



JOINING FORCES ALLIANCE FOR CHILDREN IN KENYA A BRIEF ON THE EFFECTS OF COVID-19 ON CHILDREN IN KENYA

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Introduction

The Joining Forces Alliance for Children in Kenya (JFA-Kenya), whose members are ChildFund Kenya, Plan International Kenya, Save the Children Kenya, SOS Children's Villages Kenya, Terre des Hommes and World Vision Kenya have been engaging with Children in the ongoing COVID-19 prevention and response initiatives in 143 Sub-Counties across 41 Counties in Kenya. Since March 2020 to date, JFA-Kenya has so far engaged with 6650 children (49.5% girls and 50.5% boys) largely through phone conversations and virtual platforms with consent from their parents and guardians. Regrettably, views from many children who live in households with no access to phones have not been documented. However the JFA-Kenya COVID-19 prevention and response initiatives have reached the most vulnerable children, including those living in households with no access to phones. This brief presents the effects of COVID-19 on children as analyzed from the documented views of children and from a review of secondary information. An estimated 46.09% (21.92 Million)¹ of the population in Kenya are children below the age of 18 years, among whom 49.548% are girls, 50.449% are boys and 0.002% are intersex. Additionally, 48% (11.23 Million)² of the multidimensional poor population in Kenya are children who are already experiencing the effects of COVID-19 in varied ways.

COVID-19 Prevention and Response Measures in Kenya

The Government of Kenya has put in place significant COVID-19 prevention and response measures. With specific focus on children matters, some of the guidelines that have been developed and in use include; COVID-19 guidelines for care of Children, Guidelines for handling cases where vulnerable children are involved, COVID-19 Community Health Response Minimum Standards, Guidelines on continued provision of Community Health Services in the Context of COVID-19 Pandemic and Child friendly messaging for protection of children and prevention of COVID-19. Additionally, the Basic Education COVID-19 Emergency Response plan and guidelines for Community Based Learning programmes have also been developed. The Government of Kenya also launched the 8-point Economic Stimulus programme with the objective of cushioning the public and businesses from the effects of COVID-19 and other economic challenges. What needs to be done moving forward is to assess the extent to which all these guidelines and programmes have been implemented.

Effects of COVID-19 on Children

(i) Access to Water, Sanitation and Hygiene services

The increased need to ensure that people wash their hands more regularly with soap has exposed the glaring gap of inadequate access to clean and safe water in Kenya. Whereas the Government of Kenya has commendably improved on water provision, and distribution of soap and sanitizers, many children in various urban informal settlements and rural parts of the Country have not been reached. Engagements with children reveal that many of them have not been reached directly with provision of water, sanitation

¹ Republic of Kenya (2019) Kenya Population and Housing Census Report

² Republic of Kenya (2020) Comprehensive Poverty Analysis Report

and hygiene services. Close to 40%³ of the population in Kenya do not have access to clean and safe water and close to 30% of the population in Kenya do not have access to improved sanitation, coupled with minimal access to reasonable standards of hygiene. Access to Sanitizers for cleaning hands is equally a challenge due to costs. Children living in households with no access to clean, safe, piped water continue to move for long distances in search of water thereby increasing their risk to infection of COVID-19 as they interact at the water points. Most schools in Kenya do not have access to adequate clean and safe water in addition to minimal quality sanitation and hygiene facilities and unless this situation is addressed before the schools are reopened, the risk of spread of COVID-19 within the schools will remain high. Further, access to clean and safe water, and quality sanitation and hygiene services has continued to expose children to the risk to water related diseases such as diarrhoea which contributes to 12.7%⁴ cases of infant admission to health facilities in Kenya.

(ii) Access to Quality Health Services

The key factors that expose children to the risks of COVID-19 infections include minimal consistent, regular household level outreaches on COVID-19 prevention sessions for children. Notably, the conditions of some of the quarantine facilities have been deplorable⁵ with some lacking sufficient bedding, water, food and cleaning supplies, such as soaps and detergents hence not being friendly for children, and may further expose children to the risk of COVID-19 infection. In addition, basic hygiene measures have not been alive to the diverse barriers faced by various categories of persons with disability⁶, for example on handwashing, the public wash points have been physical inaccessible to persons with disability. Access to essential child health services at the community level continues to be affected due to the inadequate health workforce. For instance, the proportion of Community Health Volunteers is still at 67.2%⁷ which implies that not all households are being reached with essential Maternal and Child health services. There are also emerging concerns that there are children who are not receiving the essential vaccine and immunization services. Children under one year who are fully immunized reduced by 40% in the month of April compared to March 2020⁸

(iii) Access to Food of Nutritious Value

Conversations with Children reveal that food remains a critical need for them. There are children who had been benefitting from school feeding programmes and with the closure of schools, they are facing food challenges at home. During the period preceding the emergence of COVID-19 in Kenya, Children from poor households largely depended on daily food as purchased by the use of the daily incomes by their parents and guardians, this has since been affected due to loss of income opportunities by some parents and guardians. It is estimated⁹ that approximately 1.3 million people are acutely food insecure and in need of humanitarian assistance, even though the number has reduced as compared to July 2019, when the Country had approximately 2.6 food insecure people. Notably, most of these people are children. According to a survey¹⁰ conducted in April 2020 on the effects of COVID-19 in Nairobi's informal settlements, 68% of respondents reported that they had skipped a meal or eaten less because they did not have enough money to buy food. This implies that children living in households of such respondents might have skipped a meal as well. Majority of the respondents, 76%, mentioned food as their priority

³ Republic of Kenya (February, 2020) Ministry of Water, Sanitation and Irrigation

⁴ Republic of Kenya (2020) Economic Survey, KNBS

⁵ Republic of Kenya (June 2020) COVID-19 Situation Report, Kenya National Commission on Human Rights

⁶ Republic of Kenya (March, 2020) Advisory to Combat COVID-19, National Gender and Equality Commission

⁷ Republic of Kenya (April, 2020) Ministry of Health

⁸ Republic of Kenya (May, 2020) Council of Governors

⁹ Republic of Kenya (July, 2020) Kenya Food Security Steering Group

¹⁰ Kenya COVID-19 Outbreak SITREP 036 22nd April 2020

need followed by cash 18%. In June 2020, in a Survey¹¹ that targeted households from all parts of the country, it was demonstrated that there was a good indicator of progress, since 78.1% of households reported to be food secure, albeit with 78.8% of the households reporting that was an increase in food prices. Though farmers may be currently having some food stocks in their homes, the challenge of accessing other non-farm foods is going to be a challenge and this may lead to un-balanced dieting, with a negative impact to health¹². Whereas the Government of Kenya and partners have been providing Cash Transfers and Food rations to most vulnerable households to cushion them from the food security related effects of COVID-19, some children are not aware of their families having received such support. This could either mean that the heads of households that receive the said support do not disclose to children the source of such support, or some of the most vulnerable households are yet to receive such support at all.

(iv) Access to Learning Opportunities

Engagements with children confirms that many of them are missing learning opportunities while at home despite the existence of the Government of Kenya's Basic Education COVID-19 Emergency Response Plan¹³ that aims to ensure continued learning and promotion of health, safety and wellbeing of learners. Over 18 million¹⁴ learners in pre-primary, primary and secondary schools in Kenya continue to remain at home, including children in the refugee camps in Kenya. Whereas the Government has been facilitating the production of radios, TVs and online teaching and learning materials, many children are missing learning opportunities. In a survey¹⁵ conducted in June 2020, it was established that 57.7% of households had learners undertaking self-learning at home (which did not include TVs, radio and other online mechanisms) while 17% of households were not using any method to continue with learning. Children who live in poor households have challenges accessing on-line learning, TV and Radio programmes and are therefore left behind. Access to the learning content by children living with disabilities¹⁶ ranging from those with visual and hearing impairment, to those with mental challenges has been a challenge as most of the mediums available are not accessible to this group of persons with disabilities, hence further excluding them. Additionally, despite the Basic Education COVID-19 emergency response plan having an objective to provide psychosocial support to learners, many learners have not been reached with the said psychosocial support as they continue to remain at home.

(v) Protection of Children from all forms of violence

Children are concerned that they are at risk of various forms of violence among which include sexual abuse, child marriage, Female Genital Mutilation, Physical violence, Child Labour among others. In a statement in April 2020 on the Justice Sector operations in Kenya in the wake of COVID-19 pandemic, it was noted that there was a significant spike in Sexual Offences¹⁷ in many parts of the country, which constituted 35.8% of the criminal matters reported. In some cases, the perpetrators of such offences were close relatives, guardians and/or persons living with the victims. In July 2020, the President of the Republic of Kenya acknowledged¹⁸ the increased cases of Gender-Based Violence, worsened mental health issues and escalated instances of teenage pregnancy; and issued a directive and order was issued to the National Crime Research Center to probe (i) the escalating cases of gender-based violence; (ii) the

¹¹ Republic of Kenya (June, 2020) Survey on Socio Economic Impact of COVID-19 on Households Report, KNBS

¹² Republic of Kenya (May, 2020) Ministry of Agriculture, Livestock, Fisheries and Cooperatives

¹³ Republic of Kenya (May, 2020) Ministry of Education

¹⁴ Republic of Kenya (May, 2020) Ministry of Education

¹⁵ Republic of Kenya (June, 2020) Survey on Socio Economic Impact of COVID-19 on Households Report, KNBS

¹⁶ Republic of Kenya (June 2020) COVID-19 Situation Report, Kenya National Commission on Human Rights

¹⁷ Republic of Kenya (April, 2020) Kenya's National Council on the Administration of Justice Statement on the Justice Sector Operations

¹⁸ Republic of Kenya (July 2020) The 9th State address on the coronavirus pandemic

worrying trend of cases where the girl child has been disempowered; and (iii) the violation of children's rights.

Child Sexual abuse, often by way of defilement, has resulted into worrying cases of Child Pregnancy in Kenya. Whereas the number of documented child pregnancies at the health facilities in Kenya has reduced, going by the 2020 data¹⁹ as compared to 2019, the numbers of cases are still very high. Between January to June 2020, there were 165,968 cases of pregnancies compared to 198,903 cases for the period January to June 2019, among the adolescents of ages 15-19 years. Among those of ages 10-14 years, the cases had reduced from 10,703 to 8,421, during the same period. Additionally, there have been reported cases of children rescued from Child marriage over the last three months. There are also concerns of increasing risk of children to Female Genital Mutilation (FGM) and that there could be cases of FGM being conducted silently within households as children continue to remain indoors due to the risk of contracting COVID-19. Notably, there is a commitment by the President of the Republic of Kenya to end FGM by 2022. Other forms of violence against children that have been reported include child labour, physical violence at home and within communities.

A key milestone in Kenya is the recent launch of the Violence Against Children (VAC) Survey Report, that provides credible data, and the related VAC National Prevention and Response Plan. Despite COVID-19 Emergency, the Government of Kenya is on the right trajectory towards eliminating various forms of violence against children in Kenya. Notably the VAC Prevention and Response plan is well aligned to the Global agreed strategies for ending violence against children, commonly referred to as INSPIRE²⁰.

While it is noted that there exists the Child Protection in Emergency Working Group, that is taking the lead on Child Protection related matters during emergency, a persistent challenge remains the fact that Child Protection Situation Reports are not readily available both at the local and National levels. Since March 2020, when the first COVID-19 cases was reported in Kenya, while it is commendable that the Ministry of Health has consistently issues a daily Situation Reports, on the contrary, the Child Protection in Emergency Working Group has never issued any Child Protection Situation Report. Responding to Child Protection needs during an emergency in Kenya is therefore being affected by lack of timely data.

(vi) Participation of Children in decision making

While it is in the best interest of children that they continue to remain at home and avoid interaction so as minimize the risk of infection to COVID-19, it is noted that children are not being reached and involved in decision making. There are a number of process related to COVID -19 prevention that have included the participation of the adults through innovative approaches among which include virtual participation, sending views through phone calls, SMSs, WhatsApp messages while children are left behind. For instance when the National COVID-19 Education Committee Response Committee, was seeking for views from the public on several issues, among which included the question on what needs to be done before schools reopen and what would need to be done after schools open, the said committee did not consider reaching out to children to seek their views. While aware that children are the consumers of basic education services, there is currently no structured process of seeking their views on matters

¹⁹ Republic of Kenya (June, 2020), Kenya Health Information System

²⁰ INSPIRE is an evidence-based resource that includes evidence based strategies to help countries and communities intensify their focus on the prevention programmes and services with the greatest potential to reduce violence against children, in addition to enabling countries achieve Sustainable Development Goals that focus on addressing violence against children.

concerning their education. Just like adults, children have a constitutionally protected right to participation and to be involved in decision-making, however this right is consistently being violated during the current pandemic.

Conclusion

Documentation of the effects of COVID-19 on children is still minimal in the country. Most of the surveys that are being done are focusing on adults and households, with very minimal focus on children matters. However, the minimal data available demonstrates that children are facing diverse challenges due to the effects of COVID-19. The promotion and protection of the rights of the child in Kenya during COVID-19 pandemic are critical focus areas that require more attention by the Government of Kenya and Partners. It is noted that, this month (August, 2020) the Republic of Kenya commemorates ten (10) years since the promulgation of its current Constitution and yet the Country is yet to enact a new law for Children, by way of repealing the Children's Act 2001, while the National Children Policy, 2010 has also not been revised in view of the ever changing child rights related landscape. This is therefore the moment to address the Child Rights related policy and legislative gaps in Kenya since the same **will address** the effects of COVID-19 on Children and all other children matters more comprehensively.

Recommendations

1. To ensure regular availability of credible information for timely decision making on children matters, the Child Protection in Emergency Working Group, should highly consider consistent regular data collection and generating weekly Situation Reports on Child Protection, just like the Ministry of health issues a daily Situation Report on COVID-19. This requires that specific COVID-19 Child Protection monitoring and reporting tool is developed for use in the villages and estates in monitoring and reporting on the Situation of Children, during the current pandemic.
2. To ensure improved coordination and monitoring of child focused COVID-19 prevention and response services; continued provision of essential child health services and child protection emergency response; and to effectively address the on-going effects of COVID-19 on Children, harmonization of several guidelines and standards of operation procedures on children matters during the on-going COVID-19 and beyond is urgent.
3. To address the emerging huge challenge of inadequate documentation of the effects of COVID-19 on children in Kenya, the National Council of Children Services (NCCS), in line with its mandate, as provided for under section 32 of the Children Act, 2001, should undertake a Comprehensive National Survey on the effects of COVID-19 on Children so as to generate data for use by all Ministries and partners in designing appropriate interventions that would cushion all children in Kenya from the effects of COVID-19 in the immediate term and beyond.
4. To guarantee meaningful participation and involvement of children in decision making, a review of the Child Participation guidelines should be highly prioritized and should take into account the emerging practice of virtual child participation; and include child friendly mechanisms for guaranteeing child participation and involvement in decision making during emergencies should be highly prioritized.
5. To address the policy and legislative gaps on Children matters, finalization of the Children Bill and a review of the Children Policy should highly be prioritized, so as to safeguard the gains made in the advancement of the rights of the child in Kenya and to guarantee sustainable promotion of the protection, participation, development, survival and the overall wellbeing of children in Kenya.

ANNEX 1

Examples of Children Voices

Below are examples of some of the children voices

"The children could play a role in ending COVID 19 by making sure the younger children stay indoors, teach others to wash hands with soap and water and making handwashing water available at home". 13-year-old primary school girl from Kakuma in Turkana West Sub County.

"I Advise the government to enforce laws to the affected counties and do mass testing to get real figures and facts of those affected by the disease so that they may be treated. The government had done census last year and have details of those living in low standards, the government should use the documents / data to support the families living in low standards. The government can't conquer the disease by itself they should work together with NGO and well-wishers" 17 year old secondary school boy from Kitui South Sub-County.

"Children are loitering around without parental guidance. The government to ensure children stay at home and those loitering to be arrested to avoid teenage pregnancy" 13 year old Primary school boy from Karachuonyo

"I would like the government to put stringent measures to children to avoid child pregnancy, police arrest, provide food to the needy families" 16 years old boy from Suba Sub County

"Close the school until next year when corona is expected to disappear." 14 years old, primary girl from Narok Sub-county

"Things have become very uncomfortable for me since the beginning of the pandemic and closure of schools, I am really missing classes. Sometimes I try to study at home, but during the day it is difficult to read and do the house chores. Online homeschooling is not possible due to lack of access to technology I pray the government finds a solution to this disease as soon as possible so that I can go back to school and concentrate on my studies." 17 years old Child

"COVID-19 pandemic has affected my life so much; my mother works at the dumpsite and she is not able to buy for me sanitary towels, her priority right now is to buy food and pay rent. I now accompany her to the dumpsite to collect old pieces of clothes, wash and use them as sanitary towels." 15 years old Child

"I wish for the government to provide necessary support to street families and vulnerable children so that they can stay free from Covid19. I wish for the government to stop teen pregnancies". 16 years old Child

"Closure of schools is good because schools are crowded and teachers live outside of school and they can bring in the virus and it will affect all the children in the school. But we are also affected in learning because we are just sitting at home." A Child from Turkana County

"Economically it has become bad for my mother to get casual job which I have been helping during weekend for us to earn an income"

"My education since I am a candidate. Reading on my own cannot satisfy me. I need teachers to guide me at this crucial moment of my education"

"My grandfather died but I was not allowed to attend in his burial because only 15 people are allowed, so I really felt bad and even I don't know if it's true he was buried".