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## Promoting the welfare, protection and care of children during the coronavirus (COVID-19) pandemic

The coronavirus (COVID-19) pandemic has precipitated multiple unplanned and abrupt changes in the lives of children and families across the globe. The outbreak has prompted lockdowns, social distancing measures and diversion of resources to adult health care to treat the seriously ill and to try and reduce the rate of transmission. Access to children's health and social care services has been severely disrupted. The United Nations has warned of "unprecedented risks to the rights and safety and development of the world's children" and of widening health, social and economic inequalities (United Nations, 2020, p. 1).

Drawing on findings from research conducted in the early stages of the pandemic and on the expert opinions of authors from Africa, Europe, Australia, North America and South America, this special issue of the *Journal of Children's Services* brings together a collection of viewpoint papers which explore the early impacts that the pandemic has had on children with diverse needs, in different contexts and on those providing care. It explores how children and families, social workers, allied professionals and communities have responded to the challenges that have emerged and recommends a range of measures to try and minimise harm and uphold the rights of children and their families.

## *Changes in children's visibility and vulnerability*

As the United Nations Committee on the Rights of the Child (UNCRC) has highlighted, the pandemic amplifies a range of vulnerabilities as access to health, education and welfare have been constrained and pressures on families have intensified. [Owusu and Frimpong-Manso \(2020\)](#) discuss the risks the pandemic poses to the survival and development of children in Ghana, where evidence suggests 73% of children are multi-dimensionally poor (National Development Planning Commission [NDPC], 2020). School closures have resulted in loss of access to free school meals and increased food insecurity. Moreover, digital poverty has undermined access to education and opportunities to learn. Reductions in household income as a result of the pandemic have also heightened the risk of street-ism and child labour. In response, the authors' signal the need to strengthen social assistance programmes and the importance of management information systems to facilitate the timely delivery of social care services and provision of integrated care.

Rafferty's (2020) paper, focusing on promoting the welfare, protection and care of victims of child trafficking, suggests that based on learning from previous pandemics, it is likely that vulnerabilities will be heightened via the following mediating pathways: economic insecurity and poverty-related stress; quarantines and social isolation; exposure to exploitative relationships and inability to escape abuse; reduced health service availability; and exposure to violence and coercion ([Petterman et al., 2020](#)). In this context, she proposes commitment to upholding the principles and commitments that are enshrined in the UNCRC (United Nations, 1989, p. 10) and in other international and regional mandates and guidelines in respect of trafficking, addressing known risk and vulnerability factors and implementing promising prevention activities. Drawing on [Hynes et al.'s \(2018\)](#) work and using the International Office for Migration's Determinants of Vulnerability Model ([International Office](#)

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for Migration [IOM], 2019), she recommends consideration of differences in vulnerability and resilience against trafficking taking into account: individual and demographic characteristics; household and family factors; community-level factors; structural factors; and situational factors that may temporarily increase exposure to human rights violations and abuse. Rafferty (2020) also proposes expanding the model to take into account: different settings (domestic servitude, construction and commercial sexual exploitation); geographical differences in exposure to risk; the duration and severity of abuse; and access to recovery and reintegration services and the quality and timeliness of these (p. 197). In terms of prevention, she calls for measures that focus not only on individuals but their environments, recognising, for example, the importance of community education and fostering inter-agency collaboration and communication (pp. 197-198).

The importance of upholding the standards of the UNCRC is also highlighted in Bateman's (2020) paper, which draws attention to a dramatic worsening of conditions for imprisoned children in England and Wales during the pandemic. He highlights that solitary confinement – defined as confinement [ . . . ] for 22 h or more a day without meaningful contact – has become a norm for children in young offenders institutions and secure training centres, contrary to international human rights standards (United Nations, 2015, Rule 44), and that calls to family are also restricted thus denying young people access to familial support and placing them under acute emotional stress. Recognising that children in custody tend to come from backgrounds marked by poverty and disadvantaged (Yates, 2010; Kingston and Webster, 2016) and their vulnerability, he questions why they are “systematically constructed being less deserving of consideration” (p. 206) and why they have not been permitted to return home given that the UNCRC have recommended the “release of children in all forms of detention, whenever possible, and providing children who cannot be released with the means to maintain regular contact with their families” (United Nations, 2020, Recommendation 8).

Pitts (2020) paper explores how the COVID-19 lockdown may affect another vulnerable group – namely, children and young people who are involved in or may be lured into county lines drug distribution. Drawing on Harding's (2020) work, he suggests that the “pool of availability” of those who might become involved in county lines has grown because of austerity measures over the past decade:

A central feature of county line drug supply networks is that it offers both young people and those willing to enter it – employability. County lines is compelling for many young people, notably those with limited or zero work experience [ . . . ]. This offer is essentially unmatched elsewhere in the economy. It offers tax-free profits and working hours to suit yourself (Harding, 2020, p. 270).

He outlines how COVID-19 restrictions have created further problems surrounding “availability” and “accessibility” and how this has heightened the risk of young people from disadvantaged communities becoming involved.

### ***Education, health and well-being***

The next paper in this special issue, by Collins and Baldiga (2020), considers measures to create a sense of normalcy for young people in foster care in the USA to promote their healthy development and well-being. Under federal legislation, state child welfare agencies are required to promote “normalcy” – the ability to engage in healthy and developmentally appropriate activities that promote well-being (Pokempner *et al.*, 2015). The authors' outline the barriers to normalcy that can be encountered by young people in out of home care, including, for example, background checks being required to stay at friend's houses and court orders to participate in activities and the stigma they report feeling as a result. Additional disruptions have been brought about because of COVID-19 with the suspension of in-person face-to-face contact with birth family because of stay-at-home mandates, school closures and reduced opportunities to engage in activities in the community. They report on

how the *Rise Above Foundation*, a not for profit organisation, have provided funds to facilitate access to extracurricular activities. They also call for the more robust promotion of normalcy within child welfare policy and practice and de-stigmatisation of care experiences.

[Platero and López-Sáez \(2020\)](#) present findings from preliminary analysis of data on 445 lesbian, gay, bisexual, transgender, queer, asexual and allies (LGBTQA+) young people aged 13–21 years during the pandemic; a group who face health risks because of discrimination and stigma and lack of support ([Frost et al., 2015](#); [Hatzenbuehler, 2009](#); [Mays and Cochran, 2001](#)). They found that “acceptance in a new places of residence correlated negatively with family cohabitation, and positively with cohabitation with friends/partners” (p. 224). Being older (18–21 years) made it possible for young people to live with friends/flatmates during lockdown: this correlated with a lower self-perception of being a burden (p. 223). The authors’ signal the need to diversify support for LGBTQA+ youth, develop online spaces of support where LGBTQA+ young people can relate to their peers, as well as facilitating access to psychological services.

The impacts of changes in levels of formal and informal support as a result of COVID-19 restrictions are also explored by [Lučić et al. \(2020\)](#) in their paper examining the additional stresses this has placed on children with developmental difficulties and their parents. Children with developmental difficulties are often sensitive to changes in daily routines and may have experienced higher levels of anxiety and restlessness as a result of school closures. Social support can buffer stress and help preserve well-being and increase the sense of parental competence ([Armstrong et al., 2005](#)) but both formal and informal support have been constrained because of the COVID-19 restrictions. Medical and therapeutic treatments necessary to maintain or improve children’s functioning were cancelled – and expert advice and support limited to phone calls or emails – at a time when changes in daily routine are likely to have resulted in increased behavioural and self-regulation issues for children with developmental difficulties. The authors’ also highlight the complexities of implementing distance learning and that in some cases parents have been expected to take on the additional role of teacher and assistant. They recommend broadening the health and social care support provided to the parents of children with developmental difficulties and parents’ participation in developing guidance on the delivery of distance learning for this group of young people.

[Gray et al.’s \(2020\)](#) paper outlines the challenges surrounding the re-opening of schools for children and young people with chronic illnesses. They explore these complexities and recommend different strategies for return, taking into account how well-controlled the conditions are. They acknowledge that ongoing home education provision will be required for some, but recommend return for children and young people with well-controlled symptoms to facilitate socialisation with peers and their learning. In situations where illnesses are poorly controlled, they highlight the importance of an inter-sectoral approach and the development of individual plans with input from young people, their families, medical staff and teachers.

### ***Adaptations to models of service delivery***

School and office closures during the pandemic have resulted in rapid changes in models of working and modes of communication with increased reliance on digital platforms. [Seymour et al.’s \(2020\)](#) paper offers insights into the adaptation of the *yourtown* education Youth Engagement Programme (YEP) in response to lockdown and school closures in Brisbane, Australia. The programme provides voluntary in-school and out of school and group-based interventions supporting young people aged 12–15 to remain engaged in school or early leavers to re-engage in secondary education. The wraparound service is designed to support school connectedness and broker the home–school divide. The authors’ highlight the challenges of moving to online schooling and wraparound support when those on the programme often lacked access to a computer, or could not access online learning because of poor internet connection or the cost of data packages. Moreover, even when resources

were available, parents and young people did not always have the digital literacy to support use of the online platforms. YEP provided remote coaching to families and supported parents to establish home schooling routines, as well as advocated for hardcopy materials for those who were finding the new online education environment difficult. Recognising the importance of face-to-face support and out-reach, they also practiced socially distanced home visits, chatting over the car bonnet or through closed windows or door. Seymour *et al.* (2020) emphasise the need to build trusting relationships to support families and be able to act as an effective conduit between schools and home, particularly in the context of intergenerational education and welfare failures. They also highlight the importance of young people's active participation in the design and delivery of non-stigmatising services and support to avoid further compounding educational disengagement.

MacDonald *et al.*'s (2020) paper also focuses on programme adaptation, but in a different geographical context and with a different group of young people. In the paper, they share their reflections on adapting the SAYes face-to-face mentoring programme for care leavers in South Africa to online delivery. Although the *Guidelines for the Alternative Care of Children* (General Assembly of the United Nations, 2010) recognise that states should prepare and support young people leaving care to assume self-reliance and integrate into the community, and provide aftercare support, in practice in South Africa, this group typically experiences an abrupt end to social support when they age out of residential care and feel abandoned, fearful and ill-prepared for life after care (van Breda, 2018). Findings from an evaluation of the SAYes programme prior to the pandemic found that mentoring boosted young people's self-confidence, connected them with a caring adult role model and wider social networks and provided hope for the future (MacDonald *et al.*, 2020). The paper highlights the practical challenges of moving from a face-to-face model of mentoring to e-mentoring because the majority of young people do not have access to devices or adequate network signals to handle video call. Data costs can also be prohibitive. There are also relational challenges to building trust and rapport in an online environment. However, they conclude that:

E-mentoring has been effective for supporting young people to navigate health information, grants and benefit payments; negotiate with employers; connect to networks of support; and to reach out to their social resources [...] some care leavers have even initiated pandemic civic action [...] raising concerns about food distribution strategies [...] and establishing community initiatives (MacDonald *et al.*, 2020, p. 257).

They also identify that the e-mentoring is not constrained by geography which has served to extend the reach of the programme to the most disadvantaged communities.

The rapid transition to new ways of working also has implications for the well-being of frontline professionals. It is recognised that social work teams play an important role in building resilience and that the office provides a space for discussion among colleagues to inform decisions about service responses to meet the needs of children and families (Ruch, 2007). Cook *et al.*'s (2020) paper presents findings from research exploring how social workers have navigated the sudden shift to remote working and the implications this has on whether they have a secure base to help them manage stress and feel confident in their practice (Biggart *et al.*, 2017). They revisit the concept of the team as a secure base in social work (including the dimensions of availability, sensitivity, acceptance, cooperation and a sense of belonging) (Biggart *et al.*, 2017) in the context of remote working and the evolution of virtual teams. They identify how teams have adapted and established new ways to keep in touch and access informal peer support, including, for example team WhatsApp groups, "water cooler" virtual meetings and peer supervision meetings. However, they also note how virtual teams do present challenges for the team's functioning as a secure base, particularly when teams were less well established or included a higher proportion of temporary staff or newly qualified social workers, as the lack of face-to-face contact made it more difficult to identify if colleagues were in need of support and also reduced informal access to multiple

perspectives on cases. They call for further work to develop the evidence base on “specific risks of remote working for workers’ resilience, reasoning and retention” (p. 266).

### *Safeguarding children: opening up opportunities to practice differently*

Nearly 10 years ago, the *Munro Review of Child Protection* (Munro, 2011) highlighted that child protection had become procedurally driven, bureaucratic and risk adverse, but it has not proved easy to re-focus child and family social work. Concerns have been raised that practice has focused on parenting (in)capacity, without sufficient acknowledgement of how poverty and social inequalities affect children and families’ lives (Featherstone *et al.*, 2014), and that the “social” is disappearing from “social work” (Shemmings and Little, 2017, p. 70). While the picture is mixed, papers in this collection do suggest that in some areas, at least, the pandemic has served as a catalyst for positive developments and opened up opportunities to practice differently. Papers from the collection focusing on professional responses to safeguarding children (Driscoll *et al.*, 2020; Pearce and Miller, 2020) and tackling child exploitation in England (Racher and Brodie, 2020) suggest that the need for a rapid adjustment to models of service delivery precipitated by the pandemic may have improved multi-agency collaboration and information sharing, encouraged creativity and more flexible approaches to working with children and families and movement towards more relational and humane practice (Baginsky and Manthorpe, 2020; Ferguson *et al.*, 2020; Pink *et al.*, 2020; Featherstone, 2020).

Multi-agency working is recognised as key to safeguarding children but differences in organisational culture and values, resources and priorities can act as barriers to effective joint working. Findings from the viewpoints suggest that multi-agency collaboration and working relationships in some areas have improved as partner agencies have come together to problem solve and implement measures to protect children who may be at heightened risk and “hidden” from view as typical routes of referral to children’s social care have been disrupted during the pandemic (Driscoll *et al.*, 2020; Racher and Brodie, 2020; Pearce and Miller, 2020). Online meetings between safeguarding partners and multi-agency COVID-19 specific task groups were reported to have accelerated the development of working relationships, facilitated information sharing and identification of what additional data needed to be collected and shared about specific groups of children (for example, pre-school children from vulnerable families), and to understand changes in patterns of referrals (*ibid.*).

Although the use of digital platforms for child protection meetings, return home interviews and to keep in touch with young people in and leaving care has not been without challenges, findings from the research in this volume suggest that in some circumstances, remote meetings have shifted the balance of power between young people and professionals and given the former a greater sense of control over their participation in meetings, thus facilitating their engagement (Driscoll *et al.*, 2020; Racher and Brodie, 2020; Pearce and Miller, 2020). Similarly, it was noted that some families had felt able to speak more frankly during remote meetings (Driscoll *et al.*, 2020). It was also suggested that the dynamics between families and professionals have altered, with less emphasis being placed on “surveillance” and more on the provision of practical support, including, for example delivery of food parcels and/or assistance with bills (Driscoll *et al.*, 2020; Racher and Brodie, 2020). As a social worker in Ferguson *et al.*’s (2020) study also reflected:

The welfare element is so strong at the moment – “can you access food etc?” – drawing down on basic needs. It has removed some of the perceived power – “oh, social care are here” – and humanised us as there to provide support, not just there to use power, but to work in partnership, what social work should be like (p. 3).

In this volume of the *Journal of Children’s Services*, Racher and Brodie (2020) also highlight that:

The level of uncertainty within the system, compounded by the requirement to navigate relationships in new – socially distanced -ways seems to have led to boundaries between statutory and community-based services being spanned in some areas [...] [and] voluntary sector charities have offered support to families in ways that complemented statutory services (p. 280).

Finally, Clulow *et al.*'s (2020) paper provides examples of how local children's organisations in South Africa, Greece and Chile, advocating for children in kinship care, unaccompanied minors and children at risk of abuse, neglect and commercial exploitations, respectively, have responded to the pandemic. They also signal the vital role that local civil society organisations have to play in supporting children and families.

### Conclusion

The papers in this special issue were written in the early stages of the COVID-19 pandemic. They attune us to similarities and differences in the needs, circumstances and vulnerabilities of children living in the Global North and Global South, and those living with their families and in alternative care settings and are intended to stimulate discussion as we continue on a journey which will have far-reaching consequences for children around the world. It is clear that in response to the challenges, statutory and voluntary services and professionals from multi-disciplinary teams have been working together to adapt, innovate and develop flexible solutions to meet needs. In this sense, the pandemic may have opened up opportunities to practice differently and to move towards more humane and relational practice (Featherstone *et al.*, 2014). Moving forward, it will remain important to focus on effective collaboration to uphold the protective, provisional and participatory rights of children and young people.

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