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## Building a protective environment for street children in the global context of Coronavirus 2019 disease (COVID-19): lessons from the Democratic Republic of Congo

MURHULA Kapalata Gloire

### ABSTRACT

Violence against children is a global health problem of high significance. While the Coronavirus 2019 disease (COVID-19) pandemic has increased the risks of violence against children in global, there have been unparalleled effects on street children. Using the case of Democratic Republic of Congo (DRC), this article explores the prospects of building a protective environment for street children. First, we demonstrate how COVID-19 has changed the living conditions, livelihoods, and risks of violence against street children. Second, drawing on the lessons from the multisectoral responses to COVID-19, I explore the prospects and challenges for improving prevention and response programs for street children. The present article concludes by examining some factors of resilience that can inform existing interventions for street children in the DRC in global, drawing on the lessons from responses to COVID-19. The latter is a disease caused by a virus named SARS-CoV-2 which is contagious and spreads quickly. It can also cause respiratory illness in humans. This article is relevant because COVID-19 has led to reflective changes in different sectors that affect considerably children's lives. Therefore, it will be significant to build protective measures to safeguard children after COVID-19 and not leave street children behind.

**KEY TERMS:** street children, protective environment, social work, distorted development

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## INTRODUCTION

Since 2019, COVID-19 has been taken seriously by many health institutions in the world. Children have been affected also by COVID-19 and street children have been neglected, despite the factor of being considered as a problematic group in the spread of COVID-19. Through the repression system, these children realized that they were in lack of information concerning COVID-19. This situation put street children not only in struggle but also other children who were exposed to the risks of falling into different forms of addiction. However, this situation has affected all aspects of human being among whom children have been the most vulnerable. Faced with this situation, there were major gaps in the response to COVID-19 in most countries. The construction of inclusive intervention strategies that do not leave no one behind could be helpful in the context of the pandemic. This article broadly uses the term street children to refer to all vulnerable children who live, work, or depend on the street for their survival by analyzing how coronavirus disease has exacerbated street children's situation in the DRC.

## BACKGROUND

The COVID-19 was first discovered in Wuhan, China, and was first centered in high and middle-income nations before spreading throughout the world (Wilkinson, 2020). COVID-19 which has spread to many nations worldwide, including those in Africa, was formally declared an international public health emergency by the World Health Organization (WHO) on January 30, 2020, and a global pandemic on March 11, 2020 (Akilimali, 2022; Juma, 2020). As a result, nations and the WHO (World Health Organisation) were advised to implement rigorous social isolation and quarantine policies to stop the virus' spread. SARS-CoV2 has spread to 213 countries, resulting in more than 5 million cases and close to 400,000 mortalities since its initial diagnosis in China, despite sporadic international efforts to contain the spread (Hiscott et al., 2020). A Congolese man was found to be the first COVID-19 case in the Democratic Republic of the Congo (DRC) on March 10, 2020, in Kinshasa (Akilimali, 2022; Juma, 2020). Since that time, there have been more confirmed cases. 92, 852 Coronavirus cases, 1,442 deaths, and 83, 504 recovered (last updated stats of INRB: September 24, 2022, 07: 47 GMT). The national government of the DRC in Kinshasa enacted strict measures to contain the spread of the virus. Some of these measures included proclaiming a state of emergency, general lockdown, curfews, border restrictions; awareness-raising, and social distancing measures (Juma, 2020). Children were recognized as more susceptible to contamination than adults and were found to be prone to the social and psychosocial effects of the pandemic such as violence and stress (Lateef et al., 2021). COVID-19 has increased violence against children and has affected their livelihoods, well-being, and safety nets (Nyabeze & Chikoko, 2021). During the lockdown, different impacts have been also observed on street children (Consortium for Street Children, 2020; Kawala & Cumber, 2020). In the DRC, access to social distancing, face masks, hand sanitizers, and water constituted challenges for street children as they could not afford the price and assistance of organizations. For example, most of the street children in DRC depend on street activities as reported mostly by street children. Unfortunately, some of the activities are closed and the price of masks, and sanitizers becomes more expensive while they are supposed to change every day for health precautions.

However, violence against children is a public health problem of high significance (Rada, 2014). Internationally, while there have been increased efforts to end violence against children (Panter-Brick, 2002), the COVID-19 context has highlighted the persisting violence of children, and street children are one of the vulnerable categories who have been significantly affected by the COVID-19 (Ainamani et al., 2020; Mohapanele & Makwara, 2023; Kourti et al., 2023). Recent developments have defined street children as a category of children in difficult circumstances, and who, based on their unique circumstances may have limited or no contact with their families and may be permanently living on the street (Abate et al. 2022; Cumber et al., 2015). While some street children may be completely homeless, others may be living in informal settlements, with limited sanitation, and physical distancing measures (Wilkinson, 2020; Angba, 2020). Therefore, street children face elevated risks of child maltreatment, developmental, and health problems, (Jarahi et al., 2021). During COVID-19, there is a high probability that these effects could increase. While the exact number of street children in the DRC is unknown, it is estimated that there could be 70,000 street children 20,000 who are found in Kinshasa, the capital city of the DRC alone (Boniface et al., 2017). Looking at the literature, there is a gap in the assistance program during the COVID-19 period, which does not take into account the inclusiveness of the different categories. This constitutes a form of inequality in social intervention that deserves particular attention from social workers and health professionals.

## METHODOLOGY

This research is designed for the benefit of street children, a vulnerable population at increased risk during the COVID-19 pandemic. conducted in a way that minimizes risk to participants and respects street children's rights and well-being. Therefore, this study is essential for understanding the challenges faced by street children during

the COVID-19 pandemic and developing effective interventions to protect them. Specifically, the proposal of this article was shared with and presented to lecturers from the Faculty of Social Sciences at the Université Evangelique en Afrique, who have some experience in the field of child protection, to obtain appropriate guidelines in line with the "Do no harm" principle. Thanks to the researcher's guidelines, the following elements have been taken into consideration: Informed consent: we obtained informed consent from street children before conducting the research interview by asking for their time to provide information for this study. the confidentiality was guaranteed. Voluntary participation: the participation in this research was voluntary and participants were free to withdraw from the study at any time. Minimization of risk: we took all reasonable steps to minimize the risk of harm to street children by informing them about the research objectives and the significance of this study. However, before conducting the interview, the risk assessment and implementing risk mitigation measures have been designed. In addition to the above, as street children are considered a vulnerable group, we have been sensitive to their needs by giving them something to eat after interviews and respecting the beliefs of all participants.

Therefore, this study is qualitative based on secondary data, although some interviews with street children were carried out to gain an in-depth understanding of the situation. To this end, this research took into consideration the existing literature on COVID-19 but also interviews street children in Bukavu town. These interviews took place based on the willingness of participants as this study did not set out to generalize results but focused more on understanding the literature, hence the few interviews that supported the existing literature. However, 10 cases of street children have been selected for interview based on areas where street children used to be. The targeted places where to meet these children are Kamagama, Essence, Beach Muhanzi, and Kadutu. The collected opinions were compared with the existing literature to design a model of intervention according to the street children's experiences. The interview guide was realized as an important instrument in this study in addition to the documentary techniques. This research had some limitations, such as: not having sufficiently captured a large number of street children, as it was just a matter of providing some insight into the reality experienced by these children in Bukavu to be added to the existing literature. Also, the lack of extensive literature on street children during COVID-19. Therefore, the wider literature on social intervention and street children completed the literature. Thus, content and document analysis were proven as methods of data analysis in this study. In addition to the limitation explained above, this study has limitations in terms of data triangulation, given that the information drawn from the interviews was collected only from street children, and the other actors were not taken into consideration because of resource constraints and time assume to the study considering as a pilot study. The important thing was not to have a large number of street children, but rather a few cases selected according to the different sites considered as "hot" in the city of Bukavu, and their availability to explain their experience during the COVID-19 to support the secondary data as illustrations.

## FINDINGS

### *COVID-19, livelihoods, and violence against street children*

The fact of living in the street influenced the rates of child abuse incidents during the lockdown, this is because street children have been forced in different ways to respect measures regarding the spread of COVID-19. For example, some of these children found themselves in search of activities where they were used for less. Sexuality has multiplied because many of them have found especially for young street girls to remain in prostitution. Some of the street children in Bukavu explained:

*Sometimes for lack of occupation, we spent the day in small wooden houses and the night with some street girls sleeping together" (Roland [pseudo]Bukavu) and another one added: "Finding the small job on the street was difficult, sometimes if there is, we are paid very less, and we had no choice (Fiston [pseudo]Bukavu).*

This affected the subsistence of food, shelter, work, health, and sanitation among street children. Children also faced other types of discrimination during the COVID-19 period. For example, access to essential services due to inequalities related to their inability to prove their identity for medical and psychosocial assistance. In addition, another example is that street children are not able to obtain gel and hide their noses every day, sometimes they find themselves unable to access health services and other psychosocial assistance structures during COVID-19 as reported by street children in Bukavu. This leads to their exclusion from programs following the guidelines of the Child Protection Act (Law No. 009 of January 10, 2009, on Child Protection).

Many street children have become the collective target of police interventions simply because of their connection to the street, as they cannot have the masks in their possession. In the city of Bukavu, they have been at all times in tracking down by the police during the COVID-19 period. Some of them said:

*We were in pursuit of the police, being used to the street, The period of lockdown was for us a moment where the police pushed us because it was forbidden to circulate at 9 pm but we had no choice because the street is our home (Norbert[pseudo]Bukavu).*

According to the Convention on the Rights of the Child (CRC), states are asked to ensure, as far as possible, that children, particularly vulnerable children, have access to means of survival, and state parties shall take all appropriate legislative, administrative, social, and educational measures to protect the child (United Nations, 2011). As reported by Yanti et al.,(2021), the rights to life, survival, and development of street children are threatened in several ways in DRC during COVID-19. Street children who depend on street activities have seen their financial status worsen due to the lack of street work. With the COVID-19 pandemic, states were obliged to promote information about COVID-19 that is appropriate to different ages and cultures (Consortium for Street Children, 2020). Street children have been also particularly affected by the lack of appropriate and consistent information about COVID-19 (Aptekar & Heinonen, 2003). In total, Some actions have been put in place but are not very significant because the literature shows that many of these actions in favor of street children were concentrated in different centers but not in the street. Street children in the DRC do not have effective access to information in the fight against the spread of COVID-19, while some actions reach other categories of children, the street children are forgotten because these children do not even have access to radio or television due to poor access to the internet, health education, and health outreach programs.

### ***Multisectoral responses to COVID-19 and street children in the DRC***

The COVID-19 crisis has overloaded the health system and other essential services. Thus, the response to contain the threat due to the COVID-19 pandemic required taking certain radical measures and measures up to the declaration of a state of health emergency to slow or stop the spread of the pandemic to protect the health of populations in the Democratic Republic of Congo (Muhima, 2021). However, DRC has remained committed to fighting against the pandemic by putting in place response strategies to COVID-19 among which we have containment that starts from 9 p.m., At these times you are arrested and transmitted to the police, the restriction of circulation in certain areas without masks, intensification of sensitization by international, national and international organizations on prevention measures, identification of sites for the isolation of suspected cases, restriction of meeting for activities exceeding 20 people, Provision of equipment for protective measures for healthcare staff, awareness campaign and interactive radio broadcasts in the 4 national languages on prevention against COVID-19.

Among the strategies by objectives implemented in DRC during COVID-19, are: strengthening governance, strengthening of health zones and provinces, preparation of health zones and provinces, advocacy for resource mobilization, Organize COVID-19 structures, Strengthening laboratory diagnostic and research capabilities, strengthening case monitoring and investigation capacities, improving the WASH program(safe water, adequate sanitation, and improved hygiene) in all health structures and the community, strengthening the risk communication and community engagement system, implementation of the COVID-19 emergency logistics system, ensure psychosocial and nutritional care, implement risk mitigation measures, Spread and social distancing (Muyembe et al., 2020).

In addition, the Multisectoral Response Committee (CMR-COVID-19) has been implemented to provide policy direction to the government, mobilize resources, and manage funds. COVID-19 consisted mainly of the following ministries which are in charge of bringing strategies about COVID-19: Ministry of Interior, Security and Customary Affairs; Ministry of Health; Ministry of Finance; Ministry of Budget; Ministry of Communication and Media; Ministry of Transport and Communication; ministry of fishing and livestock; ministry of plan; ministry of social affairs; ministry of humanitarian actions and national solidarity; ministry of higher and university education; ministry of scientific research and technological innovation as well as National Defence and Veterans Affairs, Justice, Primary, secondary and technical school. In addition to the representatives of the various ministries, the multisectoral response committee includes a technical secretariat, and all their activities are supported by a national solidarity fund for the response to COVID-19 in the DRC (Muhima, 2021).

Nevertheless, in all these strategies put in place, we observe almost non-existent strategies that affect children who live on the street, this sufficiently proves the lack of sensitivity to the problem of street children. Responses to COVID-19 in the DRC have highlighted deep existing social and health disparities. This is to say that access to information as part of preventive and curative measures has not been effective for street children and they were not concerned by many of the interventions in the context of awareness-raising and information from COVID-19. Due to their extreme poverty and living conditions, street children faced heightened risks of infection, including the difficulty in complying with distancing and self-isolation measures and the lack of hand-washing facilities available to them on the street and in the public places where they regularly frequent. This problem is compounded by the fact that street children often do not have adequate access to information, making it more difficult for them to know how to protect themselves and what to do if they develop symptoms.

Awareness-raising activities on COVID-19 have been implemented by the government and civil society actors. However, these campaigns do not reach all segments of the population including street children (Save the Children, 2020). Furthermore, it is essential to support health structures so that they can meet the WASH standards and protect in somehow street children. Social Workers should be recognized as key workers in the implementation of street policies in collaboration with health professionals. In addition, REEJER's program in DRC offered basic medical care, including essential medicines, information on preventing COVID-19, and facility referrals for primary care through mobile medical services, and conducted awareness-raising activities about COVID-19 in collaboration with street youth community leaders in Kinshasa (Engender Health, 2020). The homeless population has been a major challenge in public health, in particular, raising concerns about emergency lockdowns (Redondo-Sama et al., 2020). That's why public health interventions need to be balanced with social and economic interventions, particularly for poor urban residents, including street children (Wilkinson, 2020). Unfortunately, in the DRC access to safe water and food is a major problem for street children during COVID-19 and increases the risk of poor nutrition among children (OECD, 2020). Therefore, REEDER (Network of street children and Youth Educators) provides food on the streets of Kinshasa during COVID-19 where the program works in five communes (EngenderHealth, 2020). The same situation has been observed in India where street children during lockdown are severely affected by poor access to food, water, and support services that could help them change their situation (Pietkiewicz-Pareek, 2020). In the DRC, repression measures against COVID-19 have led to the closure of food access points and places (markets, restaurants, and bars). As a result, street children were left in an unprotected situation characterized by fear, as resources were very limited and support programs did not reach them.

### ***Factors of street children's resilient during the pandemic and implications for policy and practice***

The factors of street children's resilience in the DRC during the COVID-19 period have been influenced by the pandemic. Informal activities such as stealing, begging, and fraud in all its forms are all strategies used by street children. The abusive consumption of highly alcoholic beverages has multiplied. One of the street children met in Bukavu explained the following:

*We do not have the means to survive, in most cases we are forced to steal, beg and sometimes during Covid 19 our activities were complicated [...] the consumption of drinks has helped us a lot to survive (Victoire [pseudonym] Bukavu).*

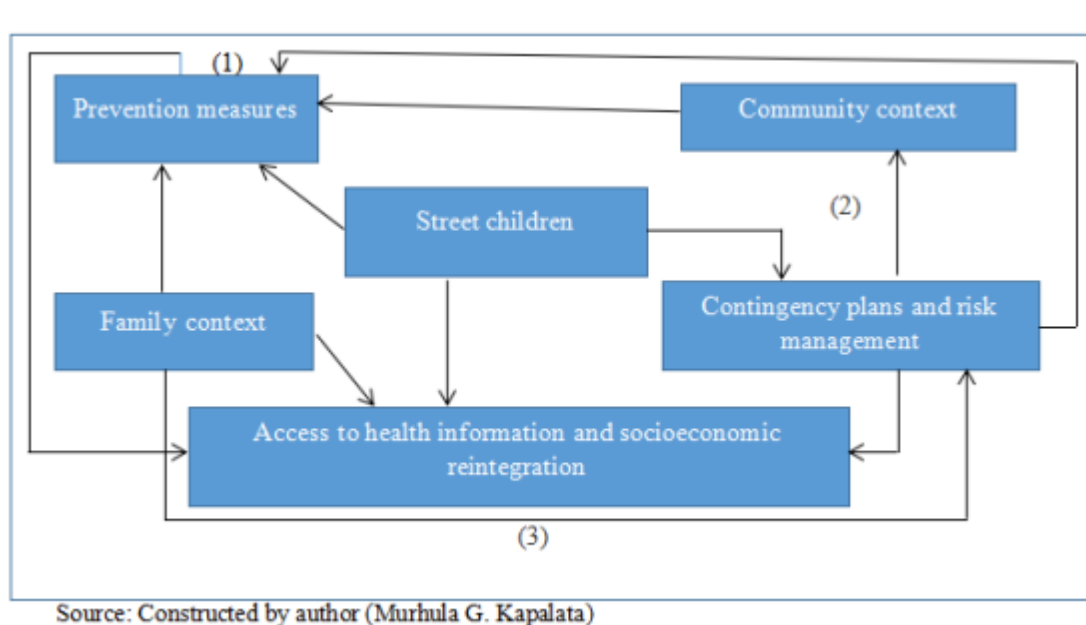
In this regard, to make a statement, a street child in the city of Bukavu explained during the interview:

*We live from the street, COVID-19, forced to circulate in different corners to find food and drink, for us, the measures could not be respected. We were obliged to move freely although sometimes the police and military will prosecute us (Norbert [pseudonym] Bukavu).*

These few pieces of evidence taken in the context of the Eastern Democratic Republic of Congo, give an idea of the resilience mechanisms of street children during COVID-19. Faced with various measures of retraction, street children were forced to move freely in searching for highly alcoholic drinks, and other informal activities likely to get money. In response to the COVID-19 pandemic, DRC has adopted different management approaches based on various considerations, including WHO recommendations. The DRC has put measures in place to fight the pandemic. However, contextual factors such as socio-economic realities and poverty pose a different set of challenges for COVID-19, especially for vulnerable populations such as street children. Street children need particular support when it comes to support them for their effective reintegration. Sensitization programs should be developed in the DRC with the support of street social workers in collaboration with other health professionals. The involvement of social workers is of paramount importance in the DRC where the number of street children is increasing. Street children have been a matter of debate in DRC. The research contributes not only to the academic debates but also by researching how to prevent, minimize, and respond to inequalities of vulnerable groups particularly affected by COVID-19 (Redondo-Sama et al., 2020). In terms of organizing services for street children in the context of the pandemic, it is important to strengthen the practice of street social workers in the DRC by developing specific programs that are street-oriented. This would allow institutions to develop contingency plans and risk management for street children and gradually integrate them into the socio-economic reintegration process. Regarding coordination among social workers, it is important to highlight the use of different tools in many situations to ensure team communication on the preventive measures for street children during COVID-19. Social intervention in the context of health emergencies must be situated on a continuum that takes into account approaches related to casework, group work, and community work with street children to make them actors and active in the search for their well-being. Integrated approaches, therefore, require that social workers implement interventions adapted to the local context.

It is important to take a brief look at the integration of three methods in social work (casework, group work, and community work). The sustainable socio-economic reintegration of street children has to be realized in a systemic perception including aspects that affect the microsystem, the macro-system, the mesosystem, and the ontosystem in the process of implementing preventive and curative measures in this global context of COVID-19. It thus appears that street children may face very particular problems in this global context of COVID-19 regarding their adaptation during and after the pandemic. It should be remembered that instability during this period may have consequences that originate in the microsystem, the macro-system, the mesosystem, or the onto-system. Therefore, street social workers, as well as health professionals, should engage in a participatory perspective to implement concerted actions with the latter on what may expose them to the reach or spread of COVID-19 viruses. Thus, the professionals involved in this task must be sufficiently informed to select the different variables affecting street children and other community variables that have an impact on street children. Social work must achieve its directive by improving people's competence and functioning, helping them access social supports and resources attempting to create responsive social services, to provide resources and opportunities to all citizens (Ebue et al., 2017). Therefore, street children deserve special attention during the period of the COVID-19 crisis. Street work can be seen as an essential service that should remain, in well-being, to reach the street living on the street who then have no one to crash to. It is vibrant that street workers profession and street organizations prioritize public health to provide essential support to street living in the street who are further isolated and at risk because of the pandemic. Despite government efforts to combat COVID-19 in the DRC, the realities show that street children were excluded from programs to combat the spread of COVID-19.

Figure 1: Framework for building a protective environment for Street children during a pandemic



This proposed intervention framework is essentially based on the idea that Street children should be the basis of any pandemic response. Social actors should put in place preventive measures as well as contingency and risk management plans for these street children or any vulnerable children. However, the intervention should be done to facilitate access to health information for these children and facilitate their socio-economic reintegration. The family and community context will benefit from a particular intervention as street children come from families and communities. Thus, the relationships among the different variables are presented in three foundations demonstrating the relationships between the social intervention variables by considering the central intervention variables represented as (1), (2), and (3):

1. Prevention measures are closely related to Community context, Family context, and street children.
2. Contingency plans and risk management take into account Community context, Street children, Family context, and prevention measures.
3. Access to health information and socio-economic reintegration is in a relationship between the variable prevention measures, contingency plans, and risk management for street children.

## DISCUSSION

Although the study's results are in line with the contributions of previous studies, new themes have emerged in this particular study. There are still themes that deserve to be explored in greater depth in the exclusivity of interventions in times of pandemic such as the involvement of stakeholders for a sustainable solution in the event of a pandemic, as well as the stigmatization and exclusion of children and other vulnerable people in the process of social intervention in the event of a pandemic. As in the case of street children, strategies should directly involve these children as they are also considered to be carriers of the spread of these viruses. In response, different nations have adopted different management approaches hinging on various considerations, among them the WHO recommendations (Kawala et al., 2020). Unfortunately, this has been described as a lack of intervention in these categories. Street children faced many challenges during COVID-19, including the lack of access to COVID-19 information, lack of access to protective wear, lack of access to shelters and centers due to closure, lack of access to food or income on the street, and being criminalized by the police for being on the street during the hard lockdown (Mohapanele & Makwara, 2023). The results of this study show that street children have adopted strategies to survive without fear of COVID-19. However, during the period of the pandemic, the preventive and curative systems proved to be somewhat discriminatory, overlooking other categories of people such as street children (Mohapanele & Makwara, 2023; Ndlovu & Tigere, 2022; Lokong, 2022). This led to an even greater degree of social inequality. Logically, the lockdown period was a difficult time for street children, as most of their income-generating activities were interrupted (Mohapanele & Makwara, 2023). Nevertheless, these children adapted in the present context despite the lack of appropriate care during this period. To this extend, it would be up to social workers to use awareness-raising sessions to inform vulnerable groups with a low level of education about how to protect themselves against the pandemic and to encourage them to make decisions to become agents of change. This is because the socialization of all categories of children has been exposed by the closure of schools and children's recreational activities have been suspended (Chineka & Kurevakwesu, 2021). Street children seem to be more at risk as they beg for money and occasionally they resort to pickpocketing from people who could be carrying the Coronavirus (Owen & Banyanga, 2021). Economic crises, food shortages due to supply chain disruptions, and lockdown measures were major features of COVID-19 (Zimmerman et al., 2023). Children were not spared from this situation, including the most vulnerable, as COVID-19 created inequalities across several key domains of life (Blundell et al., 2020). Experience reveals that in the absence of state involvement, child protection frequently depends on the mobilization efforts of civil society and participation from various community groups. These informal protective procedures may contain collective activities (Boyden & Mann, 2005). There is still a need to rethink social intervention policies in the face of pandemics to avoid all forms of discrimination and inequality in the process.

## RECOMMENDATIONS

In line with the research findings and discussion, we make the following recommendations:

1. Social Workers, through their various actions, should pay more attention to the inclusiveness of all people when setting up emergency programs in the event of a pandemic or any emergency, by responding to the specific needs of each person;
2. Social Workers should think about setting up a "Street Social Work" program based on action research and in a public-private partnership;
3. The application of the Build Back Better approach (BBB) by the various public and private sectors, including the active participation of community members should be useful in developing preventive and curative strategies.

## CONCLUSION

Street children are at heightened risk, especially during the COVID-19 pandemic. Street children's access to basic social services, access to information on COVID-19, Survival strategies, and the protection and development of street children are the visible impacts of COVID-19 on street children. The establishment of a protective environment for street children in the global context of COVID-19; in particular in the DRC through the involvement of social workers remains a great opportunity to intervene effectively with street children. The possibilities of re-launching the socio-economic integration strategies of street children in this period should be elaborated in a perspective of collaboration between the different institutions by the legal texts and the methodological principles in social work. In the context of the role of social work during COVID-19. The lack of preparedness of street social workers to intervene with street children is challenging. The results concerning cases in which social workers have played a role in saving lives are crucial to understanding the dynamics of how obstacles to providing solutions in pandemic situations (exclusionary dimension) can be transformed (transformative dimension). The implications for social work research and related disciplines can be further investigated about street children during a crisis.

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