



# Child Protection and COVID-19

Somalia Case Study

# The impact of COVID-19 on children<sup>1</sup>



**Children in Somalia faced multiple, interlinked protection risks prior to the COVID-19 pandemic, which has exacerbated an already dire situation for children, and girls in particular.**

Decades of armed conflict, climate-induced disasters, weak protective structures, disease outbreak and poverty, among other adverse conditions, have left children and their families struggling to meet their basic needs and access essential services. Against this background, 2020 brought in three new shocks: COVID-19, significant flooding and the Desert Locust invasion<sup>2</sup>.

## Closure of schools



One of the greatest impacts of COVID-19 on children, as in most countries, has been the closure of schools for some months.

Even before the pandemic, it was estimated that only 35% percent of school-age girls and 41% of school-age boys were in school; this is after years of efforts to strengthen the educational system.<sup>3</sup> School closures have multiple impacts beside the interruption to education. Schools are places where children access many other services, such as food, water, sanitation and hygiene (WASH) facilities, recreation and psychosocial support.

Increases in child marriage and female genital mutilation (FGM) have been documented; as most cases are not officially reported, the numbers are also probably much higher than the reported figures.<sup>5</sup> World Vision Somalia documented an increase in FGM in its operational areas during the first six months of the pandemic, which was the lockdown. In fact, in the safeguarding category of community incidents reporting, there were more reports of FGM than any other type of violence against children.<sup>6</sup> This was linked to a push on the supply front, with those who perform FGM in greater need of money due to the pandemic, and a reduction in teachers' opportunities to report cases due to the lockdown. All these risks lead to a higher likelihood of girls and boys dropping out of school.

In lieu of in-person learning, the Federal government set up virtual learning via online platforms, radio and television. Whilst this offered some continuity of learning, remote modalities nonetheless excluded large number of children who did not have access to required technology. The loss of education, and the pandemic in general, has caused stress and anxiety in children, affecting their overall well-being.<sup>7</sup>

## Increased violence



In Somalia, data has shown that school closures have correlated with an increase in many forms of violence against children. Girls are more exposed to physical and sexual-based violence by their caregivers, whilst boys are more exposed to violence associated with recruitment by armed groups.<sup>4</sup>

1. This case study was developed by Malia Robinson, International Consultant, and Beryl Otieno, Education and Child Protection Technical Specialist, World Vision Somalia. It was reviewed by Rosilin Bock, Education and Child Rights Technical Advisor, World Vision Germany.
2. UN Office for the Coordination of Humanitarian Affairs (2021) Humanitarian Needs Overview: Somalia. UN OCHA, p.6.
3. Mwanjisi, J. (2020) COVID-19: School closures put decades of gains for Somali children at risk. Save the Children. <https://www.savethechildren.net/blog/COVID-19-school-closures-put-decades-gains-somali-children-risk>. Retrieved 9.13.2021.
4. UNICEF Somalia (2020) COVID-19 control measure: The hidden impact on Somali children. UNICEF. <https://www.unicef.org/somalia/press-releases/COVID-19-control-measure-hidden-impact-somali-children>. Retrieved 9.13.2021.
5. Mwanjisi, op. cit.
6. Interview with World Vision Somalia Technical Specialist for Education and Child Protection. 9.20.2021.
7. UNICEF Somalia, op. cit.



## Psychosocial impacts

The psychosocial impacts of the pandemic have affected whole households. A World Vision Somalia COVID-19 Rapid Assessment found that more than half the households in Somaliland and almost 60% in Puntland reported having one or more household member who presented with changed behaviours, such as increased isolation or aggression, due to the impacts of the pandemic. When considering why people's psychosocial well-being has been affected, almost 68% of participants reported it was due to loss of livelihoods, although inadequate food supplies and school closures were also significant factors. were also significant factors.<sup>8</sup>

## SCHOOL CLOSURES LED TO INCREASE IN VIOLENCE AGAINST CHILDREN



## Economic contraction

The economic contraction that accompanied the pandemic had multiple impacts at the household level, particularly for urban, pastoral, displaced and refugee households.<sup>9</sup> The effects of this economic contraction have included lost income, difficulty conducting trade, rising prices of food and other essentials, and increasing evictions. These worsening economic conditions have increased the strain on families with food and shelter insecurity, and insecure access to basic needs and services. Circumstances such as this can lead to shrinking family incomes, exploitative child labour and sexual exploitation, and are drivers of child marriage.

In summary, the COVID-19 pandemic has had many, varied impacts on children's protection and well-being. Child protection organizations, such as World Vision Somalia, have had to adapt their programming to meet the enhanced and particular needs of children at this time.

## World Vision Somalia's adaptation and strengthening of child protection programming



### STOP FGM!

We set up hotlines that were initially intended as feedback mechanisms for programme accountability. With the increased child protection concerns arising from the pandemic, the hotlines were adapted to be used as tools for reporting child protection concerns and facilitating safe referrals. The procedures had to change, given the reports of child rights violations and violence. 10 cases of FGM were reported through our adapted hotline in Puntland State. The children were able to access medical support to prevent severe bleeding and loss of life. In addition, the Ministry of Women, Development and Family Affairs documented 120 FGM cases reported through their own hotline 377 funded by World Vision Somalia and partners. Service mappings were developed for areas where we did not have a presence. This ensured that information was available on where to refer cases if a referral could not be made to one of our child protection teams.



8. World Vision Somalia (2020) COVID-19 rapid assessment report. World Vision.

9. OCHA. (2021) Humanitarian need overview: Somalia. Humanitarian Programme Cycle 2021. OCHA, p. 25.



## MONITORING GUIDELINES

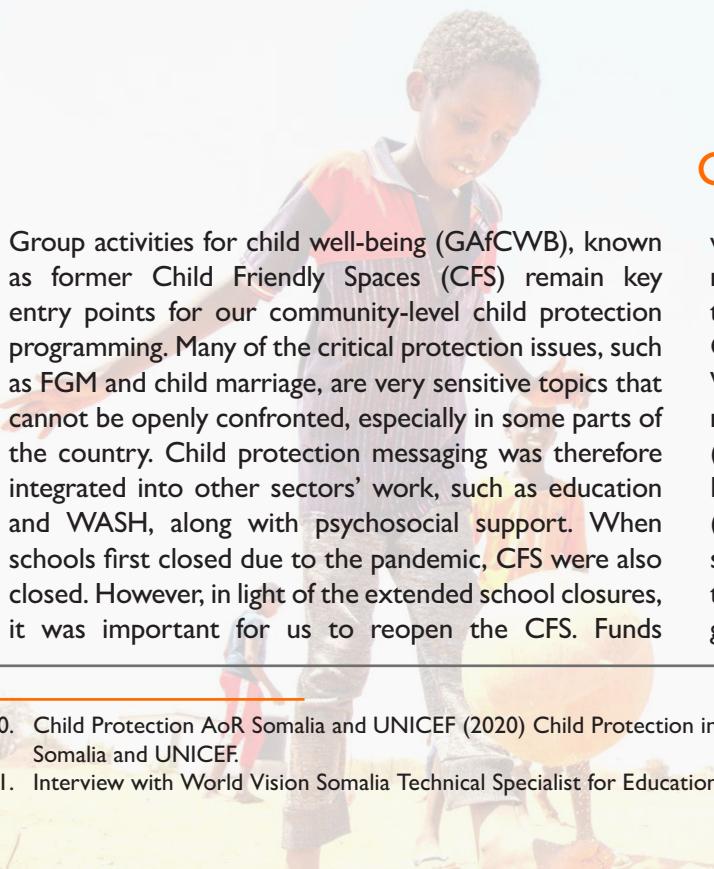
A second early warning system developed during the pandemic related to education. The Child Protection (CP) Sub-cluster in Somalia conducted a survey on children's needs and concerns during the COVID-19 pandemic<sup>10</sup>. One of the main findings was that there was a lot of distress amongst children about the disruption to schooling, particularly because the school closures came just before exams; students therefore did not know when they would be able to sit their exams and many were unable to bring their books home for preparation. There was a fear that by the time schools re-opened, children may have engaged in child labour and would not return to school, especially considering the multiple economic shocks at that time. The Strategic Advisory Group of the Child Protection Sub-cluster, of which World Vision Somalia is a member, therefore worked with the Education Cluster to develop monitoring guidelines so teachers could follow up with children. The teachers had existing WhatsApp groups to share information amongst themselves and the Ministry. This system was used to provide updates on how many students each teacher had been able to reach - an early warning system for children's education and well-being at the village level.

## BACK TO SCHOOL!

World Vision Somalia and our partners also looked for ways of supporting students to still have access to some of the services they had in school in a safe manner. We provided examination fees and personal protective equipment for students to support them to go back to school. In Puntland, we continued to operate 21 schools as part of our education programming. Along with the government, the Education Cluster and all our partners, we recognized that the risks of school dropout during the pandemic were very high. Two 'Back to School' campaigns were held to let caregivers and children know that schools were about to reopen and to highlight the importance of children returning to school. These campaigns were carried out by our Community Education Committees, which comprised parent representatives, teachers, faith leaders and other community members.

The Committees' teams used megaphones previously given to faith leaders for awareness raising on COVID-19, and disseminated messages throughout their communities.

Reflecting the success of the intervention, across the 21 schools operated by World Vision Somalia, **there was 100% return rate<sup>11</sup>**.



Group activities for child well-being (GAfCWB), known as former Child Friendly Spaces (CFS) remain key entry points for our community-level child protection programming. Many of the critical protection issues, such as FGM and child marriage, are very sensitive topics that cannot be openly confronted, especially in some parts of the country. Child protection messaging was therefore integrated into other sectors' work, such as education and WASH, along with psychosocial support. When schools first closed due to the pandemic, CFS were also closed. However, in light of the extended school closures, it was important for us to reopen the CFS. Funds

## COMMUNITY LEVEL CHILD PROTECTION



were reallocated to ensure robust COVID-19 control measures were in place across all the CFS, thus reducing the risk of disease transmission. The Strategic Advisory Group of the Child Protection Sub-cluster, of which World Vision Somalia is a member, also began gathering relevant frameworks and Standard Operating Procedures (SoPs) and contextualizing this for the Somalia context. Examples included how to provide psychosocial support (PSS) and remote case management for children who still needed specialized care. These tools and SoPs were then standardized by the Sub-cluster partners, including government actors.

10. Child Protection AoR Somalia and UNICEF (2020) Child Protection in The Context Of COVID-19, May 2020. Child Protection AoR Somalia and UNICEF.  
11. Interview with World Vision Somalia Technical Specialist for Education and Child Protection. 9.20.2021.

# Examples of how World Vision Somalia's child protection programming adapted or changed its relationship with formal child protection systems



World Vision Somalia adapted the accountability toll free line 364 to support reporting and referral of child protection incidents during the COVID-19 lockdown. During this period, 11 cases of FGM in Puntland and 5 cases of child neglect in Baidoa were reported through the hotline. In collaboration with the child protection committees (supported by World Vision Somalia and partners to intensify campaigns against FGM and other forms of violence against children), MOWDAFA records indicate that 415 girls were rescued before being subjected to FGM. This was achieved through the efforts of the Child Protection Committee members who raised the alarm before the act of FGM was conducted. Despite decreased household income levels during the pandemic, caregivers continue to pay from \$5 to \$10 for their daughters to undergo FGM. Those who cannot afford cash provide livestock or fundraise from relatives. We therefore continued to monitor and work with 20 FGM practitioners who renounced the practice by providing them with training on savings and establishing alternative sources of income.

In addition to our accountability hotline, the Puntland State government line ministry in charge of child protection was supported by World Vision Somalia projects to maintain its own hotline – 377 – which was accessible to users of the Golis service provider. This provided a platform for timely response to incidents.

The involvement of trained faith leader and child protection committees to conduct 'Back to School' campaigns led to 100% enrollment of children back to school, in addition to preventing FGM and child marriage. We provided the teams with loudspeakers and surgical face masks for use during the meetings. The same teams also spread messages of COVID-19 control measures, like handwashing, physical distancing and wearing of masks. In spite of the lock down, we continued to support payment of teacher incentives in 21 primary schools to ensure availability of teachers upon school re-opening.

The Somalia Response Innovation Lab, hosted by World Vision Somalia, in collaboration with government developed and launched animated clips on various thematic issues arising during COVID-19, like self-care tips for caregivers and children. The Twin Heroes, Hiddo and Hirsi clips were circulated online for use by partners, including government ones, and aimed to disseminate psychological support messages in Somali language for children and caregivers.

In the context of strengthening the existing child protection system, the pandemic brought forth the opportunity to engage more actively with the government. We harnessed the moment to influence bringing together education, health and child protection line ministries, the coordination mechanisms and sub-clusters in order to enhance child protection outcomes. As a result, additional joint meetings between the Child Protection and Education Sub-clusters and respective line ministries' representatives to develop guidelines for PSS in schools.



415 girls were rescued before being subjected to FGM



## Overview of the ways in which World Vision Somalia has engaged faith leaders and faith communities in ensuring children are protected in the midst of COVID-19

Prior to the pandemic, World Vision Somalia had been working with faith leaders using a range of our global flagship models, including:

### **Channels of Hope Protection**

**Channels of Hope Maternal, Newborn, and Child Health**  
**Channels of Hope for Gender.**

The aim of these models is to support faith leaders and communities to engage with key child protection and well-being issues. They are based on a facilitative package for interactive workshops, grounded in the faith community's guiding principles and religious texts.<sup>12</sup> After the trainings, faith leaders form Community of Hope Action Teams (CHAT). Through these teams, they

engage in mosque and community dialogues about the impacts of violence against children, and work towards ending violence, especially FGM, through activities which promote social normative change.

The CHATS address a broad range of child protection issues beyond violence. For instance, Channels of Hope for Gender explores the underlying issues around the inequity between boys and girls, including access to education, decision-making and community resource allocation. Building on the success of the Channels of Hope model and the experience of the CHATS, we developed specific activities which aimed to raise awareness of COVID-19 prevention and challenge misconceptions about the virus and the vaccines.

12. For more information: <https://www.wvi.org/church-and-interfaith-engagement/channels-hope-child-protection>; <https://www.wvi.org/church-and-interfaith-engagement/channels-hope-gender>; <https://www.wvi.org/church-and-interfaith-engagement/channels-hope-maternal-newborn-and-child-health>.

We also trained the CHATS on psychological first aid to enable them to provide support to their congregations during lockdown, including children who continued attending madrassa.

Our child protection teams also asked the health teams to provide some materials about COVID-19 that were already translated and could be used during 'Back to School' campaigns. Our child protection staff then worked with faith leaders to deliver common messages on both child protection and COVID-19 control measures. The faith leaders were given megaphones so they could disseminate the messages without close contact. The messages were particularly important as Eid was imminent and families would be gathering.

At the outset of the pandemic there was some disbelief that the virus is real. Even when the first cases were identified and increasing numbers of people began to believe COVID-19 is real, protective behaviour, such as mask wearing, remained limited. With the authority and trust invested in them by the community, the faith leader CHATS engaged in on-going awareness raising on how communities could protect themselves and began to see behaviour changes. When parents were reluctant to send their child back to school for fear of infection, there were 'Back to School' campaigns that disseminated information about the safety measures that would be taken in the schools. World Vision Somalia worked alongside CHATS

in delivering these campaigns through training, and some logistical support and materials.

Besides the limitations that World Vision Somalia's teams had in reaching communities due to the movement restrictions, leading to a particular reliance on the faith leaders, there was a view that those leaders' outreach and awareness raising was trusted more than that of outside actors, such as non-governmental organizations.

World Vision Somalia's strong partnerships with faith leaders enabled activities to continue, even when our teams could not access all project sites due to movement restrictions. Furthermore, since faith leaders are highly trusted within their communities, it is likely that their outreach and awareness raising had a bigger impact than messaging delivered by outside actors, such as non-governmental organisations (NGOs).

Then this leads into the last examples, concerning two particularly important impacts of the outreach conducted by faith leaders regarding school attendance and COVID-19 prevention. In Puntland, where we had done the most work with faith leaders, we observed a 100% re-enrollment rate following the re-opening of the 21 schools supported by Word Vision Somalia. Furthermore, in the schools around the country where we had provided water, sanitizer and soap, there was a demonstrable increase in handwashing and mask wearing.

## CHANNELS OF HOPE

### Engaging Faith Leaders for Child Protection



## Impacts of COVID-19 on child marriage

It is well-documented that the pandemic has led to an increase in child marriage, in great part due to girls being out of school and the economic impacts of COVID-19 at the household level (see the introduction above).

### World Vision Somalia's on-going work to address child marriage

In terms of prevention, our engagement with faith leaders includes the models Channels of Hope Gender and Channels of Hope for Maternal, Newborn and Child Health.<sup>13</sup> The latter focuses on the entire process of conception, as well as what is needed for a healthy pregnancy, healthy mother and healthy child. The issue of a mother's age and the risks that come with very young mothers' pregnancies are covered, such as obstetric fistula, the rates of which are very high in Somalia<sup>14</sup>. In this training, the risks of early pregnancy are related to cultural practices, such as child marriage and FGM, and the complications that can arise. Faith leaders are also presented with statistics from other Muslim countries which highlight that rates of child marriage and maternal and child mortality are far higher in Somalia. Faith leaders are especially effective at delivering this messaging since they have influence in their communities and also participate in law-making. The Channels of Hope model also encourages the community to reflect on their own role in marrying children.

For caregivers who are hesitant to let their daughters go to school out of fear they will get pregnant, we offer a life skills package that faith leaders can adapt to promote faith values, while supporting girls.

There were other actions to mainstream child protection across sectors. For instance, the health sector has support groups for mothers, arranged by World Vision Somalia, which encourage mothers to consider their own experiences as young mothers and reflect on whether they want their daughter to be married as young as they were. Within these groups, mothers often reflect on how ill-prepared they were to face challenging issues, such as post-partum depression or fistula resulting from prolonged labour and FGM. Most mothers under the age of 18 years leave the group resolving not to let their own daughters go through the same experiences. World Vision Somalia also has cash programmes, and our child protection team works to include protection criteria in the selection of households for cash assistance. This helps to focus economic support on households that may be at higher risk for child marriage, such as those headed by older people, caregivers with disabilities, or households fostering children, for example.



The  
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13. For more information: <https://www.wvi.org/church-and-interfaith-engagement/channels-hope-gender> and <https://www.wvi.org/church-and-interfaith-engagement/channels-hope-maternal-newborn-and-child-health>.

14. World Vision Somalia (2020), End line Fistula Project Evaluation Report, World Vision Somalia.



## Effective coordination and networking during the COVID-19 Response

Over the past few years there has been increased participation of government and national NGOs in the humanitarian coordination structures. There has been a lot of effort in building the capacity of these national actors, not only through training but also through developing simple and accessible Standard Operating Procedures. Trainings that were previously restricted, such as case management, are being implemented.

## Promising practice in the government's response

As noted earlier, government line ministries are very active in the coordination working groups, adapting a “hands on” approach to child protection, coordination and response. The pandemic has led to the government becoming increasingly vigilant in monitoring serious child protection issues, such as child marriage, child labour and FGM, after realizing that there is less monitoring of children’s well-being when they are not in school.

There was a concern amongst the Child Protection sub-cluster and other actors, including government stakeholders, that the worsening economic crisis was

going to lead to evictions of families who could not pay rent, leading to a real crisis of children in the streets, overcrowding in relatives’ homes, increased violence (including rape), increased transmission of COVID-19 and further stretching of the already strained protection services. Following advocacy on this issue, including advocacy by the Advocacy Working Group of which World Vision Somalia is a member, the government issued a moratorium on evictions. This was greatly welcomed by child protection and gender-based-violence actors.

When the pandemic started, only certain workers, such as health workers, were deemed “essential” in order for their work to continue during the lockdown. This did not include child protection workers, so child protection programming, such as CFS, were closed, and alternative care homes were asked to move the children. The Child Protection Sub-cluster and UNICEF did a lot of lobbying with the government to make the “essential” designation apply to child protection workers so that CFS and other child protection structures could open up, and child protection workers could get out and resume community-level prevention and response activities. As a member of the Child Protection Strategic Advisory Group, which falls under the Child Protection Sub-cluster, World Vision Somalia was active in pushing for these important changes.