



African Journal of Social Work
 Afri. j. soc. work
 © National Association of Social Workers-Zimbabwe/Author(s)
 ISSN Print 1563-3934
 ISSN Online 2409-5605

Licensed under a Creative Commons Attribution-Non-commercial 4.0 International License

Indexed & Accredited with: African Journals Online (AJOL) | University of Zimbabwe Accredited Journals (UZAJ) | SCOPUS (Elsevier's abstract and citation database) | Directory of Open Access Journals (DOAJ) | Society of African Journal Editors (SAJE) | Asian Digital Library (ADL) | African Social Work Network (ASWNet) | Department of Higher Education and Training (DHET) - South Africa | SJR | CNKI - China | Journal Publishing Practices and Standards (JPPS)

Challenges for child welfare and development during the COVID-19 pandemic in Zimbabwe

CHINEKA, Tanatswa Silvanus and KUREVAKWESU, Wilberforce

ABSTRACT

The COVID-19 pandemic has ushered in multiple shocks on the global terrain with disastrous consequences and children have not been spared. Restrictions associated with the mitigation of the pandemic have collapsed critical services associated with child development and gains that had been made in strengthening these services have been shamed. The development of children has been threatened as the pandemic and associated mitigation measures have led to, inter alia, the closure of schools, bereavement and reduction in family income. These have exposed children to several threats despite children not being the face of the pandemic. This conceptual article, as such, examines the impact of COVID-19 on child welfare and development in Zimbabwe against the issues associated with COVID-19 and its mitigation measures. In turn, the authors proffer policy and programmatic alternatives that can be useful in creating a conducive environment for continued child development during the COVID-19 pandemic and other future disruptions.

KEY TERMS: child development, child well-being, COVID-19, pandemic, Zimbabwe

KEY DATES

Received: August 2020

Revised: October 2020

Accepted: November 2020

Published: August 2021

Funding: None

Conflict of Interest: None

Permission: None

Ethics approval: Not applicable

Author/s details

Tanatswa Silvanus Chineka, Teaching Assistant, Department of Social Work, University of Zimbabwe. tasilvac@gmail.com

Wilberforce Kurevakwesu, Social Work Teaching Assistant, Department of Social Sciences, Women's University in Africa, Bulawayo Campus

Current and previous volumes are available at:

<https://africasocialwork.net/current-and-past-issues/>



How to reference using ASWNet style:

Chineka, T. S. and Kurevakwesu, W. (2021). Challenges for child welfare and development during the COVID-19 pandemic in Zimbabwe. *African Journal of Social Work*, 11(4), 209-215.

INTRODUCTION

The COVID-19 pandemic has brought about chaotic disruptions across the globe, upsetting the lives of many and plunging livelihoods into a precarious balance. Evidence from previous infectious disease outbreaks indicates that existing child protection mechanisms are threatened, risks are exacerbated and new ones emerge as a result of the epidemic together with the socioeconomic repercussions of preventive and control measures. COVID-19 started out as a public health emergency but quickly escalated into an ignominious debacle for global development and for the developmental prospects of children. Even though children are not the face of this pandemic, they risk being some of the biggest victims. While children have been largely spared from the direct effects of COVID-19, the extended impacts of the crisis are beginning to have profound effects on their development and well-being. This has turned into a universal crisis and for some children, the impact will be lifelong. To compound matters, the deleterious effects of this pandemic are disproportionately more damaging for children in developing countries, particularly those in the poorest neighbourhoods and those in already vulnerable circumstances. Zimbabwe has, challenges notwithstanding, realised significant gains in promoting child well-being and development through, inter alia, the establishment of policy and programmatic interventions that seek to lessen the vulnerability of children. Such gains have been threatened by the COVID-19 pandemic. Measures to contain and prevent the spread of the viral scourge in Zimbabwe have been associated with stringent restrictions on physical movement resulting in social and economic contractions. The widespread closure of schools, job and income losses and heightened economic insecurities have ensued. The provision of effective and comprehensive policy and programmatic support towards the development and welfare of children has been severely affected. As such, rates of violence at home, child labour, sexual exploitation, teenage pregnancies and child marriages will likely increase. Further, spiralling global death tolls due to COVID-19 will plunge large numbers of children into orphan hood and associated vulnerabilities. The authors therefore seek to examine these challenges, exploring alternatives that ensure that the future of children is not lost to this pandemic. A brief background of the Zimbabwean experience with the COVID-19 pandemic is first given.

THE COVID-19 EXPERIENCE IN ZIMBABWE

In December 2019, various pneumonia cases were chronicled in Wuhan, China, with subsequent lung analyses documenting a new coronavirus dubbed 'Severe Acute Respiratory Syndrome Coronavirus 2' (SARS-CoV-2) as responsible for the pneumonia cases. In February 2020, the World Health Organisation (WHO) termed the new pneumonia syndrome, Corona Virus Disease 2019 (COVID-19) and in March 2020, after nearly 114 countries were affected (over 100 000 cases reported with more than 4000 deaths) the infection was given pandemic status (World Health Organisation, 2020). With countries like Italy, the United States of America, the United Kingdom and Australia being amongst the hardest hit, the pandemic permeated into the ingresses of Zimbabwe. The first case of COVID-19 in Zimbabwe was recorded on the 21st of March 2020, with the first death being recorded on the 23rd March 2020. By the 8th of August 2020, reported cases of COVID-19 had risen to more than 3 500 with more than 100 deaths (Ministry of Health and Child Care, 2020). The Zimbabwean government had formerly declared a state of national emergency involving travel restrictions, closure of schools and banning of large gatherings (Government of Zimbabwe, 2020). Various additional measures were later promulgated and these related to the closure of all borders to non-essential travel, the closure of bars, sporting activities and all public gatherings (Government of Zimbabwe, 2020). A 21 day nationwide lockdown was instituted on 30th March 2020 having a coterie of stringent measures, including the increased presence of security personnel within and across cities, towns and communities (Ipsos, 2020). Lockdowns therefore emerge the key response measure towards the mitigation of COVID-19 in Zimbabwe. It is important to note that all subsequent relaxations and re-enactments have seen schools remaining closed and the informal sector shut out of mainline economic participation. Such a policy trajectory undoubtedly has several damaging implications for children's well-being and development as shall be discussed in subsequent sections.

CRITICAL ISSUES ON COVID-19 AND CHILD DEVELOPMENT

Inquiries on the effects of prior related adversities demonstrate that they harbour both direct and enduring adverse consequences for children. In the case of COVID-19, Yoshikawa, Wuermli, Britto, Dreyer, Leckman, Lye, Ponguta, Richter and Stein (2020) predict an increase in maternal and child mortality in low and middle-income countries as health services for non-COVID-19 related needs become scarce. Further, the United Nations (2020) highlights that environmental adversities associated with the COVID-19 pandemic have various unpropitious

implications for children: increased childhood poverty, threats to child survival and health, malnutrition, risks for safety, child labour and a learning crisis.

Social environments and child well-being

Stressful environments have long been associated with physical and mental health problems. The trepidations created by COVID-19 have brought about great uncertainty within families and communities, which constitute the immediate social environment for children. The loss of livelihoods, restrictions on movement and closure of schools disturb children's lives. This exerts significant stress on parents and caregivers, and by extension, children in their care. Such conditions of acute stress negatively bear on children's emotional and physical wellbeing. Rather, lack of social support, including parental warmth and other factors that influence emotional states adversely affect child health. Given the widespread disruptions on people's livelihoods, job losses, constrained freedom of movement and the adverse economic conditions that have become prevalent in Zimbabwe, the ability of parents and caregivers to provide adequate care and support for their children is severely undermined. Such unfavourable social environments are detrimental to children's well-being and by extension, their development.

Learning and education

Countrywide school closures have been imposed in 188 countries around the world, affecting learning for more than 1,5 billion children and youth (UNFPA, 2020). The potential losses that may accrue in learning for today's young generation, and for the development of their human capital are hard to fathom. More than two-thirds of countries have introduced a national distance learning platform, but among low-income countries the share is only 30 percent (UNFPA, 2020). Prior to the COVID-19 crisis, almost one third of the world's young people were already digitally excluded. The introduction of online learning in Zimbabwe places a significant economic burden on already resource strapped parents and caregivers. Given that the majority of the population sources their livelihoods out of the informal sector, which remains shut out, the capacity of parents and caregivers to meet the costs associated with e-learning is heavily affected. COVID-19 reinforces inherent inequalities amongst children in Zimbabwe as those whose opportunities for e-learning are disproportionately affected will be more likely to drop out of school than others. Children in remote areas are likely to face additional challenges with e-learning given limited internet connectivity. This indubitably means that these children with no access to online learning will have to wait until COVID-19 is gone, and what if the pandemic goes for more than three years? Erstwhile research has established that children who lose a parent have diminished chances of returning to school, and the longer the time a child takes out of school, the more difficult it will be for them to go back to school (UNFPA, 2020). A gendered dimension in access to e-learning exists as girls have less access to digital technology than boys (United Nations, 2020). Such grim prospects of participating in learning, a critical development institution for children, pits the well-being and development of children disproportionately affected at stake. The ability of these children to make human capital investments for the future is affected (UNFPA, 2020). Such possibilities become greater the longer schools stay closed and the deeper the economic contraction wrought by the pandemic.

Health and child survival

COVID-19 has also brought about threats to child survival and health. The economic hardships experienced by families as a result of the global economic downturn - which is a consequence of the COVID-19 pandemic - could result in hundreds of thousands of additional child deaths in 2020, reversing the last 2 to 3 years of progress in reducing infant mortality within a single year (UN, 2020). And this alarming figure does not even take into account services disrupted due to the crisis, but only reflects the current relationship between economies and mortality, so is likely an underestimate of the impact. Rising malnutrition is expected as more than 300 million children across 143 countries who normally rely on school meals for a reliable source of daily nutrition must now look to other sources (World Food Programme, WFP, 2020). That challenge is made greater by the economic shock facing households, which will negatively affect the diets of children, pregnant women and breastfeeding mothers. An estimated 5,3 million children under the age of 5 died globally in 2018, largely of preventable or treatable causes (HRW, 2020). Roughly half of those deaths occurred in sub-Saharan Africa. Due to COVID-19, access to health care for children has become even more difficult. The COVID-19 pandemic is straining health systems and leading to the reallocation of personnel and resources, shortages of medical supplies and disruptions to some routine healthcare. The 2014 to 2015 Ebola outbreak in West Africa overwhelmed healthcare systems in Guinea, Sierra Leone and Liberia and reduced access to basic health care, including HIV testing and treatment, childhood vaccinations and maternity care (HRW, 2020). Reduced access to treatment during the outbreak led to dramatic increases in deaths from malaria, HIV/AIDS, and tuberculosis, including among children. The COVID-19

pandemic could have similar effects.

Child poverty and food insecurity

The UN (2020) estimates that by the end of 2020, almost 42 to 66 million children could fall into extreme poverty as a result of the crisis and this will add to the estimated 386 million children already in extreme poverty as recorded at the end of 2019. Additionally, hurriedly implemented lockdown measures risk disrupting food supply chains and local food markets (UN, 2020; WFP, 2020). If these effects are not quickly resolved, they pose potentially grave consequences for food security. Given this, the risks to child mental health and well-being are also considerable. Should schools remain closed and cause girls to drop out, we should also anticipate an increase in teenage pregnancy in the years ahead and this takes away all the gains that had been made towards child development. A recent meta-analysis of the prevalence and determinants of adolescent pregnancy in Africa found that adolescent girls out of school are more than two times more likely to start childbearing than those who are in school (Kassa et al., 2018).

Child safety

There are also risks for child safety during the COVID-19 era. Lockdowns and the lack of proper shelter in several areas of Zimbabwe present a heightened risk of children witnessing or suffering violence and abuse (UNFPA, 2020), something that has been acknowledged by Childline Zimbabwe and Musasa Project. For most children, home represents a source of security and safety, but for a minority, the opposite is tragically the case. Violence by caregivers is the most common form of violence experienced by children (UNICEF, 2017; UNFPA, 2020). Children are also often eyewitnesses to domestic violence against women, the rates of which are thought to have increased in many countries (UN, 2020; HRW, 2020; UNFPA, 2020). Such acts of violence are more likely to occur while families are confined at home and experiencing intense stress and anxiety. Lockdowns tragically also present an opportunity for child abusers to harm children (HRW, 2020). Children are rarely in a position to report such egregious acts. Yet, at a time of increased need, children no longer have the same access to teachers to report incidents at home, while social work and related legal and protective services for children are being suspended or scaled back. To make matters worse, some children's reliance on online platforms for distance learning has also increased their risk of exposure to inappropriate content and online predators (HRW, 2020). Growing digitalization magnifies children's vulnerability to harm.

Death and absence of parents or caregivers due to COVID-19

As the death toll continues to rise, increasing numbers of children will be left without one or both parents or other caregivers. During the 2014-2015 Ebola epidemic in West Africa, UNICEF (2015) reported that Guinea, Liberia and Sierra Leone collectively recorded 11 310 deaths, resulting in over 22 000 children losing one or both parents to the Ebola epidemic. Although fatality rates from COVID-19 are highest for the elderly, the scale of the pandemic will certainly orphan a large number of children. Children may also be left without care if their parents are hospitalized due to COVID-19 (Human Rights Watch, HRW, 2020). Orphaned children are particularly vulnerable to trafficking and other forms of exploitation including sexual exploitation, forced begging, street vending and other forms of child labour. During the Ebola crisis in West Africa, many orphaned children were shunned due to stigma associated with the disease, or fears that the child might be infected (HRW, 2020). Older children often dropped out of school to try to support younger siblings. Previous public health crises resulting in large numbers of orphans, such as the global HIV epidemic which resulted in an expansion of orphanages and other residential institutions, often funded by religious groups and private individuals (HRW, 2020). Given the rise in COVID-19 related deaths, many children will be orphaned and they might be neglected to orphanages. Nevertheless, studies have documented a range of harms to children in institutional care, including deficits in physical growth, cognitive function, neurodevelopment, and social-psychological health (Kurevakwesu and Chizasa, 2020). The UN Committee on the Rights of the Child has also found residential institutions to be linked to lower educational attainment, dependency on social welfare and higher risks of homelessness, imprisonment, unwanted pregnancy, early parenthood, substance misuse, self-harm and suicide.

INTERVENTIONS FOR CONTINUED CHILD DEVELOPMENT

According to the Centre for the Developing Child (2020), some of the interventions towards helping children in the COVID-19 era relate to crisis hotlines, food banks and relief funds. It is however important that any interventions towards addressing the challenges of child development be alive to the contexts in which children

are and the unbalanced distribution of the effects of COVID-19 on families in different parts of the Zimbabwe and the rest of Africa. Importantly, the area of child development in Zimbabwe and the rest of Africa has largely been in the hands of Non-Governmental Organisations (NGOs) and some government departments (Kurevakwesu and Mukushi, 2018), for instance, the Department of Social Development, formerly known as the Department of Social Welfare. Given this, it is important to provide interventions that speak to these organisations and departments of government as was done below with the first identified intervention being awareness raising.

Awareness raising

Awareness raising activities on child protection-related issues have to continue and they should be updated to include information on prevention of COVID-19, particularly on prevention measures and how to access treatment. Given the low access to internet in most communities around Zimbabwe, it is recommended to continue using community radios, megaphones and community-based child protection teams. In South Africa, the Department of Social Development and the Department of Basic Education have collaborated with UNICEF to make infographics on COVID-19 for children and parents in all languages. These infographics have been produced in very large numbers and UNICEF has helped with their distribution throughout South Africa even in the remotest of areas. The infographics carry COVID-19 messages and information on how children can access help in the event of child abuse. The same can be done in Zimbabwe and this will go a long way in educating children on COVID-19 and how they can help with prevention. Moreover, it will empower children with enough information on where to get help in the event that their rights are infringed. There will also be need to ensure that all workforce and community networks are updated on COVID-19 related child protection risks, including the prevention of sexual exploitation and abuse and how to safely report concerns. There will also be need to adapt awareness-raising modalities according to COVID-19 precautions and Ministry of Health and Child Care (MoHCC) guidelines, potentially including the provision of infrared thermometers and hand washing stations with soap and water, avoiding mass sensitisation events by prioritising smaller gatherings where social distancing guidelines can be respected and redesigning trainings to be delivered in multiple sessions with smaller groups.

Case management and psycho-social support (PSS)

The identification and referral of all children at risk of or affected by abuse, violence, exploitation and neglect to enable access to specialized child protection services remains critical. The number of child protection cases identified and referred are expected to increase due to heightened child protection risks related to COVID-19. Individual PSS can be integrated with case management support. If case management in person is not feasible or advisable in the current circumstances, alternative modalities may be explored to ensure continued support, such as follow up by phone or ensuring that case workers remain outside the home and separated by a safe distance during home visits if conditions allow. If access to beneficiaries and capacities of case management actors are further limited, high risk cases only can be prioritised for case management follow ups. There is also need to provide PSS and Psychological First Aid (PFA) to children, parents and caregivers to alleviate the increase of stress and anxiety resulting from COVID-19. There is also need, in each locality, to identify and train families on the provision of family-based interim or alternative care, as well as supporting children to cope with grief and loss, in the case of bereaved children for children whose caregivers fall ill or who are quarantined or hospitalised. In line with this, there is need to prevent the separation of children from their families and ensuring appropriate alternative interim care options during quarantine and hospitalisation, supporting family tracing and reunification for children who become separated or unaccompanied, including those who lose parental or caregiver support because of COVID-19.

Monitoring of child rights violations

Monitoring of grave child rights violations has to be prioritised. The Department of Social Development has to update existing mechanisms in line with COVID-19 risk mitigation measures. This is so because some COVID-19 prevention measures and consequent actions can either directly or indirectly have adverse impacts on the care, wellbeing and protection of affected children and their caregivers for example children missing out on education, increased levels of stress and anxiety, disruption of public services and higher reliance on negative coping mechanisms aggravated by reduced economic opportunities. Child protection risks including the possible separation of children from their primary caregiver, physical violence and neglect need to be detected and dealt with accordingly.

Improvement of cash transfer programmes

Cash transfers are being used to help food poor families to navigate their way out of hunger caused by the lockdown measures that have affected economic activities. These programmes have been rolled out through the Department of Social Development. The money that is provided has to help children with their nutritional needs despite their parents being unable to fend for them. Cash transfers have proven to be effective in the developed world and even in South Africa they have helped a lot of families. In Zimbabwe however, the programmes have been less effective considering the amount of money that is given to a food poor family (American Institutes for Research, 2015). As of August 2020, the government of Zimbabwe said that it will be giving out ZW\$300 (an equivalent of USD\$3) to such families, yet a 10kg bag of mealie-meal is going for ZW\$600. This programme, given its success in other countries, needs to be titivated so that the money given to families in need is in grips with the reality on the ground.

Home schooling

Parents and caregivers need to continue schooling their children. The government together with NGOs need to come up with measures to help parents and caregivers continue schooling children at home in line with the radio lessons being broadcasted by the Zimbabwe Broadcasting Corporation (ZBC). One way of doing this is by supplying the needed learning materials in homes and if possible, supply online learning materials to deprived children and those in the rural areas. If not possible, home schooling needs to be supported and for parents or caregivers who cannot assist children, relatives can help. However, if someone from outside the home setting is to help, precautions need to be taken and COVID-19 guidelines have to be observed.

CONCLUSION

The paper examines the implications of the COVID-19 pandemic on child welfare and development in Zimbabwe. COVID-19 has affected all aspects of human existence, devastating the livelihoods of many across the globe. Children, who are amongst the most vulnerable members of society, have had their fair share of challenges. Though not primarily the face of the pandemic, children are affected by the socio-economic ramifications of COVID-19 and other associated measures, casting their future into a precarious balance. The discussion has highlighted critical issues affecting the welfare and development of children. Opportunities for strengthening the programmatic and policy measures to safeguard children's well-being and development have been identified. It is stressed that the efforts of both state and non-state actors in child protection have to remain particularly vigilant in the wake of the COVID-19 pandemic's threateningly inauspicious implications for child welfare and development in Zimbabwe because these children carry Zimbabwe's future. If their development is constrained, so is the future of Zimbabwe.

REFERENCES

- Human Rights Watch (HRW) (2020). COVID-19 and *Children's Rights*. Accessed on 21 July 2020 from <https://www.hrw.org/news/2020/04/09/covid-19-and-childrens-rights-0>
- Ipsos (2020). *Responding to COVID-19: Highlights of a Survey in Zimbabwe*. Available at https://www.ipsos.com/sites/default/files/ct/publication/documents/2020-05/zimbabwe_report_0.pdf (accessed on 07 June 2020)
- Kassa, G. M., Arowojolu, A. O., Odukogbe, A. A., & Yalew, A. W. (2018). Prevalence and determinants of adolescent pregnancy in Africa: a systematic review and Meta-analysis. *Reproductive health*, 15(1), 195
- Kurevakwesu, W. and Chizasa, S. (2020). Ubuntu and Child Welfare Policy in Zimbabwe: A Critical Analysis of the National Orphan Care Policy's Six-Tier System. *African Journal of Social Work*. 10(1), 89-94
- Kurevakwesu, W. and Mukushi, A. (2018). Charitable Work in a Developing Region: Why Humanitarian Work is Mostly in the Hands of Foreign Organizations in Africa. *African Journal of Social Work*. Volume 8, Number 1. pp. 56-62
- Ministry of Health and Child Care (MoHCC) (2020). *Ministry of Health and Child Care COVID-19 Update*. Causeway, Harare: MoHCC
- United Nations (UN) (2020). *Policy Brief: The Impact of COVID-19 on children*. New York: United Nations
- United Nations Children's Fund (UNICEF) (2015). *A Familiar Face: Violence in the lives of children and adolescents*. New York: UNICEF
- United Nations Children's Fund (UNICEF) (2017). *More than 16,000 children lost parents or caregivers to Ebola - many are taken in by the communities*. UNICEF News note.
- United Nations Population Fund (UNFPA) (2020). *Impact of the COVID-19 Pandemic on Family Planning and Ending Gender based Violence, Female Genital Mutilation and Child Marriage*. Interim Technical Note. New York: UNFPA
- World Food Programme (WFP) (2020). *New digital map shows terrible impact of COVID-19 on school meals around the world*. Geneva: WFP
- World Health Organisation Africa Region. (2020). COVI-19 in Africa. Brazzaville, World Health Organisation.
- Government of Zimbabwe (2020). *Statutory Instrument 83 of 2020, Public Health (Covid-19 Prevention, Containment and Treatment)*. Harare: Government Printer
- Yoshikawa, H., Wuermli, A. J., Britto, P. R., Dreyer, B., Leckman, J. F., Lye, S. J., Ponguta, L. A., Richter, L. M. and Stein, A. (2020). Effects of the Global Coronavirus Disease-2019 Pandemic on Early Childhood Development: Short- and Long-Term Risks and Mitigating Program and Policy Actions. *The Journal of Paediatrics*. Volume 223, pp. 188-193