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LIVING THE PANDEMIC AS A NEWBORN, ADOLESCENT AND YOUTH

Assessment of the impact of COVID-19 on Children and Women in Kosovo*

December 2020

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The assessment was commissioned by United Nations Children's Fund (UNICEF) and conducted by DOTS. The content and recommendations of this report do not necessarily reflect the opinion of the UNICEF

December 2020

**All references to Kosovo should be understood in the context of United Nations Security Council Resolution 1244 (1999)*

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EXECUTIVE SUMMARY

The COVID-19 pandemic has put entire societies at risk. Measures that have been implemented to contain the spread of the virus, including nationwide lockdowns and school closures, have caused major disruptions to children's lives. This, coupled with the wider social and economic impact of the pandemic, will have a significant impact on children's right to health and wellbeing, education, safety, and protection. The harmful effects of this pandemic are expected to be most damaging for children in the poorest and most disadvantaged and vulnerable communities. With even the most developed countries struggling to cope with the situation, for Kosovo, the impacts of the pandemic on children could prove to substantially undermine the wellbeing and have a long-lasting impact.

The Assessment of COVID-19 Impacts on Children and Women in Kosovo, conducted by DOTS during September and October 2020 and supported by UNICEF Kosovo, aims to generate evidence on how the COVID-19 pandemic and measures implemented by Kosovo institutions to mitigate it are impacting children's health, nutrition, learning, well-being, and protection, and identify children's and their families' needs during these times.

The objective of this study is to assess the impact of COVID-19 on children in Kosovo, with a particular focus on three priority areas – young children and their parents, youth, and children with disabilities. This study and particularly the recommendations that follow it, aim to provide UNICEF and other relevant stakeholders in Kosovo with the needed evidence to design informed and effective prevention and response actions towards mitigating and minimizing COVID-19's consequences on children's and women's lives.

This assessment is mainly based on qualitative data collected through interviews and focus group discussions with key informants at both the local and national level, focusing on three main target groups: (1) Young children, and their parents; (2) Adolescents and youth; and, (3) Children with disabilities. Literature review was also used to sketch out the scope of impact and outreach activities delivered to target populations.

The main findings of this assessment can be summarized as follows.

Young children, and their parents

- COVID-19 is challenging the provision of quality health services to newborns and mothers, with mothers reporting feeling reluctant and scared to visit healthcare facilities for non-emergent health issues.
- As home visits under the Universal Progressive Home Visiting Program are carried out virtually, the quality of healthcare services provided to new mothers and newborns virtually remains questionable.
- COVID-19 disrupted and delayed routine immunization services, exposing more children to risk of vaccine-preventable diseases and health complications.
- Disruption to family income, especially for poorer families, is likely to prevent families from providing their children with the nutrition they need, which is particularly alarming for children under the age of two, who need a diversified diet for optimum health, growth, and development.
- Many children in Kosovo will miss out on quality early childhood education, which is essential in building a foundation upon which every aspect of a child's development relies.

Adolescents and Youth

- Unequal distance learning access amid COVID-19, with an estimation of 9,070 out of a total of 308,491 (roughly 3%) of public primary and secondary school students in Kosovo unable to participate in online learning due to lack of access to technology, will cause many adolescents and youth to experience significant setbacks in their education.
- COVID-19 will potentially increase school drop-out rates among adolescents and youth, particularly for those living in vulnerable situations, who lack access to distance learning and may be forced to work in order to help their families meet their basic needs.
- Adolescents and youth in Kosovo are at high risk of lasting psychological distress due to the COVID-19 pandemic, with long-lasting quarantine, inability to socialize or play outside with friends, fear of getting infected, and boredom, being just some of the stressors adding to their feelings of anxiety and worry.

Children with disabilities

- The burden of accessing healthcare services amid COVID-19 is especially unique for children with disabilities, who due to the suspension of non-emergent and elective healthcare services and closure of rehabilitation centers from March - June, were at high risk of missing out on essential healthcare.
- The provision of remote therapeutic services has proved challenging for children who need intensive one-on-one guidance, with the inability to access regular in-person therapy potentially exerting significant and long-lasting effects, potentially leading to regressive behaviors.
- Amid COVID-19, low quality distance learning is particularly an issue for children with disabilities as distance learning is not designed with children with disabilities in mind, with the complex educational needs of some children having remained completely unaddressed.

Child poverty and protection

- As households experience income and job losses due to COVID-19, many children are at risk of being pushed into poverty (or further into extreme poverty), threatening children's access to essential goods and services including food, hygiene products, quality healthcare, and medicine.
- Increased poverty amid COVID-19 is likely to force many families and children, particularly of vulnerable communities, to adopt more extreme forms of survival including child labor, early marriage, and sexual exploitation, the consequences of which are staggering.

The closure of day care centers due to COVID-19 might have put some women at risk of being unable to continue work, leading to increased poverty.

- As social protection systems in Kosovo are limited in coverage and not prepared for large-scale economic shocks such as COVID-19, many families in need might be at risk of missing out on essential social protection.
- COVID-19 has exacerbated violence, abuse, and exploitation towards children and women in Kosovo, while institutions that are supposed to protect children and women from domestic violence, many weak and underfunded to begin with, are now straining to respond to the increased demand. The pandemic is resulting in significant challenges for Kosovo's foster care systems, particularly in weakening the ability of centers for social work to respond to child protection and foster care needs, as they already lack adequate professional, technical, and financial capacities.
- COVID-19 contributes to an exacerbation of existing gender-based inequalities in Kosovo, as women's jobs are more vulnerable to this crisis than men's and as the virus significantly increases the burden of unpaid care, falling disproportionately on women and girls.
- COVID-19 increases children's exposure to risks arising from the unsafe and excessive use of the internet, including exposure to potentially harmful content, cyberbullying, online sexual abuse, and exposure to various privacy risks.


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INTRODUCTION AND BACKGROUND

Children are not the face of this pandemic. However, they risk being among its biggest victims, as children's lives are nonetheless being changed in profound ways. Separation or loss in their own families as a result of COVID-19 may cause children to experience long-lasting trauma and grief; disruption of healthcare services may significantly impact child survival, projecting a potential increase on preventable child deaths or diseases; school closures may increase the learning gap between children from wealthier households who were able to continue distance learning and those from poorer households falling behind; lack of play, socialization and peer interaction may significantly affect psychosocial wellbeing and development of children and adolescents; reduced household income may push more children into poverty, and can result in them being at a higher risk of violence, including child labor and child marriage. The most marginalized and deprived children are hit the hardest, as existing inequalities are further exacerbated amid COVID-19. These implications, coupled with the wider social and economic impact of the pandemic, will have a significant impact on children's right to health, education and protection.

OVERALL OBJECTIVE

The overall objective of this assessment study is to assess the socio-economic impacts of COVID-19 on children and women in Kosovo, with a particular focus on the most vulnerable. The findings generated from this report aim to enable UNICEF and other relevant stakeholders to design informed prevention and response actions towards mitigating and minimizing COVID-19's impact on children and women in Kosovo. We trust that this study and particularly the recommendations that follow it, will provide useful in consolidating and coordinating responses across Kosovo's institutions and other organizations, and to find synergies for effective and timely impact. Without urgent socio-economic responses, suffering will escalate, jeopardizing children's lives and livelihoods for years to come.

METHODOLOGY

The Assessment is mainly based on qualitative data collected through in-depth interviews and focus group discussions with key informants at both the local and national level, including service providers, relevant stakeholders, and target groups: 1. Young children, and their parents; 2. Adolescents and youth, and 3. Children with disabilities. Interviews and focus group discussions were organized via remote means of communication throughout September 2020, whereas data analysis and reporting ensued in October 2020.

Qualitative data were collected through a series of in-depth interview and focus group guidelines, developed to capture the key themes relevant for this assignment. Interviews and focus group discussions aimed to determine the access to and quality of services provided to children and women in Kosovo amid COVID-19, their limitations, as well as target populations' local conditions and needs, knowledge, attitudes and practices in light of the pandemic situation. The detailed information on data collection and target groups is provided in the **Annex 1**.

This assessment also adapted a detailed literature review, researching pertinent documents and publications which were used to evaluate the scope of restrictive measures and outstanding challenges faced by the target populations amid the COVID-19 situation. Literature review was used to sketch out the scope of impact and outreach activities delivered to target populations.

CHAPTER 1:
NATIONAL CONTEXT AND RESPONSE TO THE COVID-19 PANDEMIC

The COVID-19 pandemic has put entire societies at risk. The most marginalized and deprived children have been hit the hardest, and existing inequalities have been exacerbated. Measures that have been implemented to contain the spread of the virus, including nationwide lockdowns and school closures, have caused major disruptions to children's lives. This, coupled with the wider social and economic impact of the pandemic, will have a significant impact on children's right to health, education and protection.

With even the most developed countries struggling to cope with the situation, for Kosovo, the impacts of the pandemic could prove catastrophic and long-lasting. As households lose income, more children are at risk of falling into poverty or going deeper into poverty. The pressure that the pandemic has placed on Kosovo's healthcare system and children's access to quality health services, along with potentially reduced access to essential nutrition and heightened psycho-social burdening, will cause serious implications on children's health and wellbeing. The disruption to children's education along with the inability of attending distance learning will cause many children to drop out of school, putting them at heightened risk of child labor, early marriage and other forms of exploitation and abuse. Moreover, as families turn to negative coping mechanisms to deal with insecurities and stressors, the use of violence, particularly against girls and women, is likely to increase.

The first two cases of COVID-19 in Kosovo were registered on March 13th, 2020. Since then, the total number of confirmed cases has reached 39,596 with 25,001 reported recoveries and 1,016 deaths (as of November 30th). According to Johns Hopkins University, Kosovo is ranked in the 30th place with a mortality rate of 55.60 deaths per 100K inhabitants. This is a dramatic increase from the beginning of May, when the mortality rate per 100K inhabitants was only 0.65.

Having one of the weakest healthcare systems in the region as well as one of the lowest levels of health expenditures in Europe with a government budget of 240 million (2019), Kosovo is struggling to meet the required health standards to urgently and effectively prevent and control outbreaks. The COVID-19 pandemic is, however, much more than a health crisis: it is affecting the society and the economy at their core. As the crisis continues to unravel, it will lead to devastating social, economic and political impacts, particularly for the most vulnerable. The timeline of measures undertaken in response to COVID-19 pandemic is provided in Annex 2.

Health Policy Responses to COVID-19

On March 16th, only three days after the first COVID-19 cases were recorded, the Kosovo Government declared a public health state of emergency, establishing national coordinating mechanisms to enforce COVID-19 preventive and protective measures. On March 16th, the Ministry of Health also suspended all non-emergent, elective services in all public and private health institutions, with all staff and wards concentrated on providing COVID-19 and emergency treatments. That said, many wards were closed, while all healthcare professionals were majorly concentrated in providing screening and treatments to COVID-19 patients. In some municipalities, healthcare professionals also provided home healthcare services to COVID-19 patients. In response to the high number of healthcare personnel infections (with 9.25 % of total COVID-19 infected persons in Kosovo being healthcare workers; 2,051 out

of 22,163 infections as of November 4th)[1] - the Ministry of Health employed an additional 200 healthcare professionals nationwide. Moreover, due to the high volume of work, the government approved bonus payments of 300 EUR to all public health personnel and on-site workers for a period of two months (April-May 2020) - amounting to a total of EUR 15 million.[2] A Manual for COVID-19 Prevention and Control[3] was issued in June, based on the recommendations of WHO, containing guidelines on protection and preventive measures at workplaces, shopping malls, gastronomy, as well as polling station guidelines.

Additionally, the Assembly of Kosovo adopted the Law on Preventing and Combating COVID-19 Pandemics in Kosovo,[4] officially effective from August 25th, guiding the legal basis for Kosovo state institutions to effectively combat and prevent COVID-19. The law authorizes competent Kosovo authorities to, among other things, impose fines ranging from 35 EUR to 2,000 EUR for non-compliance with different COVID-19 containment measures.[5]

Public health response measures to mitigate the pandemic have centered on social distancing and quarantine policies, some of which still remain in place (e.g. mask wearing in public places is mandatory). The Kosovo institutions, in collaboration with international organizations, undertook a series of measures in order to ensure that families in need and particularly families of Roma, Ashkali and Egyptian communities receive essential sanitary and hygiene products.

In line with the prevention measures for COVID-19 outbreak, the Ministry of Health temporarily halted the home visits provided as part of the Universal Progressive Home Visiting Program (UPHV) for pregnant women and children under age of 3 years. While the home visits are suspended, nurses continue to offer help and assistance to mothers via virtual communication means (i.e. phone or video calls, messaging apps, social media platforms, etc.). The UPHV program provides home-based services throughout Kosovo, as an approach to improve the health and well-being of children and help build a stronger trust and bond between nurses and the community. Home visits are particularly helpful in reaching mothers of vulnerable communities who would have otherwise foregone healthcare services.

The Ministry of Health utilized and continues to utilize a variety of communication channels including social media, websites, TV, mobile apps, and radio to disseminate COVID-19 risk communication, ensuring that gender sensitive and age-appropriate child protection messaging is integrated. It also launched the https://kosova.health/ website, containing the latest information on the spread of the COVID-19 virus. Through this website, citizens could also fill out a self-evaluation survey to see if they were showing any COVID-19 symptoms. Understanding citizens' knowledge, attitudes and practices regarding COVID-19 is crucial to preventing it and controlling it. However, no data is yet available regarding the accessibility to information for COVID-19 and the preferred channels for accessing such information.

The Ministry of Health in cooperation with the Department of Psychology of University of Prishtina, issued a free of charge phone therapy and counselling line through which volunteer psychologists offer psychological services to all citizens who feel

1 UNKT COVID-19 Update: November 6th, 2020
2 KPGM: Kosovo COVID-19 - Emergency Fiscal Measures Package
3 Qeveria e Kosovës: Manual për mbrojtje nga përhapja e virusit COVID-19
4 Ligji nr. 07/l-006 për parandalimin dhe luftimin e pandemisë covid-19 në territorin e republikës së kosovës
5 Prishtina Insight: Testing capacities still low despite licensing of private labs

psychologically overburdened or stressed about the COVID-19 situation. Moreover, the Department of Psychology together with the Municipality of Prizren launched a virtual platform,[6] through which citizens can attend online therapy sessions designed to help reduce anxiety, stress, negative thinking, and depression as well as talk or chat with one of the psychologists.

Education Policy Responses to COVID-19

Even though children are clinically less affected by COVID-19 than adults, they are at most risk of experiencing damaging consequences for years to come. Following the first recorded cases of COVID-19 in Kosovo on March 13th, all education institutions were closed as a means of mitigating the spread of the virus. This meant that a total of 345,540 pupils attending schools as per 2019/2020 academic year data[7] have been affected by the lockdown and school closures. Considering, however, that a child's right to quality and inclusive education does not end if schools are closed, alternative distance learning programs were swiftly developed by the Ministry of Education and Science (MES) so that children can continue their learning:

- Early childhood education platform - The online learning platform for children age 0 to 6 years
- E-learning platform - The foremost online learning platform, entailing video lessons, which were also broadcasted daily on the national television "RTK"
- E-scholar learning platform - The online learning platform for pupils of grades 1-9
- Inclusive Distance learning platform - The online learning platform for children with disabilities and special needs.

The distance learning platforms integrate video lectures, resources, games and various activities in support of the educational process. All platforms, with the exception of the Inclusive Education platform are available in four languages: Albanian, Serbian, Turkish, and Bosnian (including Romani language for the ECD Digital Platform). Moreover, classes for grades 1-9 were broadcasted daily on the national television "Radio Television of Kosovo (RTK)", until the end of the school year at the end of June. Since mid-March, the Ministry of Education has made more than 500 of lessons available to 1-9 graders through its E-learning platform and TV broadcasts, also uploaded on a popular video transmission platform.[8] In addition to distance learning platforms and TV-based instructions, teachers and students used other applications and resources for educational purposes including but not limited to Viber, Zoom, WhatsApp, Google Classrooms and other social media platforms.

Additionally, MES postponed both the National Achievement Exam (for 9th graders) and the State Matura Exam (taken by senior high school students), held on August 20th and August 29th, respectively.

Reopening of schools amid COVID-19: After being closed for a period of six months, schools in Kosovo reopened on September 14th, under a three-stage plan that combines in-person and distance learning systems. In-class learning will be conducted according to the presented scenarios and the level of risk, with Task Forces of municipalities and

6 https://shendetimendor.uni-pr.edu/
7 Kosovo Agency of Statistics: Education Statistics in Kosovo 2019/2020
8 https://www.youtube.com/channel/UCAV5EiFcsQ9QWmfRel2yS5Q/playlists

schools having to decide which scenario is most appropriate to implement. Should the situation with COVID-19 deteriorate, the Ministry of Education will stop all in-class education and shift towards utilizing distance learning platforms. In addition, as part of the Back to School campaign, schools were supported with distribution of prevention and protection materials for teachers and students and hygienic kits for schools.

Child and Women Protection Policy Responses to COVID-19

The impacts of COVID-19 on women and children must be central to any COVID-19 response plan. Kosovo institutions were not prepared for the ways the new public health measures issued amid COVID-19 would create opportunities for abusers to terrorize their victims. Kosovo Women's Network (KWN) reported finding "no evidence that the Kosovo institutions have conducted any gender impact assessment, regardless of the fact that the under the Law on Gender Equality, Kosovo institutions should conduct ex-ante gender impact assessments to inform all policies and actions, towards preventing and eliminating gender discrimination."[9] The Kosovo Police issued several appeals asking both victims and witnesses of domestic abuse to report these cases by calling 192 and 080019999 or by visiting the nearest police station. These reporting mechanisms, however, were in place even before the pandemic started. No new domestic violence reporting mechanisms were introduced by the Kosovo institutions during COVID-19.

According to Kosovo Police Reports, a total of 1,338 reports of domestic violence were issued only in the first half of year 2020. [10] Whereas a total of 648 domestic violence cases were reported from January to March 2020 (161 in January, 151 in February, 167 in March, and 169 in April), 690 domestic violence cases were reported only between May and June.[11] In response to this increase in domestic violence cases amid lockdown the Ministry of Health in cooperation with the Ministry of Justice in Kosovo, opened a temporary safe space to shelter survivors of domestic and gender-based violence.[12] After spending two-weeks in the quarantined temporary shelter, survivors were then referred to and placed in Kosovo government-funded shelters. The temporary shelter was managed in adherence to the national health and quarantine management protocol and in compliance with standard operating procedures for protection from domestic violence.

Social Protection Policy Responses to COVID-19

On March 30, 2020, the Kosovo institutions approved an emergency fiscal package13 to financially support taxpayers, employees, and businesses amid the outbreak of COVID-19. The package amounts to a total of 180 million Euros and aims to neutralize COVID-19's adverse effects in the economy and livelihoods. Out of a total of 15 measures included in the emergency fiscal package, the following respond directly to social protection and household income, thus potentially affecting the wellbeing of children and women:

9 Kosovo Women's Network: Addressing COVID-19 from a Gender Perspective, Recommendations to the Government of Kosovo (2020)
10 UNKT Brief, September 25th 2020
11 Evropa e Lirë: Dhuna në Familje.
Retrieved from [https://www.evropaelire.org/a/dhuna-ne-familje-izolimi-/30561213.html]
12 UN Women: Women confront pandemic-related violence against women across Europe and Central Asia
13 Kosovo Prime Minister's Office: Approval of Emergency Fiscal Package

No.	Description of measure	Amount
1	Double payment of the amount of the social scheme for all beneficiaries of social schemes for April and May. This amount includes the payment made for the month of March.	€ 7,650,000
2	Additional payment in the amount of thirty (30) Euros per month for all beneficiaries of social and pension schemes who receive a monthly payment in the amount of less than one hundred Euros, for the month of April, May and June, provided that they are beneficiaries of only the scheme; as well as the return to the beneficiary lists of beneficiaries whose rights have not been renewed due to non-appearance or non-evaluation in the period January-March 2020.	€ 13,000,000
3	Financial support for companies (including NGOs, religious communities and various entities) that are in financial difficulties as a result of the decline in activity due to the emergency public health situation, including: a) Coverage of monthly salary expenses of employees in the amount of 170 Euros for April and May b) Subsidy of rent up to 50% of the value of rent for small and medium enterprises, for April and May c) Coverage of the amount of pension contributions for salaries in relation to measures envisaged in this decision for April and May	€ 61,000,000
6	Provide a hazard payment of 300 Euros for field workers and who are directly exposed to the risk of infection in their work (not the entire staff of the institution): Medical staff (doctors and nurses), Kosovo Police officers, officers of the Correctional Service, officers (firefighters) of the Emergency Management Agency, personnel (military officers) of the KSF, workers working in Quarantine - Students' Centre of Prishtina, officials (inspectors) of the Labor Inspectorate, officials (inspectors) of the Tax Administration of Kosovo, Officials (customs) of Kosovo Customs, officials (inspectors) of the Market Inspector's Office, officials (inspectors) of the Market Inspectorate, officials (inspectors) of relevant municipal inspectorates, officials of the Institute of Occupational Medicine, for the month of April and May.	€ 15,000,000
7	Salary bonus of 100 Euros for employees of grocery stores, bakeries and pharmacies for April and May.	€ 3,000,000
8	Payment of monthly assistance in the amount of 130 Euros for citizens who lost their jobs due to the emergency public health situation, for April, May and June.	€ 4,000,00
9	Supporting initiatives and projects aimed at improving the lives of non-majority communities in the Republic of Kosovo, which have been hit hardest by the public health emergency situation.	€ 2,000,000
10	Financial liquidity support will be extended to: 1) microenterprises and self-employed at the amount of EUR 10 thousand for a maximum period of 24 months and 2) Commercial companies/authorized companies that provide basic services (similar to those of public enterprises).	€ 15,000,000
14	Monthly salaries coverage of EUR 130 will be awarded for the first two months to any new hired employee during the COVID-19 situation with a defined term contract of at least one year.	€ 6,000,000
15	Payment of monthly assistance in the amount of 130 citizens with dire social conditions, declared as unemployed in the competent institution, who are not beneficiaries of any monthly income from the Kosovo Budget for April, May and June.	€ 3,000,000

Even though the emergency fiscal package envisioned the doubling of social assistance for certain vulnerable categories (measure no.1), the coverage period is certainly very short (March, April, and May) and therefore not sufficiently helpful, particularly for those living in extreme poverty. As social assistance rates in Kosovo have already consistently failed to meet the costs of basic needs identified in the consumer price index, with the increase of needs and costs amid the pandemic, the small-amount support initiatives provided to social assistance beneficiaries under the emergency fiscal package render quite meagre.[14] The Law on Economic Recovery was drafted in July[15] and shall remain in force until the end of 2021. The draft law envisions more measures to support Kosovo's economic recovery after experiencing significant COVID-19 implications. The Law has not yet passed however, as Kosovo leading political parties lack consensus to agree on law's content.

14 Kosovo Women's Network: Addressing COVID-19 From a Gender Perspective
15 Kosovo Government: Draft Law on Economic Recovery (2020)

CHAPTER 2:
YOUNGER CHILDREN AND THEIR PARENTS

The early years of a child's life are fundamentally important. This is the time in the life cycle when the foundation that shapes children's future health, happiness, growth, development and learning achievement at school, in the family and community is laid. While the available data shows continuing improvement in child survival and development, especially in infant mortality, the areas of neonatal and maternal mortality remain challenging, indicating issues with the quality of maternal, neonatal and child health services. Newborns in Kosovo are increasingly surviving, but they are not always developing and reaching their full potential because of a number of risks in their environments. While most children are born healthy, many face breakdowns in the continuum of care. Moreover, there are also challenges with the availability of and access to Early Childhood Education, inclusive education and equitable access to services, opportunities and social outcomes.[16] The disruption of essential services for children due to COVID-19 may however significantly impact child survival, lack of monitoring of child development and care-seeking for preventative interventions towards acute disease and injuries.

Newborns and Mothers

COVID-19 is challenging the provision of quality health services to newborns and mothers. To date, there is no scientific evidence about the increased susceptibility of pregnant women to COVID-19. On the other hand, new research findings suggest that pregnant or recently pregnant women with COVID-19 are more likely to give birth prematurely, albeit without casualties.[17] Safe pregnancy and childbirth amid COVID-19 depends heavily on functioning health systems and strict adherence to infection precautions. A healthy start to life is critical to ensuring that the foundations of a child's physical, mental, and emotional development are laid. Despite the general de-prioritization of non-COVID-19 related healthcare services, reproductive and gynecological health services and quality maternal healthcare during COVID-19 in Kosovo remained largely intact, mitigating the effects of the crisis on young children. Healthcare professionals confirmed that the Gynecological Clinic within the University Clinical Center of Kosovo as well as gynecological departments within regional hospitals were extra careful on ensuring adherence to all infection prevention and control measures and providing quality services to mothers and their newborns. In order to ensure optimal care, during the period between March and June, most pregnant women approaching labor were referred to the Gynecological Clinic in Prishtina. After this period, pregnant women approaching labor were no longer referred to the Gynecological Clinic; they continued to receive healthcare services in other local hospitals.

"A special labor ward was created within the Gynecological clinic in Prishtina, which is still being utilized, allocated for COVID-infected pregnant women and their newborns. The ward has 20 beds, a delivery room, operating room, and an intensive and semi-intensive care unit." ***(Healthcare professional)***

Additionally, expectant mothers confirmed that, despite being scared of being exposed to the virus, they continue to follow their schedule of prenatal visits while taking all necessary precautions, such as wearing a mask and practicing physical dis-

16 UNICEF: Analysis of the Situation of Children and Women in Kosovo (2019)
17 WHO: New research helps to increase understanding of the impact of COVID-19 for pregnant women and their babies

tancing when outside. However, one must not ignore the fact that not all expectant mothers have the same level of access to information on how to stay protected from COVID-19.

"What if something important would go unchecked with my baby? I could not risk letting that happen. So, I went to the doctor but ensured I was protecting myself from COVID-19" ***(Mother)***

In terms of COVID-19 testing, health professionals confirmed that pregnant women are not prioritized in getting tested for COVID-19; only people with symptoms are. There are no official statistics on pregnant women infected with COVID-19, however according to media reports this number is estimated to be around 60 (as of 8 November 2020).[18] Lack of effective inter-institutional communication on COVID-19 results makes data obtainment and situation monitoring more challenging.

"A week ago, a newborn tested positive with COVID-19. We still don't know if the mother is positive or not; the Infectious Disease Clinic is lagging behind in providing timely COVID-19 results and reports." ***(Ministry of Health representative)***

Interviewed mothers reported that even during the lockdown and currently as home visits remain suspended amid COVID-19, they relied heavily on the support and help from the Universal Progressive Home Visiting Program (UPHV). To prevent COVID-19 outbreak, the Ministry of Health temporarily halted all home visits provided under UPHV. Nevertheless, nurses continue to offer help and assistance to mothers via virtual communication means (i.e. phone or video calls, messaging apps, social media platforms, etc.).

"We regularly held virtual meetings with nurses, program coordinators, as well as directors of family health centers to mobilize and prepare staff to deliver virtual assistance to mothers and newborns under the Home Visiting Program"
(UPHV Coordinator)

"In exceptional cases only, with family's insisting, we also visit mothers at homes. We wear protective gear and adhere to health protocols to ensure everyone's safety."
(UPHV Nurse)

Interviewed representatives from the Ministry of Health reported that a total of 11,556 home visits (both in-person and virtual) were made from January to August. More specifically, before the pandemic, 1,712 families were reached in January, 1,913 in February, and 651 until March 13th. Since April, home visits were conducted virtually, i.e. via phone or video calls between nurses and parents, usually mothers. 397 virtual visits were made in April, 1,526 in May, 1,661 in June, 1,892 in July, and 1,804 in August. Interviewed beneficiaries of the UPHV were very satisfied with the support received by the nurses, albeit virtually. They stated that, through virtual communication, nurses provide both prenatal and postnatal health care advice to them. Of particular importance was the information and support they offered on breastfeeding, hygienic practices, and routine assessments for identifying, managing, and referring to any kind of health complication, nutritional support, managing vaccinations, etc. Nurses also responded to all questions and concerns mothers had with relation to COVID-19, while also tending to their emotional wellbeing during this time.

18 Syri Kosova: 63 Shtatzëna u infektuan me COVID-19 në Kosovë

"I called the nurse at 10:30 pm. Even though she was off her work schedule she came to my house nevertheless and attended to my needs. If it weren't for her, I wouldn't be able to continue breastfeeding my baby." ***(Mother)***

"I remained in touch with the nurse regularly. We video-chatted from time to time so she could see my son and observe how he's physically developing and moving." ***(Mother)***

"I was pregnant when the pandemic started. I was very stressed because I was scared of giving birth amid the coronavirus pandemic. The conversation with the nurses helped me calm down as I got more informed on the associated risks and how to stay protected." ***(Mother)***

According to UPHV nurses, one of the main challenges of providing virtual home visits is the inability to physically examine children and mothers. Under such circumstances, their health was examined by asking the mother a couple of questions to determine their health condition, practices, and behaviors. Sometimes nurses also video chatted with the mother so they could visually observe the baby's mobility and behavior in certain situations and positions. Although telemedicine can be very effective for detecting minor conditions, nurses generally are not comfortable with the quality of an examination conducted over a video chat. That said, virtual visits impede nurses' ability to detect more serious health conditions and problems.

"You only get to know what the mother wants you to know. The reality is usually hidden from us. Mothers rarely openly discuss the energy at home, their family relationships, which are key factors to ensuring a child grows up safe and healthy." ***(UPHV Nurse)***

A similar project by Red Cross aims to increase awareness among duty bearers and families by providing Family Health Education sessions. Amid COVID-19, they also had to switch towards virtual communication means, through which 800 mothers, fathers, families and caregivers were reached to increase knowledge for healthy seeking behavior issues affecting child health, nutrition, well-being, including early stimulation and development. In addition, via online sessions, they provided information to parents on how to stay protected and safe, they provided psycho-social services, ensured children are healthy, and respond to parents' requests and needs.

Continuum of Care

COVID-19's indirect impacts could threaten children's health and wellbeing more than the disease itself: While evidence so far indicates that children are not at a high risk of suffering COVID-19's direct health impacts, the indirect effects on a child's health and wellbeing stemming from strained health systems, household income loss, and disruptions to immunization services may cause serious implications. Children from the poorest and most vulnerable communities in Kosovo might face significant indirect impacts from the pandemic, which risk putting their wellbeing and their futures at long-lasting risk.

COVID-19 disrupted and delayed routine immunization services. Routine immunizations are one of the worst affected services globally, with at least 68 countries that experienced disruptions. Amid COVID-19, immunization services in Kosovo of-

ficially resumed in May, after being temporarily halted for nearly two months (March and April), excluding vaccines given to newborns at birth in hospitals. Healthcare workers stated that in order to prevent COVID-19 infections, they adhered to providing vaccines outside family health centers, in outside-placed tents. The majority of healthcare workers stated that they were very pleased with the number of parents who went to family health centers to resume their children's vaccinations after temporary delays.

"Parents in our municipality were very willing and determined to resume their children's vaccinations. Despite the COVID-19 situation and movement restrictions in place, all of them bring their kids in for vaccinations." ***(Healthcare worker)***

"My son's vaccine got delayed for about a month due to the pandemic. I got a call from the family health center at my municipality notifying me that vaccinations had resumed and that I could bring my son to get his vaccine." ***(Mother)***

Despite the fact that interviews with key informants confirmed that the majority of parents vaccinated their children once immunization services resumed, the fact that some children are yet not vaccinated, or risk being left unvaccinated following the pandemic, must not be ignored. This may particularly be the case with families living in rural areas as well as Roma, Ashkali and Egyptian communities, who have a considerably low immunization coverage rate, with only 30% of children aged 24-35 months fully immunized (in comparison to 79% of the general population).[19]

Interviews with UPHV nurses revealed that before the pandemic, through regular home visits, they identified a number of children who were missing out on multiple vaccines, whom they then helped get vaccinated (either by providing transportation to health clinics or by vaccinating them at home). All parents' beneficiaries of the home-visiting program get timely notifications on due vaccines. Due to the temporary halting of home visits amid COVID-19 however, many unvaccinated children may remain unidentified. This means that more children can be at risk for vaccine-preventable diseases and their complications.

'Our work goes beyond that of helping mothers and their newborns. During home visits, we also examine the health of other children in the family. In this way we were able to identify many unvaccinated children, especially in the Roma, Ashkali and Egyptian communities. We provide our support to those families by making sure that their children get immunized. This was harder to do once home visits stopped and we had to switch to providing services online. ***(Healthcare professional)***

Delayed or substantial decrease in providing care as a result of increasing access barriers to healthcare can potentially cause long-term adverse effects to children's health and wellbeing. As of March 16th, all non-emergent, elective health services in both public and private health institutions in Kosovo were suspended, with the decision being revoked on June 1st. The general de-prioritization of non-COVID-19 related healthcare services, with many wards and health facilities being temporarily closed in order to accommodate COVID-19 patients, made it impossible for some families to access needed public healthcare services. The implications of such foregone or delayed care can be particularly alarming for children with chronic

19 Multiple Indicator Cluster Survey 2013-2014 (Republic of Kosovo) / Multiple Indicator Cluster Survey 2013-2014 (Roma, Ashkali, and Egyptian communities)

health conditions or disabilities whose regular medical check-ups and interventions got disrupted. Gradually, with the relaxation of COVID-19 restriction measures, specialized healthcare services became available, mostly in private clinics. However, for many poor and marginalized families, private healthcare is out of reach.

"Children, especially those of younger ages, depend on their parents for meeting their basic needs. If a child's parents fall ill, her basic needs could be impacted. The impacts are even larger if her parents are unable to get the treatment they need." ***(Healthcare professional)***

"COVID-19 is not the only health threat people are facing. Many children are unable to receive their usual regular health and rehabilitation services, critical to their wellbeing and development." ***(Healthcare professional)***

Additionally, one of families' biggest concerns with regards to accessing healthcare services during the COVID-19 pandemic in Kosovo is fear of contracting the virus. Even though the majority of parents interviewed reported that both their and their children's health was and continues to remain stable and that they did not need medical treatment so far, all of them admitted a general unease about the idea of visiting health facilities amid a pandemic, particularly public ones. New mothers, in particular, reported feeling reluctant to visit health facilities for non-urgent health matters due to fear of COVID-19 infection even after the easy of measures.

"My daughter was born during the pandemic. Even though I knew I was supposed to regularly weigh and measure her, I did not take her to the family health center due to fear of getting infected. Once COVID-19 cases started declining in July, I took her for a check-up." ***(Parent)***

"We try to be careful: we wear a mask every time we go out, we keep our distance from other people, use hand sanitizer. Perhaps that's why my children managed to not get sick so far. I would be a bit scared to take them to the hospital if I have to." ***(Parent)***

Pediatricians see this as a disturbing and worrying trend. Skipping medical check-ups, particularly when a child might have really needed one, can have long-term impact on children's health, especially for newborns and young children. Maintaining the trust of the population in the capacity of the public healthcare professional to safely provide services is key to prevent foregone and delayed care.

"People are saying: Don't go to the hospital, you'll catch COVID there. I've actually heard that a few times." ***(Healthcare professional)***

Moreover, disruption to family income is likely to prevent families from providing their children with the nutrition they need. The impacts of COVID-19 on poverty in Kosovo are likely to be substantial. World Bank projections suggest that the pandemic will cause 57,000 - 148,000 people to become poor, thus pushing the poverty rate to go up by 4-10%. The Rapid Impact Assessment Survey by UNDP, UN Women, and UNFPA showed that due to the pandemic, 56% of 202 interviewed Kosovo businesses had to close, whereas about half (49%) of 1,412 interviewed households experienced declining incomes.[20] Poorer households are more likely to

20 UNDP: Rapid Socio-economic Impact Assessment of COVID-19 in Kosovo

face financial barriers in accessing dairy products. Inability to access quality nutrition particularly threatens vulnerable groups such as pregnant and lactating mothers, as well as children under the age of two, who need a diversified diet for optimum health, growth, and development.

Early Childhood Education

There is a lack of parental awareness regarding the importance of early learning and early childhood development. According to the MICS, the percentage of children aged 36–59 months attending an organized early childhood education program is 14.[21] That is an immensely low percentage compared to an EU average of over 80%. Moreover, development-focused family practices are poor, leading to low child development indexes particularly for the cognitive dimension (literacy and numeracy): only 18% of children in Kosovo have a sufficient level of literacy and numeracy, with even lower indexes in Roma, Ashkali and Egyptian populations, where only 9% of children have a sufficient literacy and numeracy. It is estimated that half of children under the age of 5 in Kosovo have no children's books at home, and only 42 percent of mothers and 6 percent of fathers engage in any learning activities with children at home.[22] Closure of early childhood education programmes (officially from March – September), due to COVID-19 pandemic, may further increase the learning gap between children from wealthier households who are able to continue distance learning through digital means and those from poorer households falling behind.

Many children will miss out on quality early childhood education. Early childhood education is essential in building a foundation upon which every aspect of a child's development relies. The pandemic is putting that foundation under serious threat, not only by suspended normal early childhood activities such as attending preschool, interacting with friends, and playing outdoors, but also disrupting the consequent socio-emotional benefits that accrue from children's engagement in these experiences. Failure to provide quality early childhood education limits children's futures by denying them opportunities to reach their full potential. It also limits the futures of countries, robbing them of the human capital needed to reduce inequalities and promote peaceful, prosperous societies.

To ensure continuity in learning and increase parental involvement in learning activities with children, the MES together with UNICEF Kosovo and Save the Children designed and launched the first digital Early Childhood Development and Education platform for children aged 0-6 years in Kosovo. Reaching over 2.7 million viewers and 220,000 unique users from April - November 2020[23], the platform was launched in a record time and provides an opportunity for engagement of all young children and parents including those not enrolled in pre-school institutions. Around 900 educators across Kosovo have actively instructed parents and have reviewed activities performed by children using the platform.[24] More than 1,600 educators and teachers in preschool and pre-primary institutions received virtual training from ECD field experts, focusing on learning through play and digital competencies to use the platform.

21 World Bank Group: Republic of Kosovo Systematic Country Diagnostic (2017)
22 UNICEF: Crisis to opportunity for children
23 Ministry of Education and Science data from the platform Distance Education - edukimihershem.rks-gov.net
24 UNICEF Kosovo: Kosovo case - Crisis to opportunity for children - boosting early childhood education and parental involvement in times of COVID-19

"Before the opening of kindergartens and preschools, we encouraged parents to use the ECD platform daily. When parents completed their daily activity plan with their children, they notified our educators by sending them photos of completed tasks. Educators kept weekly and monthly reports of how many children were actually participating in online activities and sent them to parents, this in a way motivated those who were not as active to become more active." ***(Preschool teacher)***

Parents reported having had little to no difficulty accessing and using the online preschool education platform, with 74% of parents finding the platform easy to use, while 67% reported that the time they spent engaging with their children in activities increased significantly.[25] Parents also received a lot of help from preschool teachers, who remained in close touch with parents and regularly offered assistance and monitoring of their children's progress.

"Preschool educators are very responsive to our needs. They regularly send us tips, resources, guidance, and activities, which help us a lot in taking an active role in our children's early childhood education process." ***(Parent)***

Interviewed preschool staff and NGO representatives working with young children said that they were generally very satisfied with the level of parental engagement in both using the ECD platform and in engaging in extracurricular activities with their children. They also added that they were very pleased with parents' willingness to stay in touch with educators, regularly informing them on their children's educational progress. However, they also mentioned cases where parents lacked motivation and willingness to stay engaged.

"When preschools were closed, we sent each family an activity plan, which was tailored according to children's age and needs, aiming to motivate families to become more directly engaged with their children via various activities. We were very happy with the parental engagement rate." ***(Preschool representative)***

"In day care centers and preschools where parents are more active, engagement methods with their children were more diverse, creative, and interesting. Parents were willing to do extra activities, not just the ones given to them by the educators. This is particularly important for enhancing a child's creativity and imagination." ***(Preschool management staff)***

Interviewees pointed out that the majority of preschool teachers lacked adequate training required to conduct quality online teaching. Without an online-adapted curriculum in place, their work became even more challenging as they had to use the same monthly work plans, they would have used during in-class teaching. Most of the activities included in the already existing curriculum, however, were impossible to be done remotely, individually, or within home conditions. Some educators also reported struggling with having to individually assess the work of a large number of children, particularly due to reduced staff as many preschool teachers were infected with Covid-19.

25 Ibid.

"One of the obstacles in ensuring quality distance preschool education is the fact that preschool teachers keep using the already-existing curriculum designed for in-class teaching and therefore not suitable for virtual learning." ***(Preschool management staff)***

Lockdown and restrictive movement measures have left many Kosovo parents struggling to balance childcare and paid employment, with a disproportionate burden placed on women who, on average, spend more time on childcare and housework than men. In most families, women's responsibilities now include more food preparation, cleaning and childcare than ever before, with those who are economically vulnerable facing the greatest challenges. According to a 2018 gender analysis conducted by KWN, childcare is the main contributor to hindering women's access to the labor market.[26] With schools and daycare closed, women are disproportionately shouldering the burdens of unpaid care and household labor. The majority of working mothers reported living with their husband's parents, having their mother-in-law or even sister-in-law look after their children while they were at work. For some women however, the closure of day-care centers and schools for a 6-month period means that they will be unable to reenter the labor force because they cannot leave their children unattended.

"Both me and my partner continue to work during the pandemic. When the day-care centers were closed, my mother had to look after my child. This was overburdening for her, since she also takes care of my brother's children." ***(Parent)***

As the virus began to slightly subside in May, some preschool centers began to reopen. Reopened preschools reported facing challenges in having to adapt to a new reality, with all preschool teachers and staff playing an important role in creating safe learning environments, adjusting curricula and assessments, and ensuring adherence to hygiene practices and protection of children's wellbeing.

"The early educational childhood services provided for children aged 3-6 years amid COVID-19 remain the same, but the way in which they are now carried out has changed. We have employed a variety of protective measures: we measure children's body temperature each morning, we put them to sleep in a head to toe position, they wait in line while entering the kitchen, we regularly clean and disinfect all areas, and we no longer allow parents to enter the building. This requires more work and effort by all staff members." ***(Preschool teacher)***

Preschool management staff fear that as preschool pupils' attendance increases starting from October, the effective implementation of protective measures in preschool facilities will become more challenging.

"We need to work harder on educating children on the importance of keeping a safe physical distance with each-other and on washing their hands more often. We also have to carefully tell them that they should refrain from hugging their teachers, while ensuring that they do not take this the wrong way." ***(Day care center staff)***

To facilitate the utilization of ECD platform and promote parental engagement in activities with children, UNICEF donated ECD packages which included paper-based learning materials, books, puzzles, and educational games and toys for children age 0-6 years from marginalized groups.

26 Kosovo Women's Network: Kosovo Gender Analysis (2018).

"Efforts to respond to the crisis are rather scattered, uncoordinated, and deficient. Technology packs do not reach every single child in need of access to digital devices. Our NGO identified children living in vulnerable families who did not benefit from such donations, most from the Roma, Ashkali and Egyptian community, and distributed learning packs, including self-study materials, books, notebooks, pens and colors, games, etc." ***(NGO representative)***

Similarly, preschool institutions also distributed paper-based materials to children whose parents could not access the online learning platform, with preschool educators preparing materials as per existing curriculum.

"When preschools were closed due to lockdown, we provided parents with didactic materials including planned lessons, drawing and coloring sheets, paper craft activity supplies, games, etc. When children completed an activity, e.g. finished a drawing, parents sent us a photo of it, usually via Viber, and in this way, we kept track of children's progress". ***(Preschool teacher)***

However, even when children in these situations were able to get hold of printed materials, they are unlikely to be in a position to continue to learn to a satisfactory and high-quality level. This is particularly the case for young children, whose home-learning.

"mostly consists of routine drawing and coloring activities, activities that do not adequately address their early childhood developmental needs". ***(Preschool teacher)***

Parents, now teachers, may not have the skills, or may not be able to allocate adequate time to assist their children's learning. With children currently not able to study in classrooms, the importance of learning at home is amplified and the task of supporting children's learning has fallen on parents at a much larger rate. This is a significant burden, particularly for those who are also teleworking and those with limited schooling themselves. A heavily common obstacle for children - as reported by NGOs - was that they needed help but parents were in most cases unprepared to do so. This is particularly devastating for young children (aged 0-6) considering how critical parental engagement is for the youngest learners during this time of adversity.

"Most parents lack the knowledge and skills to help their children with school-related assignments. In most cases, parents have to spend some time reading and studying before feeling comfortable enough to explain it to their children." ***(Teacher)***

This was the case for children living in poorer households. Besides a higher likelihood of access to technology to support learning online, wealthier parents are more likely to have the knowledge and skills needed to support children with home learning. Research demonstrates that parents or caregivers play a significant role in guiding their children using technology as a means of learning.[27] This is particularly the case for children needing help from adults around them about how to use the technology, including how to use it safely, as well as the motivation to keep learning.

"Children of low-income households and young children of parents with lower levels of education are definitely hit hardest. Not only do they not have access to technology, but with their parents not able to read and write. They are also more likely to face difficulties accessing the online platform and receiving the needed help in learning."
(Ministry of Education and Science representative)

27 Save the Children International: Save Our Education (2020)

"This is a time where parents have to be actively engaged in their children's learning process, particularly for younger children. This is a challenge for most parents, not due to lack of will, but in most cases due to lack of free time, as well as necessary skills and knowledge to do so." ***(Parent)***

Most teachers reported that they were generally satisfied with parental engagement and support in children's distance learning. Albanian and urban parents reported higher involvement, with the learning environment in these households being assessed as more stimulating. By contrast, parents of lower socio-economic status are expected to be less involved in school-related activities. Some teachers expressed their concerns regarding parents' honesty with this regard, stating that parents may be hiding the reality in order to protect themselves.

"Parents say that they regularly keep track of their children's educational progress and provide help and support with their assignments. Of course, they would say this to us. But we can never be sure if that's the truth." ***(Teacher)***

To provide parents and children with the option of following daily activities in the Distance Learning platform, during September, UNICEF compiled and distributed 5,000 early childhood development kits for children of ages 0-6 years old. Above 70% of packages were distributed to children in the social assistance scheme, thus prioritizing marginalized and vulnerable children with limited access to early learning opportunities. The kits are equipped with didactic materials aligned with the developmental activities presented in the ECD digital platform, with the objective to enhance engagement of children and parents in daily play-based and learning activities to follow on developmental steps of their children during the early childhood period.


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CHAPTER 3:
ADOLESCENTS AND YOUTH

The Kosovar population is among the youngest in Europe - around 42% of the population are under 25 years old - with an average age of 30.5 years compared to 43.1 for the 28 EU countries.[28] As the ongoing situation with the COVID-19 pandemic unravels, adolescents and youth are among those feeling the impact across many aspects of their lives. Evidence on the impact of the pandemic on adolescents remains at an early stage, though experience suggests that times of crisis and social upheaval can leave children and adolescents vulnerable to violations of their rights.[29] School closures and the absence of play, socialization and peer interaction may significantly affect the psychosocial wellbeing and development of adolescents. They can especially suffer when deprived of social interaction while their overexposure to mass and social media may further increase their risk of exploration and bullying. The impacts of COVID-19 are, and will continue to be, felt most harshly by adolescents and young people already living in difficult and/or disadvantaged circumstances.

Access to and Quality of Education

Despite the efforts of Kosovo institutions, school closures will widen already large learning inequalities as the most marginalized children, adolescents and youth continue to miss out on education, often due to a lack of internet access and technology. In addition, lack of technological capacity or knowledge among teachers and parents contributes to the disruption of education, especially for children with disabilities, who need support from caregivers to access platforms and for online education activities. When children lose out on education, it has an impact on a myriad of different elements of their life – including their future earning potential. As students from poorer backgrounds are more likely to experience challenges in accessing distance learning tools during the pandemic, this learning gap is set to increase, entrenching inequalities between groups of children, with a larger share of students falling into functional illiteracy.[30] Despite some improvements in recent years, Kosovo suffers from a lack of sufficient and inclusive school infrastructure, poor quality education provision and poor teacher performance, poor learning outcomes among students, and social norms preventing the establishment of inclusive education. As per the latest World Bank Human Capital Index, children in Kosovo can expect to complete 12.8 years of pre-primary, primary, and secondary school by age 18.[31] However, when years of schooling are adjusted for quality of learning, this is only equivalent to 7.7 years, which means there is a learning gap of 5.1 years. COVID-19 will likely further exacerbate such challenges faced by Kosovo's education system.

Access to distance learning amid COVID-19 is far from equal. Deprivation from learning opportunities amid COVID-19 requires utilization of alternative means such as digital learning platforms, technological tools, books, and direct engagement with their children in order to support learning at home. Yet, access to technology and materials needed to continue learning while schools are closed is desperately unequal. Wealthier families are generally better able to maintain their children's learning, as they are more likely to afford technology, internet connectivity, books, as well as the knowledge and time to assist their children's learning. Unfortunately, that is not the case for every child. While there is no official statistics on the number of children who were not able to attend distance learning, media reports estimated that around 9,070

28 CIA World Factbook
29 UNICEF: Adolescents and COVID-19
30 World Bank: The Economic and Social Impact of COVID-19 (2020)
31 World Bank: If Kosovo Acts Now, Its Children Born Today Could Be Healthier, Wealthier, More Productive

students attending public education in Kosovo did not participate in online learning due to lack of access to technology.[32] According to the Rapid Impact Assessment Survey by UN Women, UNDP and UNFPA, 96% of respondents claimed that their children were able to attend distance learning and 4% claimed the children were not able to attend distance learning.[33]

The Kosovo population has widespread access to television signal, which helps guarantee at least a minimum level of equity in accessing educational services even for most vulnerable communities. However, this medium is not sufficient for quality instruction. By design, TV-based instruction and pre-recorded televised lessons are not interactive (making them therefore less attractive) and fail to adequately adapt to learners' individualized needs. That said, online learning is potentially more effective than televised. National data reveal that in 2018, the majority of households in Kosovo (93.2%) had internet connectivity at home with 84.9% mainly using mobile phones for internet connectivity, followed by laptops (22.5%), computers (18.1%), and tablets (9.6%). [34] The same study conducted in 2017 revealed that 61.3% of households had access to computers, while 38.7% had no access to other types of technological devices, excluding smartphones.[35] Inequality in accessing online education is stark among Roma, Ashkali and Egyptian youth, with clear gender-based disadvantages: only 75% of young women from Roma, Ashkali and Egyptian communities use computers and 76% have used the Internet, compared to 90% of Roma, Ashkali and Egyptian men. Moreover, most households in Kosovo are not equipped with high speed internet to sustain requirements for online learning.[36] That said, the type of technology available, how advanced it is, whether it needs constant internet access, and troubleshooting issues all affect a child's experience of educational technology. Those who have the latest advanced technology will benefit much more than those with older or no technology.

"I had problems with poor internet connection. I was getting disconnected from Zoom meetings quite frequently. I had difficulties listening to what the teachers were saying as the sound kept being disrupted. I had to ask my friends to share their notes with me after the class was over." ***(Pupil)***

Despite the seemingly large number of households with access to both the internet and some sort of technological device, the number of children without access to online education is alarming. All interviewees and focus group discussion participants agreed that the current situation has exacerbated social inequalities when it comes to access to education, fearing that such digital divide is to further separate poor children, children with disabilities, and those in rural areas from children in wealthier households.

"I work as a teacher at a resource center for children with special needs. One of the biggest challenges we face is that most of the children cannot access distance learning due to lack of technological devices. As a person with disabilities, I felt really bad because I saw how a lot of members of my community felt detached from the real world." ***(Teacher)***

32 Klan Kosova: Mbi 9000 nxënës nuk ndoqën mësimin online
33 UNDP: Rapid Socio-economic Impact Assessment of COVID-19 in Kosovo
34 Kosovo Agency of Statistics Results of the Survey on Use of Information and Communication Technology 2018
35 Kosovo Agency of Statistics: Results of the Survey on Use of Information and Communication Technology, 2017
36 World Bank: The Economic and Social Impact of COVID-19 (2020)

Even for households with access to online learning, barriers impacting student learning at home were numerous. For example, the majority of parents reported struggling most with children having to share a single device with more than one other family member (i.e. sibling, cousin, etc.). This was a quite challenging issue particularly in cases when two or more children had classes scheduled at the same time. According to NGO interviewees, this led to the adoption of negative coping mechanisms, as parents had to choose which child's education to prioritize – in most cases it was that of older children, with younger ones being particularly discriminated against, likely to fall even further behind in lessons.

"I am doing a teacher's job. Online learning simply does not work for children with special needs." ***(Parent)***

Donations of tablets and other technological devices, as well as internet connectivity packages for disadvantaged households were numerous, particularly by national and municipal institutions, international organizations operating in Kosovo, local NGOs, as well as individuals. Interviewees highlighted that such donations were immensely helpful in providing the opportunity for poor children, and particularly those of Roma, Ashkali and Egyptian communities, to attend distance learning.

Additionally, with Kosovo's electricity system being outdated, inadequate and undependable, power outages constitute another common problem faced by children, hindering their access to online learning.[37] Interviewees reported that this is most often the case for children living in rural areas, where power outages are more frequent than in rural ones, mainly due to weaker electricity infrastructure.

"The whole village was left without power for two days after transmission lines were damaged by heavy winds and rainfall. We could not attend lectures for three days, missing out on lectures. We submitted our assignments and homework later, once the power was back on". ***(Pupil)***

Even in new circumstances with COVID-19, many adolescents and youth remained engaged in several of UNICEF's informal education activities, including UPSHIFT, PONDER and PODIUM. UPSHIFT combines some of the leading approaches to youth and adolescent development, social innovation, and entrepreneurship, to empower marginalized youth and adolescents to become social innovators and entrepreneurs by providing experiential learning in understanding community challenges and designing and building impactful solutions in the form of products or services. PONDER improves the life skills of adolescents by fostering media literacy and critical approaches to information, whereas PODIUM teaches adolescents and youth of the most marginalized groups in Kosovo how to advocate for the needs and rights of their communities. In light of COVID-19, UPSHIFT, PONDER and PODIUM workshops were held virtually. Interviews with youth participants reveal high satisfaction rates particularly with the content of informal educational programs.

37 World Bank: Energy in Kosovo, Brief

"After the three-day workshop ended, the competition began. Each group had to think of an idea of how to best keep youth engaged during COVID-19 in Kosovo. Our group decided to open an Instagram account, where we created and posted video tutorials of activities that can be done at home. I had a lot of fun since we made our own tutorials, we did not just take them from the internet. And I was very happy because our idea won!" ***(PODIUM workshop participant)***

"Even though I could not attend the activities in-person due to COVID-19 restrictions in place, I was a part of a project supported by UNICEF called "Youth Solutions for COVID-19", where I was engaged in developing an app for businesses to help them facilitate their time during the pandemic." ***(Student)***

COVID-19 will potentially increase school drop-out rates. Although the rate of school dropouts in Kosovo has significantly decreased in the last years from 0.48% in 2011 to 0.12% in 2014[38], the risk of school dropout still represents a fundamental challenge for the Kosovo education system, particularly in light of COVID-19 impacts. One in five children (21%) from Roma, Ashkali and Egyptian communities of lower secondary school age are out of school with only two thirds (65%) attending lower secondary school or higher[39]. Additionally, youth from Roma, Ashkali and Egyptian communities are at a significant disadvantage compared to other youth regarding their levels educational attainment: 73% women and 87% of men from the three communities are literate, compared to a national figure of 98%. For vulnerable communities, the COVID-19 emergency comes on top of an already existing learning crisis. Kosovo's most vulnerable children may not have been in school in the first place – and if they were, they now risk the chance of not making it back. The longer schools are closed, the less likely the most vulnerable children will be to return to school. This is particularly the case for children with disabilities who already struggle to access inclusive education opportunities, as well as children pushed further into poverty as a result of COVID-19's economic strain faced by vulnerable families, who may be forced to work in order to help their families meet their basic needs. Even for those children who do return to school, many will have experienced significant setbacks in their learning and wellbeing. Such learning losses threaten to extend beyond this generation.

COVID-19 might negatively impact the quality of education. Undertaken as emergency responses, remote learning measures may not be as effective as classroom instruction. Achieving that would require a few preconditions: internet access and connectivity, quality online content tailored to the specific needs of children, qualified teachers skilled in online instruction, parental support for remote and online instruction, and motivated students.

In addition to limited connectivity (covered above), the availability and quality of digital content in Kosovo is questionable. PISA 2018 data suggest that only 22% of school principals deem an effective online learning support platform available.[40] As such, most students do not attend schools which offer an effective online learning support platform. The sudden transition to remote online instruction during the pandemic forced the Kosovo education system to scramble for a next best alternative, such as recorded lessons and distribution of electronic learning materials by email, Viber, Facebook Messenger, etc. It is not clear whether such materials were designed for

38 MEST: Kosovo Education Strategy Plan (2017-2021)
39 Multiple Indicator Cluster Survey 2013-2014 (Roma, Ashkali, and Egyptian communities)
40 World Bank: The Economic and Social Impact of COVID-19 (2020)

use in remote online instruction or had to be improvised. Moreover, there has not been enough emphasis on monitoring whether or not students were actually engaging with digital lessons. The quality of digital content and its effectiveness in general is specifically challenging for children with disabilities.

"It is very hard to keep children focused on a 45-minute online session - most of them suffer from short attention span and other learning disabilities which puts the effectiveness of online learning under serious threat." ***(NGO representative)***

Some adolescents also reported having trouble concentrating on online lectures, which ultimately impacted their overall performance. Most of them stated that that was because they had their phones next to them, which they often used even during lectures. Phones are not allowed during in-class instruction. Many also mentioned lacking a home environment conducive to learning, including lack of an adequate and quiet study space.

"I prefer the school atmosphere and in-class instruction. Seeing and interacting with professors and classmates helps me concentrate and focus better on my studies. It's also very exhausting for me to stare at the screen for hours, which can potentially lead to eye and posture problems." ***(Student)***

However, even when adolescents and youth attended online classes and submitted their assignments, many were not receiving quality education. How much students actually learned or enjoyed learning during COVID-19 remains questionable. On one hand, some adolescents and youth reported a decreased motivation to study online and an increased laziness. They felt that they were learning very little or nothing at all.

"To be honest, although I did attend online classes, I was not listening to what the professor was saying." ***(Student)***

"The motivation is not the same when you compare online classes vs. face-to-face classes. I wasn't able to perfectly deliver what was expected of me and this of course had an impact on my grades." ***(Student)***

On the other hand, only a small minority of adolescents stated that they enjoyed learning online. Parents reported that this new way of learning induced an excitement and motivation for them to study harder. They also mentioned how distance learning was beneficial in that it helped them strengthen their technological, computer, and digital communication skills.

"My daughter loves technology. During school closure, she was very happy to use the online platform for learning. She made sure she attended all classes and submitted all assignments on time. The fact that she was now doing all this virtually made the whole learning process fun and exciting." ***(Parent)***

Similarly, results from the UNICEF's Back to School U-report poll conducted in October 2020[41], show that out of 597 survey respondents aged 15-19 years, the majority (61%) stated that they felt happy about schools reopening in September, while 25% stated that they have mixed feelings.

41 Kosovo Back to School U-Report, results published on Oct.5th 2020

Teachers in Kosovo may not be prepared to support effective and high-quality online learning. A competent and skilled teacher is one of the most important components in every education system. In times of emergency and crisis, such as the COVID-19 pandemic, the critical role that teachers play is amplified. Yet in these circumstances' teachers face the most challenging teaching conditions, receive limited support, and may face personal difficulties coping with the crisis.

Although no specific data are available, there are clear indications that teachers in Kosovo continue to mainly use traditional teaching methods (i.e. utilizing memorization and recitation techniques), and lack adequate training and skills in adopting more up-to-date teaching methodologies that are essential in virtual teaching.[42] Although teachers should use ICT in the classroom-type teaching and learning process, the pandemic revealed that their ICT skills related to planning, implementation, and assessment were insufficient for the introduction of distance learning. Most of the schools did not consider teachers adequately prepared to use digital devices. This reinforces the need for rapid investment in such skills among teaching staff. Generally, the majority of interviewed students agreed that their teachers' ICT skills were lacking.

"I was not satisfied with the way online lessons were prepared and delivered. I attend classes based on the Serbian educational system. Our teachers were not prepared for that kind of teaching (online teaching), as most are incompetent in using technology. But I had books at home, I studied by myself and did not really rely on them". ***(Student)***

"I am not satisfied with our teachers' performance in distance teaching because unfortunately a lot of them had a lazy attitude during lectures which also impacted our energy as students. Also most of the students themselves weren't really interested in lectures and did not take them seriously. They were happily waiting for the session to end." ***(Student)***

"Sometimes the professors logged in late to the online learning platform, so our lectures started late, and this caused a chain-reaction with other following classes having to start late as well." ***(Pupil)***

The educational system in Kosovo shifted to distance learning fairly quickly. In order to respond to these changes, the Kosovo government is increasingly focusing on building capacity for their schools and teachers so that they also can quickly adapt to the newly imposed circumstances. Interviewees from the Ministry of Education stated that, in cooperation with schools and municipal education directorates, they are actively engaged in identifying needed areas of improvement in relation to teachers' skills and in taking necessary measures to overcome them.

"So far, we have organized several capacity-building trainings for teachers in order to advance their virtual teaching skills and in using distance learning platforms, with hopes of effectively strengthening the quality of online teaching."
(Ministry of Education representative)

42 World Bank: Western Balkans Regular Economic Report No.17 Spring 2020; The Economic and Social Impact of COVID-19 – Education (p.5 – Teachers' Digital Skills)

Mental Health and Psycho-social Wellbeing

Adolescents and youth are at risk of lasting psychological distress due to the COVID-19 pandemic. Globally, it is estimated that one in four children having experienced lockdown, social restrictions and school closures due to the pandemic, is dealing with worry and anxiety, while many are at risk of experiencing long-term psychological distress. In general, parents reported not having noticed major changes in their children's psycho-social wellbeing. However, the impact the pandemic might have on children's mental wellbeing should not be underestimated. Adolescents and youth living in stable homes and healthy environments are likely to cope better. But those living in poverty, experiencing anxiety on a regular basis, violence at home, bullying, and vulnerable children in general, might severely suffer from mental health issues. Some can also experience cyberbullying which can affect their mental health. If left unaddressed, these could lead to depression and other long-lasting mental health concerns.

Interviews with psychologists and healthcare professionals reported that generally, school-age children and adolescents and youth in particular are more prone to facing mental health consequences amid COVID-19, while pre-school aged children are generally calmer. Long-lasting quarantine, being unable to socialize or play outside with friends, fear of getting infected, boredom, are just some of the stressors adding to their feelings of anxiety and worry.

"I wasn't mentally stable at all. My parents were adapting well, but not me. I thought I was stronger but I wasn't. I am proud of myself because I fought it the right way. I talked to my family and sister and that helped me get better." ***(Student)***

Interviews with adolescents and youth revealed that the majority of them experienced increasing feelings of fear, anxiety, and loneliness, especially during lockdown. One of their biggest psycho-social concerns was fear of them and their family members getting infected with COVID-19. In order to cope with this, many talked to their parents and friends about how they were feeling and engaged in different leisure activities to keep their mind off from negative thinking.

"My main concern is my family's health. My parents and brothers were working even during lockdown. I was worried that they were going to get COVID-19 and die." ***(Student)***

"I feel the need to go out and spend time with my friends and talk to them, but I am also scared of getting infected." ***(Student)***

"I was very stressed in the beginning because everything was so new and unpredictable, I did not know where this was going and how serious it was going to get." ***(Student)***

On the other hand, however, some adolescents and youth mentioned that the change in their routine as a result of lockdown had some positive effects. More specifically, they reported that the pandemic gave them more time to work on themselves, to attain new skills, explore new hobbies and passions, and spend more quality time with their loved one.

"Being isolated and staying at home is not problem for me. As an introvert, that was already a part of my daily life. Now I have more time to write, which is my biggest passion. I managed to finish my first book which will be published soon." ***(Student)***

"I manage to stay away from negative thinking and all the bad news by practicing yoga, meditating, cooking, and crafting". ***(Student)***

Besides adolescents and youth, parents admitted having been psychologically affected by the COVID-19 situation as well. The socio-economic assessment of COVID-19's impact on businesses and households, led by UNDP in collaboration with UN Women and the UN Food and Agriculture Organization highlights that out of 1,412 adult participants surveyed, 56% claimed to have experienced some sort of psychological or emotional distress due to COVID-19 (25% men and 31% women).[43] For many parents, fear of losing their job or inability to receive their monthly social assistance and thus not be able to support their children's basic needs, contributed to increased levels of stress and anxiety. Prolonged financial and personal stress caused by the pandemic can exacerbate mental health disorders in parents, including anxiety, anger, and depression, all of which ultimately have an impact on children's wellbeing as well.

"The beginning of the pandemic was very stressful. The first COVID-19 case was shocking to me. There were moments where I cried a lot and did not want to be in this situation as a new mother". ***(Mother)***

"A lot of people are losing their jobs. I'm scared of losing mine and not being able to put food on the table for my children." ***(Parent)***

"An interesting trend we observed was that families living in cities feel more isolated and anxious, in comparison to those living in rural areas. Spending more time outdoors, either in their yards or nature in general, help them reduce stress during this time." ***(NGO Representative)***

The Ministry of Health in cooperation with the Department of Psychology of University of Prishtina, issued a phone therapy and counselling line[44] through which volunteer psychologists offered free psychological services to all citizens who were feeling overburdened or stressed about the COVID-19 situation. Moreover, the Department of Psychology together with the Municipality of Prizren launched a website,[45] through which citizens attended online therapy sessions designed to help reduce anxiety, stress, negative thinking, and depression and talked or chatted with one of the psychologists.

Additionally, many international organizations and NGOs working particularly with children from marginalized communities, provided psycho-social support to children and their parents via online therapy sessions. To illustrate, in partnership with the Government of Japan and Kosovar Forum of Disability (KDF), UNICEF offered online psychological, educational, and therapeutic support to children with disabilities in Kosovo through online platforms.[46]

"We can tell that parents are stressed. Our psychologist works closely with foster parents and regularly provides advice on how to manage negative thinking and worrying." ***(NGO representative)***

43 UNDP Kosovo - Rapid Socio-Economic impact assessment of COVID-19 in Kosovo
44 https://kosova.health/en/
45 https://shendetimendor.uni-pr.edu/
46 UNICEF: 3,000 children with disabilities are receiving online psychological, educational, and therapeutic support


COLLEGE FOOTBALL

CHAPTER 4:
CHILDREN WITH DISABILITIES

As in many other countries, children with disabilities in Kosovo are particularly vulnerable to stigma, discrimination, marginalization and exclusion, and often feel segregated. Facing daily discrimination in the form of negative social attitudes and lack of adequate policies and legislation, children with disabilities in Kosovo have very limited access to quality health, education and social protection services.[47] COVID-19 has disrupted life in every corner, however, children with pre-existing health conditions and disabilities are disproportionally affected.

Access to and Quality of Healthcare Services

The health of children with disabilities is not fully mainstreamed into the priorities of Kosovo's health care system, with very little to no data on their health situation. Individualized healthcare and physical development plans for children with disabilities are carried out mostly by NGOs, whose work is mainly supported by international donor organizations. However, due to the limited number of staff and funds, NGOs are only able to attend to the health needs of a limited number of children and for a limited number of conditions. Additionally, school enrollment rates for children with disabilities are very low.

The burden of accessing healthcare services amid COVID-19 is especially unique for children with disabilities. Many children with pre-existing health conditions and disabilities require ongoing medical care as well as respite and rehabilitation services. With the suspension of non-emergent and elective healthcare services and closure of rehabilitation centers however, many children with disabilities are at high risk missing out on essential healthcare. Additionally, due to lack of inclusive risk communication, children with difficulties in the domains of hearing, seeing, and cognitive functioning, face barriers in accessing public health information, crucial in mitigating risk and protecting their lives.

"COVID-19 has further highlighted the already-existing and persistent inequalities affecting children with disabilities in Kosovo." ***(Healthcare professional)***

Rehabilitation support to children with disabilities in Kosovo comes mostly from local NGOs and community-based rehabilitation centers (i.e. Down Syndrome Kosova, Handikos, Hendikep, National Association of Autism in Kosovo, Kosovo Association of the Blind, etc.), which offer multi-disciplinary services such as physical therapy, occupational therapy, language and speech therapy, psychological and emotional development, informative and educational sessions to parents, etc. Since the outbreak of COVID-19, however, even this supportive network that helped children with disabilities overcome physical and cognitive challenges has sputtered away. Amid having to temporarily close their centers, NGOs switched to working online while having to rely heavily on parents of children with disabilities to now act as therapists and caregivers as well. Through daily communication sessions, NGOs offered their maximum support to aid parents on these new roles.

"Via regular online information sessions, we provide guidance to parents on how to support their children at home during COVID-19, taking into account the specific needs of each child. We advise them on different areas, e.g. how to talk to them about the pandemic, how to offer a variety of home-based therapies, how to build new routines, how to engage in recreational activities, how to calm them if they feel emotionally and mentally stressed, etc." ***(NGO representative)***

47 UNICEF: Analysis of the Situation of Children and Women in Kosovo (2019)

"In some cases, we also send parents videos of how to conduct therapeutic sessions with their children. Using a child actor, we demonstrate step-by-step techniques (e.g. speech therapy guides) for parents to use." ***(NGO representative)***

"It is hard for children with disabilities to participate in online therapeutic sessions. For some, staying concentrated on a screen for 45 minutes is beyond demanding. So we needed parents to step in and help us make sure their children continue to engage in quality developmental activities." ***(NGO representative)***

Despite stating that parents were very determined and pleased to work with their children, NGO representatives reported that parents felt more worried, depleted and, more often than not, helpless as they tried to learn, through their screens, how to best support their children's therapeutic needs at home. In addition to having to find time for work, family, homeschooling their children, now parents had to also juggle the added responsibility of providing therapies to their children. This is particularly challenging for parents or caregivers who get sick with COVID-19, as they may lack the specialized child-care support needed to isolate from their child. Interviewed parents of children with disabilities stated that this perhaps was the most demanding part of their new role during the pandemic: providing proper care to their children.

"I am now a teacher, a speech therapist, and a psychologist as well. It is terrifying, particularly because I don't know if I am doing a good job, and I want the best for my child." ***(Parent)***

"We have to assist our daughter through all of her therapies — including physical therapy, occupational therapy, speech therapy — none of which we have any formal training to carry out." ***(Parent)***

"It is already very challenging to raise a child with autism spectrum disorder. It is even more challenging to do that in Kosovo, where we have very little to no support by public institutions. We are thankful and grateful to NGOs for continuing to assist us, especially during this hard time." ***(Parent)***

Parents mentioned that despite doing their best to work with their children and engage with their children in therapeutic services, they were concerned about their children not receiving the same quality services as they would have received from trained professionals. Parents can only do so much to replicate all those activities at home and can hardly substitute a number of professional helpers they used to rely on throughout a normal day. Besides lacking the professional skills, some of them also reported struggling with the lack of material needed to carry out certain therapies.

"When rehabilitation centers were closed, I tried to make sure that my son was doing the physical therapy exercises he did at the center, but I could never really replace a professional therapist" ***(Parent)***

"I have to improvise and use the tools I have at home in absence of adequate medical equipment." ***(Parent)***

The provision of remote therapeutic services has proved challenging for children who need intensive one-on-one guidance. Inability to access regular in-person therapy may exert significant and long-lasting effects for these children, poten-

tially leading to regressive behaviors. In other words, due to disruptions in therapeutic services with professional therapists, some children with disabilities risk losing the skills they worked really hard to develop, which can lead to negative health and development outcomes in the long-run. Parents particularly mentioned worrying about their children losing their social skills.

"Continuation of isolation for such a long period of time is not good for them because in a way they get used to staying at home and might then face difficulties going out and engaging in socializing activities with others." ***(Parent)***

"I feel helpless, I am worried about having to watch the effort my child had put in years come undone." ***(Parent)***

"When children with disabilities undergo regular, intensive therapeutic services, you can immediately tell how fast they progress. On the other hand, when such services stop, progress might stagnate as well. However, we did not see any regressive behaviors in none of our child beneficiaries and we definitely owe this to parents for doing amazing work with them at home." ***(NGO representative)***

Despite these issues however, parents reported to be generally very satisfied with the effectiveness of online therapeutic services and especially with the dedication and support shown from NGO staff.

"It is really comforting to know that someone cares about you and your child and wants to help, especially during a time like this." ***(Parent)***

Inclusion of Children with Disabilities in Quality Learning

According to the official data, during the 2018/2019 academic year, only 3,645 children with disabilities were enrolled in formal pre-university education, while 365 attended special needs' schools (resource centers).[48] Schools in Kosovo lack funding to hire assistant-teachers to cover the educational needs of all children with disabilities. While teachers receive some training to educate students with disabilities, they do not have the time to provide quality instruction to them. International organizations and NGOs working to promote inclusive education in Kosovo (such as UNICEF, Save the Children, National Association of Autism of Kosovo, etc.) work to build the capacities of the education system to meet the individualized educational needs of each child. Children with disabilities living in Kosovo continue to be systematically excluded from formal education, resulting mainly from stigmatizing social norms and a lack of disability-friendly school facilities, transportation, equipment, and most importantly, skilled teaching staff and qualified assistants.

Amid COVID-19, low quality distance learning is particularly an issue for children with disabilities as distance learning is not designed with children with disabilities in mind. The quality of digital content and its effectiveness in general is specifically challenging for children with disabilities. Interviewees working with children with disabilities, pointed out that despite a number of initiatives to support children with technology equipment, the complex educational needs of some chil-

48 EU Office in Kosovo: Mid-term Evaluation – Implementation of Kosovo Education Strategic Plan 2017-2021 (2019; p.23)

dren remained completely unaddressed. For children with visual impairments and blindness for example, *"needs for braille machines, didactic equipment, and books with enlarged fonts by NGOs remained unmet."* ***(NGO representative)***

Programmes that only use one delivery mechanism or expect rigid inputs and functional abilities from students exclude children with disabilities. For example, interactive voice/video instruction excludes children with hearing impairments, and self-learning materials (paper-based or on phone or tablet) may be inaccessible to children who need the continuous support of an adult. That said, in the absence of one-on-one help, the burden placed on parents of children with disabilities during COVID-19 is especially unique as it requires them to take both roles, that of parents and caregivers. This clearly risks leaving a toll in children with disabilities' development and educational progress.

"Besides offering them help with accessing the inclusive distance learning platform, we sent parents their child's individual education plan (IEP), with tasks specifically tailored to the child's developmental needs. It became parents' responsibility to manage virtual learning, carry out therapies, observe, and evaluate their child's progress."
(NGO representative)

"Distance learning is more challenging for blind children because they cannot learn how to read and write braille virtually. We had to rely on parents, by first explaining the lesson to them and then having them explain it to their children."
(NGO representative)

"Unable to afford buying each child a device and accommodate their children's individual educational needs, parents often face the challenge of having to prioritize the educational needs of one child over another. This burden often falls upon girls, preschool children, and children with disabilities whose education is considered, by society in general, as less important." ***(Teacher)***


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CHAPTER 5:
CHILD POVERTY AND PROTECTION

Kosovo's population is one of the poorest in Europe. According to the Household Budget Survey (HBS), it is estimated that 18% percent of Kosovo's population lives below the poverty line, with 5.1% of the population living below the extreme poverty line (2017 estimations)[49]. In 2017, the child poverty rate in Kosovo (aged 0-18) was 22.8%, almost 5% higher than that of the general population.[50] Youth unemployment (aged 15-24) in Kosovo remains exceptionally high, at 48.4% in 2019, with women and Roma, Ashkali and Egyptian communities scoring higher rates.[51] The Social Assistance Scheme (SAS) is the main social assistance instrument in Kosovo. It absorbed around 88% of the budget for social assistance in 2017.[52] It is the sole program targeted at poverty reduction in Kosovo and, importantly, the only program in which household income and assets are used to identify beneficiaries. Yet, due to the restrictive eligibility criteria, the assistance leaves more than two thirds of the poor population uncovered, and the low levels of assistance are not enough to bring the household above the national poverty line. [53] Moreover, domestic violence, particularly against children and women remains quite prevalent in Kosovo. According to MICS 2013-14, 61% of children of ages 1-14 years in Kosovo had been subjected to at least one form of psychological or physical punishment by household members during the past month (71% among Roma, Ashkali and Egyptian). Whereas Kosovo has made significant progress in aligning the majority of laws, policies, and strategies for ensuring the protection of children's rights with international standards, the child protection system remains chronically underfunded and severely fragmented at both the central and local level, and lacks a holistic approach to effectively address the protection needs of all children, especially the most marginalized.

Poverty and Social Protection

As households experience income and job losses due to COVID-19, many children are at risk of being pushed into poverty (or further into extreme poverty). The impacts of COVID-19 on poverty in Kosovo are likely to be substantial. World Bank projections suggest that the pandemic will cause 57,000 - 148,000 people to become poor, thus pushing the poverty rate to go up by 4-10%.[54] The Rapid Impact Assessment Survey by UN Women, UNDP and UNFPA showed that due to the pandemic, 56% of businesses in Kosovo had to close, half of households (49%) experienced declining incomes (46% of women and 52% of men), while 8% of respondents lost their jobs.[55] As households incur job and income losses, more children and women, particularly of disadvantages communities, are at risk of getting multidimensionally poor, i.e. to face critical deprivations such as poor health, lack of education, inadequate living standards, disempowerment, poor quality of work, the threat of violence, and living in areas that are environmentally hazardous.[56] Moreover, with the loss or reduction of household income and an increased poverty rate in Kosovo, there may be an increased need or expectation for children to contribute to their families financially by engaging in child labor. Poverty also puts many young girls at heightened risk of early marriage and other forms of exploitation.

49 Kosovo Agency of Statistics: Consumption Poverty in the Republic of Kosovo (2019)
50 Ibid
51 Kosovo Agency of Statistics: Labor Force Survey 2019
52 World Bank: Kosovo Social Assistance Scheme Study Assessment and Reform Options (2019)
53 Embassy of Sweden: Multidimensional poverty analysis Kosovo 2017
54 World Bank: The Economic and Social Impact of COVID-19, Western Balkans Outlook
55 UNDP Kosovo - Rapid Socio-Economic impact assessment of COVID-19 in Kosovo
56 OPHI: Policy, a multidimensional approach

Interviews with staff from the centers for social work reported that the number of applications for the social assistance scheme has visibly increased throughout all municipalities, which can be attributed to the fact that many more people are being pushed into poverty as a result of COVID-19. At the same time, family identification and inspection (social workers have to verify family's conditions before they are enlisted as social assistance beneficiaries') was made harder due to lockdown and movement restrictions, particularly during March and April.

"We have never received more applications for the social assistance scheme. There are many families who are in need of financial help. As the number is likely to increase, we'll need to further expand our program and reach."
(Centre for Social Work Representative)

In order to help poor families meet their basic needs amid COVID-19, municipalities, NGOs, and international organizations distributed care packages (containing food items, personal hygiene products, protective personal equipment, etc.) to families in need. A number of international developmental agencies and national institutions provided immediate support to families in need. Interviews with Red Cross staff revealed that around 200 Red Cross volunteers throughout Kosovo were engaged in delivered around 20,000 packages to families in need. These measures have helped to sustain the incomes of many and minimize initial job losses. However, they provide temporary solutions to only a small set of families' needs, and due to lack of monitoring data, there is no way of knowing whether these packages have reached all those whose livelihoods are affected.

Economic uncertainty and income losses threaten children's access to essential goods and services including food, quality healthcare, and medicine. As families experience decreases in income, many will face difficulties in obtaining goods and services that are essential to their health and wellbeing. According to the UNDP study, more than half of respondents claimed to have had difficulties in accessing a number of basic social and health services.[57] In light of both employment and income changes, 26% reported having difficulties accessing health services for themselves or their family members while 21% of the respondents claimed that they might need to stop seeking healthcare services due to increased income losses affected by the pandemic. 51% of men and 57% of women have had difficulties accessing medical supplies for personal use. Many might not be able to even afford purchasing medicines, the prices of which have reportedly increased due to the pandemic. For vulnerable households having to spend more on medicines this would result in less disposable income for other basic needs such as food and education.

This has the potential of indirectly affecting the health of children, causing them to miss out on potentially essential healthcare services. Delayed or foregone care is particularly risky for younger children and children with disabilities. Moreover, as households are pushed in poverty, they are more likely to face financial barriers in accessing meat, dairy products, grains, fruit and vegetables. Inability to access quality nutrition threatens the risk of vulnerable groups, particularly of younger children, who need a diversified diet for optimum health, growth, and development.

57 Ibid

"My father is the only one working in the family. He works as a farmer so he does not have a regular job. Ever since the pandemic, with lockdown and movement restriction in place, my dad struggles to find work, and we have to rely on savings and family support to meet our basic needs." (Student)

Access to COVID-19 preventive and protective equipment (PPE) is particularly challenging for poor households, which face increased difficulties in obtaining infection-prevention hygiene products. One of the most important ways to prevent the spread of the coronavirus is frequent handwashing with soap and water. But for many children and families, basic water and hygiene facilities remain out of reach. It is estimated that 25% of the poorest households of Roma, Ashkali and Egyptian communities do not have soap or other cleansing agents at home. As COVID-19 is bound to push poor households into a deeper level of poverty, many children will lack access to essential items needed to stay safe amid COVID-19.

Social protection systems in Kosovo are limited in coverage and not prepared for large-scale economic shocks such as COVID-19. With the socio-economic impacts of COVID-19 resulting in millions of households at risk of sliding into poverty, it is essential that the Kosovo government, and non-governmental organizations (NGOs) in humanitarian situations, scale up their social protection programmes. Effective social protection systems are crucial for safeguarding the most deprived and marginalized people. However, the social assistance scheme in Kosovo, due to its restrictive eligibility criteria, leaves more than two thirds of the poor population uncovered, and the low levels of assistance are not enough to bring the household above the national poverty line (monthly allowances range from 50-150 EUR, depending on family size). Moreover, since Kosovo does not have a national unemployment insurance scheme, unemployed people have no social protection whatsoever.

Protection of Children and Women from Violence and Exploitation

COVID-19 exacerbates violence, abuse, and exploitation towards children and women. Globally, violence, particularly towards marginalized communities, tends to increase during crises, and the COVID-19 pandemic has been no exception. Frustration related to health risks, economic losses and uncertainty, lockdowns, restrictions in movement and deprivation, all contribute to an increased violence against children and women. Violence against children and women in Kosovo was already at alarming proportions before the outbreak of COVID-19: the 2013-14 MICS study revealed that 61% children age 1-14 years were subjected to at least one form of psychological or physical punishment by household members during the previous month (71% among Roma, Ashkali and Egyptian communities) and that 24% (40% among Roma, Ashkali and Egyptian communities) had experienced physical punishment. Moreover, 59% of children experienced psychological aggression (69% among Roma, Ashkali and Egyptian communities) while 24% experienced physical punishment (40% among Roma, Ashkali and Egyptian communities). Domestic violence remains of the most prevalent yet relatively hidden and ignored forms of violence against women and girls in Kosovo. According to a 2015 survey conducted by Kosovo Women's Network, 31% of Kosovars (41% of women and 20% of men) said they suffered some form of domestic violence in 2014, including physical, psychological, and/or economic violence.[58] Moreover, 62% of Kosovars (68% of women and 56% of men) reported

58 Kosovo Women's Network: No More Excuses - An Analysis of Attitudes, Incidence, and Institutional Response to Domestic Violence in Kosovo, 2015

having experienced some type of domestic violence in their lifetimes (an increase of 19% in comparison to 2008).[59] As existing inequalities exacerbate and families turn to negative coping mechanisms to deal with insecurities and stressors during COVID-19, the pandemic threatens to further exacerbate the risk of violence against children and women, particularly for girls, poor children, children with disabilities, and children of Roma, Ashkali and Egyptian communities.[60]

"There is an apparent increase in domestic violence cases. Due to the negative impact of isolation and movement restrictions, relationships between parents changed - people feel an emotional and psychological burden created by COVID-19, leading to aggressive and violent behavior as a coping mechanism"
(Center for social work representative)

In addition, lockdowns and limited contact with friends, teachers, and extended family and community members diminish victims' access to support networks and reporting mechanisms, leaving children and women more vulnerable as they remain confined with their abusers.[61] According to Kosovo Police Reports, a total of 1,338 reports of domestic violence were issued only in the first half of year 2020. [62] Whereas a total of 648 domestic violence cases were reported from January to March 2020 (161 in January, 151 in February, 167 in March, and 169 in April), 690 domestic violence cases were reported only between May and June.[63] Such an increase in domestic violence reports, particularly between the months of May and June, may heavily be attributed to the domestic violence increase resulting from COVID-19 as well as to more women generally reporting domestic cases violence.

"Social isolation limits survivors' contact with family members and friends. With childcare systems and schools closed, COVID-19 makes it far more difficult for victims to get help or escape." ***(NGO representative)***

Children who are exposed to violence at home, particularly those in the earliest years of life are denied their right to a safe environment, they may have difficulty learning, and they may exhibit violent, risky or delinquent behavior, or suffer from depression or severe anxiety. [64] Far more must be done to protect these children and to prevent domestic violence from happening in the first place.

COVID-19 causes disruptions to protection services provided to children and women. Institutions that are supposed to protect children and women from domestic violence, many weak and underfunded to begin with, are now straining to respond to the increased demand. Studies of past epidemics and crises show devastating impacts on the mechanisms that ensure children and women protection from all types of violence and abuse: for example, during the 2013 Ebola outbreak in West Africa, "child welfare structures and community mechanisms were weakened, and child protection responses were delayed or otherwise affected." [65] Victims of violence in Kosovo rely heavily on the support and help offered by centers for social work, shelters, and local NGOs, which provide a wide range of services to victims of violence

59 Ibid
60 Save the Children International: Protect a Generation
61 UNICEF: COVID-19 causes disruptions to child protection services in more than 100 countries
62 UNKT Brief, September 25th 2020
63 Evropa e Lirë: Dhuna në Familje.
Retrieved from [https://www.evropaelire.org/a/dhuna-ne-familje-izolimi-/30561213.html]
64 UNICEF: Behind Closed Doors – The Impact of Domestic Violence on Children
65 UNICEF: COVID-19 causes disruptions to child protection services in more than 100 countries

(including counselling and psycho-social therapy, healthcare and medication, legal advice, etc.). As Kosovo adopted prevention and control measures to contain COVID-19 however, many vital violence prevention and response services were suspended or interrupted as a result.

"The increase in requests and need for service delivery is overwhelming for the institution." ***(Centre for social work representative)***

With almost all employees of centers for social work working from home, and some being reluctant to enter shelters for fear of getting infected (particularly in the beginning of the pandemic), very few social workers were available to address cases of domestic violence - a significant problem when responding to cases involving children, as Kosovo Police cannot interview minors without the presence of a Centre for Social Work representative.[66] As for police, they and other members of security forces were, in many instances, less willing to arrest perpetrators of violence, limiting direct engagement. According to UN Women, around 550 women survivors of domestic violence from Kosovo were admitted to shelters during the COVID-19 pandemic.[67] Although Kosovo shelters of victims of violence reported that they were so far able to manage the situation well, they may not have the necessary capacities and funds to cope with a further influx of victims in the upcoming months of the pandemic.

"I have experienced violence before, but it escalated during the pandemic. I was really afraid, so I sought help. The police brought me to the shelter. Here, I feel safe." ***(Mother)***[68]

"For me, this pandemic did not start in March. I was quarantined for almost my whole life. My children witnessed everything and encouraged me to contact the police and the shelter." ***(Mother)***[69]

An additional challenge was the lack of access to adequate psychological treatment and justice services (postponement of court proceedings) for survivors of domestic violence due to isolation measures. Offering a magnitude of services (including counselling and psycho-social therapy, healthcare and medication, legal advice, etc.) shelters play a critical role in ensuring victims' rehabilitation and reintegration. However, due to an influx of survivors, shelters experienced shortages of essential food and hygiene supplies. Amid the operational challenges faced, shelters also struggled with ensuring the safety of their inhabitants - usually consisting of small houses, on average accommodating up to 15 people, shelters grappled with providing the required social distancing and COVID-19 transmission and protective measures. Shelters were able however, to test newcomers on arrival for COVID-19. Moreover, shelters fail to respond to the needs of all categories of victims of violence as boys older than 12, men, and LGBTQI people are not allowed to stay in shelters.[70] According to an OSCE and UNFPA study, around 12% of boys under the age of 18 in Kosovo were sometimes threatened with physical punishment in their home and 4% reported that this behavior would often happen.[71] Men particularly elderly, are also subject to domestic violence - mostly not perpetrated by their spouse, but by other

66 Prishtina Insight: Domestic Violence Shelters Keeping Their Heads Above Water During Pandemic
67 UN Women: Women survivors of violence receive vital support from shelters in Kosovo during the pandemic
68 Ibid
69 Ibid
70 Ibid
71 OSCE Mission in Kosovo and UNFPA, A Men's Perspective on Gender Equality in Kosovo (2018)

family members including fathers, sons and brothers.[72] Inclusion of such categories of victims to response, relief, and recovery efforts is essential in ensuring their safety and protection amid COVID-19.

In response to their strained capacities, municipalities, local NGOs, and international organizations have continuously offered their support to shelters to maintain and adapt critical prevention and response services for children and women affected by violence during COVID-19. In the first week of isolation measures, UN Women received a list of essential needs from all Kosovo shelters and in coordination with other UN agencies, it addressed the needs of shelters and women survivors.[73] The Association of Women in Kosovo Police also distributed hygiene and food packages to all shelters operating in Kosovo. [74] Laptops and tablets were also donated so that children in shelters could follow distance learning classes. In times of crisis, governments must have immediate and long-term measures that protect children from violence, including designating and investing in social service workers as essential, strengthening child helplines and making positive parenting resources available.

COVID-19 may lead to more child labor. With the loss or reduction of household income and an increased poverty rate in Kosovo, there may be an increased need or expectation for children to contribute to their families financially by engaging in work. The latest data from MICS show that in Kosovo, 11% of children age 5 – 17 years were engaged in child labor, with the share being as high as 17% among children living in Roma, Ashkali and Egyptian communities.[75] The case is particularly alarming for boys, with 25.7% being engaged in child labor in comparison to 6.9% of girls (15.6% and 5.4% among Roma, Ashkali and Egyptian communities, respectively).[76] Many children in Kosovo engaged in harmful work experience its worst forms, including forced work, hazardous agriculture work, child trafficking, illicit activities, and involvement in sexual exploitation. The International Labor Organization (ILO) predicts that there may be an increase in child labor for the first time in 20 years; for every 1% increase in poverty, there may be a corresponding 0.7% increase in child labor. [77] COVID-19 is likely to push more boys into hazardous child labor, including trafficking and sexual exploitation, and out of school. For girls, the burden of having to combine school, work and household chores heightens their risk of falling behind, makes them even more vulnerable to poverty and exclusion, and increases school dropouts. That said, child labor in Kosovo may worsen, especially in communities where it has remained resistant to change. The consequences of child labor are staggering: it cuts children off from school and healthcare, it can result in extreme bodily and mental harm, it can lead to sexual or economic exploitation, in this way violating children's fundamental rights and threatening their futures. Kosovo institutions' capacities to identify, report, prevent, and end child labor remain limited. Because Centers for Social Work lack sufficient staff and resources, they are unable to identify and deal with child labor cases, particularly those where hazardous and exploitative work is involved.

72 Ibid
73 Ibid
74 Shoqata e Grave të Policisë së Kosovës: Donacion në strehimoret/shtëpitë e sigurta në tërë teritorin e Republikes së Kosovës
75 Multiple Indicator Cluster Survey 2013-2014 (Republic of Kosovo) / Multiple Indicator Cluster Survey 2013-2014 (Roma, Ashkali, and Egyptian communities)
76 Ibid
77 UNICEF and ILO: COVID-19 may push millions more children into child labor

Exacerbation of Gender-based Inequalities and Family Roles

COVID-19 contributes to an exacerbation of existing economic gender-based inequalities in Kosovo. The impacts of crises are never gender-neutral, and COVID-19 is no exception. In 2019 women's labor force participation stood at 21.1% compared to 59.7% for men. Women's inactivity rate was recorded at 80% compared to 40.3% for men. Less than 13.9% of women were employed (one of the lowest female employment rates in the world) compared to 46.2% of men.[78] Such existing gender-based employment disparities mean that the pandemic-induced poverty surge will also widen the gender poverty gap in Kosovo, i.e. more women are likely to be pushed into poverty than men. Women from vulnerable communities, particularly from Roma, Ashkali and Egyptian communities (employment rate 4% in 2017) will be hit hardest. Women in Kosovo are also overrepresented in many of the sectors hardest hit by COVID-19, such as food service and accommodation, retail, and domestic work. Because of the persistence of gender-based differences in the labor force, women in Kosovo are employed in the lowest-paying sectors, such as health care, education and retail services. In this context, they are at risk of being more exposed to COVID-19 than men. Moreover, as many women in Kosovo are employed in the informal economy (exact data is not available), they face higher exposure to risks but lack access to appropriate risk-management instruments. Daily wage earners are likely to lose their jobs and be unable to access formal income replacement mechanisms.

Moreover, due to socio-cultural barriers, Kosovo women lack financial autonomy, which also heavily contributes to decision-making gender inequalities. While men comprise the majority of people registered to receive social assistance (60%) on behalf of their families, more family members reliant on social assistance are women (60-65%).[79] Their inability to directly access social assistance may limit their access to basic sanitary and hygienic needs, depending on how such expenditures are divided within the family. Such disparities can seriously affect women's and children's wellbeing amid COVID-19, particularly by putting them at risk of not receiving essential healthcare and education.

The closure of day care centers due to COVID-19 might have put some women at risk of being unable to continue work, leading to increased poverty. In Kosovo, the main responsibility of unpaid care work falls on women and girls due to traditional gender roles and social norms: they perform household chores, care for sick relatives or younger out-of-school children and manage food, health and sanitization within the household. Women's time on unpaid domestic work has increased much more than that of men since the outbreak of COVID-19. The UNDP study highlights that there is increasing chores and caring burden amid COVID-19 notably higher for women, which can interrupt girls' access to education and affect their futures. Prolonged periods spent out of school put girls at increased risk of gender-based violence, child labor, and child marriage.

Amid COVID-19, harmful gender-based norms and roles can result in the burden of domestic work and childcare falling heavily on girls. According to MICS 2013-14, whereas 7.9% of boys aged 5-17 were engaged in economic activities above the age-specific threshold, the case was 3% for girls (12% and 2.3% for Roma, Ashkali and Egyptian communities, respectively). On the other hand, 1.1% of girls aged 5-17

78 Kosovo Agency of Statistics: Labor Force Survey 2019
79 Kosovo Women's Network: Kosovo Gender Analysis (2018)

were engaged in household chores above the age-specific threshold, in comparison to 0.6% of boys (2.6% and 1.2% among Roma, Ashkali and Egyptian communities, respectively). With children out of school and likely increases in family members falling sick, it is likely that there will be an increase in girls carrying out domestic duties during the pandemic. This threatens their health and wellbeing as it potentially exposes them to the virus. Most importantly, it can threaten their education as they spend less time in learning and more in care and house chores. In the long-term, this can lead to an exacerbation of gender-based stereotypes, already heavily embedded in almost all social groups in Kosovo (i.e. women are trusted with attending to the needs of children, supporting their education, and also completing household chores; men, on the other hand, are the heads of household, responsible for income generation and family financial provision).

COVID-19 might place more girls at risk of child marriage. According to MICS (2013-14), 12% of Roma, Ashkali and Egyptian girls got married before turning 15, whereas 43% before turning 18. The number of child marriages is likely to further increase amid COVID-19. Globally, it is estimated that 13 million additional early child marriages will occur over the next decade as a result of COVID-19 impacts. Unemployment and economic uncertainty stemming from the COVID-19 pandemic in Kosovo, might bring more families, particularly poorer ones, to use child marriage as a coping mechanism. Poverty forces families and children to more extreme forms of survival including child labor, early marriage, and sexual exploitation. Many Kosovar girls, particularly of poor households and households with poorest educational attainment, will be forced to drop out of school in order to support their families, with far less of a chance than boys of ever returning. As decisions about a girl's education and marriage are often made in tandem, with an exit from education paired with entry into marriage, school closures along with disruption in education due to lack of access to online education is also likely to cause many girls in Kosovo, particularly of Roma, Ashkali and Egyptian communities, to drop out of school and enter marriage. Many parents might feel they have little alternative but to force their girls to marry as a way of securing financial stability for their daughters.

Child marriage violates girls' rights, interrupts their education and compromises their economic and political participation. Furthermore, it undermines their physical and mental health, it might expose them to sexual and gender-based violence, and in some cases it can also result in death, particularly during childbirth as their bodies are not ready for bearing children.

Quality of Services for Children Without Parental Care

COVID-19 might affect the quality of child protection and foster services for children without parental care. Despite the pressing need for foster families, the Organization for Children without Parental Care (OFAP) reports that the number of foster parents in Kosovo is very low, with less than 50 foster families in the whole of Kosovo; and when it comes to foster families for children with disabilities, this number falls even lower, with just 10 foster care families in Kosovo.[80] All foster and kin parents in Kosovo receive financial assistance from the Ministry of Labour and Social Welfare, which provides a monthly allowance to ensure that a child's basic needs are met.[81] Children without parental or family care, those in alternative care, as well as

80 UNICEF: From a cold hospital to a warm family
81 Law No. 02/L-17 on Social and Family Services

children living on the streets, are especially vulnerable to COVID-19 impacts. Kosovo still lacks accurate and reliable figures on the number and characteristics of children in such situations which makes the monitoring of their safety and wellbeing quite challenging. The potential of being exposed to, or infected, by the virus in crowded settings is high given that physical distancing and other basic sanitation practices are often difficult to observe. For children in residential care, a lack of capacity and resources could result in a rapid closure of such facilities, with children being returned to families without proper preparation. Some children may risk being sent back from their care placement to families of origin who are not in a position to care for them and guarantee their protection, exposing them to potential neglect and abuse. Increased poverty and loss of livelihoods will mean reduced capacities of families to care for their children, with the burden shifting to foster care who are already quite weak. Any unplanned effort to reduce the burden of foster care families in the post-COVID era could lead to a rush to send the children back, even to dysfunctional families; which is not in the best interest for children. For children in street situations, access to help and support services is likely to be disrupted and even more challenging.

The pandemic can result in significant challenges for Kosovo's foster care systems, particularly in weakening the ability of centers for social work to respond to child protection and foster care needs, as they already lack adequate professional, technical, human, and financial capacities and resources. In Kosovo, NGOs such as OFAP and SOS Children's Villages play a prominent role in developing and strengthening foster care services for all categories of children in need of care. They offer a range of services including professional services and alternative housing to children without parental care, abandoned children, as well as abused and neglected children; capacity-building training and expertise to centers for social work; provide advice, support, social programming, as well as psychological services to foster families and children; as well as monitor the health and wellbeing of children placed under foster care. Amid COVID-19, these NGOs can face severe budget challenges, pressuring them to find the lowest cost interventions possible.

Interviews with OFAP NGO representatives revealed that whereas before the pandemic they regularly met with foster families and provided their services in-person, with the outbreak of COVID-19 they had to switch to providing these services online. Using virtual communication channels, NGO representatives regularly contacted all foster families and children, ensuring to keep parents engaged in a variety of activities with their children. Representatives provided daily online activity plans for children, aiming to engage them in recreational and educational activities and in this way distance them from COVID-related news, which can be psychologically overburdening for a child. The psycho-social team of the organization provided regular online therapy sessions to both parents and children, focusing particularly on providing advice on how to deal with stress, anxiety, and worrying amid the pandemic. OFAP staff also visited foster parents and children when they distributed food and hygiene packages to each family.

"Our primary concern is their physical and mental health. We provide regular online psycho-social therapies as a way of helping parents and children overcome fear and stress resulting from the outbreak of COVID-19. We also ensure that all foster parents stay informed about the situation and follow the recommendations of public health experts." ***(OFAP NGO Representative)***

OFAP reported that generally, both children and foster parents were in good health during the pandemic and managed to cope with stress quite well. One of families' biggest concerns was financial stability, with many being afraid that their allowance from the Ministry of Labour and Social Welfare was going to get disrupted due to COVID-19. This however, did not happen as parents continued to receive their monthly allowance.

"Foster parents are very concerned with the fact that no one from the centers for social work contacted them ever since the COVID-19 outbreak. Not even their case managers assigned to them by the centers. This shows how neglected, even during crises, vulnerable groups are in Kosovo." ***(OFAP NGO Representative)***

With rising poverty and shrinking resources, it is worrisome and beyond estimation that many more children in Kosovo can be left uncared for and abandoned. Steps to prevent separation of children from their families and support families and communities to keep their children safe need to be taken with monitoring mechanisms and social service support systems in place.

Exposure to Harmful Online Content

COVID-19 increases children's exposure to risks arising from the unsafe and excessive use of the internet: For many adolescents and youth, social distancing during the COVID-19 global pandemic means that the only contact they will have with their peers will be done virtually. As a result, children and youth are using social media platforms and messaging apps like Facebook, Instagram, Viber, WhatsApp, TikTok, FaceTime, and Zoom a lot more frequently than in the past. The internet provides valuable opportunities for children to learn, play and socialize with friends, access information and support, and is therefore extremely important for children and young people. However, spending time online comes with many risks including exposure to potentially harmful content (e.g. violent or xenophobic content, incitement to self-harm and suicide, pornography); cyberbullying, online sexual abuse, and exposure to various privacy risks.[82] According to Save the Children's 2014 Children Internet Safety report,[83] over a quarter of children had experienced cyberbullying during the last 12 months, 58% were contacted by unknown people online, 42 % saw pornographic content online and were disturbed by the images, 61 % saw photos or videos with combative and aggressive content, and 15% had their personal data misused by someone.[84]

Interviewed parents confirmed that ever since the outbreak of COVID-19, their children have been spending more time online and reported that they feel more concerned about their children's online safety. The majority reported that their children use the internet excessively and independently from adult supervision. Additionally, they reported that since their children usually use the internet very privately, via their mobile phones, it has become very difficult for them to monitor their online activities. Nevertheless, parents said that they spend a lot of time talking to their children about the risks associated with internet usage and explaining to them why they should take such threats seriously. This however may not be the case for parents of poorer households and households with low levels of education who may lack knowledge

82 UNICEF: Keeping children safe online during the COVID-19 pandemic
83 Save the Children in Kosovo: Children Internet Safety Report (2014)
84 Ibid

and awareness of online safety risks. If children are not kept safe and are not taught about the potential risks of being online, they could be left vulnerable to different forms of exploitation or abuse.

"I am mostly worried about my child seeing harmful content, such as sexual or violent content, which can significantly impact her mental health." ***(Parent)***

"Although social media has made it possible for my children to stay connected with friends during lockdown, I am worried about them receiving potentially harmful and threatening anonymous messages from strangers." ***(Parent)***

Positive Outcome: Bringing Families Closer

COVID-19 may help bring families closer. Mitigating measures adopted by many countries to address the pandemic have resulted in disruptions to children's and families' everyday environments, routines, and relationships. When there is a major crisis like the one that COVID-19 brings, this puts everyone on edge, adults and children alike. Lockdowns, social distancing, fear, and uncertainty can cause many parents to feel stressed, frustrated, angry, and in some cases, even aggressive. Interviews with parents, children, and representatives of various NGOs working directly with parent and child beneficiaries, however, reveal that family ties have improved for the majority of families in Kosovo as a result of the pandemic. Parents, and fathers in particular, are now spending more time with their children. Spending more time together not only helps strengthen family bonds but is highly beneficial for both children's and parents' wellbeing: children who spend quality time with their parents perform better at school, have higher self-esteem, and show fewer signs of depression.[85]

"COVID-19 is making us realize just how important healthy family bonds are. We still continue to spend more quality time together even though slowly everything is going back to normal." ***(Parent)***

"My 12-year-old and I are now engaged in so many home activities, games, and discussions. It really helped grow our relationship and get to know each-other at a deeper level." ***(Parent)***

85 Scientific America: One Upside of COVID-19: Kids Are Spending More Time with their Dads

RECOMMENDATIONS

Young Children and their parents

Ensure that essential maternal, newborn, and child health routine services are maintained and strengthened during the COVID-19 pandemic:

- Strengthen the health system to ensure the quality provision of maternal, newborn and child health, including, immunization, breastfeeding and other nutrition services.
- Strengthen child health monitoring system and prioritize basic healthcare needs of the most deprived and marginalized children and families such as through free basic health and maternity care.
- Conduct continuous trainings to ensure that UPHV nurses can utilize virtual means of communication and have the capacities and skills needed to provide quality screening and healthcare advice to families in need via virtual means.

Ensure accessible, inclusive, and timely mental health and risk communication to help children and parents stay protected and promote mental wellbeing:

- Inform parents, via traditional and social media, localized advertisements, and other means of communication, on how to best care for young children amid COVID-19.
- Provide child-friendly and easy-to-read educational materials to inform young children on the risks of COVID-19 and how to stay protected, as well as how to cope with fears and stress during the pandemic, including practical guidance for parents on explaining the facts to children and helping them properly understand the situation without being afraid or anxious.
- Provide resources to parents on how they can adapt healthy and positive parenting strategies during COVID-19, including staying positive, creating a daily routine of engagement with their children, avoiding bad behavior, managing stress, and talking about COVID-19.
- Ensure the provision of psychosocial support and early childhood mental health services, including the identification and referral of children most severely affected by the crisis to more specialized child protection and mental health services (particularly those children who have been affected by increased violence and exploitation during the pandemic).

Ensure that preschools and schools are safe environments for children to return to whilst at the same time strengthening early childhood distance learning:

- Provide every child with a learning and development assessment on their return to preschool or school to inform targeted interventions including catch-up classes and other remedial programs
- Ensure that preschools and schools are safe environments for children to return to by implementing social distancing strategies, intensifying cleaning and disinfection efforts, modifying drop off and pick-up procedures, implementing screening procedures upon arrival, adding additional classrooms. Develop preparedness plans in case schools need to close again due to localized outbreaks
- Provide professional development and capacity-building support for preschool and day care center staff, so that they can best adapt to new teaching and caring circumstances amid COVID-19
- Provide effective, flexible and inclusive distance learning programs, including digital learning, and printed learning materials, with a focus on reaching the most marginalized children. These should support early learning, mental health and psychosocial support, child protection, and public health objectives and address harmful gender norms
- Ensure that distance learning strategies include support for parents' roles in children's learning at home through development and promotion of tips, resources and activities

Adolescents and Youth

Ensure timely communication and youth engagement activities amid risks associated with COVID-19:

- Increase use of communication channels such as traditional and social media as effective platforms to disseminate key information on COVID-19 to adolescents and youth
- Support adolescents and youth to influence change during the pandemic: National responses to COVID-19 have significantly restricted adolescents' and youth's already limited access to civil society spaces and public policy processes at different levels, where they may engage safely and meaningfully to influence decisions taken about their lives – ensure support for other, safer means of engagement amid COVID-19
- Strengthen social-accountability mechanisms to support dialogue between adolescents, youth, and decision-makers at all levels, so that the reality of the experience and impact of COVID-19 for children and their families can be heard and responded to
- Creatively engage adolescents and youth in digitalized youth empowerment and skills development programs

Ensure that schools adopt mitigation strategies to promote healthy behaviors that reduce the spread of COVID-19 (for in-person schooling), while also strengthening distance learning when schools are closed

- Design, implement and fund a national COVID-19 education action plan, ensuring an effective national education response which supports adolescents' and young people's safe return to schools while also building a better and more accessible distance education system
- Provide professional development and support for teachers so that they can adapt to new circumstances in schools as part of the frontline response and recovery, while also ensuring to strengthen their digital and distance teaching skills
- Create targeted interventions and expand social protection to help keep adolescents of marginalized communities in school, particularly those at highest risk of dropping out. Scale up coverage and types of social protection. Including cash transfers, school feeding, school grants, etc.
- Ensure that the risk of transmission is minimized in schools via promotion of healthy behaviors and implementation of mitigation measures
- Provide effective, flexible and inclusive distance learning programs, including digital learning, interactive TV instruction and printed learning materials, with a focus on reaching the most marginalized adolescents and youth

Ensure equitable access to mental health support as a means of helping adolescents and youth cope with stress in a healthy way amid the pandemic:

- Provide information, guidelines, tips and other resources to help adolescents and youth navigate through this challenging time and support their social and emotional needs amid COVID-19
- Inform parents, caregivers, and other adults serving adolescents and youth (e.g. teachers) in recognizing adolescents' and young people's social, emotional, and mental challenges and what they can do to help
- Ensure access to school-based counselling services for all adolescents and youth
- Support the provision of mental health and psychosocial support, particularly to adolescents and youth of poorer households who cannot afford psychological services, to tackle mental health related issues resulting from isolation and lockdown measures
- Help adolescents and youth stay socially connected by encouraging them to reach out to friends and family via phone, video chats, social media, or even via video games and other means of social interactions

Children with Disabilities

Ensure an inclusive quality healthcare services for all children with disabilities:

- Ensure priority testing of persons with disabilities presenting symptoms
- Promote research on the impact of COVID-19 on the health of children with disabilities
- Identify and remove barriers to treatment including ensuring accessible environments (hospitals, testing and quarantine facilities), as well as the availability and dissemination of health information and communications in accessible modes, means and formats
- Ensure the continued supply and access to medicines, food packages, hygiene products, and other necessary basic items for children with disabilities during the pandemic
- Conduct training and awareness-raising of health workers to prevent discrimination based on prejudice and bias against persons with disabilities

Ensure timely risk communication and community engagement to inform children with disabilities on the risks associated with COVID-19 and how to stay protected:

- Provide information on COVID-19 related measures in accessible way to children with disabilities, including through sign language interpretation, captioning, and easy to read formats, among others
- Closely consult with and actively involve adolescents and young people with disabilities in framing a rights-based response to the pandemic that is inclusive of, and responsive to, persons with disabilities in all their diversity
- Provide specialist professional advice for parents of children with disabilities on how to meet their child's social, emotional, and mental health needs

Strengthen protection services and schemes to offer targeted support to families of children with disabilities amid COVID-19:

- Increase existing disability benefits (via the national disability scheme), including through advancing payments to cover extra costs
- Ensure that food provision schemes include families of children with disabilities and are responsive to their needs
- Ensure that reporting mechanisms, hotlines, emergency shelters and other forms of assistance are accessible to and include children with disabilities
- Raise awareness and provide training about the risk of violence faced by children with disabilities, in particular girls with disabilities, and promote support networks including fostering peer support

Ensure the provision of quality inclusive education that addresses each student's learning, social, and emotional needs:

- Ensure access to Internet for remote learning and ensure that software is accessible to children with disabilities, including through the provision of assistive devices and reasonable accommodation
- Provide guidance, training and support for teachers on inclusive education through remote learning

- Establish close coordination with parents and caregivers for early education of children with disabilities
- Provide guidance and distance support for parents and caregivers to assist in setting up equipment and to support the education program of their children with disabilities
- Develop quality accessible and adapted materials for students with disabilities, to support remote learning
- Develop accessible educational audio-visual materials to disseminate through different media (e.g. online on demand, televised educational programs, etc.)

Social and Child Protection

Expand and strengthen social protection schemes for vulnerable children and families whilst ensuring that they are accessible to all those in need:

- Design social protection programs and systems that are more shock-responsive, encompassing a wide range of actions such as:
  - Strengthening and keeping more up-to-date social registries that can quickly identify and reach households in need in the event of a shock, including referrals of children and families identified through child protection case management
  - Ensuring preparedness plans with agreed procedures and larger budgets
  - Further research on the impact of COVID-19 on children's livelihoods and food security
- Prioritize basic healthcare and nutrition needs of the most deprived and marginalized children and families such as through free basic health care
- Provide support to households in the geographic locations worst hit by the pandemic, addressing deeply rooted urban vs. rural inequalities, reassessing the food security of communities, their access to basic services, to healthcare and education
- Ensure that unemployed youth are provided with and have access to training, development, and progression opportunities as well as employment support programs and services.

Strengthen mechanisms that ensure effective and inclusive protection of children and women from COVID-19 related risks of violence, abuse, and exploitation

- Ensure that protection risk factors are understood and integrated into social protection and child benefit programs, with the objective of helping prevent and mitigate violence against children and women
- Encourage all relevant institutions dealing with violence against women (police, medical and social professions, as well as Centers for Social Work) to draw up long-term action plans to enable effective and timely responses to the immediate protection needs of children and women who are victims of violence
- Strengthen domestic violence reporting mechanisms while also integrating child and women protection messaging in COVID-19 risk communication and community engagement
- Recognize that governments have an obligation to exercise due diligence to prevent, investigate and punish acts of violence, whether those acts are perpetrated by the state or private persons, and provide protection to violence victims

- Ensure that all measures are coordinated nation-wide and focused on the needs of the domestic violence victims and that relevant state institutions as well as NGOs be associated with the elaboration and the implementation of the necessary measures

Prioritize child protection within COVID-19 response plans, placing child protection as a central component within national and local level COVID-19 preparedness plans:

- Implement measures to ensure support for children left alone due to the hospitalization or death of a parent or caregiver - this could include direct support for civil-society groups and frontline social-service providers (e.g. teachers, social workers, and youth groups) so that they can maintain outreach to vulnerable children and youth
- Increase the numbers and the reach of skilled, trained, child protection workers, tailoring services to the needs of children, and address barriers to access for children with disabilities and other vulnerable groups
- Detect new and emerging patterns of child labor and other forms of child exploitation and abuse (e.g. forced child marriage, child trafficking, etc.) while addressing its root causes and managing actions accordingly
- Design and implement gender equality programming to transform harmful gender norms and address roots cause of gender-based violence and gender-based inequalities and other forms of violence and abuse against children
- Strengthen integration of high-quality mental health and psycho-social well-being programs within child protection systems and services
- Inform children and parents on internet safety dangers and available options to protect children from unsafe and excessive use of the internet, including exposure to potentially harmful content, cyberbullying, online sexual abuse, and exposure to various privacy risks.

Annex 1: DATA COLLECTION

Target group	Participants	Specifics	Data collection method	
			IDI	FGD
a) Mothers and young children	a) Service providers (healthcare workers, Home Visiting Programme, Educators, MEST ECE, UNICEF partners, etc.) b) Parents of young children	1. Healthcare management	2	
		2. Implementing partners supporting health and ECD sector	5	
		3. Preschool education (educators and ECD officials)	3	
		4. Healthcare professionals (HVP and immunization)		1
		5. Young parents and HVP and ECD beneficiaries (one FGD with participants from Egyptian, Roma and Egyptian communities)		2
b) Adolescents and youth	a) Education sector (MEST/ MED officials, school management) b) Youth sector (Ministry of Culture, Youth and Sports) b) Service providers (UNICEF partner organizations, NGO working with youth) a) Adolescents and youth	1. MCYS official	1	
		2. MEST/MED officials or school management	3	
		3. Service providers		1
		4. Adolescents		1
		5. Adolescents in correctional center		1
		6. Youth		1
c) Children with disabilities	a) Service providers (healthcare workers, NGOs) b) Parents of children with disabilities	1. Service providers from the public sector	4	
		2. Services providers from NGO/ other sectors		3
		3. Parents of children with disabilities (including one with foster care family with children with disabilities)		2

Table 1. Overview of the target groups and data collection techniques


UNRRA

Annex 2: TIMELINE OF MEASURES UNDERTAKEN IN RESPONSE TO COVID-19 PANDEMIC

Starting from March 13th 2020, when the first cases of COVID-19 were confirmed, the Kosovo institutions undertook a series of initial preventive measures specifically targeted to contain the spread of the virus, beginning with the immediate quarantine of Klinë/Klina and Viti/Vitina municipalities (where the first two cases of Covid-19 were registered).

March 16th: The Kosovo institutions declared a public health state of emergency, establishing national coordinating mechanisms to enforce COVID-19 preventive and protective measures, which included:

- The quarantine of Klina and Vitia municipalities
- Closure of land borders for non-Kosovo citizens, with an imposed two-week quarantine for Kosovo citizens coming in
- Temporary closure of all educational institutions
- Closure of all cafes, restaurants, bars, as well as non-essential shops
- Obligation of private sector employees to carry on their work from home
- Suspension of all non-emergent and elective healthcare in both private and public institutions
- Suspension of all cultural and sports events
- Suspensions of all flights
- Suspension of inter-urban transportation

March 23rd: The Kosovo institutions introduced several new stricter measures including:

- Prohibition of citizen movement from 10:00 - 16:00 and 20:00 - 6:00
- Quarantining of other municipalities following an increase in covid-19 cases (Prishtina, Prizren, etc.)
- Risk communication is intensified: Encouragement of social distancing, mask wearing, and disinfection
- Prohibition of all types of social gatherings (including weddings, religious ceremonies and other celebrations)

On March 30th: The Kosovo institutions approved an emergency fiscal package[86] to financially support taxpayers, employees, and businesses amid the outbreak of COVID-19.

April 15th: People were allowed to go out for only 1 and a half hours and only in order to purchase essential goods and items such as food and medication. The other restrictions remained in place.

May 4th - June 1st: The relaxing of some measures began to take place from May 4 - 31, following a plan organized in three phases or so-called 'waves'. On May 29th, student dormitories used as quarantine facilities were closed.

Wave 1 (May 4th):

- Citizen circulation allowed for only 3 hours a day
- Construction and real estate businesses are open
- Sale businesses of motor vehicles are open (partially)
- Retail businesses are open (partially)
- Businesses working on repairing personal and household items are open
- Consultancy offices (essential staff only) are open

Wave 2 (May 18th):

- Allows circulation of citizens based on the epidemiological situation (4 hours a day)
- Retail businesses open fully
- Dentists, Physiotherapists, Hairdressers and Hair Salons open
- Green markets open
- Gastronomy services (restaurants and cafes) open - takeaway only
- Railway transport (adhering to protection measures) becomes functional
- Urban and interurban transport is open for operation (special permits only)
- Call centres open (essential staff only)
- Opening of Museums

Wave 3 (June 1st)

- Allows circulation of citizens based on the epidemiological situation (from 5:00 am to 21:00 pm from May 27th)
- All urban and interurban transport is open for operation
- Taxi services become operational
- Gastronomy (in general) is open
- Exams in higher education
- Matura and achievement test (actually held in August)
- Opening of cinema and theaters
- Selective opening of sports activities

86 Kosovo Prime Minister's Office: Approval of Emergency Fiscal Package

June:

- As of June 1, all Kosovo ground crossing points were opened
- As of June 7, individuals entering Kosovo were not required to provide a negative COVID-19 test and were not obliged to enter quarantine
- As of June 8, bus lines allowed to operate at 50% capacity & usage of PPE is mandatory
- As of June 28, airport is open

July: Due to a sharp increase of COVID-19 cases, a list of 28 new measures were enforced as of July 6th. Movement restrictions were reintroduced, prohibiting citizen circulation from 21:00 pm until 05:00 am[87]. From July 13th, mask wearing became mandatory in all public spaces (both indoor and outdoor ones), as well as the keeping of a 2m distance in all outdoor places. Citizen circulation remained prohibited from 21:00 to 05:00 am.[88] From 30 July, all persons entering Kosovo were imposed a one-week self-isolation period. Citizens circulation was prohibited from 22:30 to 05:00. Public and private kindergartens were allowed to open as long as they met certain criteria, evaluated by municipal authorities[89].

August & September: The National Achievement Exam (for 9th graders) was held on August 20th, and the State Matura Exam (taken by senior high school students), was held on August 29th. Schools in Kosovo reopened on September 14th after, under a three-stage plan that combines in-person and distance learning systems. On September 25th, the government relaxed most of the measures amid declining COVID-19 infection cases. Entities providing gastronomy services (restaurants, cafes and the like) are only prohibited from operating from 23:30 to 05:00. Indoor and outdoor sports activities are allowed, including gyms and indoor pools. Public transport entities (buses, vans, taxis) continue to work with 50% capacity in terms of the number of passengers they carry.[90]

87 UNKT Brief, July 6th, 2020
88 UNKT Brief, July 13th, 2020
89 UNKT Brief, July 30th 2020
90 Kosovo's Prime Minister's Office: Government approves new measures to prevent the spread of COVID-19 and allocates additional funds to members of the Kosovo Police

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