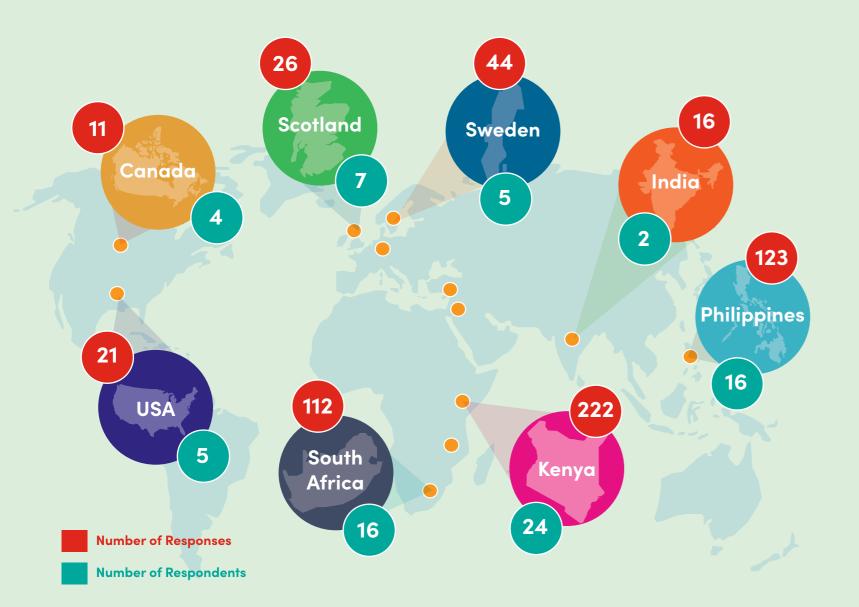
Direct Service Provider, NGO, Kenya

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Respondents and Countries Represented in this Report

590 responses from 84 respondents across
12 countries and 4 continents



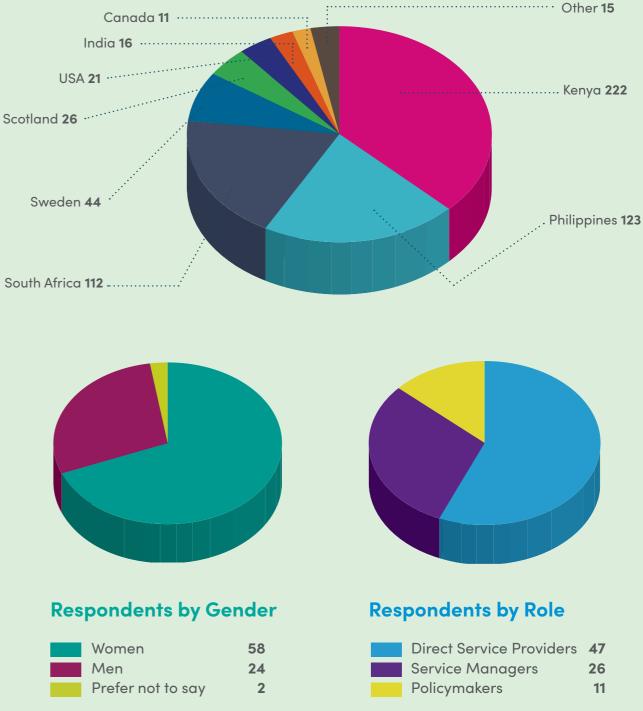
The findings in this Learning Report are based on 590 responses from 84 respondents – including 47 direct service providers, 26 service managers and 11 policymakers (58 – women; 24 – men; 2 – prefer not to say).

58 (69%) represented NGOs; 10 (12%) – civil society organisations; 8 (10%) – the government; 2 (2%) – the private sector; 3 (4%) – other; 3 (4%) – unknown. 52 (62%) of all respondents in this report supervised staff.

The respondents represented 12 countries:

Belgium, Canada, India, Israel, Kenya, Malawi, Palestine, the Philippines, South Africa, Sweden, the United Kingdom (Scotland) and the USA.

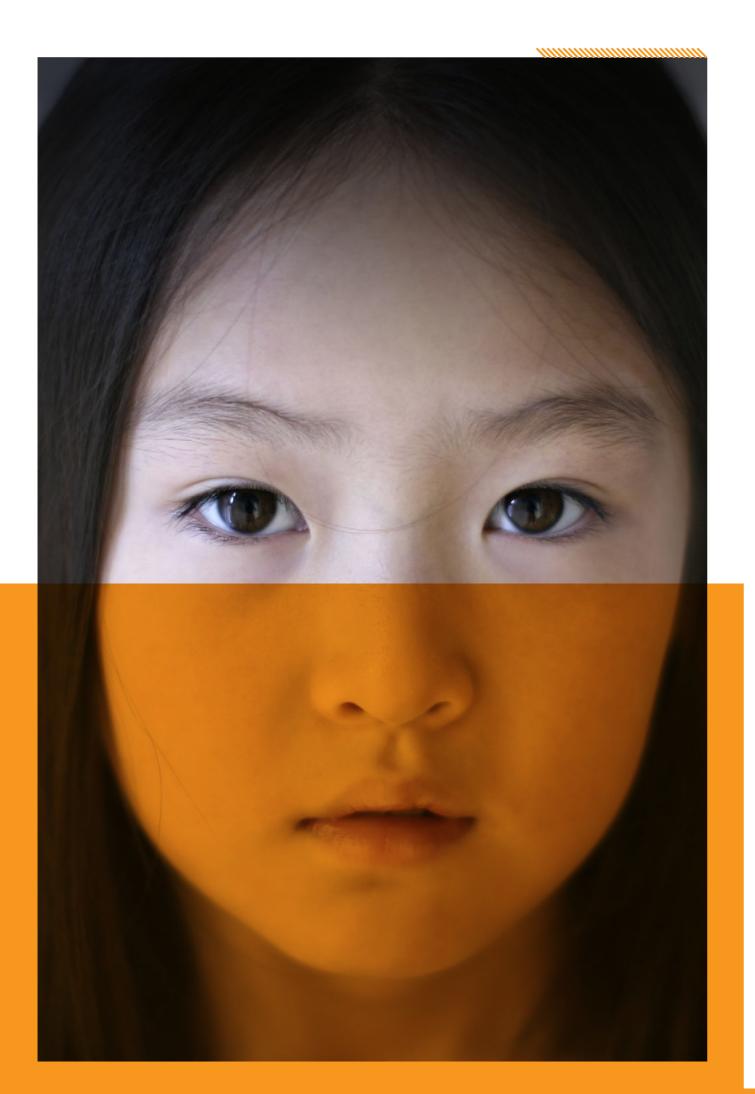
Number of Responses



The top eight countries by highest numbers of respondents and responses, respectively, were:

Kenya (24 and 222); the Philippines (16 and 123); South Africa (16 and 112); Sweden (5 and 44); Scotland (7 and 26); the USA (5 and 21); India (2 and 16); and Canada (4 and 11).

Together, the responses from those top eight countries amount to 575 or 97% of all responses reported here. All other countries contributed to a total of 15 (or 3%) of all responses.



In-Depth Findings—Part One:

Responses to Protect Children from Violence During the COVID-19 Pandemic

Children are at an increased risk of all forms of violence during a pandemic. Safeguards, and responses to protect children, can be compromised. This can result in harm to children.

These Week 2 questions explore the ways in which respondents and their sectors are working to protect children from violence. The questions ask about good practices protecting children from violence during the pandemic, as well as the challenges in protecting children, and the impact of these on children. In addition, respondents were asked about innovative practice and policy solutions that were needed, and any barriers they encountered in their efforts to change practice.

Through consultations with our Key Partners, and reinforced by international COVID guidance published early in the pandemic, we recognised how important it was to pay close attention to the many adaptations to practices, services and policies in response to pandemic challenges. And most importantly, we recognised the importance of understanding the impact of these responses on children and their families.

The following three sections offer an overview of how respondents most commonly answered those questions. Key themes and verbatim quotes from our respondents are used throughout to illustrate the main points raised.

QUESTION	NUMBER OF RESPONSES
Have you seen good practices that have protected children from violence during COVID19?	30
Please describe this good practice and the impact on children's wellbeing.	34
What type of violence against children are these good practices addressing?	32
Which age group(s) are these services responding to?	31
Services that prevent and respond to violence against women are also essential in the protection of children from violence. What services are available?	42
If available, please describe these services. In what ways are they useful in promoting children's wellbeing?	24

Good Practices



Respondents were asked several close-ended questions regarding any good practices in protecting children from violence during COVID-19 they had observed. Fewer than half of the respondents in this report opted to answer those questions.

The responses are summarised in the tables and indicate that the overwhelming majority of respondents had seen such practices being implemented during the pandemic; that those practices were addressing a range of issues – such as physical, sexual and emotional violence, neglect and deprivation; and that a wide range of age groups benefitted from those practices and services.

Have you seen good practices that have protected children from voilence during COVID19?	TOTAL RESPONDENTS 37	%
Yes OR Provided a free-text response containing an example of an innovation	29	78 %
No	5	14%
Don't know	1	3%
Not Applicable	1	3%
Free-text responses that could not be categorised	1	3%

What type of violence against children are these good practices addressing?	TOTAL RESPONDENTS 32	%
Physical	19	63.3%
Emotion	22	73.3%
Sexual	22	73.3%
Witnessing IPV	12	40%
Neglect	17	56.7 %
Deprivation	12	40%
Other	2	6.7%

Which age group(s) are these services responding to?	TOTAL RESPONDENTS 31	%
0-2	11	35.5%
3-7	15	48.4%
8-12	20	64.5%
13-17	26	83.9%
18-24	9	29%

In addition, a policymaker working for the government in Sweden indicated that they were concerned with 'honor related violence, trafficking', and a service manager working for the government in the USA was concerned with 'medical neglect'.

Several free-text responses were offered to the question, 'Have you seen good practices that have protected children from violence during COVID19?'. Most of these featured examples of innovations – including:

- Organising positive parenting sessions and 'male championing among male caregivers' (Direct Service Provider, NGO, Kenya);
- A ward champion forum for child protection formed by the government (Service Manager, NGO, Kenya);
- Educating children and parents on the rights of children (Policymaker, NGO, Kenya);
- Self-help groups of parents with disabilities promoting the rights of children with disabilities and working with the local authorities through online activities (Service Manager, NGO, Philippines);
- Innovations relating to child and youth care worker support (South Africa):

'Yes. Child and youth care workers would call and watsapp children to do child protections checks. They would look out for issues at home and respond if suspected anything.'

Service Manager, NGO, South Africa

'Yes, Child care workers and other community cadre of workers have been able to provide services virtually especially to children on ART'

Service Manager, NGO, South Africa

'Yes there is a programme that was designed to assist child and youth care workers while working under lock down situations. It was called Child and Youth Care Workers Response to Covid 19.'

Direct Service Provider, NGO, South Africa

One direct service provider working at a civil society organisation in the Philippines, however, shared:

'I did not see any innovative approach at least from my purview. Those that were working before the pandemic are now working double time. Examples of which are the child protection units in the hospitals and helplines.'

Practices that Have Protected Children from Violence During COVID-19





EDUCATION. TRAINING AND AWARENESS-RAISING



FACILITATING ACCESS TO JUSTICE



FACILITATING ACCESS TO HEALTH CARE



PROVISION OF BASIC SUPPLIES



ONLINE SUPPORT AND SERVICES



POLICIES AND SYSTEMS PUT IN PLACE TO PROTECT CHILDREN



PARTICIPATION OF CHILDREN AND ADULTS



CONTINUING FACE-TO-FACE VISITS



INNOVATIVE PROGRAMME TO SUPPORT CHILD AND YOUTH CARE WORKERS **DURING LOCKDOWN**

In response to the prompt, 'Please describe this good practice and the impact on children's wellbeing', respondents reported a wide range of practices that had been effective at protecting children from violence during the COVID-19 pandemic.

Advocacy and Signposting

Responses included advocacy against gender-based violence, as well as the provision of helplines for children in distress:

'Advocating against sgbv [sexual and genderbased violence] protect children from being violated [...]'

Direct Service Provider, NGO, Kenya

'Ensuring that children are adhering to covid rules by wearing their mask sanitize their hands and the president also addresses that number of aender base violence should not increase because of covid, people shouldn't take this as an opportunity to I'll treat those who can't fight for themselves.'

Direct Service Provider, NGO, South Africa

There is a helpline for children 1098 and if the child is in ditress [distress] they call the number and the social workers talk to the children and thileir [their] parents. In rare cases the child is put into a childrens home to keep them safe. The organisation reaches out through its community network of children and adults. During the lock down connectingband [connecting and] talkingbto [talking to] children and adults was very important. The children's groups tell adult facilitators if anybchildren [any children] are in

Service Manager, NGO, India

One respondent, however, commented that hotlines were insufficient to address those challenges and that more accessible services were required:

'The provision of hotlines might not be enough as many times children tend to report late or not at all, what the children need are services within their reach.'

Service Manager, Civil Society Organisation, Philippines

Education, Training and Awareness-raising

Those include educating children and caregivers about children's rights; webinars for caregivers; and genderbased violence training:

'Mainly webinars given to parents and carers'

Service Manager, NGO, Philippines

'Gender based violence training .and shujaa'

Direct Service Provider, NGO, Kenya

'Education about their rights, giving them room for sharing, directing them to places where to report.'

Direct Service Provider, NGO, Kenya

'Not so much, however ican [I can] clearly state that they're organization that works with children and children are recieving [receiving] psychosocial support from trained and professional child care professionals.and children are being educated about their right who to report to and where to report.'

Direct Service Provider, NGO, South Africa

Facilitating Access to Justice

'The good practice is that the paralegal will pick up any case refered [referred] and act a accordingly reporting to policy, isolation and protection of victims as case is ongoing, referring for treatment if it needs treatment.'

Service Manager, NGO, Kenya

'All those who work with children eg CHVs and case workers have sole responsibility to monitor any form of Violence to children by linking them to law enforcement based at the community level. Cases reported are followed up to ensure justice is done'

Direct Service Provider, NGO, Kenya

Common responses to the survey item, 'Please describe this good practice and the impact on children's wellbeing'



Facilitating Access to Health Care

'Giving free Reproductive health services ensure proper care to children.'

Direct Service Provider, NGO, Kenya

'the organization of peer to peer counseling among children and the multidisciplinary child protection units in hospitals'

Service Manager, Civil Society Organisation, Philippines

Provision of Basic Supplies

'Provision of sanitary towels, solar lamps'

Direct Service Provider, Civil Society Organisation, Kenya

'Provision of the basic needs of children during pandemic.'

Direct Service Provider, Civil Society Organisation, Philippines

Online Support and Services

Examples include child protection checks via WhatsApp; online consultation with children; using social media to report cases of abuse and other violations; and facilitating child-friendly activities online:

'Use of social media to report abuses, neglect and exploitation against children'

Service Manager, NGO, Philippines

'Online Consultation with children [...] conducting child friendly activities online'

Direct Service Provider, Civil Society Organisation, Philippines

'Child and youth care workers working in the life space of families and children virtually and physically.'

Direct Service Provider, NGO, South Africa

Policies and Systems Put in Place to Protect Children

One respondent, a direct service provider from an NGO in the Philippines, highlighted that policies and systems at the local government and NGO levels had been put in place to protect children:

'I've experienced that some local government units and some NGOs at the local level are ensuring that systems and policies (i.e. ordinance, iec) are in placed to fully protect and safeguard the children. [...] Although this aspect is more of at the response level, it's somehow lessen the potential effect of violence to the children since they ensure that the system is in place.'

Participation of Children and Adults

This includes listening to children's concerns and mobilising community networks:

'Education about their rights, giving them room for sharing , directing them to places where to report.'

Direct Service Provider, NGO, Kenya

'Children have people to talk about their worries, not only to report about violations.'

Policymaker, NGO, Philippines

'the organization of peer to peer counseling among children'

Service Manager, Civil Society Organisation, Philippines

'There is a helpline for children 1098 and if the child is in ditress [distress] they call the number and the social workers talk to the children and thileir [their] parents. In rare cases the child is put into a childrens [children's] home to keep them safe.

The organisation reaches out through its community network of children and adults. During the lock down connectingband [connecting and] talkingbto [taking to] children and adults was very important.

The children's groups tell adult facilitators if anybchildren [any children] are in distress.'

Service Manager, NGO, India

'Engaging parents/caregivers to be ALL children's keeper be it that the child is yours or not; respond to any issue affecting any child'

Direct Service Provider, NGO, Kenya

'Child and youth care at community level'

Direct Service Provider, NGO, South Africa

Continuing Face-to-Face Visits:

'Our investigation teams are continuing to make face to face visits to ensure child safety and while they have enacted Covid protocols (asking questions about Covid exposure before entering a home), they have not changed the frequency of their face to face contacts.'

Service Manager, Government, USA

An Innovative Programme for Child and Youth Care Workers During Lockdown:

'Yes there is a programme that was designed to assist child and youth care workers while working under lock down situations. It was called Child and Youth Care Workers Response to Covid19 [...] It provided tools that the child and youth care workers could use while connecting with families via social media platforms and also had built in methods for counselling children in private. Some of the tools included budgeting, parenting skills and how to keep the young people busy. Children were assisted with school work and also provided with means to request time for counselling. This programme prevented a child from suicide.'

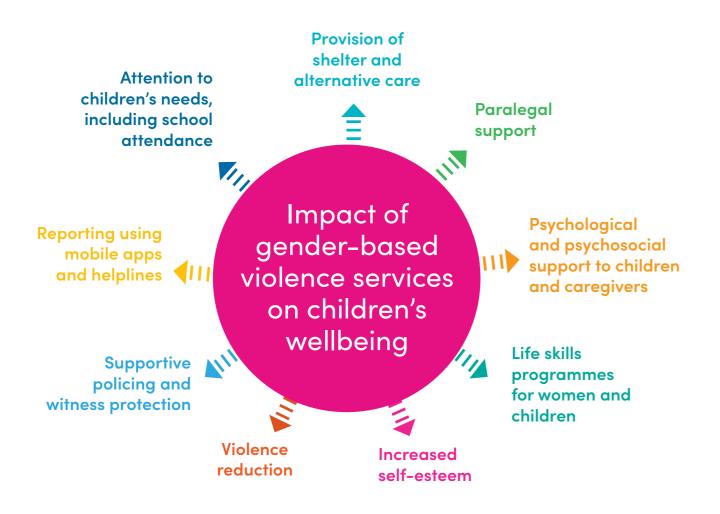
Direct Service Provider, NGO, South Africa

Notably, a direct service provider from an NGO in South Africa highlighted the difference between practices being 'written' and being implemented:

'In paper practices are written but implementation will be done after you have fought.'

Direct Service Provider, NGO, South Africa

Preventing Violence Against Women and the Impact on Children and Families



Common responses about gender-based violence services and their impact on women and children

Respondents were asked what services that prevented and responded to violence against women were available and how useful those were in promoting children's wellbeing.

Services that prevent and respond to violence against women are also essential in the protection of children from violence. What services are available?	TOTAL RESPONDENTS 42	%
Helpline	25	59.5%
Shelter	21	50%
Supportive Policing	17	40.5%
Psychosocial support	28	66.7%
Other	3	7.1 %

Gender-based violence services were recognised by respondents as having a range of direct positive impacts on children's wellbeing, including: the provision of shelter and alternative care; paralegal support; violence reduction and early intervention; supportive policing and witness protection; psychological and psychosocial support; life skills programmes; attention to children's right to education through schooling; their increased self-esteem; and facilitated reporting via mobile apps.

The Provision of Shelter, Alternative Care and Paralegal Support

'Safe places after violence, gender based violence team and the paralegals that follow up to ensure that Justice is served.'

Direct Service Provider, NGO, Kenya

'Shelter allows the survivors to live away from the environment of abuse and prevent out of court settlement'

Service Manager, NGO, Kenya

'Womans aid offer counciling [counselling] to children and woman also offer housing, they also will support a family leave home and be safe.'

Direct Service Provider, Private Sector, Scotland

'Children are removed from the violent situation.'

Policymaker, NGO, Philippines

Violence Reduction and Early Intervention

'They curb level of violence'

Direct Service Provider, International Organisation, Malawi

'research shows that violence against women is related to violence against children. One must be served to address the other. Supportive preventions and early intervention programmes are needed in addition to responsive services. ImOther [Other] facts also needs to be addressed like substance use in order to prevention the above.'

Service Manager, NGO, South Africa

Supportive Policing and Witness Protection

'Supportive policing makes it easier for witness protection, evidence preservation and arrest and presentation of the suspected perpetrators to court for justice'

Service Manager, NGO, Kenya

'Helpline different organisations such as lifeline and the Department of social Development including supportive policing.'

Service Manager, NGO, South Africa

Psychological and Psychosocial Support

Examples include counselling offered to both children and parents, including video counselling, to help with stress alleviation, processing painful memories, sharing difficulties, decreasing self-stigma and managing mental health problems:

'caregiver PSS [psychosocial support?] forums'

Director, Kenya (organisation type unknown)

'Psychological support helps the child survivors to understand that they are not to blame and help prevent self stigma'

Service Manager, NGO, Kenya

'During psychosocial support, children get to freely interact and share their challenges. Every child will always have time to share with newly planted guides.'

Direct Service Provider, NGO, Kenya

'We offer free video counselling and psychological support during this stressful time.'

Policymaker, NGO, Kenya

'Help lines help victims relay their cases to relevant authorities, psychosocial support to mothers to help them deal with stress and depression which might result to violence.'

Direct Service Provider, NGO, Kenya

Facilitated Reporting Using Helplines and Mobile Apps

'Helpline for children's and women. Available social service with support. Shelters provided by NPO:s'

Direct Service Provider, Civil Society Organisation, Sweden

'Helpline help in quick handling of the case of women thus reducing psychological stress to the children in that house.'

Service Manager, NGO, Kenya

'Stakeholder Whatsapp group for reporting'

Director, Kenya (organisation type unknown)





In-Depth Findings—Part Two:

Challenges in Protecting Children from Violence During the COVID-19 Pandemic, and their Impact on Children

In discussions with our Key Partners internationally, it was starkly clear that they were deeply concerned about the impact of the public health containment measures on children, on families, and on practitioners' abilities to protect them. The questions in this section explore this further.

QUESTION	NUMBER OF RESPONSES
Has your sector experienced challenges in protecting children from violence during COVID19?	47
Have you had challenges in the protection of children from violence in your own work?	33
Please describe these challenges.	34
Which age group(s) are most challenging to protect?	38
What types of violence against children have been most challenging to protect children from? If other, please specify.	38
Have you seen challenges in delivering home or clinic visits, or other practices to protect children?	35
Please describe these challenges, how these have affected children, and any innovative solutions.	24

Challenges and Impact on Children



A word cloud from responses about challenges faced in protecting children, their impact on children and any innovative solutions

Respondents were asked a series of questions regarding the challenges to protecting children from violence during COVID-19 observed in their sectors and in their own work, as well as about their impact on children.

In brief, the responses to this series of close-ended questions showed that most respondents had faced challenges in protecting children from violence during the pandemic.

Emotional, physical and sexual violence, as well as witnessing interpersonal violence, were highlighted as the most challenging to protect children against. The vast majority of respondents also indicated they had experienced difficulties carrying out home or clinic visits, or other practices to protect children.

A service manager from an NGO in Kenya shared:

'If funds were available we would have ensured all community volunteers who are in touch with the children are sensitized on prevetion [prevention], protection, provision and participation'

Has your sector experienced challenges in protecting children from violence during COVID19?	TOTAL RESPONDENTS 45	%
Yes	34	75.6%
No	6	13.3%
Don't Know	2	4.4%
N/A	3	6.7%

Have you had challenges in the protection of children from violence in your own work?	TOTAL RESPONDENTS 44	%
Yes	24	54.5%
No	17	38.6%
Don't Know	1	2.3%
N/A	2	4.5%

Which age group(s) are most challenging to protect?	TOTAL RESPONDENTS 38	%
0-2	7	18.4%
3-7	8	21.1%
8-12	18	47.4 %
13-17	26	68.4%
18-24	5	13.2%

Have you seen challenges in delivering home or clinic visits, or other practices to protect children?	TOTAL RESPONDENTS 33	%
Yes	24	72.7%
No	7	21.2%
Don't Know	1	3.0%
N/A	1	3.0%

What types of violence against children have been most challenging to protect children from? If other, please specify	TOTAL RESPONDENTS 38	%
Physical	22	57.9%
Emotional	27	71.1 %
Sexual	20	52.6%
Witnessing IPV	19	50%
Neglect	9	23.7%
Deprivation	7	18.4%
Other	0	0%

In addition, one government policymaker from Sweden responded with 'honour related violence, trafficking, prostitution'.

Ineffective law enforcement

Uncoordinated stakeholder actions

> Delayed government responses

Delays in the justice system

Inadequate child protection laws, policies and service

Limited resources

Children retained in non-specialised police centres

responses

Insufficient support and recognition of child workers

Children remaining in homes despite safety and wellbeing concerns

Maria Maria

Lack of trust in public social work provision

Civic space restrictions

Common responses about child protection challenges related to laws, policies and services

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Challenges



Two open-ended questions asked respondents to describe the challenges they had faced such as challenges to delivering home or clinic visits, or any other challenges to protecting children.

The majority of those responses can be categorised as: ineffective child protection laws, policies and service responses; violence against children in the home; barriers specific to carrying out home visits and monitoring children; service delays and disruptions; health system pressures; and poverty and unemployment.

Inadequate Child Protection Laws, Policies and Service Responses

Those included inadequate law enforcement; delayed and uncoordinated responses; limited resources; civic space restrictions; and others. In some cases, those challenges had resulted in difficulties pursuing justice, unsuitable placements for children, and the lack of access to services, among other negative outcomes.

'Let me cite a specific case. So there was a case of extreme violence against children in our country. You can google Fabel Pineda's case. It was really challenging not only could we not stage a protest as expression of our indignation, but it was also particularly difficult during this time because of the preeminence of politics in the country. The case died just like that. It is sad because even when we promote child helplines and tell children to 'report, report, report' the existing laws and mechanisms could not protect them.'

Direct Service Provider, Civil Society Organisation, Philippines

'Closure of courts and delayed justice system'

Director, Kenya (organisation type unknown)

'During covid19 we were unable to do home visits so we couldn't engage and work in the life space of our beneficiaries, yes we did virtual connections to check up on them but that was not enough to assess the situation they're in during this global pandemic. In our work line we only experience challenges to protect them when they relocate to another place without informing you because you can't tell if they are safe and not experiencing violence'

Service Manager, NGO, South Africa

'Not having acces [access] to FCS immediately'

Direct Service Provider, NGO, South Africa

'The organisations that we make referral to sometimes take long to respond, or the parent or caregiver of the child violated is bought especially if caregiver is not a biological parent.'

Service Manager, NGO, Kenya

'The challenge is really the effectiveness of the government policies and services in place that are supposed to protect children. Until now, the best services are still being provided by private NGO service providers. There is also no trust in the police and public social work provision'

Service Manager, Civil Society Organisation, Philippines

'1-Inefficiency in law enforcement. The police take a lot of time to apprehend perpetrators of violence. 2- Judgement to these cases in court also take long. 3 -compromise, most of the time, perpetrators of these acts do compromise the victims, parents and even law enforcing officers by offering money or other goodies to drop or derail these cases. 4-culture, some times the act of violence could have been committed amongst people of the same family. The family would settle down the case as a family and release the culprit.'

Direct Service Provider, NGO, Kenya

The insufficient support and recognition of social workers was emphasised by a direct service provider from an NGO in Scotland:

'Bans on home visits for CP [Child Protection?] Social Work, lack of (or complete absence of) PPE provision for front line CP Social Work, lack of recognition for the role of CP Social Workers.'

Unsupportive policing and social work responses were highlighted by a service manager from an NGO in South Africa:

'The first is linked to responses of other workers where needed like police for example or social

workers or even our workers who were not working for some reason'

The insufficient coordination with the police was highlighted by a direct service provider from an NGO in South Africa:

'I did not expierance [experience] a lot of challenges it is just the delay on updates on cases from SAPS [South African Police Service]'

Violence Against Children in the Home

This included neglect, exposure to violence and poor parenting practices:

'Challenges in immediate response to VAC [violence against children] at home'

Policymaker, NGO, Philippines

'We repeat concerns to child welfare agencies and sometimes feel surprised to hear that children will still be returned to living with the family members or caregivers we had reported about. We struggle to accept that child welfare has deemed certain placements as suitable when we often have concerns around emotional, physical and verbal abuse and neglect.'

Direct Service Provider, Government, Canada

'Misunderstanding between the parents redulting [resulting] to abuse and neglect'

Service Manager, NGO, Kenya

'One of the children we service was lock in an old fridge by his mothers live in partner.'

Direct Service Provider, NGO, South Africa

'Verbal abuse physical abuse when for the families in the community is normal because that is how they discipline their children. Neglect too because sometimes they just lived their children going outside just to play without mask sometimes without dress. Playing mud, dirty water.'

Service Manager, NGO, Philippines

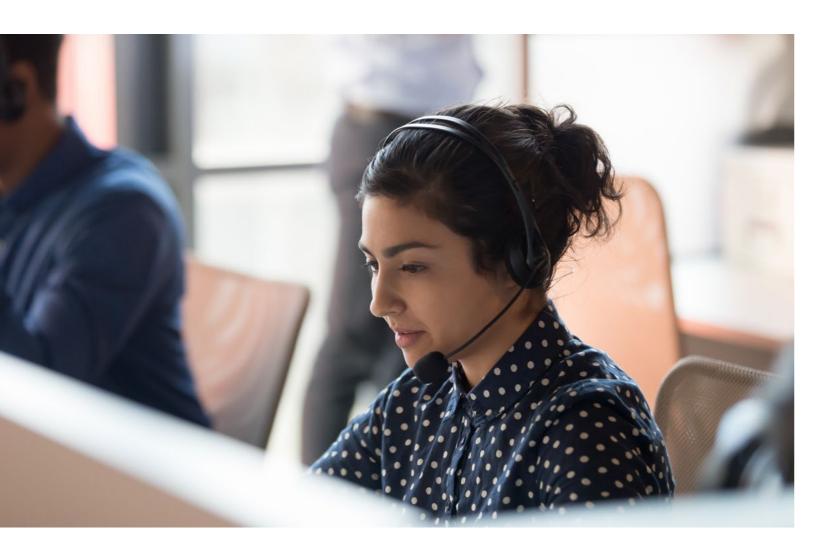
'We knew of kids stuck in homes during lockdown where parents had addiction problems and kids normally go on the streets to escape parents. Our concern was that we didn't know if one or two of them were safe and we couldn't check on them'

Direct Service Provider, NGO, Scotland

'Reports that more children contact phone service for them about violence to them or between their parents but difficult to follow up in child heath

Direct Service Provider, Civil Society Organisation, Sweden





Barriers to Home Visits and Child and Family Monitoring

Those were often related to movement restrictions, the lack of cooperation by caregivers and COVID-19 fears.

'Lack of cooperation and over expectations by the households'

Service Manager, NGO, Kenya

'We couldn't make home visits to check if our beneficiaries are doing well.'

Direct Service Provider, NGO, South Africa

'Staying long hours with the perpetrators, distorted support system due to curfew and movement restrictions'

Director, Kenya (organisation type unknown)

'During this period home visits were prohibited at times and therefore some parents suffered severe depression and anxiety because of the lack of face to face support and in turn it has a detrimental impact on the children'

Direct Service Provider, NGO, Scotland

'Home visit can facilitate transmission of virus. It is very high risk to field implementers as well as to the people to be visited in the houses. Failure to do home visits would lead increased in number of children continued to be abused inside their homes'

Service Manager, NGO, Philippines

'Caseworkers are nervous to visit families, and families are reluctant to allow caseworkers in their homes.'

Policymaker, Government, USA

Barriers to home visits were also reported by a service manager working at an NGO, in Kenya, a service manager from an NGO in the Philippines, and a direct service provider from an NGO in Scotland.

'Fear of corona contamination became deterrent deterrent to step into the community and reach children and provide services.'

Policymaker, NGO, India

CHILD PROTECTION DURING COVID-19: CHALLENGES

COVID-19 fear was also mentioned by a Director at an NGO in Kenya, and two direct service providers from NGOs in Kenya.

Other Disruptions to Service Delivery

Those included delays, the lack of coordination, staff sickness and difficult work conditions:

'Staff sick, families sick. General recommendation not to use public transportation. Extended period of the pandemic hinders regular visits, a lot of assessments, medication checks etc piling up. I anticipate that there will be a major disturbance to deliver services several years after the pandemic. But this is also a possibility to fix the system bugs in flow and underdeveloped processes'

Policymaker, Government, Sweden

'Not all CBOs [community-based organisations?] which employ workers were open as government delayed responses. Not all workers were on top form like some examples of police and social workers and even care workers in some instances. This time called for efficient responsive services and not a drop in them I bele9ve.'

Service Manager, NGO, South Africa

'Uncoordinated stakeholder watch on GBV [gender-based violence].'

Director, Kenya (organisation type unknown)

Health System Pressures

'For primary care, this has been made difficult by the lack of investment in a trained and robust health human resources even before covid-19. The other thing is that the health system was not really prepared even at the tertiary level, displacing children and young people of the health and child protection services when the health facilities took over in the care of covid patients.'

Service Manager, Civil Society Organisation, Philippines

'Accessing health facility is a problem due to fear of encounter ing with covid 19affected people&also the.medics are over whelmed with the big number of covid affected people.safe spaces are also acting like quarantine places.'

Direct Service Provider, NGO, Kenya

'closure of health facilities due to the surge in infection'

Director, Kenya (organisation type unknown)

Poverty and Unemployment

'Children being harmed by adults in the various forms. This as a result of increased poverty and resultant increase in the stress that comes with this.'

Direct Service Provider, NGO, South Africa





'Since we are notbalso [not also] allowed to do home visitations due to tge [the] pandemic, it is really hard to check on the children's welfare especially those who have no means to communicate. It is hard for them to report cases of abuse especially those happening in their homes and if perpetrators are their own family members. What we did is to ask some neighbors to check on some children who we are suspecting to be suffering in their homes.'

'The survivor does not always get the justice deserved coz most perpetrators are very close relative to the survivor making it had to push the case'

Direct Service Provider, NGO, Kenya

'People are sick and do not come to visits. No control over the situation in vulnerable families. Difficult to keep on working in a consistent and stringent manner. Some families lost in the system due to sick leaves and more urgent matters. Everything depends on the parents capacity and will.'

Policymaker, Government, Sweden

'The main challenge that we face as a sector is that most children are facing threats after being violated hence making it difficult for them to report.'

Direct Service Provider, NGO, Kenya

Service Manager, NGO, Philippines



In-Depth Findings—Part Three: Innovative Practices in Response to Child

Innovative Practices in Response to Child Protection Challenges

These questions sought to capture the range of ways that respondents were adapting their practices and services to overcome the many challenges posed by COVID-19, and what these innovations and adaptations were specifically focusing on in their efforts to ensure children were protected.

QUESTION	NUMBER OF RESPONSES
Have you seen new practice innovations in response to the challenges?	38
Please describe these changed practices, and how these have helped children and their families.	24
What type of violence against children are these new innovations addressing? If other, please specify.	16
Which age group(s) are these new innovations responding to?	17
Please describe any barriers you have seen which have affected the delivery of good and innovative practices in these challenges.	26

Changed Practices and the Outcomes for Children and Families

The responses to the close-ended questions showed that most respondents had seen new practice innovations in response to child protection challenges. Those innovations were addressing different types of violence against children such as emotional, physical and sexual violence, and deprivation and neglect, as well as a range of age groups.

Have you seen new practice innovations in response to the challenges?	TOTAL RESPONDENTS 37	%
Yes	22	60.5%
No	12	31.6%
Don't Know	3	7.9%
N/A	0	0%

Which age group(s) are these new innovations responding to? Select all that apply.	TOTAL RESPONDENTS 17	%
0-2	4	8.5%
3-7	6	12.8%
8-12	14	29.8%
13-17	15	31.9%
18-24	7	14.9%

What type of violence against children are these new innovations addressing? Select all that apply.	TOTAL RESPONDENTS 16	%
Physical	10	17.5%
Emotional	12	21.1%
Sexual	11	19.3%
Witnessing IPV	6	10.5%
Neglect	10	17.5%
Deprivation	7	12.3%
Other	1	1.8%
Three free-text responses were also received: 'Not really' (Service Manager, NGO, Kenya); 'I haven't seen any' (Direct Service Provider, NGO, South Africa); and 'All types' (Direct		

Service Provider, NGO, South Africa); and 'All types' (Direct Service Provider, Government, Sweden).

The relatively small number of responses received to the prompt, 'Please describe these changed practices, and how these have helped children and their families', revealed a variety of new practices aimed at better protecting children from violence during the pandemic.

Online Communication with Children and **Families**

'The protection mechanism was more on online communication to children and their family remain cautious during the pandemic periods. Care given to invite govt functionaries to support children'

Policymaker, NGO, India

'Video connections have allowed for engagement and service delivery to families in rural areas who didn't previously get same access. Helped parents to record videos for kids in care and helped kids record videos for parents. Allows for more frequent contact'

Policymaker, Civil Society Organisation, USA

virtual child protection services or check ins' Service Manager, NGO, South Africa

Adapting Positive Parenting Training

'Learning modules for parents, specifically positive discipline in everyday parenting, was revised to adapt key messages and tips for parents on how to support their children given the pandemic.'

Service Manager, Civil Society Organisation, Philippines

Increasing Awareness of Children's Rights

'Awareness creation through radio stations'

Direct Service Provider, NGO, Kenya

'Changed practice involved use of phone and radio to send messages on protection.'

Service Manager, NGO, Kenya

'The youth are now involved in disseminating information on child abuse and where/who to report cases that they know of. They advocate messages online with their peers.'

Service Manager, NGO, Philippines

Use of Helplines to Report Cases of Abuse

'The use of toll free lines to report cases of abuse had helped children and caregivers who don't have to physically present themselves to report

Service Manager, NGO, Kenya

Mobilising Community Networks

'Created a chain of open discussions and expressions amongst family, neighbours, village elders and administrators'

Direct Service Provider, NGO, Kenya

'Involvement of community partners termed as nyumba kumi, who understands the society well and always moves around checking on structures that are not working well'

Service Manager, NGO, Kenya

'Service to this effect has been trickled down to the grass roots reaching the affected immediately'

Direct Service Provider, NGO, Kenya

Medication Adherence

'MDT to clhiv [children living with HIV] children with high viral load. This has helped because they adhere to medicine And they have suppressed'

Direct Service Provider, NGO, Kenya

Positive Outcomes of Changed Practices

Overall, several types of positive outcomes of those changed practices were reported - including more effective service delivery leading to better engagement of children and families; ensuring frequent contact between children and families; and reaching the harder-to-reach such as families in rural areas.

No Changes in Practices

Notably, four respondents shared that no changes in practices had occurred:

'Im not sure if there have been changes. The team members have been told to be more sesitive [sensitive] with both the children and the parents as both are suffering.'

Service Manager, NGO, India

'There is no changes in practices when it comes to ways of working during this pandemic'

Direct Service Provider, Civil Society Organisation, Philippines

'I haven't seen one yet'

Policymaker, Government, Philippines

'I haven't seen them'

Direct Service Provider, NGO, South Africa

Innovative Solutions



Several innovative solutions to the aforementioned service delivery challenges were shared by the respondents – including:

- Hotlines for reporting cases of abuse;
- Alternative ways to communicate with children and families, for example, virtually;
- Child-friendly justice practices;
- Child protection policies;
- Multi-drug dispensing;
- Mobilising neighbours and community networks.

'One of the main challenges was related to the children in conflict with law, who need special care houses and child friendly justice practices, as per the CRC article 39. However, during the pandemic sometime retained children are kept with adults of at non-specallized [nonspecialised] police centers. This was to avoid any potential infections of Covid 19, in case the retained children may have the virus, so they should be kept away from other children at the care houses centers. To overcome this, our organization supported the rehabilitation of a room at each of those centers. Those rooms will serve as isolation rooms for the new children to avoid mixing them with other children residents of the houses and avoid the transmission of covid 1 in case they have it.

Also a room was rehabilitated at the police centers with child friendly measures, to recieve [receive] the retained children for the first 14 hours before being transferred to the care houses or released back home.

This process was accompanied with developing child protection policies for the care houses with close monitoring, in addition to developing a child friendly justice practices for the juvenile justice actors.'

Direct Service Provider, NGO, Palestine

'They were unable to receive the needed services. We sensitized them to be using the hotline'

Direct Service Provider, International Organisation, Malawi

'We have however been able to meet up at a public place whenever possible or communicate by telephone to continue to support families.'

Direct Service Provider, NGO, Scotland

'1. closure of health facilities due to the surge in infection . Solution - multi drug dispensing'

Director, Kenya (organisation type unknown)

'What we did is to ask some neighbors to check on some children who we are suspecting to be suffering in their homes.'

Service Manager, NGO, Philippines

COMMON RESPONSES ABOUT INNOVATIVE SOLUTIONS TO CHALLENGES FACED DURING THE PANDEMIC



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Barriers to the Delivery of Good and Innovative Practices

Systemic and structural issues (such as poverty, corruption and lack of funding)

Movement restrictions and limited home visits

Communication with caregivers

Communication with children

Community awareness and acceptance

Staff Sickness

Premature release of perpetrators of violence

Common responses about barriers to the delivery of effective and innovative practices

Finally, respondents were asked about any barriers to those effective practices that had occurred.

Most commonly, those barriers related to: systemic and structural issues (such as poverty, corruption and the lack of funding); movement restrictions and limited home visits; communication with caregivers and children; community awareness and acceptance; staff sickness; and the premature release of perpetrators of violence.

Systemic and Structural Issues

A wide range of systemic and structural barriers were reported – including poverty, corruption, the lack of funding, insufficient services, cultural practices, poor implementation of programmes, the inadequate focus on prevention, and others.

'Luck [Lack] of fund'

Direct Service Provider, NGO, Kenya

'Lack of service that can cater for all children'

Direct Service Provider, NGO, Kenya

'Poverty, cultural practices and corruption are among the barriers'

Direct Service Provider, NGO, Kenya

'System and structures their is does not amicably enhance service delivery on this effect.'

Direct Service Provider, NGO, Kenya

'Poor implementation of programs and services, quarantine guidelines, community awareness, data, politics and economics, and very dependent at the national government'

Direct Service Provider, Civil Society Organisation, Philippines

The insufficient focus on prevention was stressed by a direct service provider working for the government in Sweden:

'Not so much preventive work, only addressing emergency issues. Social workers can't go out to schools and stuff because of the pandemic'

Direct Service Provider, Government, Sweden

Movement Restrictions and Limited Home Visits

'Mobility restrictions'

Direct Service Provider, International Organisation, Malawi

'Hlme [Home] visits are limited'

Direct Service Provider, NGO, Israel

Communication with Caregivers

This group of challenges included the lack of understanding by caregivers and difficulties with reaching caregivers due to connectivity issues:

'The lack of cellophone to most of the caregiver/ guardians . Only a small percentage can be teached'

Service Manager, NGO, Kenya

'Some caregivers in rural areas do not have phones.'

Direct Service Provider, NGO, Kenya

'Other partners that give confusing communication abot [about] keeping local CBOs [community-based organisations?] closed. No phones or technology for children and caregivers so cant access check in etc. Funding and capacity building of workers and good monitoring and evaluation tools'

Service Manager, NGO, South Africa

'Lack of understanding from the caregivers'

Direct Service Provider, NGO, Kenya

One respondent also noted family members' refusal to report issues on time:

'Refusal by family members to report any itchy issues on time'

Direct Service Provider, NGO, Kenya

Communication with Children

'Children fearing to express them self openly.'

Direct Service Provider, NGO, Kenya

'Staff is sick. IT system problems. Difficult to make good assessments via Skype ie people can select when to show up/what to share. Communication with children controlled by adults (difficult to meet them alone in peace)'

Policymaker, Government, Sweden

Community Awareness and Acceptance

'Resistance by the community people who still does not want to accept the position of these community volunteers'

Service Manager, NGO, Kenya

Premature Release of Perpetrators of Violence

'Perpetrators of sexual violence sometimes released without being presented in court as the police are not lowed to keep suspects in crowded police cells'

Service Manager, NGO, Kenya



A Note of Caution

While the survey generated useful insights into the respondents' work in relation to children and families, the findings should be interpreted with caution due to a number of factors.

- The numbers of respondents are modest, so the findings may not be representative of the experiences and challenges faced in those countries or sectors.
- The findings reported here have been produced by the COVID 4P Log research team and, due to the format of the smartphone app survey, the findings cannot be shared with the respondents for commentary or review.
- The findings are derived from a short-form survey and lack context. Respondents' engagement with the survey varied, which may have affected the completeness of the data.
- We are aware some respondents had difficulties with engaging with the app due to workload pressures and technical issues, which might have affected their response rates.



Summary

This report offered an overview of COVID 4P Log respondents' views and experiences of challenges to protecting children from violence during the pandemic; the effects of those challenges on children's rights and wellbeing; good practices implemented to protect children during the pandemic; and barriers to the effectiveness and reach of those practice innovations and other organisational and policy responses.

The overwhelming majority of respondents in this report represented eight countries: Kenya, the Philippines; South Africa; Sweden; Scotland; the USA; India; and Canada.

Part One presented examples of good practices in child protection during the pandemic. The most commonly reported examples of such practices were: advocating against gender-based violence, as well as providing helplines for children in distress; educating children and caregivers about children's rights; and following up on, and referring, child protection cases promptly to ensure justice was served. Examples of facilitating access to health care and basic supplies were also shared. Respondents stressed the importance of connecting with, and listening to, children in order to understand their concerns and escalate any issues swiftly. This was often facilitated by online consultations with children and using social media and other child-friendly activities online.

Part Two was focused on common challenges to protecting children from violence during COVID-19, particularly the inadequate child protection laws, policies and service responses; violence against children in the home; barriers specific to carrying out home visits and monitoring children; service delays and disruptions; health system pressures; and poverty

and unemployment. Barriers to home visits and child and family monitoring were most often related to movement restrictions, the lack of cooperation by caregivers and COVID-19 fears. Collectively, those challenges were associated with a range of negative outcomes for children – specifically – in relation to accessing needed services; reporting cases of abuse; and accessing safe spaces.

Finally, Part Three was dedicated to innovative practices in child protection implemented during the pandemic such as setting up hotlines for reporting child abuse cases; using technology to connect with children remotely; mobilising neighbours and community networks; advocating for child-friendly justice practices such as safe spaces; and others. Despite enhancing service delivery and the engagement and protection of children and families, several barriers hindered the effectiveness and reach of those measures. Such commonly reported hinderers were poverty, corruption and the lack of funding; movement restrictions and limited home visits; communication with caregivers and children; community awareness and acceptance; staff sickness; and the premature release of perpetrators of violence.

Respondents highlighted that ensuring children's wellbeing and continued access to essential rights such as health, safety and justice was dependent upon responsive and well-coordinated systems and structures.

Our hope is that this COVID 4P Log Learning Report series will generate new insights, and spark new questions and ideas to strengthen policy, service and practice with, and for, children and their families.

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About this Report

This Learning Report has been produced by the Institute for Inspiring Children's Futures at the University of Strathclyde, Scotland, UK.

Inspiring Children's Futures, with its many partners, has a strong track record of multi-level, multi-sector global engagement, policy development and practice improvement.

This Learning Report is part of a series of reports on the findings of the COVID 4P Log smartphone app survey. Together, the reports from this series form the second of a three-part 'Inspiring Children's Futures in light of COVID-19' programme.

This programme is gathering evidence on protecting children's wellbeing in past epidemics; informing better policies and practices throughout the COVID-19 pandemic; and influencing change in the long shadow that COVID-19 will cast over the recovery phases ahead.

With our partners, we are strengthening global, national and local approaches to ensure that we are collectively delivering on the Justice for Children, Justice for All SDG 16+ Call to Action to "respond to children's distinct needs, and realise their full range of rights and opportunities, to achieve peaceful, just and inclusive societies for all".

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