



How will the COVID-19 crisis affect children in cocoa-growing communities?

A brief review of the effects of recent pandemics on children, April 2020

As in many parts of the world, governments in West Africa have closed schools, prohibited large gatherings, introduced curfews and restricted movement to and from large cities to protect their populations from the threat of COVID-19 virus.¹ While important from a public health perspective, such measures will have multiple consequences. As in many countries, the poorest households are likely to be affected disproportionately. Where governments have limited means to provide economic support and social safety nets, the challenges they face are likely to be exacerbated.

So, what can we learn from past pandemics in the region about how children are likely to be affected? With a view to understanding these risks and identifying what can be done to address them, we look to earlier pandemics, notably Ebola, to understand how children were affected, and explore how applicable these findings might be to cocoa-growing communities.

1. Economic pressure and reduced ability for families to cope

While work in agriculture remains essential to ensure that basic needs can be met and disruptions to food supply have been limited so far, the FAO is warning of [a looming food crisis](#), unless measures are taken fast to protect the most vulnerable, including small scale farmers. The World Bank warns that the [Coronavirus will push Sub-Saharan Africa into recession](#), increasing pressure on government budgets, and their spending on essential services and social protection. At a household level, farmer illness, higher food prices, lack of access to school feeding for children, and [possible disruptions to the supply of fertilisers and pesticides](#) would all place increasing pressure on farmer incomes. According to reviews of the impact of the Ebola crisis, [quarantines had a disproportionate impact on the poor and elderly](#), hindering their access to food and basic services and causing [longer-term adverse impacts on food security and livelihoods](#).

2. Likely rises in child labour

A forthcoming literature review by ICI shows that when household incomes decrease, child labour tends to increase. One example from Côte d'Ivoire showed that a 10% fall in income, due to a drop in cocoa price, led to a [5 percentage point increase in child labour](#). During the Ebola crisis in Sierra Leone, child labour increased as [children were required to supplement family incomes](#), with children expected to work more due to school closures. Analysis of data from ICI's Child Labour Monitoring and Remediation Systems confirms this, showing that even under ordinary circumstances, child labour rates are up to 13 percentage points higher in the school holidays (when schools are closed) than during term time. Illness or death of a family member as a result of epidemics required some children to take over the role of a

¹ For more information, see: [Communiqué du Conseil National de Sécurité en Côte d'Ivoire, 16 March 2020](#) and [Covid-19: Ghana goes on partial lockdown](#) APA Accra, 28 March 2020.

main breadwinner. ILO research has found a close link between child labour and the loss of a parent, with one study showing that [orphans of HIV/AIDS are twice as likely to work as other children](#). Children interviewed in Sierra Leone reported of increased participation in work during the Ebola crisis, including incidences of [hazardous work and transactional sex](#).

3. Challenges accessing education and continuing learning

[An estimated 1,848 learning hours per child were lost](#) due to school closures in Guinea, Liberia and Sierra Leone during the Ebola crisis. In the joint [Children's Ebola Recovery Assessment](#), school closure was the top concern raised by children in Sierra Leone. Children reported fears of forgetting what they had learned, or being unable to return to school, since they would be too old to do so by the time schools reopened. Although lessons were broadcast via radio and television, they were [considered "a poor substitute for schools"](#). [Many children struggled to access remote learning opportunities](#), especially in rural communities where electricity was unavailable. Limited access to pens, paper and textbooks made it challenging for some children to study at home. Once schools reopened, household income deficits left many families unable to provide for their children's education, among other essential needs, according to [a joint assessment of Ebola impacts in Liberia](#).

4. Increases in other child protection risks

[Quarantine and school closures have been shown to exacerbate other child protection risks](#). Broadly speaking, there is a [strong evidence base linking economic stress to higher prevalence of violence against women and children](#). Ebola caused reported increases in [violence against children \(including instances of sexual violence\)](#), [psychosocial distress](#), [teenage pregnancy](#), and [early marriage](#). Such risks are exacerbated by increased exposure to perpetrators in situations of quarantine or confinement, as well as lack of access to social support networks through schools. As demographics change as a result of a crisis, there is evidence that [women and girls are especially vulnerable to exploitative relationships](#), especially those facing economic vulnerability. Increased pressure on healthcare and social services can also [limit access to support services when violence occurs](#). Children who lost relatives to Ebola were especially vulnerable to these risks.

5. Family separation, stigmatisation and secondary effects

The 2014-2016 [Ebola outbreak caused more than 30,000 children to lose one or both parents](#). Due to fear surrounding the virus, [many children faced stigma](#), in some cases causing communities or members of their extended families to reject them. This served to further separate families and cut children off from social support networks. Ebola has also had far-reaching secondary effects on children's protection and development, including missed education, [limited access to preventative healthcare](#), [mental health problems and distress](#). Other secondary effects were less visible: in Liberia, [up to 70,000 births went unregistered during the Ebola outbreak](#), requiring a huge catch up programme in the aftermath so that children could receive official documentation and access essential services that require them. In Côte d'Ivoire, many children already struggle to access birth certificates, preventing them from continuing their studies beyond primary school and [increasing their vulnerability to child labour](#).

While it is too early to tell how exactly COVID-19 will affect cocoa-growing communities in West Africa, the findings above suggest children and their families will face a range of inter-related risks, which are likely to have negative consequences for child protection.

Relevant lessons from past responses include:

- The need for a **comprehensive government-led emergency response that builds on existing coordination structures**, to ensure that government, civil society, UN and industry actors work effectively in partnership

- **Proactive engagement with communities** to effectively share information on prevention, promote trust in authorities and combat stigmatisation
- **Integration of child protection as a central part of the response including specific efforts to ensure access to education and avoid increases in harmful child labour**
- **Provision of direct support to households to weather the economic consequences** of the virus, meet immediate food needs, and reduce the use of negative coping strategies

As the cocoa sector adapts to the evolving situation, these lessons from past pandemics should inform the way we act. All stakeholders will need to plan and deliver in a context of severe operational restrictions. It will take partnership, innovation and creativity to find the best ways of delivering support, while ensuring adequate precautions and prevention.
