ACT NOW:

Experiences and recommendations of girls and boys in East Africa on the impact of COVID-19
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COVID-19 is currently wreaking havoc in countries around the world. The devastating health consequences of the virus are only the tip of the iceberg. The pandemic’s secondary impacts, such as loss of livelihoods, school closures and restrictions on travel and socialising have far-reaching effects on children and young people’s health, safety, education and well-being. Recent research conducted by World Vision reveals that this crisis puts children and young people at high risk of hunger, isolation, witnessing and/or experiencing violence at home and in their communities, child labour, early marriage, and online risks.1 This consultation explores children and young people’s views and experiences related to COVID-19 and its indirect impacts. Firstly, it looks at children and young people’s perceptions of how COVID-19 has had an impact on their lives and countries. Secondly, it seeks to highlight the ways in which they are working to help to stop the spread of the virus and lessen its impacts.

This consultation was conducted between June and August 2020 using a qualitative approach. Listening to children is at the heart of World Vision’s child-centred approach and our commitment to amplifying the voices of children and young people on the world stage. The consultation included individual and group interviews with 123 children and young people (55 girls, 42 boys and 26 unspecified) between the ages of 7 and 18 years old. The research was conducted in six countries across East Africa, including Burundi, Ethiopia, Rwanda, South Sudan, Tanzania and Uganda. The interviews were conducted over the phone and through online platforms, as well as face-to-face, while abiding by physical distancing mandates. This consultation followed the minimum standards for consulting with children and young people developed by the Inter-agency Working Group on Children’s Participation.2 The report also draws on findings from interviews conducted in Kenya as part of another World Vision consultation, Children’s voices, from May to July 2020.3
The report is organised around the three themes that emerged from the data: (1) the impacts of COVID-19 on children and young people; (2) their resilient responses to these impacts personally, in their families and communities; and (3) the support the children and young people requested so they can be safe, healthy and help fight the further spread of the virus.

Children and young people from across East Africa shared examples of the sudden and vast changes to their lives as a result of the COVID-19 outbreak, including school disruptions, economic hardships, food insecurity, mental health challenges, missing community worship, and the increased risk of violence. However, it is clear from this consultation that children and young people are not merely victims of the current crisis. Despite the many challenges they face, children and young people shared stories of resiliency, of following best practices to stop the spread of COVID-19 and of taking part in awareness-raising activities.

Children and young people recognised that they cannot do this alone. Participants provided suggestions on how they could be better supported and protected in the time of COVID-19. They called on their governments and leaders (1) to involve children and young people, (2) to support children and young people to fight the spread of the virus, (3) to support families’ and communities’ livelihoods, (4) to ensure the continuation of students’ education, and (5) to protect children and young people from violence.

On the basis of these children and young people’s views and experiences, World Vision recommends that relevant actors work together to provide practical help in the areas of education, health and hygiene, food provision, livelihoods and COVID-19 awareness raising. Additionally, comprehensive child protection mechanisms must be established and maintained, with clear avenues for all children and young people to seek support. Moreover, World Vision urges all relevant stakeholders and decision makers to listen to children and young people and take their views seriously.

While the challenges children and young people face at this time are immense, this consultation highlights countless examples of their resiliency and activism in the face of a complex crisis. World Vision thus calls on governments, United Nations (UN) agencies, donors, non-governmental organisations (NGOs), faith-based organisations and the private sector to take a collaborative approach to support children and young people around the world and include them in their COVID-19 responses.
On 11 March, the World Health Organization (WHO) escalated the COVID-19 outbreak from a “Public Health Emergency of International Concern” to a pandemic. The WHO director-general explained he was “deeply concerned by both the alarming levels of spread and severity, and by the alarming levels of inaction”. This pandemic is affecting children and young people, families and communities around the world; between December 2019 and mid-September 2020, WHO confirmed 30,905,162 cases of COVID-19 and 958,703 deaths worldwide.

World Vision is responding globally to the COVID-19 crisis in 70 countries, nine of which are in East Africa. Prior to the outbreak of COVID-19, East Africa was already facing endemic poverty, unemployment and record levels of food insecurity. Natural disasters, such as locust invasions and widespread flooding, affected an estimated 3.1 million people and weakened existing infrastructures and health systems just months before the pandemic began. Moreover, the region’s large refugee populations and ongoing armed conflicts further complicated efforts to fight the spread of the virus and treat affected populations.

In spite of these challenges, over the next 18 months, World Vision aims to reach at least 72 million people globally, half of them children and young people. In East Africa in particular, World Vision expects to reach 16,614,164 people, 5,527,594 of whom are children and young people. World Vision is focusing on countries that have significant pockets of fragility and poverty where children and young people are most at risk, including conflict-affected contexts, urban slums and refugee settings. World Vision’s response is focused on four key areas to help to limit the spread of COVID-19 and reduce its impact on vulnerable children and young people and families: (1) to scale up preventative measures to limit the spread of disease, (2) to strengthen health systems and workers, (3) to support children and young people affected by COVID-19, and (4) to collaborate and advocate to ensure vulnerable children are protected.

World Vision works in collaboration with local authorities, frontline health workers, academic institutions, faith leaders, communities, and local NGOs. Following our commitment to place children and young people at the centre of our work, World Vision responds in times of crisis by listening to children and young people, empowering them and amplifying their voices at the local and global levels.

This report is part of World Vision’s continuous effort to listen to children and young people. It will provide further information about children and young people’s experiences and contributions to mitigate the impacts of COVID-19 in East Africa. With these findings, World Vision hopes to contribute to improving the ongoing work of child-focused agencies, decision makers, adult professionals, and children and young people themselves.
METHODOLOGY

World Vision considers children and young people active social actors capable of interacting with others and shaping their environments, not helpless, hidden victims of this pandemic. Following this premise, for this consultation the methodology included collaboration between adults and young leaders engaged as peer researchers who also conducted interviews other children and young people over online platforms.

AIM AND RESEARCH QUESTIONS

This regional child consultation sought to explore children and young people’s views and experiences related to the outbreak of COVID-19, their ideas on how to engage in online community-based activities to support their peers and communities, and their thoughts on how to raise awareness on protective measures against COVID-19. Research questions included:

• How is COVID-19 affecting the lives of children and young people in their countries and communities?
• How are children and young people contributing, or can they contribute, to the fight against the spread of COVID-19?
• Are there children in your community who are facing violence or abuse in this time of COVID-19?

SAMPLE

This report includes the views of 123 children and young people (55 girls, 42 boys and 26 children of unspecified gender) between the ages of 7 and 18 from six countries across East Africa, including Burundi, Ethiopia, Rwanda, South Sudan, Tanzania and Uganda. Selection criteria took gender, age, ability, religion, geographic region, context (i.e. ensuring fragile and refugee contexts were represented), location (i.e. rural and urban areas), and ethnicity into consideration to ensure diverse perspectives. This report is not representative of the views of all children and young people in the region. What this report does, however, is provide a useful snapshot of what children and young people are thinking and feeling about their experiences living in the time of COVID-19.
METHODOLOGY

METHOD, DATA COLLECTION AND ANALYSIS

This project used a qualitative interview approach which allowed the research team to capture information about participants’ personal meanings and interpretations. Data were collected through one-to-one or group interviews over electronic devices and online platforms or face-to-face (while maintaining social distancing). The World Vision team in each country adapted the data collection procedure to the contexts of the participants. In each country, children and young people were asked three questions (in addition to the prompt questions used to stimulate the conversation), and then given the option to either respond individually or as part of a group interview. The research team analysed the interview transcripts to identify emerging themes and patterns mentioned by children and young people.

This report also draws on the findings of another World Vision consultation, Children’s voices, conducted between May and July 2020 in Kenya. World Vision Kenya interviewed 4,554 children and young people between the ages of 7 and 22, to explore their experiences in the time of COVID-19. The research team identified relevant findings from that consultation as they related to these main research questions and incorporated them into the findings discussion where appropriate.

LIMITATIONS

- This research was based on three open-ended questions. Each question had a series of prompts to gain further insight and detail. Interviewers used their discretion utilising these prompts, and as such, these variations are reflected in the data.
- Given the sensitive and often hidden nature of violence, it is highly likely that children and young people sometimes chose not to answer some questions.
- While the primary aim of the research was to highlight the voices of children and young people, some percentages are noted, based on the responses for each question, to provide a clearer picture.
- The Children’s voices report added important information to this consultation’s findings. The quotes from that report meaningfully spotlighted children and young people’s experiences in Kenya and supported the themes which arose in other interviews across the region more broadly; however, it was not possible to include the insights from the 4,554 interviews into the regional percentage calculations, but Kenya-specific percentages are included where applicable.

ETHICS

This consultation followed the minimum standards for consulting with children and young people developed by the Inter-agency Working Group on Children’s Participation. These principles include, transparency, honesty, accountability, provision of a child-friendly environment, equality of opportunity, and the safety and protection of young participants. This project took into account the special considerations required to gain informed consent, ensure confidentiality and anonymity, acknowledge the diverse cultures of the research sites, and refrain from presenting any information that may potentially harm or negatively influence participants. The facilitation team ensured safe and ethical participation of children and young people, strictly adhering to World Vision’s safeguarding protocols, including a referral procedure in coordination with local partners engaged in the crisis response. In order to ensure that participation was meaningful, safe and ethical, World Vision staff members facilitated online conversations with the child participants, and they were encouraged to decide on their own whether or not they would participate.
Children and young people’s views are arranged in three parts. The first section outlines the impacts of COVID-19 on children and young people in East Africa and the increased risk they face of witnessing or experiencing violence. The second section considers the ways in which children and young people are responding to these changes in their daily lives. Lastly, the third section spotlights the recommendations of children and young people, highlighting their ideas for ensuring that child rights are upheld moving forward.

**IMPACTS OF THE COVID-19 PANDEMIC ON CHILDREN AND YOUNG PEOPLE IN EAST AFRICA**

*COVID-19 is negatively affecting the lives of children and our country ... This pandemic is affecting our spirit, economy, our day-to-day life and education. To mention an example, our school has closed for more than four months – I am not sure about tomorrow [in regard to] our education. My mother also has a small traditional drinking shop, [but because of the] restrictions, the business has faced challenges. At this time, she can’t cover our house rent with this business. I can mention hundreds of stories of my friends and neighbours [of how] their lives are affected due to the government’s restrictions to fight against COVID-19, especially [those in the] transport business, small businesses that gather people, and [those working in the] market. (Arisma, 12, female, Ethiopia)*

Like Arisma, many children and young people in East Africa shared examples of the ways in which the current global pandemic has affected their lives and the lives of others in their respective countries. Across all six countries, participants pointed out five significant ways that the pandemic has affected their lives including: (1) school disruptions, (2) economic hardship, (3) food insecurity, (4) mental health challenges, (5) missing community worship, and (6) an increased risk for violence against children and young people.
School Disruptions

Governments across East Africa temporarily closed schools as a measure to try to diminish the spread of the virus. 67% of participants [83 out of 123] agreed that this decision had caused overwhelming challenges to children and young people’s education and well-being.

Children and young people expressed their concerns about the continuity and quality of their education, as well as the difficulties some children and young people had accessing online learning platforms.

Coronavirus is affecting the lives of my friends and me. It is threatening our right to education and [to live a] healthy life. Our school is closed, and we are not learning. We hear that children in town learn through media, but there is no Internet or media in our community, and we are not able to attend our education like others do. We received handouts from our school, but if teachers do not explain them for us, it is not clear. [Since] we cannot have our teacher to explain [them] for us, therefore, we are not getting quality education right now due to this pandemic. (Kalid, 14, female, Ethiopia)

Kalid’s experience reflects a common perception of other participants on how school closures negatively affect children and young people in the East Africa region. The poor Internet coverage around the region makes it difficult for students to access online learning opportunities set up by governments to provide lessons. In 2017, the World Bank estimated that the Internet coverage only reached 19% of the population in sub-Saharan Africa. In addition to the poor Internet access, a lack of policies supporting remote learning, in combination with a lack of resources to purchase digital or broadcast devices for households, contributes to educational limitations during the COVID-19 pandemic. A recent global analysis stated that at least 49% of students living in eastern and southern Africa – the highest rate globally – do not have access to digital or broadcast remote learning platforms.

Findings from World Vision’s consultation, Children voices, similarly found that children and young people in Kenya missed being at school (43% boys and 46% girls) and had difficulties accessing online learning (34% boys and 31% girls). One 12-year-old Kenyan boy said: “I have lost a lot in education because I have no textbooks for personal study. Also, I lack gadgets, like the radio, for online learning at home.”

Some children and young people explained that their concerns about the quality of their education, the lack of support for their learning process, together with not knowing when classes would resume, made them feel uncertain about the future of their education. Farida, a 13-year-old female from Rwanda, said: “Children stopped schooling, leading to a [delay] in their studies. Because most of them are losing hope for their schoolyear, [they think they will] repeat the class.” Similarly, Theogene, an 18-year-old male from Rwanda, expressed his worry about the continuation of his studies: “Schools are closed. I am a senior six graduate, and I have a scholarship. I am unhappy and not sure when I will continue my studies.”

Besides their concerns about their learning process, children and young people explained that they felt isolated because of the temporary school closures. Participants highlighted that school closures meant they had fewer opportunities to socialise in person with their peers. Many participants also said that they missed their friends and classmates. Prisca, a female from Uganda, explained: “COVID-19 has led to school closures, which has led me and others to miss our friends . . . It makes us miserable with thoughts because we may not meet our friends for this very long period, making students reluctant to [study].”

By the time this consultation took place, classes had resumed in Tanzania and Burundi. Even though children and young people clearly wanted to resume their studies in person, the new preventative measures within schools also created new challenges. Some respondents, for example, said that social distancing measures changed the ways they usually interacted with their peers and teachers. Jean, a 15-year-old male from Burundi, explained: “Because we are restricted from approaching our classmates . . . it is difficult to revise together . . . because you cannot hear what they say as you are far from them.”
ECONOMIC HARDSHIP

There is poverty in our household because our parents are not working, [and] they cannot meet most of our basic needs. (Henry, 17, male, Uganda)

41% [51 out of 123] of children and young people in this consultation spoke about the increased economic hardships in their families and communities. Sub-Saharan Africa has both the highest rate of children and young people living in extreme poverty (49%) and the largest share of the world’s extremely poor children (51%). In 2019, 14 million children and young people were already in need of humanitarian assistance in East Africa. Recent reports in the region evidence that existing economic challenges are worsening as a result of the COVID-19 pandemic. A survey administered between April and May 2020, conducted by VisionFund in sub-Saharan Africa, including Tanzania, Uganda, Kenya and Rwanda in East Africa, revealed that most of the participants were struggling; 92% of both male and female client groups reported that their incomes were reduced.

Children and young people expressed their concerns about the large increase in job losses for their caregivers. For instance, Kessi, a 10-year-old female from Rwanda, shared her experience: “My mother used to work in the cement industry near our home, [but] now she no longer goes to work because [they began] reducing their number of employees due to COVID-19.”

Some children explained that due to the mobility restrictions put in place by governments, some people could not reach the places where they usually worked, which affected their income. Jihad, a 12-year-old male from Burundi, said: “As country borders closed, some parents could no longer go to Tanzania to work on the plantations for daily pay or for other business; this increased poverty within families and [now] children are missing school materials and food.”

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FINDINGS

FOOD INSECURITY

My father was the breadwinner at home by riding a bicycle. However, because of COVID-19, he is no longer riding his bicycle to get money, and it is very hard for us to get food. We only eat once per day. (Parfait, 7, male, Rwanda)

Like Parfait, nearly 20% of participants [23 out of 123] in this consultation mentioned the difficulties families in East Africa were facing to access a sufficient daily intake of nutritious food. In Kenya, food insecurity was also frequently mentioned by respondents (89% of boys and 89% of girls) as a significant issue brought on by the COVID-19 pandemic.

Prior to the COVID-19 outbreak, 23.6 million people across East Africa were already in a situation of severe food insecurity. An estimated 4.5 million children under 5 years old were acutely malnourished prior to the outbreak. The region was also affected by the desert locust infestation, which affected basic services and disrupted crop planting, leading to further food security challenges for households.

Over the first 12 months of the pandemic, it is estimated that, in certain parts of sub-Saharan Africa, the prevalence of malnutrition may rise to 20-25%. Children and young people recognised that the food insecurity in their communities worsened following the outbreak of COVID-19. Thomas, a 15-year-old male from Tanzania, explained: “[There is a] decrease in household incomes due to the market shutdown, decrease of meals consumed per day (from three meals to one meal a day), and the crops harvested aren’t enough for household consumption.” Amani, a 15-year-old respondent, agreed:

The second negative effect of COVID-19 is that our parents don’t get enough food for us because of increase of prices on the market and some markets are in lockdown, so some of the children don’t get enough food to eat. (Amani, 15, male, Rwanda)

Thomas’ and Amani’s experiences support recent reports which suggest that an increase in poverty, market closures, rising food prices, and difficulties with agricultural production will worsen food security in the region. Moreover, the impacts of the recent floods and locusts on crops and pastures have further exacerbated the deteriorating food security situation.

Due to the existing socioeconomic inequalities, this situation is even more dire for some children and young people.

To find something to eat was very difficult; even those who had money, they could not go out to buy anything. It seems that poor people had difficulty finding something to eat, even if the government tried to do their best to provide food to those people. But it was not enough; it was worse for us children to stay home in such a situation. (Mignonette, 13, Rwanda)
FINDINGS

MENTAL HEALTH CHALLENGES

In my community, even if no cases of COVID-[19] were identified, the lives of children and young people were affected because we are not able to go to school, we are not able to play. At home, it’s like loneliness, and we are afraid that this pandemic could affect us and our relatives. We do not know when schools will reopen, and we are not happy because we will repeat classes. There is no hope that this pandemic will be stopped so that we can enjoy our full rights again. (Valerie, 14, female, Rwanda)

58% of children and young people pointed out that the preventative measures to stop the spread of the virus led to a reduction of their peer networks and caused them to feel isolated.

The impacts of COVID-19 have a psychological impact on children and young people. The threat of contracting the virus, combined with the indirect economic and social effects have affected the mental health of children and young people, their families and community members. Participants across East Africa shared how they and other family members felt isolated, anxious about their economic situation, and/or afraid of contracting the virus.

Children and young people felt emotionally affected because they could not meet their friends and other members of their communities. In fact, 58% of children and young people [72 out of 123] pointed out that the preventative measures to stop the spread of the virus, particularly school closures and social distancing measures, led to a reduction of their peer networks and caused them to feel isolated.

COVID-19 suspended our education, deterred our friendships and relationships with many. Honestly, I am highly missing my friends, teachers and even our school compound outdoor games . . . We have been stressed, frustrated, and feel heavy hearted. Not going out to school and being forbidden to see our friends gives us a harder time. (Eyerus, 14, female, Ethiopia)

Participants mentioned that they also missed attending the spaces where they usually socialised or met other friends, such as after school activities organised by local institutions, like churches.

Myself, I have been affected by COVID-19 restrictions. I am no longer [able to] meet other children in our usual prayer. We used to read books and share ideas in group with other young people, but because of COVID-19, we missed this good time. (Lidia, 16, female, Rwanda)

Some respondents explained that because of the social distancing measures, the dynamics of expressing physical affection, such as shaking hands and giving hugs, changed. Nadeigne, a 12-year-old female from Burundi, stated: “It seems like people don’t love each other anymore. We don’t hug anymore like before. We don’t shake hands anymore in church to wish each other the peace of God.” They worried that such changes may have a negative impact on their relationships.

Something that is affecting my life is that we used to greet each other through shaking hands or hugging, but now we just only wave hands. We meet people as if we do not know each other, even after a long time, and this harms the love or friendship between us. (Jean, 15, male, Burundi)

Children and young people also talked about the fear of contracting COVID-19, and the uncertainty of how the pandemic may have an impact on their futures.

COVID-19 is affecting our life in different ways; for example, it kills friendships. [We are not] playing football [and] people are bored at home. We stay [home] in fear because we are informed that [the disease] has no treatment and it can spread easily. (Anger, 17, female, South Sudan)
MISSING COMMUNITY WORSHIP

I used to attend ceremonies together with my parents, but now we are told to remain at home. There are no more wedding ceremonies, and I am not attending Sunday school together with my friends. (Daniel, 7, male, Rwanda)

When asked how their lives had been affected by the COVID-19 pandemic, children and young people said that they were affected by the restrictions for attending church services and events. Participants explained that they not only missed attending ceremonies, such as weddings, at church, but they also missed learning from community worship, learning about their faith and socialising there. Clair, a 14-year-old female from Uganda, responded: “Going to church was stopped, and we are missing singing in the church, receiving holy sacrament, and preaching by the priest.”

INCREASED RISK FOR VIOLENCE AGAINST CHILDREN AND YOUNG PEOPLE

Participants discussed how the COVID-19 pandemic and its secondary impacts put children and young people at an increased risk of experiencing violence or taking part in risky behaviours. Respondents’ views were in line with the findings from a recent World Vision report that warned about how the COVID-19 outbreak has created conditions where violence at home, child marriage and teen pregnancy are more likely to occur.

This aspect was particularly highlighted by participants in Uganda, where 50% of respondents (11 out of 22) talked about children and young people’s exposure to harmful and dangerous circumstances. Noeline, a 16-year-old female from Uganda, reported: “Family disputes amongst parents … force children to leave home and enter into marriage.” However, violence against children and young people is not a new phenomenon in the region. A Ugandan national survey carried out in 2015 found that six in 10 females (59%) and seven in 10 males (68%) between the ages of 18 and 24, reported experiencing physical violence during their childhoods, with parents or adult relatives being the most common perpetrators.

Participants of the earlier Kenyan consultation also shared their concerns around violence. Most of the children and young people mentioned early pregnancy (31% of boys and 34% of girls), child marriage (26% of boys and 26% of girls) and child labour (24% of boys and 18% of girls) as the forms of violence that needed to be addressed during the time of COVID-19. A 17-year-old boy from Kenya, shared his experience: “There is a lot of child abuse in the community, especially parents letting their children sell items, even late at night.”

Emily, a 17-year-old female from Uganda, reported: “Poverty during this period has led to unwanted pregnancies, domestic violence and child abuse because children are not in school.” Similarly, a recent World Vision report stated that school closures during this crisis could lead to increases in teenage pregnancy in sub-Saharan Africa by as much as 65%.

Besides violence, some participants highlighted that, due to the indirect economic impacts of the crisis, children and young people were resorting to risky behaviours to meet their needs and obtain resources to help their families. Aisha, an 18-year-old female from Uganda, explained that “some children have become thieves in order to meet their needs that [their] parents cannot provide”. Philippe, a 17-year-old male from Rwanda, agreed: “Street children are increasing in number where children end up becoming thieves while they should be at school.” This alarming trend was also reported in the World Vision report, Out of time: COVID-19 aftershocks, which stressed that the increase in child hunger, violence, and poverty due to the economic impacts of the pandemic, was forcing families to expose their children to dangerous circumstances, such as begging or working on the streets.
RESILIENT RESPONSES: FACING CHALLENGES AND CREATING OPPORTUNITIES

This section provides examples of how children and young people are staying safe during the pandemic and taking individual and collective actions to stop the spread of the virus to improve their own lives and the lives of those around them.

FOLLOWING BEST PRACTICES TO STOP COVID-19

As per my understanding, the contribution of children and young people to the fight against the spread of COVID-19 is by protecting ourselves from this disease. (Arisma, 12, female, Ethiopia)

75% of participants said that following government guidelines was the main way in which children and young people were contributing to protecting themselves and other members of their communities.

Children and young people were fully aware of the current events surrounding the pandemic and expressed a clear understanding of the importance of complying with the regulations imposed by their governments.

75% of participants [93 out of 123] highlighted that following government guidelines was the main way in which children and young people were contributing to protecting themselves and other members of their communities.

Mariam, a female from Tanzania, said children and young people “contribute through protecting themselves and staying at home, wearing masks when they go out, and washing hands when going out or coming in”.

Some respondents highlighted that the preventative measures in their communities would help them to prevent other diseases. Jihad, a 12-year-old male from Burundi, said: “It is really good to respect the preventative measures; we don’t only prevent coronavirus but also other diseases related to a lack of hygiene, and we ensure that our school environment is clean.”

AWARENESS RAISING

Arisma, a 12-year-old female from Ethiopia shared that “children and young people can contribute in creating awareness in people, especially to those who have no media access . . . we children [can] support communities by promoting health advice”. Arisma was not alone in her efforts, many other participants said that they were sharing updates and guidance or teaching others about the preventative measures to stop the spread of the virus.

We children contribute by teaching our community to practice the preventative methods advised by medical experts and by implementing them ourselves. We taught our community by holding banners, [sharing] messages, [singing] songs and public speaking. (Eyerus, 14, female, Ethiopia)
Children and young people raised awareness in a variety of ways, depending on the resources available to them. Mesay, a 14-year-old female from Ethiopia, replied: “I was washing my hands with soap frequently, keeping social distance while being together with friends, and telling my younger brothers, sisters and friends to do the same. Similarly, Awan, a child respondent from South Sudan, said they were telling their “friends about this virus and informing them to keep washing their hands on a regular basis”.

Children and young people shared that they were participating in awareness-raising activities in their wider communities and examples of their volunteer work with different organisations to educate people and distribute protective and hygiene materials.

In our community, a group of young people named ‘youth volunteers’ has been formed who are in charge of raising awareness within the community about staying at home, handwashing, and observing other safety measures, like wearing masks and social distancing. (Theogene, 18, male, Rwanda)

Children and young people encouraged their peers to keep participating in awareness-raising activities and provided ideas for how to get involved.

We can write posts and put them at the doorway to remind our family members and those who come to our home of COVID-19. We can put some of the posts in trading centres to remind and educate people about the dangers of COVID-19 and how they can protect themselves. (Henry, 17, male, Uganda)

We can design a signpost with full information on how to struggle against the COVID-19 pandemic and hang it in the community. We can compose a song and record it . . . We can develop a message and display it on Facebook as many children use Facebook, especially in this period of COVID-19. (Angelique, 16, female, Rwanda)

HELPING OTHERS TO FOLLOW PREVENTATIVE MEASURES

Our contribution in fighting against the spread of COVID-19 is to respect government policies and to help others to do so. (Adelie, 15, female, Rwanda)

Children and young people pointed out that they were not only disseminating information but were also taking part in activities to help other members in their communities to be able to follow the preventative measures. Jihad, a 12-year-old male from Burundi, said that he was reminding others to follow the guidelines: “If friends, parents or teachers tend to forget the preventative measures against the coronavirus, I just remind them that what they are doing is risky.” David, a 14-year-old male from Rwanda, reported that he encourages others to “comply [with] the government’s and ministry of health’s measures”.

Participants also described how they leveraged their resources to help others to find the protective materials needed to reduce their risk of contracting the virus.

Children and youth people are organised in groups. They collect protective materials, such as handwashing materials, hand soap, sanitisers and masks from the community and organisations. They put handwashing pans and soap on the main streets and people-crowded areas. (Binyam, 14, male, Ethiopia)
WHAT’S NEXT?
SUPPORT FOR CHILDREN AND YOUNG PEOPLE

All governments and other concerned bodies should take responsibility and take action as soon as possible to save children and the community. (Embet, 13, female, Ethiopia)

Children and young people are already playing a key role in slowing the spread of COVID-19. They expressed the desire to continue contributing to the well-being of their peers, families and communities. However, to do so, participants in this consultation and the one in Kenya, provided suggestions to their countries’ leaders on how their governments could help support and protect children and young people in the time of COVID-19. These fell into five key areas: (1) involving children and young people, (2) supporting children and young people to fight the spread of the virus, (3) supporting families and communities, (4) supporting education and (5) protecting children and young people from violence. Here are a few of their ideas in their own words.

INVOLVE CHILDREN AND YOUNG PEOPLE

Participants from across the region agreed that children and young people should be involved in the strategies to stop the spread of the virus as they have the capacity to meaningfully contribute to their societies.

I believe that children and young people can play a pivotal role in raising awareness on COVID-19 and providing information to people. Because, in many cases, they had a better education and more access to technology and information than their parents and other community members. (Tamiru, 16, male, Ethiopia)

Hirut, a 13-year-old female from Ethiopia, called attention to children and young people’s abilities to positively influence others: “Generally, it is good to make children and other young people to participate in the actions of raising awareness about COVID-19 as they are energetic and have the ability to understand and teach others.”

Many children and young people are incredibly knowledgeable about their communities and may be able to identify potential barriers to awareness raising and other preventative measures.

Young people can create public awareness using microphones or awareness creation through brochures. Awareness creation using microphones is the best way for people who do not read. Most people in our country are illiterate and do not understand what brochures say. Some also are impatient to listen to the microphones and this may be the way to inculcate about coronavirus and its spread. (Ahmed, 17, male, Ethiopia)
SUPPORT CHILDREN AND YOUNG PEOPLE TO FIGHT THE SPREAD OF THE VIRUS

Children and young people want to help stop the spread of COVID-19, but they cannot do it alone. Children and young people said that they must receive up-to-date information in order to protect themselves.

*First of all, children must know the prevention mechanisms of COVID-19, its way of spreading, as well as the signs and symptoms of COVID-19 . . . so they can play [a] greater role in keeping themselves from the infection by adhering [to] social distancing, staying at home and handwashing.* (Meseret, 13, female, Ethiopia)

Aside from information, respondents also asked for protective and hygiene materials, such as face masks, soaps and hand sanitisers. Kelvin, a child respondent from Tanzania, requested “for more education about the coronavirus diseases; we ask for the facilities, such as masks, soaps and buckets, especially in schools, so that we can easily fight against COVID-19.” A 17-year-old Kenyan girl also spoke about this need, explaining the difficulties accessing these materials in her country: “The government should help us by providing sanitisers, soaps and masks. Masks are available in our local market, and we only buy them once and use them for a long time.”

Children and young people are willing to continue disseminating information; however, they need training and educational materials to do so.

*Young people and children should be trained about the spread of COVID-19 so that they can go to sensitise other children in communities. Those who know [how] to draw, they [the government] can give them drawing materials so that they can also contribute to fighting the spread of COVID-19. If there are some young people able to sing against the pandemic, they should be also supported.* (Eliudi, 18, female, Burundi)

Other participants said they needed media resources to communicate their ideas. Hirut, a 13-year-old female from Ethiopia, noted: “Children and young people should get support, like media coverage, materials, trainings and other means of transmitting their ideas to their peers and community.”

Participants were conscious of the need to protect themselves when doing their awareness-raising activities. Henry, a 17-year-old male from Uganda, explained: “We [children and young people] need face masks [and] we need sanitisers before we go to support [or] hold meetings.”
SUPPORT FAMILIES AND COMMUNITIES

Before COVID-19, 20 million people in East Africa were already in need of clean water, sanitation and hygiene assistance. Children and young people were fully aware that the COVID-19 pandemic had made these needs even more acute and expressed that their families and communities needed food assistance, access to clean water, and/or hygiene and protective products, such as masks and hand sanitisers. Senea, a 10-year-old female from Ethiopia, said that children and young people “should have masks, soaps and enough food... these are the resources and support needed to be safe”. Marvin, an 18-year-old male from Uganda, asked for infrastructure to ensure water services: “More masks should be provided, and water tanks should be constructed so that washing of hands can be done.”

An 11-year-old girl from Kenya stated: “The government should provide food items and ensure people follow safety guidelines.” Similarly, Moise, a 13-year-old male from Burundi, asked his country’s leaders to “increase efforts to sensitise people who neglect the COVID-19 propagation ways”.

SUPPORT EDUCATION

During this season of COVID-19, children should be supported to study from home. (Gloria, 16, female, Uganda)

Like Gloria, participants across East Africa asked their governments to support equitable education at home. Children and young people pointed out that they needed means to continue their education, such as better access to remote learning platforms, as well as school supplies. Amani, a 15-year-old male from Rwanda, asked the government to “support children who cannot access radio talks to follow lessons”. Medihanit, a 13-year-old female from Ethiopia, informed: “[Children need] different educational materials; worksheets and books can help children to do their education from home. Parents need to support children to follow their education while they stay at home.”

Participants also shared their suggestions for ensuring a safe resumption of in-person lessons. Kedir, a 14-year-old male from Ethiopia, reported that “children and young people would like to return to their schools by keeping social distancing in class, by wearing face masks, and by using hand sanitisers”. Respondents also spoke about the need to better equip schools to ensure social distancing amongst children. Sevela, a 15-year-old from Burundi, suggested: “Increase the number of desks in schools to allow one child seating, in respect of social distancing.”

PROTECT CHILDREN AND YOUNG PEOPLE FROM VIOLENCE

Enforce the law to safeguard children. Right now especially everybody is at risk and people will take advantage of the children who are vulnerable. (Child respondent, 14, male, Kenya)

Children and young people highlighted the importance of taking actions to ensure they and their peers were safe, provided for and protected. When asked how the government should support children and young people during this time, one 15-year-old from Kenya responded that the government should “provide support to needy families [and] protect children from abuse during this period”. 
Children and young people are ready and willing to play their part in fighting the spread of COVID-19. In addition to highlighting how they and their peers have been affected by the crisis, children and young people are also working to respond, but they need support from their governments, UN agencies, donors, NGOs, and the private sector to do so. They are not only beneficiaries but are also rights-holders. Relevant stakeholders must create an environment where child rights are protected and children and young people are included as actors in their own right.

**RECOMMENDATIONS**

On the basis of these findings from this qualitative research, World Vision suggests the following recommendations to ensure that children and young people are active participants, protected, educated and have their basic survival and development needs fulfilled throughout this crisis.

Children and young people must be protected from violence, equipped with practical help to fight the spread of COVID-19, supported to continue their education, and provided with livelihood opportunities for their families.

- **Recognise and embrace children and young people as rights-holders and social actors with capabilities to contribute to stopping the spread of COVID-19.** This includes utilising appropriate strategies to ensure that their participation is safe, sensitive, and meaningful, including the provision of age-appropriate information.

- **Governments, donors, UN agencies and the international community must prioritise child protection actions** in all national COVID-19 responses. This includes ensuring continued functioning of child-friendly reporting mechanisms, such as SOS hotlines.

- **Governments, UN agencies and civil societies must fund and implement a mental health and psychosocial (MHPSS) strategy** for reaching those directly and indirectly affected, especially the most vulnerable, taking into account gender, age and disability.

- **Governments, UN agencies, civil societies, faith-based organisations and the private sector should work together to make the Internet a safer place for children and young people.** This includes strict implementation of laws on cybercrime, such as the online sexual exploitation of children and young people and online bullying, and intensifying efforts to raise online safety awareness amongst children and young people.
• Governments, donors, UN agencies and the international community must improve access to and availability of age-appropriate and gender-responsive distance education methods to mitigate the disruption school closures, due to COVID-19, are having on learning.

• Governments must ensure that education reaches the most vulnerable children and young people, particularly where learning has already been difficult or interrupted due to fragility or exclusion.

• Distance learning curriculums should include life skills education to help children and young people to recognise and mitigate violence, exclusion, stigmatisation and poverty-associated risks. This is crucial to preventing increased rates of child labour and child marriage.

• Governments, donors, UN agencies and the international community must urgently take action to scale their responses to acute hunger by investing in public health and water, sanitation, and hygiene to address root causes of child malnutrition.

• Governments should ensure social protection measures are in place for the most vulnerable throughout the response and recovery phases.

• Governments, banks and microfinance institutions should develop and fund poverty alleviation plans that incorporate economic recovery lending to help the most vulnerable families recover more quickly after the shock.
ENDNOTES


3. World Vision Kenya (unpublished). Children’s voices: March – July 2020 (draft for peer review). This report was conducted between May and July 2020 by World Vision Kenya’s local team, reaching children and young people in 42 sub-counties across 26 counties across Kenya. The report highlights the key issues raised by the participants regarding their experiences during the COVID-19 pandemic and includes recommendations for their governments and stakeholders.


5. Ibid.


8. Ibid.


14. Ibid.


18. Ibid.


