**COVID-19:
Leadership, Learning
and Children's
Wellbeing**
*Government Briefing note:
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The following content was drafted to inform two OECD April 2020 Briefing notes, *Combatting COVID-19's effect on Children* and *COVID-19: Inclusive Growth and Recovery* and discussions with various Government officials.

The content is based on a forthcoming *Brief Scan*[1] drawing from: the grey and academic literature on learning from past epidemics (particularly from Ebola, SARS, MERS, cholera), from newly published guidance and reports, and informed by emerging concerns, with themes subsequently tested with child and humanitarian experts around the world who have led responses to such public health emergencies.

1. What can we learn about **impact on children's lives** from previous epidemics?

Previous epidemics indicate that existing child wellbeing concerns are exacerbated and new ones emerge. These result specifically from the health impacts of the epidemic as well as from the prevention and control measures with existing and new inequalities exacerbated. The impacts include, in particular:

- The sudden or ongoing impact of poverty and low income affects access to basic services, water and sanitation, nutritious food, adequate housing, basic income, and risks children's survival and development.
- Emergency measures to restrict movement impact on everyday childhood experiences: on children's friendships, their access to play and education, and to their birth families for those in alternative care, as well as on their autonomy.
- These measures also create *new* vulnerabilities, as well as increasing the *number* of vulnerable children, especially those who were not seen as *at risk* in the pre-epidemic period - leading to online exploitation, sexual exploitation, domestic abuse, neglect and challenges to children's mental health.
- Children's vulnerabilities are compounded by the impact on parenting, due to isolation and a lack of external support.
- There is no single 'group' of children or single childhood experience: their age, gender, race, disability, and asylum, refugee and migrant status all contribute to complex experiences. Policy responses need to consider these variables. The distinctiveness of children – indeed, the distinctiveness of *each* child – makes it imperative to identify a response that is distinctive for children.
- A lack of equity in how support and services are delivered can result in hardship and/or a lack of access to services.
- Children can be physically and socially *invisible*. Older children - young people up to the age of 18 - are often overlooked in humanitarian programming. Ensuring young people are included and their agency recognised helps them support the emergency measures.

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[1] A scan, which has drawn from: the grey and academic literature on learning from past epidemics (particularly from Ebola, SARS, MERS, cholera); from newly published guidance and reports, and informed by emerging concerns, with themes subsequently tested with child and humanitarian experts, offers the basis for this note. Source: Elsley, S and Davidson, J (May, 2020). *Inspiring Children's Futures Learning Report One: Protecting Children's Wellbeing in Response to COVID-19: Learning from Past Epidemics?* University of Strathclyde, UK. Available: www.InspiringChildrensFutures.org/COVID

2. *What can we learn about from previous epidemics about the* **leadership, policies and provision of public services for children and families**?

> *"An epidemic is a health check on the whole system."*

Observations from previous epidemics offer prompts to consider what policy and practice responses might best enable children's wellbeing, in the face of the many competing government objectives.

GOVERNMENT LEADERS AND POLICYMAKERS

Good policy and delivery in an epidemic requires responsiveness of political and professional leadership, with a balance between following standard procedures and policy, making difficult judgements about the priorities for the immediate term and those for the longer term, and having a flexible 'can do' approach. Inflexible adherence to pre-epidemic ways of working means that children lose out on the support they need.

> *"We started with a lack of leadership, with all different agencies weighing in on what we should do. It was like 'freestyle wrestling'… but we were able to* **readjust from these individual strategies to …ones with a common purpose**. *That adjustment was essential to [success of] the response."*

Effective responses will actively facilitate trust, relationships and connections:

- Information flow needs to be transparent, and both top down *and* bottom up, driven by a common sense of purpose. Prioritise engaging with communities and civil society in timely, meaningful and sustained ways to inform planning and provision. Value relationships with NGOs and community leaders in order to access community knowledge, make better decisions, build trust and lessen discrimination.

> *"The lack of transparency from government* **then** *[during the epidemic] about what was happening, and what they knew and didn't know, still affects their interventions even now, even though we managed to contain Ebola. And as a result it's making it harder for us* **now** *to contain COVID-19."*

- The power of communities and the localised nature of response: Support community responses and actions with funding and infrastructure so that local organisations and groups can deliver and inform local and national government decisions.

> *"**Don't create new structures**. We ignored existing structures, and created new ones, which just added unnecessary pressures… **What's needed is shared leadership** [across national, local and community levels]."*

- Politicization of the epidemic undermines trust.

- Directly engage with children and their families, and use their views and experiences to shape policy responses.

- Ensure that support to poorer families and communities, and the most vulnerable within them, is at the heart of responses. Deliver funding to organisations and services, and cash transfers to families, in timely, transparent and effective ways so financial support arrives when it is needed.

- Ensure communications and information are shared across sectors and with communities and families in accessible formats. This should include the provision of information to children.

Effective responses will be strategic, planned and informed:

- Sustain and increase budgets for children and the services that support them in order to ensure the wellbeing of children and their families.

- Anticipate the phases of the epidemic response, recognising that these might not be distinct, and that relaxation of measures might be followed by intermittent tightening. Take into account the long-term as well as the short-term impact of measures in planning, resourcing and implementation, and plan to mitigate any negative factors.

> *"No more cases does not mean the end of the epidemic.* **Prepare now for the long term, including recovery and development***."*

- Anticipate the surges in demand across all services expected after lifting emergency measures.

- Build the case for political and resources commitment over the long term to advance the wellbeing of children, in the face of significant setbacks during the epidemic, given the centrality of children to the future strength of every society and their long term contribution.

- Protect the policy and practice advances that have been gained in supporting children's wellbeing, ensuring that emergency measures are proportionate. There should be an assessment, and corrective action where needed, of the impact on children's human rights in all phases of the epidemic.

- Keep track of the learning, and integrate the responses that worked, into ongoing systems.

> *"***Document your learning*** now --including especially your failures—for the next pandemic response. We didn't do that, and we didn't 'institutionalise' what was successful, so now with COVID-19, despite all we did successfully to stop Ebola, we're starting from scratch again."*

PUBLIC SERVICES & PROVISION FOR CHILDREN:

Inter-agency, inter-sectoral strategy needs to be promoted and supported, with health care understood as forming only one part of the wider system. **Coordinate economic, social and health sectors' responses**, recognising that these are complex and interdependent, to ensure that children's diverse needs can be met.

> *"When we finally turned to children and the vulnerability created [by the epidemic], we found* **we were really far behind***"*

Effective responses will respect the importance of children's relationships:

> *"***There is no 'one-size-fits-all' response***. Know your groups with the greatest vulnerabilities, consider geographies, disabilities, people, and tailor your responses."*

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- Choose responses and approaches that maintain carers' and professionals' relationships with children, taking account of, and mitigating the impact of, professionals' absences, working from home, and loss of posts and redeployment.

- The role of, and children's access to, helplines are especially important to access independent support.

Effective responses will recognise the increased complexity of the situation and ensure public services work as a whole, in a connected and interdependent way, to meet the needs of children:

- Ensure decisions to close schools, and to keep them closed, are informed by consideration of the longer-term consequence for children of not being at school. Ensure schools maintain regular contact with their children out of school in the interim, work with the other public services if they have concerns. Proactively work with the diversity of children's learning experiences on their return.

- Children's access to other health services, such as mental health and antenatal provision, might need to be temporarily suspended or restricted. Flexible provision is important to enable the assessment of need, and to respond where most urgent. Plan how to catch up with this accumulating need after the epidemic, paying special attention to bereavement support for children.

- Revised children's social care and protection services will be more effective where approaches to assessing and responding to children and families' acute and ongoing needs are undertaken in a systematic way. Prevention measures remain important.

- Justice systems affect children in many diverse ways –as victims, as witnesses, when accused, as an interested party or because intervention is required for their care and protection. Reforms should be for the shortest time possible, and restored swiftly. Where emergency legislation reforms deprioritise children's rights, for example their right to complain and their access to legal representation and support, this leaves children unheard and is most acute for those who experience profound and sustained injustice. Release young people from detention facilities who can be safely released, and pause entry to detention facilities.

- Suspending birth registration services introduces new and serious vulnerability factors for children.

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