World Vision

EXECUTIVE REPORT

Learning from rapid adaptations to child protection programming during the COVID-19 pandemic

Acknowledgements

World Vision

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INTRODUCTION

BACKGROUND

Within hours of the declaration by the World Health Organization (WHO) of the COVID-19 pandemic, World Vision launched its largest global emergency response ever. Working closely with governments, partners, supporters, and communities, World Vision responded to the impact of COVID-19 in more than 70 countries to limit the spread of the disease and reduce its impact on the world's most vulnerable children and families.

The strategic objectives of the global response included the following:

› **Scale up preventative measures to limit the spread of disease.**
› **Strengthen health systems and workers.**
› **Support children affected by COVID-19 with education, child protection, food security, and livelihoods.**
› **Collaborate and advocate to ensure vulnerable children were protected.**

World Vision further defined priorities for child protection programming that were contextualized by country offices according to their specific needs. Programmatic priorities included effective reporting and referral mechanisms, standard procedures for alternative care, and psychosocial support for children, parents, and caregivers.

The realities of the pandemic and the social distancing requirements accelerated an existing trend toward digital tools and remote delivery of child protection services. World Vision rapidly adapted traditional tools and mechanisms for remote and digital delivery of services and supports for child protection, often without significant space to consider potential limitations and reflect on promising practices and reasons for success. Therefore, World Vision conducted a reflective analysis on its child protection programming within the COVID-19 response to systematically explore experiences in remote and digital adaptations and implementation, identifying both benefits and limitations.

METHODOLOGY

A retrospective meta review of case studies, project reports, and monitoring and evaluation documents on adaptations to child protection programming and interventions was conducted for 18 World Vision offices. This was a systematic review with predetermined priority areas of interest, including child resilience, faith community mobilization, and direct participant/client engagement.

Following the review of World Vision experiences globally, four programs in Somalia, Myanmar, Lebanon, and El Salvador were selected as case studies, based on relevance to the priority areas of interest and contextual considerations. A thematic deductive review was conducted through program documentation and key informant interviews, allowing common themes to be identified across contexts, programs, and projects in hopes of furthering the validity of findings. Major themes were selected based on frequency of identification and relevance. However, it was not possible to conduct interviews with program and project participants, and little review or interrogation of quantitative data of remote and digital adaptations was conducted.

LEARNINGS AND RECOMMENDATIONS

While there were distinctions across the types of interventions and adaptations reviewed, several common learnings emerged regarding digital and remote design and implementation, as well as opportunities to strengthen safety and access to remote and digital protection services and supports. Based on the information gathered and the notable findings from the case studies, we identified *six key learnings* and accompanied them with related recommendations for digital or remote child protection programming. The learnings and recommendations are aligned with the *Principles for Digital Development*, which are nine living guidelines designed to help integrate best practices into every phase of the project life cycle of technology-enabled programs.[1]

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[1]   Principles for Digital Development. www.digitalprinciples.org

Key learning 1

Implementers should assess and plan for existing staff capacity and resources to effectively adapt and use digital and/or remote modalities.

LEARNING

World Vision's offices collectively recognized that the onset of the COVID-19 pandemic presented new stressors for staff and service providers who suddenly had to switch to delivering services digitally and/or remotely. While the needs were immediate, this was unknown territory for most World Vision offices, and significant adaptations to face-to-face community-based approaches were required. World Vision staff and partners faced new boundaries in human and financial resources for digital adaptations, as psychosocial concerns during the pandemic placed an extra burden on direct service providers and case management facilitators living and working within strained systems. World Vision teams learned to use online and remote platforms for digital delivery of communication and capacity building. Materials also needed to be digitalized in an inclusive and accessible way for the target communities.

RECOMMENDATIONS

Prior to starting any adapted intervention, invest sufficient time and resources to build the capacity of staff at national and local levels during the pilot phase. Allow for reallocation of funding or raise the budget to support quick and effective adaptation of programming to remote and digital modalities.

It is also important to invest in ongoing coaching and mentoring to support quality service delivery—and to monitor and foster the well-being of service providers. Case managers and facilitators must be trained to build essential skills for building effective relationships remotely.

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It was important to invest in educating the field teams on digitalization and developing capacity-building packages, also taking remote work into consideration. The teams should be ready in a concerted way and have everything functioning and ready to go. Even after kicking off, we needed to monitor and motivate staff to stay abreast and adapt to the changing reality."

—World Vision staff member in Lebanon

Key learning 2

Consideration must be given to increased and unique risks and vulnerabilities for engaging children and young people in the digital space.

LEARNING

In the vast majority of the countries we reviewed, the internet had become more accessible, taking on new dimensions with life-altering consequences for children growing up in an online world, even before the pandemic. In lieu of in-person learning, several World Vision programs set up virtual learning via online platforms, radio, and television. While this offered some continuity of learning, remote modalities nonetheless excluded large numbers of children who did not have access to the necessary technology. The loss of educational and social opportunities, and the COVID-19 pandemic in general, caused stress and anxiety in children, affecting their overall well-being, as recognized across all the offices. There were opportunities to use online platforms, especially during periods of lockdown, to build life skills and resilience.

There were also limitations and risks, especially for children and young people. Widespread use of the internet and social media offers both possibilities and perils for young users. While these digital platforms can contribute to educational and social development, they also put children at risk of harm, exploitation, and abuse. Not all risks will translate into actual harm, but children and young people already facing other issues may be more vulnerable. More research is needed to fully assess the online safety risks for young users.

RECOMMENDATIONS

Invest in equipping children and young people with safe digital skills that enhance their resilience to protect themselves from harm both online and off. It is important that measures to mitigate risks are balanced with children's rights to freedom of expression, access to information, and privacy. While children ages 13 and older may already be familiar with social media, the pandemic has introduced younger children to social networking tools that may contain content that is not age appropriate.

The best interests of children must be central to the design of such initiatives to strengthen digital skills. It is important to consider the child-centric recommendations and input from many different individuals and groups to better protect children online. These people and groups may include law enforcement, social service providers, educators, child protection committees, parents, and caregivers—and, unquestionably, children themselves.

In addition, parents, caregivers, educators, and other key stakeholders should help children as they navigate the shift to engaging with different digital spaces, addressing online safety during learning, socialization, and play. Schools should incorporate digital safety into their curriculums and provide school-based counselors and peer-to-peer support for children. Our recommendations are consistent with digital safety findings by the WHO.[2]

[2]   World Health Organization. (2022). *What works to prevent online violence against children?* https://www.who.int/publications/i/item/9789240062061

Key learning 3

Recognizing the barriers that vulnerable communities face in obtaining services and supports through digital and remote modalities is key to increasing meaningful access.

LEARNING

While digital platforms and modalities can provide opportunities for fast communication and mobilization, there are significant gaps in access within communities, especially for the most vulnerable people. There is a range of barriers to access, including the lack of internet and/or devices for participants to engage with individually and limited or unreliable connectivity. When digital modalities were not accessible, World Vision programs made adaptations to work remotely through community leaders, including faith leaders.

In Myanmar, when case managers faced challenges to reach vulnerable Survivors of Trafficking during lockdowns, they started working with trained and trusted community members to facilitate face-to-face engagements. In El Salvador and Somalia, World Vision staff worked with faith leaders to reach communities through SMS messages, megaphones, and the distribution of kits, among other modalities, to raise awareness on the increased protection risks in light of the pandemic. When faced with connectivity or high financial burdens such as increasing internet tariff prices, World Vision's office in Lebanon also relied heavily on faith leaders as well as volunteers, teachers, municipal staff, and community-based child protection committees to ensure the continuity of programs and community response mechanisms to child protection concerns.

RECOMMENDATIONS

When introducing remote modalities, conduct a barrier analysis that examines the economic, behavioral, and operational aspects of shifting to digital and/or remote community services and supports for end users—particularly the most vulnerable and marginalized people. Staff should make efforts to bridge the digital divide by reaching out to vulnerable groups and addressing their multiple barriers related to access and use, such as language and literacy, abilities and capacities, gender and income, and location and age. Related existing community supports and structures should be strengthened as safe and accessible resources. For example, building on intergenerational approaches can strengthen a culture of peer-to-peer learning among all family members and the entire community. At the same time, it is critical to continue looking ahead, analyzing the ever-changing ecosystem and thinking creatively about internet connectivity.

Key learning 4

The voices of children should be included and amplified as we develop digital and remote solutions that address their realities and needs.

LEARNING

In the programs reviewed, children's opinions and perspectives on the risks they face coming of age in a digital world were considered while redesigning child protection interventions. This supported the overall relevance and effectiveness of World Vision's programming efforts. In Lebanon, World Vision's Focused Psychosocial Support (FPSS) programs were significantly adapted for children ages 6 to 17. Many of these children had been exploited through severe forms of child labor and had low literacy skills. This group included children with disabilities. The online sessions on the platform had to be designed with sensitivity to age, ability, and literacy to ensure an accessible modality to all participants.

Staff from the local office in Lebanon engaged with parents and caregivers, school authorities, digital technology companies, media providers, and social service workers to recognize that children have agency and can contribute to change. Pre- and post-assessments in Lebanon showed that listening to the opinions and perspectives of children and incorporating their views into programs and campaigns enhanced their resilience. Keeping children informed and engaged empowered them with the skills to use the internet safely and was deemed a critical line of defense in the World Vision programs that were assessed.

RECOMMENDATIONS

To design user-centric programs, the end user must be engaged through conversation, observation, and co-creation. Information gathered through this engagement should lead to building, testing, and redesigning tools until they effectively meet the needs of children. By designing *with* the users, and not just *for* them, digital tools will better address the specific needs and contexts of the people who will directly interact with the technology. As World Vision is committed to serving the most vulnerable, it is critical that the programs and interventions are adapted to respond to specific vulnerabilities, needs, and risks. Some considerations that should be addressed at the onset of the design are gender inequalities, social exclusions, and accessibility needs for people with disabilities. It is critical to amplify messaging on safe and responsible behavior online and messaging on supporting children as they develop digital resilience skills to navigate and respond to online risks.

Key learning 5

Mobilizing local partners, including faith communities, can support the reach and effectiveness of programs.

LEARNING

World Vision's operating model allows us to partner with communities over several years to strengthen capacities and coordination for the well-being and protection of children. Through this model, local staff work to build relationships and contribute to strengthening structures and environments for children and families. World Vision's prior capacity-building initiatives with local leaders, especially faith leaders, were identified as an enabling factor for the effectiveness of the adaptations made during the pandemic. Faith leaders were able to launch remote and digital initiatives that effectively reached communities, including marginalized people, with tailored and trusted messages to protect themselves and their children.

The faith leaders' understanding of the contexts and access to communities was pivotal for tailoring and delivering child protection messages that resonated with community members. World Vision's office in Somalia involved trained faith leaders and child protection committees in a back-to-school campaign following the lockdowns, which led to a 100% re-enrollment rate of children. In Lebanon, faith leaders who were previously trained and organized by World Vision mobilized to disseminate messages on child protection and the prevention of COVID-19. Given their reputation among the community, faith leaders were able to influence the attitudes and behaviors related to prevention and protection.

RECOMMENDATIONS

In adapting programs and interventions for remote and digital delivery, it is valuable to continue to cultivate and leverage partnerships and relationships at the local level, especially with faith-based organizations. Faith leaders can play an active role in influencing social norms to better protect children and support their psychosocial well-being during times of distress. Faith leaders and communities can be equipped to help reduce the exclusion of vulnerable individuals and groups. They are often recognized and trusted members of the community and should be engaged in adaptations to ensure that the modalities and information are accessible and meaningful for the community.

Key learning 6

Prior presence in communities, including capacity-building initiatives with local leaders, is critical to quickly and successfully launching remote or digital initiatives.

LEARNING

The reflective analysis highlighted the importance of World Vision's established presence in communities. The ability to build upon existing relationships and partnerships was identified as an enabling factor for responsive and successful adaptations. Some offices noted that prior capacity-building efforts supported the ability to work with and through community leaders. In many ways, the success in delivering interventions remotely and digitally was feasible due to existing partnerships with community leaders and local stakeholders from governments and businesses. World Vision offices were able to quickly leverage their local knowledge as well as their trusted reputations in communities to reach vulnerable people. Trained leaders were equipped with additional tools and resources that supported the efforts to respond to pressing needs.

World Vision's office in Lebanon assessed the capacity-building needs of staff and partners to identify any potential risks or challenges anticipated in relation to the pandemic response. This led to equipping existing partners to develop appropriate prevention and response initiatives and to adjusting existing programming for use via remote modalities. The staff's priority was to continue building upon existing partnerships that were supporting child protection services to children, their families, and their communities.

RECOMMENDATIONS

Continue to invest in partnerships at the local level, recognizing that they are conveners that connect individuals and groups to community-based resources and supports that are accessible and relevant to communities and their needs. Contribute to the capacity building of local groups and organizations, including those led by typically marginalized or excluded groups. With the provision of additional training and other resources, community-based organizations play an effective and sustainable role in protection initiatives.

CONCLUSION

While the challenges were many, World Vision offices recognized that COVID-19 provided opportunities to be agile and innovative in their efforts to protect children from violence in this new, fast-changing environment. The pandemic accelerated field office development and use of remote and digital modalities to strengthen child protection programming. While the programmatic adaptations reviewed were diverse and the assessment relied primarily on anecdotal data, the reflections and evidence generated fundamental learnings and recommendations related to remote and digital adaptations of child protection programs and the need to continue strengthening safety and access for vulnerable communities, especially children.

CASE STUDY

SOMALIA: Mobilizing faith leaders for the protection of children, especially girls

Children in Somalia faced multiple interlinked protection risks prior to the COVID-19 pandemic, which exacerbated an already dire situation for children. Decades of armed conflict, weather-induced disasters, weak protective structures, disease outbreaks, and poverty, among other adverse conditions, left children and their families struggling to meet their basic needs and access essential services.

Against this background, 2020 presented compounding challenges for children, as schools were closed and households were affected by economic and psychosocial distress. As a result, there was increased violence against children, especially girls. World Vision's office in Somalia had to adapt child protection programming to address increased protection concerns, as well as the emerging needs of children following the onset of the pandemic.

World Vision's Somalia office adapted their programming to meet the needs of children at this time, despite challenges in the communities where there was some disbelief that the virus was real. As communities recognized faith leaders as trusted authorities, faith leaders and previously trained and organized faith groups played an active role in raising awareness on COVID-19 and protection.

With movement restrictions, World Vision staff were unable to reach many communities. However, they could rely on trusted faith leaders, building upon decades of trust and cultural sensitivity established before the pandemic. The staff in Somalia noted how efforts to make appropriate adaptations for Muslims prior to the pandemic created a foundation for trust and respect that then supported protection efforts during the pandemic.

Along with child protection committees, faith leaders led back-to-school campaign efforts that contributed to a 100% re-enrollment of children following the lockdown. Faith leaders also advocated for the prevention of female genital mutilation and child marriage. Following social distancing protocols, child protection and faith leader teams used megaphones and loudspeakers to bring information and support to communities.

Overall, World Vision's office in Somalia relied heavily on trained faith leaders as trusted actors that effectively contributed to awareness raising and behavior change across communities, even reaching many marginalized groups. The office's strong partnership with faith leaders and communities enabled activities to continue, even when staff could not directly access communities.

The reflective analysis with World Vision's office in Somalia generated several notable findings:

> The outreach and messages from faith leaders were more trusted than those of outside actors.

> Building on long-term partnerships during times of crisis by deploying faith leaders and members of local child protection committees was effective.

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MYANMAR: Remote and digital case management and psychosocial support for Survivors of Trafficking

In Myanmar, the combination of COVID-19, the economic downturn, the 2021 military coup, and the loss of employment and self-reliance opportunities made it harder for Survivors of Trafficking (SoTs) to maintain their livelihoods. These factors further exacerbated the underlying vulnerabilities and protection risks faced by SoTs. In response to this volatile situation, the Burma (Myanmar) Anti-Trafficking in Persons (A-TiP) Project quickly adapted to address the reintegration needs of SoTs by maintaining case management, services, and support to survivors, despite limitations and restrictions.

The project quickly developed and applied a hybrid approach to case management and reintegration support to SoTs. The project team adapted to conducting weekly monitoring through mobile calls and calls using SMS messaging platforms—often with the support of trained local partners and volunteers. If there were heightened safety concerns and vulnerabilities, local case managers were dispatched to conduct physical monitoring.

The A-TiP Project team and case managers, as well as SoTs, recognized that remote case management was not ideal, yet they were able to successfully continue monitoring 220 cases, providing ongoing psychosocial support to SoTs. In an evaluation of World Vision's A-TiP Project in Myanmar, SoTs reported that they found significant stress relief and encouragement through the remote psychosocial support provided by case managers.[3]

While the project evaluation found SoTs to be satisfied with the case management services and psychosocial support provided by case managers, case managers identified new stressors and strains, including the new challenges for providing support remotely. Case managers communicated some limitations to building rapport and trust remotely, which are critical components of the protection and reintegration of SoTs. The project team recognized that while digital platforms allowed for connection and communication, the overall impacts of the pandemic and the lockdowns took a toll on their own well-being. Recognizing the case managers' need for psychosocial support, the A-TiP Project facilitated spaces for reflecting, building coping skills, and developing new ways of working.

> **The reflective analysis of the A-TiP Project produced several notable findings:**
>
> › It is necessary to provide ongoing training and mentoring to case managers and key community partners on remote service delivery to vulnerable individuals.
>
> › Though there were limitations to rapport and trust building when providing case management remotely, the benefits of delivering psychosocial support outweighed the challenges.

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[3] Thiri Kyaw, A. (2022). *Opening the "black box" of protection and reintegration interventions for trafficking survivors in Myanmar: A realist-focused evaluation of World Vision's Anti-trafficking in Persons (A/TIP) program.* https://rtaconference.org/session/opening-the-black-box-of-protection-and-reintegration-interventions-for-trafficking-survivors-in-myanmar-a-realist-evaluation-of-world-visions-anti-trafficking-in-persons/

LEBANON: Digitalization of psychosocial support for child resilience building

Prior to the onset of the COVID-19 pandemic, children in Lebanon faced multiple risks due to the complex humanitarian crisis. Before 2020, there were approximately 1.5 million refugees, the majority of whom lacked legal status, lived under the poverty line, and experienced difficulties accessing basic services, such as healthcare and education. In addition, the country had been experiencing a financial collapse impacting households' access to food and basic services. Both the refugee crisis and the financial crisis had affected the psychosocial well-being of children.[4] Altogether, the compounding crises had affected just about every aspect of children's lives, including education, nutrition, and mental health.

With that context in mind, adaptations for the COVID-19 response of World Vision's office in Lebanon were made to directly support affected children through child protection programming while also collaborating and advocating with partners to ensure that children were safe and protected in light of the challenges and risks faced during the pandemic. Among the many efforts to strengthen the environments surrounding children, World Vision's Lebanon staff provided and facilitated online psychosocial support sessions for children, including those participating in child labor.

Through the Focused Psychosocial Support (FPSS) online platform, psychosocial support tools and child labor program tools were adapted with COVID-19 prevention messaging. Programs and materials were converted to remote modalities, such as phone applications, for two different groups—ages 6 to 11 and ages 12 to 17—convening them in digitalized, interactive sessions and child-friendly websites. The children were provided orientation and facilitation support to ensure their ability to use the website.

Participating children had access to 16 digital, age-appropriate sessions covering specific psychosocial topics, such as managing emotions like sadness or anger and planning for the future. After completion, groups participated in follow-up meetings with the facilitator, assessing learnings

and updates on the participants' well-being and household needs. Younger children often accessed the website through their parents' or caregivers' mobile phones, and airtime recharge cards were provided to support children's access. However, one noteworthy challenge was the inconvenience of recharging phones during monitoring calls, which caused some parents and caregivers to discontinue their engagement.

To assess the impact of the FPSS sessions on children's emotional and psychosocial well-being, World Vision's Lebanon office organized pre- and post-test surveys during its pilot phase and, based on lessons learned and children's suggestions, subsequently scaled up and implemented the platform over two cycles. The post-test scores showed improvement for more than 80% of the respondents, consistent for boys and girls alike. The different cognitive, emotional, and psychosocial dimensions of the FPSS curriculum were well captured by the key informants from World Vision's staff in Lebanon who monitored the well-being of children and their caregivers.

> **The reflective analysis generated several notable findings for the World Vision team in Lebanon:**
>
> › Despite the promising results of digital and remote adaptations, children still request face-to-face interactions.
>
> › It is important to conduct a barrier analysis and examine financial, behavioral, and operational aspects when shifting to digital community service, both for end users and for World Vision.
>
> › Remote work can be challenging, especially for direct service providers, impacting motivation and effectiveness. It is critical to ensure that sufficient resources are invested in building the capacity of local and national partners on digital safety and service delivery.

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4   World Vision International. (2022). *Child Protection and COVID-19: Lebanon Case Study.* https://www.wvi.org/publications/case-study/child-protection/child-protection-and-covid-19-lebanon-case-study

EL SALVADOR: Adapted and tailored programming to protect children

Prior to the onset of COVID-19, El Salvador, which faces a complex and long-lasting violence crisis, was considered one of the most dangerous countries for children. The pandemic exacerbated factors perpetuating violence against children. With strict lockdowns and limited government capacity, it was difficult to gauge the implications for the protection and well-being of children.

World Vision's El Salvador office quickly mobilized to conduct a review of the most urgent child protection issues in the wake of the pandemic. The rapid assessment confirmed the relevance of issues identified prior to the onset of COVID-19; however, the modalities needed to be changed. The assessment also found that some areas of need required closer attention, such as mental health and psychosocial support (MHPSS).

Child protection programming was adapted to reach key stakeholder groups to prevent and respond to child protection risks and concerns, including MHPSS needs. With social isolation, the loss of loved ones, and the increased levels of stress affecting most households, the staff in El Salvador recognized the implications for children and their parents and caregivers. A life-skills and resilience curriculum was adapted for remote and digital use. In addition to the digital and printed materials, World Vision's office in El Salvador provided household kits with educational content and family activities to build coping and conflict resolution skills and reduce stress. Several local informants made note of the kits building solidarity and unity within families.

Ultimately, the team decided that a hybrid approach was necessary to reach the target groups, as many simply did not have access to internet or devices to participate virtually. Digital communication methods, such as SMS messaging with links to videos, books, forms, and virtual spaces, were combined with the distribution of printed materials and small and safe gatherings. This hybrid approach was successful.

The World Vision office in El Salvador recognized the limitations to impacting behavior change (to strengthen children's protection from violence) through digital messaging. These limitations were made evident as the pandemic evolved over more than two years. While some digital tools seemed to be effective for awareness raising, additional efforts were needed to effectively change behaviors.

World Vision's El Salvador staff and volunteers identified several notable findings:

> The prior investments made in training and mobilizing community leaders, as well as maintaining their organized support, were a valuable and critical component to successfully initiating the COVID-19 response.

> The team prioritized the need to continue providing resources and support to build the capacity of community groups and structures, which was effective in serving the communities.