

## Program guidance: preventive and responsive support to children, families and alternative care providers during COVID-19

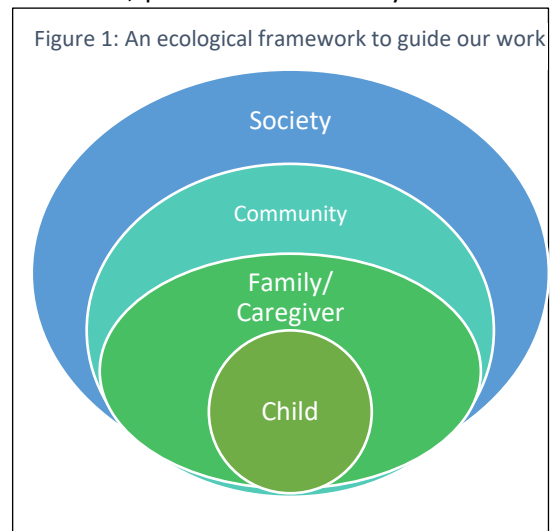
The COVID-19 pandemic requires that we assess how to best adapt existing or adopt new services and programming to best serve children and families in uncertain times. An ecological framework<sup>1</sup> (see image below) can help us understand how COVID-19 might impact the children, families and communities we aim to serve. This framework also serves to help programs adapt, reorganize and prioritize prevention and response activities.

### Impact on children and families

Disruptions to families, friendships, daily routines, schooling and the wider community can have negative consequences on children's well-being, development and protection. Measures used to prevent and control the spread of the COVID-19 virus can expose children to protection risks. Home-based, facility-based and zonal-based quarantine and isolation measures, whilst critical to slow the spread of the virus, can also negatively impact children and their families in different ways. It is important for those working with vulnerable children stay informed about the increased safeguarding risks that can and do occur during an emergency and when families, care givers and communities are under stress. See this Interagency [Technical Guidance](#) on child protection during the COVID-19 pandemic.<sup>2</sup>

COVID-19 can quickly change the context in which children live. Quarantine and social distancing measures such as school closures, community center and other service limitations, prohibitions of family visitation to children in alternative care and general restrictions on movement can disrupt children's routines and stress family social supports. It also places new stressors on parents and caregivers who may have to be without childcare or out of work. Children and families who are already vulnerable due to socio-economic exclusion, living in overcrowded settings, or are already separated, are particularly at risk for protection and care disruptions. For example, parents could lose employment which causes both economic and emotional stress; stress can lead to caregivers with less attention for children. With schools closed and children home, tensions within the household can rise sometimes resulting in increased levels of violence, abuse or neglect against children. Furthermore, loss of employment and school closures can also result in children moving to the streets or into work. Some may be sent to live in outside of their communities or families. Finally, spontaneous closure of residential care institutions can result in mass and poorly planned reunifications, often into unprepared families, without monitoring, putting children at great risk for protection violations and re-separation.

However, challenging times are also opportunities to recognize the resilience in the children and families with whom we work. Whilst we must acknowledge the additional risks, it is also important to balance it with a concerted effort to recognize, build upon and leverage the strengths of children, families and communities. We must be proactive in helping families to make decisions around their own care and well-being, to access learning and essential services, to implement good hygiene and parenting practices, and find ways to cope within their homes and communities. We must also be intentional about regularly engaging with organizations engaged in and government bodies responsible for child protection and care. Where conditions are changing rapidly and will continue to do so for an unknown period of time it is important to seek ways to collaborate and leverage existing resources to meet the ever-changing needs of the people we serve. We have to be



<sup>1</sup> An ecological framework is one that represents how different systems affect one another; existence does not occur in a vacuum but in relation to changing circumstances; systems are dynamic and interrelated. More at:

<https://www.oxfordbibliographies.com/view/document/obo-9780195389678/obo-9780195389678-0095.xml>

<sup>2</sup> The Alliance for Child Protection in Humanitarian Action, Technical Note: Protection of Children during the Coronavirus Pandemic, Version 1, March 2019. <https://alliancecpha.org/en/COVID19>

creative in using virtual communication and news ways of communicating and connecting with families and partners.

### Program action and adaptation

As programs take rapid action to adapt and design services and activities to both prevent the spread of COVID-19 and respond to the increased risks and challenges associated with the pandemic, the use of an ecological framework can help guide decision-making and prioritization of actions is recommended. We encourage organizational teams to use this framework to help identify what can and should be done at each of the levels: the child, family/caregiver, community and society. Once identified, potential actions in each level can be ranked/prioritized in terms of the timing of the action including immediate/urgent, short term (within days), medium term (over weeks) and long term and the resources (financial, human, technological) needed.

### Child level

As a starting point, begin thinking about the individual children you work directly with (as an individual or a program). This includes children living in vulnerable families, in alternative care, as well as children living in residential institutions.

- The uncertainty and changes to routine can result in anxiety and fear for children. Design simple messages to reassure children and to help parents or other caregivers appropriately respond to the informational and emotional needs of children in a positive manner. Identify strategies for providing psychosocial support to children, especially to those under quarantine. See [here](#) for some examples of psychosocial support to children highlighted in Intervention 3 and [here](#) for suggestions for adolescents.
- Ensure that you have child-friendly key messages about COVID-19, including on handwashing, hygiene and social distancing. Make them simple for children to understand. Examples can be found [here](#) and [here](#).
- Provide recreational and learning activities to children during isolation. Examples of activities for children recommended by the CP AOR<sup>3</sup> can be found [here](#). In addition, the following links provide online learning resources for young children (preschool-Grade 2) using visual images to introduce basic concepts of math, science, social studies, art and health to the youngest learners: [Everyday Learning and PBS KIDS videos, games and activities all about handwashing and staying healthy](#).
- Provide children in residential care with items to support their hygiene, health and wellbeing whilst in care e.g., soap, hand sanitizer, educational materials, recreational supplies like sporting equipment, games or puzzles. This should include the provision of child-friendly hand-washing stations made in close collaboration with Water, Sanitation and Hygiene (WASH) service providers.
- In close collaboration with WASH service providers, develop and conduct child-friendly hygiene promotion activities, including the development of posters and infographics targeting children, parents/caregivers and other carers.
- Make sure that administrators and other staff of residential institutions have materials (e.g., posters) explaining the basics of preventing the spread of COVID-19, including child-friendly messages.
- Caregivers in institutions will be experiencing stress as well, share messages of self-care and caring for mental health.
- Pay special attention to the unique needs and risks of children with disabilities. See [here](#) for guidance.

#### Taking care of yourself

Self-care is critical to our ability to care for ourselves, our own families and others. There are things that we can do to make sure that we stay physically healthy and emotionally ready to meet the needs of children and families in our programs

- Determine what you need to do to make sure that you are mentally and physically at your best. Do it daily!
- Participate in a webinar or read posts on self-care.
- Make sure that you have a work from home routine that works for you and your family.
- Ensure that you and your family have the information needed to make smart choices, including for children. See [here](#) and [here](#) for simple steps to take for yourself and build resilience.

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<sup>3</sup> The [Child Protection Area of Responsibility](#) (CP AoR) is specifically focused on enhancing child protection coordination and response in humanitarian contexts (as defined as Humanitarian Coordinator and Early Warning contexts). They have put resources together that they regular update in this [Dropbox folder](#).

#### Child Protection Risks in Emergencies<sup>4</sup>

**Separation of children from family:** Children can become separated from families and primary caregivers due to death, disability or illness, if one or the other is isolated for quarantine, or the child is abandoned after they have received treatment or have been quarantined. Children are at increased risk of being placed in care, including in residential institutions.

**Psychological distress:** Children can feel fear of being infected with the disease, and may also be frightened by health or aid workers wearing personal protective gear (including masks), isolation due to school and community closures or quarantine can leave children feeling anxious and lonely, children or their caregivers may be stigmatized if they are infected, or are suspected to be infected with, the disease.

**Violence:** Household and community quarantine measures can lead to tensions between caregivers and children, resulting in increased parental frustration and corporal punishment, and increased obstacles to reporting physical violence are common. The illness or death of caregiver reduces family protection, family stress and/or reliance on outsiders to transport goods and services to the community, can leave children prey due to reduced supervision.

**Child Labor:** Loss of household income due to death or illness of caregiver increases the risk of child labor.

**Neglect:** Children may not receive consistent levels of social and/or cognitive stimulation due to closure of school and other facilities.

### Family level

Review and consider the family level including caregiver/ carers in residential and other alternative care. This includes children and families served by our programs. Ask yourselves what you can do for them immediately to keep them healthy, together and able to meet their daily needs in this new context? Examples include:

- Establish virtual monitoring tools and schedules for reintegrated and/or at-risk families of separating (see suggestions in text box, below).
- Regularly communicate with partners to ensure that they align their approach with new restrictions including taking appropriate hygiene and social distancing measures to protect both their staff and children/families.
- Provide hygiene kits to families, especially those with limited access to water and soap and those living in crowded environments.
- Ensure children and families in quarantine/self-isolation have access to adequate food.
- Consider providing food, hygiene or educational supplies to families via grocery vouchers/cash transfers to ensure that vulnerable families stay together and can meet their basic needs.
- The disruption of school and work routines can increase stress and anxiety and result in protection violations against children. To prevent this, design simple messages to share with caregivers about self-care, positive discipline and what to do to minimize stress-filled (including violent) reactions to children's behaviors. See [here](#) for excellent positive parenting resources.
- Ensure that your organization's safeguarding policies are clear and that you know what to report, to whom and how.
- Recognizing the elderly are more vulnerable to becoming ill, identify grandparents and other older carers in your program that might be at high risk and ensure they get the support they need and, if they need to be isolated/ quarantined, identify other family members to care for children who were in their care.
- Identify needs and provide targeted support to other particularly vulnerable families and households such as foster families and child headed households.

### Community level

Explore options at the community level. This includes reaching out to other organizations, local government institutions and humanitarian coordination mechanisms working in the child protection and children's care, in health, education and other sectors. Find out what they are doing and try to sync efforts wherever possible – reducing overlap of services can ensure that scarce resources are able to reach more children and families over time. In particular, health-focused organizations and government actors are likely to key messages and

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<sup>4</sup> The Alliance for Child Protection in Humanitarian Action, [Guidance Note on the Protection of Children During Infectious Disease Outbreaks](#), 2018.

develop new initiatives to help reduce spread. It may be possible to leverage the coverage of these initiatives and ‘layer’ other needed services. Communicate regularly. Examples include:

- Map services within the community (existing or new) for vulnerable families. Ask yourself if your program helps families to access these. If not, find ways to link families to services that could benefit them.
- Design simple, concise flyers or job aids for community leaders (chiefs, religious and cultural leaders, child protection volunteers) about the importance of keeping children in families.
- Design key messages to share with frontline health and other emergency response workers about the increased child protection risks to children, including family separation, the importance of facilitating safe and regular communication between children and parents/caregivers who are temporarily separated and provision child-friendly services. Make sure health and other emergency response frontline workers have information about what to do and who to contact if they identify a risk. Make sure that information also includes children or families living with disabilities.

### Society level

Finally, look at what can be done at the society level to support large scale information sharing. It is critical to reach out to other organizations, government bodies and networks to see where efforts can be coordinated, and messaging can be standardized. Priority is to support vulnerable families in their ability to stay together and send clear messages about how to protect and keep children and families healthy.

- Make sure that emergency or front-line workers are provided with information about the additional [child protection risks](#) that COVID-19 may create. Be sure to provide information about what to do and who to contact should they identify at-risk children. Make sure that child protection is represented on working groups with other sectors.
- Ensure that existing residential care facilities’ minimum standards of care are not reduced due to COVID-19; support to children and caregivers highlighted in the previous sections is in place; remote communication between children and families is facilitated during any period of isolation / quarantine; gatekeeping mechanisms are strengthened to ensure children are not placed by default due to COVID-19 instead of strengthening and preserving family unity or identifying other family care options.
- Design posters with key messages to be posted in Children’s Courts about preventive measures to keep children in families and keeping placement in residential care as a last option.
- Ensure that government announcements include important information about children in alternative care and ensure that information, services and supplies also target and reach them.

**Considerations for virtual monitoring**

**Phone calls to PARENTS/ CAREGIVERS**

- Attain update on status of all family members
- Track case plan actions
- Provide simple guidance on prevention, signs and symptoms, prevention, and emergency numbers
- Assess for and make needed referrals

**Phone calls with CHILDREN and ADOLESCENTS (able to converse via phone)**

- Attain update on health and well-being status
- Track case plan actions
- Provide child-friendly guidance on preventative measures, maintaining learning
- Provide basic psychosocial support

**Phone calls to RESIDENTIAL CARE FACILITIES**

- Attain updates on entry and exit of children
- Check in about regular supplies, especially WASH, and educational / recreational supplies
- Assess for child protection issues
- **Weekly communication** with local and national government partners, child protection and other relevant (health, WASH, education, protection, shelter) humanitarian coordination mechanisms, civil society networks and community leaders

**Case file records should be completed for all phone or virtual meetings with families or children**

*This brief will be regularly updated with the latest information, guidance and tools to ensure program teams have the information they need to make informed decisions.*

