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JOINT ADVISORY BY THE ECOWAS COMMISSION AND THE REGIONAL CHILD PROTECTION WORKING GROUP (RCPWG) TO ECOWAS MEMBER STATES ON MINIMIZING THE IMPACT OF THE COVID-19 PANDEMIC ON CHILDREN.

Background:

The Director General of the WHO declared the outbreak of COVID-19 as a Pandemic on the 11th of March 2020. Cases of COVID-19 have been reported in all West African Countries. Sierra Leone was the last country in the ECOWAS region to be affected and reported a confirmed COVID-19 case on 31 March 2020.

Clearly, the impact of COVID-19 and the response measures of Member States must take into account (as much as possible) the prevailing context of Child Rights in West Africa, including, multi-dimensional poverty, crisis, conflicts, and the situation of Children in emergencies (including other subsisting infectious diseases outbreaks such as Lassa Fever and Cholera etc.) amongst other factors.

As the virus spreads to lower-income, fragile and/or conflict-affected countries such as those in the ECOWAS region, the ECOWAS Commission and its partners in the Regional Child Protection Working Group¹ (RCPWG) are deeply concerned for the children of West Africa, where health, education and social protection systems are weak and severely impaired in times of stability, let alone in a crisis of such magnitude.

The virus does not discriminate and impacts everyone across the globe, but there are far more devastating effects on vulnerable populations especially Women and Children. While so far, it seems COVID-19 affects Children to a lesser extent, Children with disabilities and chronic diseases, children living in overcrowded urban slums, as well as malnourished children and children living in refugee camps are exposed to a higher risk of contracting the virus.

¹The Regional Child Protection Working Group (RCPWG) is a coalition of agencies with a common objective of strengthening Child Protection measures in the West Africa Region. The RCPWG comprises of 15 organizations as follows: ISS, Save the Children, World Vision International, Educo, MAEJT, ENDA, Terre des hommes-Lausanne, Handicap International, ChildFund, Plan International, SOS Children's Village, ILO, IOM, UNODC and UNICEF.

Beyond the menace of the disease itself, the rapidly changing context poses a great risk of violence against children. Measures to prevent the spread of the virus, such as social distancing, school closures and restrictions on movements disrupt Children's routine, social care, and support; and social development, while also placing new stressors on parents and caregivers who may have to find new childcare options or forgo work. These contribute to an increased risk of violence at home. Moreover, stigma and discrimination related to COVID-19 may make children more vulnerable to abuse, exploitation, violence and psychosocial distress. Children and families who are already vulnerable due to socio-economic exclusion or those who live in overcrowded settings are particularly at risk.²

Thus, this Advisory is focused on the impact of the Pandemic on the Rights of Children and proposes to Member States, immediate and medium to long term measures meant not only to address the direct impacts of the current Pandemic on Children (including mortality and morbidity) but the impact of actions which are both extraordinary and necessary being taken by Member States to curb the spread of the Pandemic.

ECOWAS Regional Situation and Context

As ECOWAS Member States Governments ask millions of vulnerable people to stay home, and close schools and public spaces in order to contain the Pandemic, Children, including Children without parental care, Children on the street, Children on the Move and Migrant children, may face increased risks of psychological distress, violence, and social exclusion. The measures taken by our Member States including school closures are also likely to increase the burden of care for girls and young women, who may have to take increased care of their homes and siblings.

The young age structure of the West African population; as almost half of West Africans are 15 years old and younger³, makes it imperative that all COVID-19 responses have a special focus on Children, in particular those in vulnerable situations, so as to mitigate the risks of the virus infection and its secondary impacts.

Given that the economic impact of the COVID-19 outbreak is severe and long term, Children are exposed to a higher risk of abuse, violence and exploitation. Girls, in particular, will continue to be at heightened risk **of sexual violence and exploitation as well as Child marriage, and early pregnancy**. They are also likely to lack proper menstrual hygiene given the dire economic situation that families are and will be facing. Girls and boys may be forced to adopt negative coping mechanisms such as exchange of sex for assistance or to supplement the family income. Girls may also be forced into **child marriage** to alleviate the family burden, while boys may be pushed into **hazardous and exploitative labour**. **Children on the move, living on the streets, in urban slums, and without parental care as well as children living in humanitarian settings across the region** are especially in need of protection as they lack access to the essential health services and the necessary means to survive in the COVID-19 Pandemic and beyond. They

² The Alliance for Child Protection in Humanitarian Action, Technical Note: Protection of Children during the Coronavirus Pandemic, Version 1, March 2019

³<https://eros.usgs.gov/westafrika/node/156>

can become targets for all forms of abuses and violations and may not receive timely information to protect themselves.

Current Regional and National Responses and Interventions

We acknowledge the actions of ECOWAS, through the West African Health Organization (WAHO), its specialized Health Organization, as ECOWAS has made available financial support from its own resources, in addition to assistance from international partners, for the purchase of Medical Supplies and Equipment essential for the fight against the pandemic. WAHO has already purchased and dispatched to the 15 Member States:

- 30 500 diagnostic test kits;
- 10 000 Personal Protective Equipment (PPE) (Coveralls, Aprons, Gowns, Gloves, Goggles, boots);
- 740 000 prescription tablets (Chloroquine and Azithromycin);

In addition, orders have been placed to acquire for Member States, the following items:

- 240,000 Diagnostic Kits;
- 240,000 Extraction Kits;
- 250,000 Viral Sample Transport Equipment;
- 285,100 Personal Protective Equipment (PPE);
- 268,100 Masks for Medical Personnel (Face Masks, Surgical Masks, Full Face, Masks);
- 120 Ventilators;
- Several thousand litres of Alcohol Gel and Disinfectants.

WAHO is also working, in close collaboration with the Specialised Services in Member States, to deploy Personnel and Epidemiological Surveillance and Data Collection Tools, to strengthen the capacity of Reference Laboratories and train Technical Personnel. ECOWAS / WAHO, continue both internal and external resource mobilisation, with a view to increasing the availability of Medical materials and Equipment necessary to prevent, monitor and combat this pandemic. In addition, ECOWAS is working to complement its intervention as part of a Short and Medium Term State Assistance Plan including Humanitarian Assistance and Support for Economic Recovery. (***ECOWAS Communiqué N° 02 of 6 April 2020 on the Fight Against the Coronavirus Disease***).

ECOWAS and the CPRWG also commend ECOWAS Member States for actions taken so far to limit the spread of COVID-19 and in protecting its citizens; including extraordinary measures taken in appropriating funds and other palliatives as part of the response to this Pandemic. Given the novelty, urgency, and the severity of the current crisis, we urge Member States to create designated budgets and undertake actions that specifically factor Child Protection and Rights in Member States responses.

The ECOWAS Child Policy and Strategic Plan of Action 2019-2030

The ECOWAS Child Policy and Strategic Plan of Action 2019 -2030 updates the first Child Policy and its' Strategic Plan of Action. It provides a comprehensive, holistic and gender-based approach to the protection and promotion of the Rights of Children in the ECOWAS region; addressing the rights of the Child to survival, development, protection, and participation.

The ECOWAS Child Policy and the ECOWAS Child Protection Systems Strengthening Strategic Framework were approved by the Member States in 2017. The Strategic Framework outlines 3 key objectives that are of strategic relevance in the management of Child Protection related COVID-19 concerns:

1. To strengthen and adapt National Child Protection Systems to prevent and respond to Violence, Abuse, Exploitation and Neglect against children, especially the most vulnerable.
2. To strengthen political commitment, accountability and national capacity to legislate, plan and budget for scaling up Child Protection interventions, particularly across the 5 priority areas
3. To enhance ECOWAS accountability in monitoring, implementation and reporting on the Goals and objectives of the Strategic Framework for Strengthening National Child Protection Systems to prevent and respond to Violence, Abuse and Exploitation against Children in West Africa.

RECOMMENDATIONS

In line with key ECOWAS Child Rights Instruments, we advise that Member States urgently implement the following recommendations as immediate, short and long term actions to mitigate the impacts of COVID-19 on Children;

1. **Inform and prepare Children and Families** of the COVID-19 Pandemic and measures being undertaken to contain it, to reduce their stress and anxiety. This should include Child-friendly information on how to recognise the disease and measures for children to protect themselves. These Child-friendly materials may be distributed via TV, Radio, and Social Media channels and through School teaching content (in cases where schools are still open).
2. **Promote meaningful participation of girls and boys** in decision-making processes when appropriate and possible, in addressing the COVID-19 Pandemic at Community and National levels. This is essential to effectively respond to the crisis. When children are informed correctly, they can be more resilient and be agents of positive change to influence their peers and others, even their parents.
3. **Include the Core Child Rights and Protection Professional Services** in the COVID-19 Response at Strategic, Operational and Tactical levels by ensuring representation from the Ministry responsible for the Rights of the Child and integrating Professional Advisors from the Social Workforce in the National Response Architecture along with Health, Economic, Security and other actors.
4. **Ensure access to Social Protection measures for the most vulnerable children** by providing support to their Parents and Caregivers. Provide the most vulnerable families with free access to Healthcare, urgently needed food, hygiene, shelter where possible for those living in the streets, sanitation items including sanitary pads and Cash Assistance support to overcome the immediate and long term impact of the crisis. These measures should be integrated into the Government's response mechanisms and rolled out from the onset of the crisis. Plans should particularly target families depending on daily income, working in the informal sector or with lack of income especially in remote areas and those living in humanitarian settings.
5. **Children benefiting from School Lunch programmes and other School-based Social Protection measures should continue receiving these benefits** even in out-of-school

settings. This may include delivery of School Lunches and Meals to the homes or designated Centres for the most vulnerable families.

6. **The strengthening of Social Protection measures will require a consideration of both formal and informal Safety Nets**, bringing in both contributory and non-contributory forms of Social Insurance as a means of reaching the most vulnerable. In the targeting of these Social Protection measures, the following strategies might be helpful:

- Use of Registers indicating where School Feeding programs are being implemented in identifying vulnerable communities and families;
- As a further step, conducting carefully controlled 'Enumeration Exercises' of initially indicated vulnerable communities in ascertaining vulnerable households to qualify for Cash Transfers and application of other Safety Nets;
- Identification of primary markets serving such vulnerable communities and the application of Strategic Reserves (especially Food and Medicines) to these markets etc. These could include the establishment of Government controlled Shops or release of grains and other items by appropriate means to sellers in these areas (with due attention paid to price controls and the possibility of panic buying and hoarding);

7. **Protect and care for children living on the Streets, without parental care, or who have been separated from or lost Parents/Carers due to the disease.** Government's response should include alternative care provisions for Street Children and those who have been separated and/or lost their Parents/Carers as a result of the virus, as well as a mechanism to monitor **situations of child-headed families**. Kinship, foster care, Family-like Care or temporary shelter care should be preferred options to institutional care. There should also be support for communication between separated children and their Parents/Caregivers. To achieve this, the support of local and international Volunteer Organizations including key Non-State Actors might have to be solicited e.g. the Red Cross, Organized Religious Groups, Community Based Organizations, Artisan Guilds and Informal Sector Associations (especially those with existing institutional and physical infrastructure) etc.

8. **Provide mental health and psychosocial support to assist Children and Parents/Caregivers.** This may include the provision of free Hotlines, Helpdesks, Online Programmes and Counselling options or Community Outreach programmes, when possible.

9. **Ensure access to Online/Tele education for all** by using Child-friendly distant education methods such as TV, Radio or Online Learning. Schools should continue to provide Life Skills education to reduce the risk of stigmatisation and exclusion of Groups affected by the virus, as well as to help Children recognize risks and mitigate them as a part of the Curriculum delivered online.

10. **Train Health, Education, Social workers and Child Services staff on COVID-19 related Child Protection risks**, including on the prevention of Child Labour, Sexual Exploitation and Abuse and how to safely report concerns; consider Social Service workers, whether paid or unpaid, professional or volunteer, as essential and provide them with Personal Protective Equipment so that Care and Protection services for Children can be supported in communities.