

Qualitative study on childhood
under school closure

My New Normal

Executive summary:
Findings from Zambia



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Save the Children**

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Introduction

The 2020 Covid-19 pandemic has been an unprecedented event for it has put the globalized world of today on hold. It has taken the lives of thousands of people, shocked the world's economy with long lasting repercussions and has significantly altered people's daily life. Although children and youth have been less threatened by the virus itself, they have not been immune to its disruptive consequences. Considering the amount of time children usually spend at school, their temporal closure is not only interrupting their learning. Schools are also usually a safe place for human interaction, and by missing out, children are not developing fundamental social skills. In Zambia, all schools have been closed from March 18th, 2020, forcing over 4.4 million learners to stay home. Schools reopened on September 21st, 2020, after 6 months of closure, but at the time of the study many educational institutions remained partly closed. The pandemic came in a context where Zambia was already facing challenges related to educational attainment and retention of students and particularly girls.¹



This study complements the global research series² led by Save the Children through a qualitative and visual approach that fosters child and youth participation. Through this research, Save the Children Sponsorship team aimed to make children and youth's voices heard and learn

¹ <http://www.unicef.org/zambia/education>

² <https://resourcecentre.savethechildren.net/library/hidden-impact-covid-19-children-global-research-series>

about their experience of living under COVID-19.³ This study followed a small-scale qualitative approach relying on child-friendly and visual data collection methods (such as Photovoice, the use of an emoji feelings chart, empathy mapping and a social network mapping tool). In total, In Zambia the team consulted 26 adults (Save the Children staff, parents, teachers, health workers and local authorities), and 23 children and young people (12 girls and 11 boys) in St. Josephs, Bulaya communities where the sponsorship programme is implemented.

Findings

Overall, the main impact of the COVID-19 crisis on children were linked to education, mental and physical health and on the economic wellbeing on the households they live in.

Impact on children's education

The most predominantly noted impact of the COVID-19 pandemic and lockdown measures on children was educational. In Zambia, a number of programmes were put forth by the ministry to facilitate learning including TV shows. However, as the targeted district is mostly rural, many communities do not have electricity and could not benefit from these programmes. Learning camps were also organised where parents could collect materials to help children learning at home. A radio programme was also produced to sensitize children and parents on how protect themselves from the virus. Despite those efforts, consulted teachers have reported important losses in terms of children learning achievements, especially at ages when they usually gain key competencies such as learning how to write, read or count. Children almost did not learn anything during school closure due to a lack of learning materials, limited capacity of parents or older siblings to support them and the loss of a 'learning routine'. Despite some parents trying to teach children at home, they reported it as being rather ineffective. The research team identified some factors which could explain why some families were identified as 'positive deviants' in managing to keep their children learning during school closure: the presence of one or several older siblings who was still studying to support younger children; and the economic status of the family.

Since schools have reopened, they were operating in different shifts (morning/afternoon shift, or 2 days per week shifts) in order to limit the number of students per classroom and allow for social distancing. As such, students were still studying reduced hours. Teachers explained that the course curriculum was reduced by 50% to fit the new schedule. Teachers reported that they did not have enough desks to effectively observe social distancing and some schools had problems with provision of water, soap, sanitisers and face masks making it hard for students to attend school safely. Drop-out rates were also on the rise due to the loss of jobs and economic opportunities of parents. This is thus particularly the case for children living in the most deprived families, risking trapping them even more into a circle of poverty.



My child is not doing well in school. It has caused a lack of knowledge. He was passing with good grades before, but now he is scoring low. Some of the children around me don't even attend schools anymore.

Parent of a 8 years old boy studying in Nkana primary school in Zambia



³ The scope of the study was limited to school-aged children and youth (15-18 years old) living in Sponsorship impact areas in Nepal and Zambia. The two countries were selected based on their interest in taking part in this study and availability.

In Zambia, many teachers reported difficulties in bringing children back to school once they had reopened. In some communities, a programme called “come back to school” where community and government schoolteachers went into the communities to inform the parents that schools had opened and that they should send them back. One of the causes highlighted for girls not coming back to school was child marriage and teenage pregnancy, which were reportedly on the rise.

As a result of all those changes, many children from the different age groups consulted, when asked to represent the main changes that COVID-19 brought to their life, took a picture related to education. This was particularly the case for the older age group (13–18 years old as illustrated on the adjacent photo.)



The difficulty of studying with masks on since schools have reopened

Physical and mental health impacts

The second most important change caused by the COVID-19 and lockdown measures on children's lives is linked to physical and mental health.

In terms of physical health, health centre services were halted for a few weeks when the pandemic started due to the lack of supply in medicines, treatments and protective equipment and the engagement of health workers in quarantine and isolation centres. Since the centres restarted their services however, the patients flow remained low. As a result, many children were unable to access health treatment during lockdown or to receive the recommended vaccinations. A few key informants also noted the impact of the pandemic on the nutrition and dietary pattern of children. As transportation and markets were closed for a long time and most parents were unable to generate an income during lockdown, the ability to maintain the same number of meals per day and a balance diet for children was impacted.

Closure of schools, which can create protective environments for children and young people, and lack of access to health (including sexual and reproductive health) services and information, are expected to have caused a rise in adolescent pregnancies by up to 1 million globally in 2020. In Zambia, consulted teachers, local authorities and health workers reported an increase in teenage pregnancies. In Nkana, about 20 cases were reported during the lockdown period, which, according to some key informants, is almost double the usual figure. Bearing children before being physically, mentally, and emotionally ready has major negative health consequences on young girls. Complications linked to pregnancy and childbirth are the leading cause of death for girls between 15 and 19 years old in the world. Early childbearing also increases risks for the

During the lockdown is the length that they stayed at home without learning so many of them have remained behind on their learning. Some parents have already relocated to other places with the children. We are back to square one with the education of the children because the children had forgotten what they learned before. Some children have lost interest in going back to school.

Teacher in Kamchanga primary school in Zambia

infant: babies born to mothers under 20 years are more likely to have a lower birth weight, preterm delivery and severe neonatal conditions. Beyond the health effects, early pregnancies can also be a cause of child marriage and often prevent girls from completing education and reduce their access to economic opportunities later on in life. As such, those changes could have long lasting negative consequences.

While the consulted children and young people highlighted physical health consequences to a lesser extent, many of them expressed how the pandemic, lockdown and school closures impacted their mental health and well-being. Children and young people have been overwhelmingly affected by negative feelings as a result of the pandemic and the disruption to their lives, including socialising and school. They expressed how having to keep distance from friends and family created feelings of loneliness, sadness and boredom

Additionally, while this was not highlighted by young people themselves, key informants in both countries reported an increase in child abuse and violence within the households and communities.

Economic impacts

The last main change in children's lives reported by children and young people themselves relates to the economic impacts on the pandemic and lockdown and the increased poverty in the Sponsorship impact areas. This was mostly highlighted by the older age groups (13-18 years old) who seemed more sensitive to the hardship faced by their parents. In the areas covered by the programme, most parents are subsistence farmers who, in normal times, can barely produce enough to feed their family. However, with the COVID-19 pandemic, the authorities have put up a lot of restrictions, such as markets closure, which contributed to reduction in incomes in many households. Therefore, most parents were failing to sustain their families, causing a lot of hunger among children and young people. This hit the poorest and most marginalised households even more.

Positive impacts

Nonetheless, the research identified one positive effect of the COVID-19 pandemic on children and young people in the targeted areas. This effect relates to improved hygiene practices in the consulted communities and was highlighted by young people and adults. The picture shows how children and young people have adopted new practices such as washing hands following a thorough process and at key moments. This could have a positive impact on the spread of other diseases and contribute to improve young people's health.



Young women in Zambia washing hands using learned steps during lockdown.

I see most parents in the village forcing their children to get married because they can provide for them & I think most of these school going children will be married off soon, so the government should warn parents about such vices & sensitize them against the dangers of doing such things. I also think pregnant girls should not stop coming to school.

**Girl respondent in Zambia
(13 years old)**

Lastly, in Zambia, some young women also illustrated the fact that, due to the pandemic, schools had to improve their hygiene facilities through the construction of taps allowing young people to wash their hands before entering classrooms. This was reported as an improvement in children and young people, especially girls', lives as they will not have to walk and carry heavy buckets anymore.

Children's perception of those changes

Overall, children had rather negative feelings about those changes, being having to stay at home, not being able to socialise with friends and to go to school. They were also sensing the stress and fear regarding the economic situation and the impact of school closure on their education.

We noted however some positive feelings regarding the ability of children to study independently. Some children felt proud to be able to learn at home by themselves for instance. Children were also happy and excited to be able to go back to school when they reopened. In Zambia, young people put a great emphasis on the rise of child marriages and teenage pregnancies, seeing and hearing a lot of parents talking about marrying off their daughters, which led the consulted young people to think about prevention mechanisms such as encouraging the government to lead awareness raising sessions in the community or to increase access to family planning. Young people also highlighted the food shortages that happened during lockdown which led some of them to take action and start growing their own food during school closure.

Social network analysis

Part of this research also wanted to explore the effect of the COVID-19 pandemic on children and young people's social life. The absence of social relationships and behaviours can affect child development in various ways. Through a social mapping exercise, the consulted young people (13-18 years old) drew their social network before the pandemic and lockdown and during the crisis. The comparison between pre-COVID situation and during the school closure and lockdown shows how the ties between family members and friends/neighbours were strengthened, as opposed to the formal contacts and school social relations. According to the consulted young people, before the COVID -19 lockdown, they were not so close to their parents and siblings, but stronger bonds were built when the family had to stay at home for a few months. More time was also available for playing and supporting parents in their day-to-day activities, which created a feeling of closeness. However, other relatives and formal contacts (such as doctors, nurses, NGO staff, members of savings and cooperative groups) were less frequently visiting their homes. Teachers and friends were also close to them before the pandemic, the ties then loosened during school closure but were getting stronger again after schools reopened. Neighbours and village-friends became also closer as young people got more time to interact with them. Based on the conversation with the young people and their parents/caregivers it seems that, since lockdown ended and schools reopened, the level of social interactions encountered by children and young people almost resumed to its pre-COVID level.

In light of those findings, the following key recommendations have been drawn:

For communication and advocacy



- Keep advocating to government to put in place social protection schemes and policies which are shock-responsive to address hunger and loss of livelihoods when a crisis like the COVID-19 one strikes;
- If this was not already done, advocate for the development of a national COVID-19 education action plan, to invest in remote learning mechanisms that leave no child behind and to ensure that all children return to school when the conditions allow;
- Advocate for national campaigns to put in place or raise awareness on family planning services available in communities in order to reduce the rise in cases of teenage pregnancy during school closure. Also ensure that mechanisms are in place at the local scale to ensure that young women can go back to school after giving birth

For programme adaptation



- Consider including psychosocial support interventions available to all children and young people in the impact areas. If those services already exist in the impact areas, raise awareness around them in the communities;
- Make sure that parents and caregivers are aware of the psychological effect that lockdown can have on children and young people and ensure that they are aware of the services available to them and their children if needed;
- Develop other forms of remote learning such as radio programmes and paper-based learning packs to ensure that all children can continue learning. Also consider providing capacity strengthening support to teachers on distance learning methods;
- Carry on an assessment of the home-based learning approaches implemented as part of Sponsorship programme such as Early Literacy and Math to understand why they did not allow children to learn more during school closure;
- Develop or intensify livelihoods strengthening interventions post-crisis in order to restore decent living conditions for families which fell into poverty during the pandemic;
- Listen to children's voices more and use it to improve programming. With age-appropriate consultation methods, their opinions can be collected and taken into account.