

CP-EiE Collaboration Framework - Checklist for Reopening Schools A coordinated response for children to return to school

Extended school closures in response to the COVID-19 pandemic have had adverse effects on children's protection, wellbeing and learning. Reopening schools not only provides learning, but also the critical opportunity to address the risks to children's protection and wellbeing experienced during periods of lockdown, and will require strong collaboration between education and child protection sectors more than ever.

This checklist proposes steps for CP and Education sectors to take as schools prepare to re-open to ensure a coordinated response for children returning to school. It should be read in conjunction with the CP-EiE Collaboration Framework and Tipsheet for CP-EiE Collaboration during COVID-19. While the focus of this paper is on CP considerations during school reopening, collaboration with other sectors such as Health and WASH, will also be critical at this time.

This checklist provides a non-exhaustive list of suggested actions to coordinate inclusion of CP considerations during school re-opening. <u>Sections 1, 2 and 3</u> suggest actions to address <u>three main issues</u> during the school re-opening phase; <u>Section 4</u> provides an <u>indicative timeline</u> for incorporating CP considerations prior to reopening of schools, during reopening, and while schools are reopened.

1. Children at risk of dropping out

After prolonged school closures, there is an increased risk of children not returning to school, with marginalized children more likely to drop out. Actions to encourage return to school and mitigate potential drop out can include:

- Teachers and CP workers convene to identify <u>categories of children at risk</u> of dropping out according to their context (e.g. children who got married, girls who got pregnant, children who started working, children whose caretaking or domestic responsibilities increased, children with disabilities who might not have accessed distance learning, etc.) - prior
- Teachers and CP workers collaborate to identify children at risk of dropping out and work proactively with their families and communities to ensure school reintegration - prior
- Establish system for monitoring and identifying children who have not returned to school within a reasonable timeframe (determined by school / MoE) prior
- Consider adapted activities during first weeks of reopening to encourage children to return (e.g. community sensitization and back to school campaigns, MHPSS activities, child discussions and activities, etc.) during
- Identify and report to CP which children have not come back to school during
 - Teachers / Education teams to work with CP teams / social workers (depending on capacities
 of both sectors) to reach out to identified children and their families to encourage a return to
 school and identify and address barriers to their return during (see Section 2 for referrals)
- Community-level planning with teachers, CP workers and the community (including PTA) for activities and strategies for bringing children back to school who did not return – after

2. Children experiencing child protection concerns

Once schools re-open, teachers will be among the first people outside of the child's home who are seeing and spending time with children. They are well-placed to identify differences in behaviour (pre-and post-school closure) or other signals of CP issues.

- Sensitize teachers on <u>signs of CP and MHPSS issues</u> that could be prevalent at this time (i.e. SGBV), and provide a (refresher) training on identification & referral, <u>psychological first aid</u> – prior
- Ensure school-based <u>reporting and referral mechanisms</u> are functional, adapted for the COVID context if necessary, and are communicated to teachers. Test communication channels. prior
- Teachers and CP workers proactively identify <u>children at risk</u> of child protection concerns during school closures, and outreach to families to facilitate referrals and return to school- prior

- Social workers prepared to receive increased reports at time of re-opening prior
- If possible, position social workers in schools during reopening to facilitate referrals during

3. Children in need of MHPSS

After extended disruption to children's normal routines and peer interaction, increased MHPSS needs among children returning to school are expected. Schools will be among the first places with access to children as society begins to re-open, therefore providing MHPSS services at schools (level 2 of the pyramid), and facilitating referrals from schools to more specialised MHPSS services, will be important.

- Provide teachers with basic training and ready-to-use materials/activities for <u>Psychological first</u> <u>aid</u> (PFA) and <u>MHPSS</u>, including Social-Emotional Learning (SEL) prior
- Coordinate to deliver school-based MHPSS interventions and facilitate MHPSS referrals after
 - Applying the MHPSS Thematic Paper (CP-EiE Collaboration Framework) to support the two sectors to decide on which sector delivers which MHPSS activities (at which MHPSS pyramid levels) and to which children.

General Considerations

- Establish information sharing protocols between partners/sectors: what information is shared, with whom, and how? Ensure there are procedures in place in terms of data protection prior
- Consider response capacities from both sectors during planning (availability of staff, technical capacities, movement possibilities, flexible funding, etc.) prior
- CP and Education, in collaboration with the community and other sectors (especially GBV and FSL) to develop on strategies to bring and keep children back to schools and address other identified protection concerns – prior, during, after
- Involve children, parents, and PTAs in activities, information, and support prior, during, after
- Schools should be prepared for possible short-term re-closure and, in collaboration with CP, prepare and preposition for that (learning material, awareness messages to children and families, strengthened community/family-based approaches for learning, protection and wellbeing) – after
- If appropriate, consider advocacy on school reopening for the sake of children's overall wellbeing

4. Indicative timeline – incorporating CP considerations during school re-opening

	Prior to reopening	During reopening	With schools reopened
1. Prevent Drop-out	 ✓ Jointly identify categories of children at risk ✓ Establish system for monitoring, identifying and reporting children who do not return to school ✓ Agree information sharing protocols between sectors 	 ✓ Identify (& report to CP) which children have not come back to school ✓ Coordinated outreach to absent children and families ✓ Identify and address barriers to their return to school 	 ✓ Planning with teachers, CP workers and communities on strategies to bring absent children back to school ✓ Preparedness measures for potential future school closure
2. Facilitate Referrals	 ✓ Update school-based reporting and referral mechanisms, adapted for COVID context if necessary. Test communication channels. ✓ Sensitize teachers on signs of CP and MHPSS issues, and referral procedures ✓ Social workers prepared to receive increased reports at time of re-opening 	✓ Where possible, position social workers in schools during reopening to facilitate referrals	
3. Provide MHPSS	 ✓ PFA refresher for teachers ✓ Teachers trained on MHPSS provision (Level 2 of the MHPSS pyramid) 		✓ Coordinate to deliver school- based MHPSS interventions & referrals to specialised MHPSS services, applying the MHPSS Thematic Paper to determine 'Who' does 'What'

Additional resources on reopening schools:

<u>Framework for Reopening Schools</u> (UNESCO, UNICEF, WFP, World Bank)

Inter-agency Safe Back to School guide (GEC, CP AoR)

Additional COVID-19 coordination resources:

<u>CP AoR's Resource of menu for COVID-19</u> <u>GEC's Resource of menu for COVID-19</u>