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Avoiding a Child Welfare Crisis: Mitigating the Impact of COVID-19 through Social Service Workforce Strengthening.

Although children appear less susceptible to the physical effects of COVID-19, the pandemic is increasing the vulnerability of children to abuse, neglect and exploitation. As noted by the UN Secretary-General, “What began as a health crisis risks evolving into a broader child-rights crisis.”

Social welfare services are critical to keeping children safe and mitigating the longer-term social consequences of the pandemic. However, evidence indicates that social service providers have faced significant challenges in delivering services due to social distancing and lockdown measures, restrictions of movement and other pandemic suppression strategies.

This policy brief examines the global and domestic evidence generated in Malaysia on the impact of COVID-19 on child welfare and protection and the delivery of essential social welfare services. This includes analysis of the impact on all forms of social service delivery from a range of sectors. The brief concludes with recommendations on how this crisis can, nonetheless, become an opportunity to strengthen the social service workforce, which will contribute to the protective environment for children, as well as build resilience and capacity to withstand future crises better.

Pre-COVID-19 Child Welfare and Protection

Research and studies indicate that children in Malaysia were already vulnerable to harm before the COVID-19 crisis. Violence, abuse, neglect and exploitation in the home, in schools, in the community and institutions, such as alternative care settings and detention, are well-documented.¹ Malaysia is a destination, source and transit country for the trafficking of men, women and children into forced labour, brokered marriage and commercial sexual exploitation.² In 2019, the Special Rapporteur on the sale and sexual exploitation of children noted that ‘the phenomena of the sale of children, child sexual abuse and exploitation are vast and real in Malaysia against the backdrop of stateless, asylum-seeking and refugee populations,’ highlighting the

additional vulnerabilities faced by these groups.³ Government data shows that over 1,500 child marriages occur in Malaysia every year.⁴ Despite investment in a child protection system to tackle these complex welfare challenges, research suggests that social services are not uniform across the country and do not reach some communities.⁵



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A DSW social worker counsels a girl who has been abused by a family member. The social worker received training in child protection as part of a 2014 pilot project conducted by the Department and supported by UNICEF.

The social service workforce for child protection includes⁶:

Paid and unpaid, governmental and non-governmental, professionals and para-professionals, working to ensure the well-being of children and families.

The workforce focuses on preventative, responsive and promotive programs that support families and children in communities by facilitating access to services and preventing and responding to violence, abuse, exploitation, neglect and family separation.

The term 'social service workforce' as used in this brief encompasses a range of sectors that deliver general social services. This includes specific child protective and probation services, as well as services provided by other sectors including health, education, etc.

As part of this workforce, social workers are professionals with an academic degree. In the absence of an official regulation of this profession, many other social service workforce representatives are referred to as 'social workers,' however it is important to reserve this professional title for qualified social workers.

In Malaysia, social workers are employed by the Ministry of Women, Family and Community Development (MWFCDD) at the national level and by the Department of Social Welfare (DSW) at the national, state and district levels. The Child Act established the roles of child protectors and probation officers, defined as 'social welfare officers'. Social workers are also located in hospitals, the National Anti-Drug Agency, the National Unity Department and in NGOs.

Impact of COVID-19 on child welfare and protection

COVID-19 is increasing the exposure of children in Malaysia to physical and emotional harm. Globally, it is found that the combined effects of school closures and economic distress is likely to lead to increased risks of child marriage, teenage pregnancy, child labour and exploitation and recruitment into criminal gangs, among other things. Children who are separated from their families and children in detention, institutional care and quarantine, children affected by migration⁷ and marginalized children, including those with disabilities are particularly vulnerable to violence and abuse. Children from families impacted by COVID-19 and children affected by migration, amongst others, have also experienced stigma and harassment during the pandemic.

Economic challenges and stress also increase the risk of caregivers becoming violent or abusive, especially if substance abuse, mental health problems or domestic violence history are involved. This is exacerbated by the reality that, during the

lockdown period, children were less visible and unlikely to be in contact with protective adults such as teachers, medical professionals, and child and family welfare service providers. Increased time online may also result in exposure to online bullying, sexual abuse or grooming, increased risk-taking behavior, exposure to pornographic materials and inappropriate content, as well as violations of privacy. At an online meeting hosted by The Office of the Children's Commissioner (OCC), Human Rights Commission of Malaysia (SUHAKAM) in April 2020, child representatives highlighted the frightening reality of the increasing use of internet during the lockdown period, which may lead to exposure to online child predation and abuse.⁸

A nationwide U-report survey conducted with adolescents by UNICEF Malaysia found that while some adolescent respondents feel 'safe and calm' (43%), others reported feeling 'tired, bored and agitated' (52%) and 'nervous, anxious and scared' (33%), indicating underlying feelings of unease about the Movement Control Order (MCO).^{9,10} Another UNICEF study reveals a deterioration in mental health: a majority of heads of household (66%) reported emotional distress during the MCO, with an even higher prevalence among female-headed households (80%).¹¹ More than 40 per cent of those who are emotionally distressed said that they are afraid for their family's future.¹² As a further indication of increases in violence, a local NGO, Women's Aid Organisation observed a 44 per cent increase in calls and enquiries to their hotline and WhatsApp numbers for domestic violence between February to March 2020.¹³

Other examples of increased risks to children during the MCO period include:

- Interviews with child protection stakeholders indicated an increase in gender-based and domestic violence cases during the Covid-19 MCO period. In some cases, mothers fled violent home situations along with their children, who then also become more vulnerable.¹⁴
- Interviews also found that in remote areas in Sarawak, being out of school for a significant period can reduce the chance that children will return to school or may cause them to drop further behind in their studies. With limited internet access, online schooling was often not an option for these children to continue their education.¹⁵ On a practical level, many children have very long journeys back to school, which may reduce the likelihood that they will return. They are said to worry that, having made the journey, they will be told to go back home again.
- Immigration operations (including arrest, detention and deportation) impacting children affected by migration and their caregivers increased, with lack of processes for screening and referral to alternatives to detention.
- Similarly, arrest and detention of children for breaching lockdown restrictions occurred, without recourse to alternatives. This is in violation of the UN Standard Minimum Rules for the Administration of Juvenile Justice, which state that deprivation of liberty shall only be used as measure of last resort and only for the shortest appropriate period of time.¹⁶



A social worker from the Department of Social Welfare lodges a report of child abuse with an officer at the police station.

- Children remained in detention and care centres during the MCO period, in contrast to other countries where case management processes were utilised to enable safe release and reintegration with their families in line with international law and guidance.^{17,18}

Precisely at the time when children are at heightened risk of abuse, neglect and exploitation due to the social and economic impact of the epidemic, social service providers have been less able to reach and deliver protection services to children and their families. Social distancing measures have isolated children and families and made it almost impossible for social workers and probation officers to conduct home visits safely. To ensure continuity of service provision, social work practitioners have had to adapt to new working conditions, including a shift to online and remote service delivery.

The Social Service Workforce during the COVID-19 Crisis: Impact & Lessons learnt in Malaysia

The Malaysian social service workforce provides essential services in a complex and dynamic environment to ensure the care, safety and protection of vulnerable populations.

Before the COVID-19 crisis, the social service workforce in Malaysia already faced challenges, including the lack of a comprehensive alternative care system that prioritises family-based care arrangements, geographical constraints to the delivery of essential services, as well as significant capacity and human resource limitations.¹⁹

A 2018 UNICEF Malaysia survey found that social service workers are gazetted across several areas including child protection (1,615 officers), probation (1,618 officers) and anti-trafficking operations (119 officers). However, only 236 officers are directly involved in handling child protection cases and 183 officers are managing children in conflict with the law.²⁰

Limited coordination between civil society and government agencies and the lack of clear delineation of roles and responsibilities have also hindered efficient service delivery.²¹ There is a recognized need to increase the numbers of the social service workforce and to ensure that staff are adequately trained to meet the range of needs for all vulnerable populations.²²

Thus, professionalisation of social work is critical to strengthening the child protection system. This includes promoting greater clarity about the social service workforce, including explaining the functions and purpose of social work, definition of roles and responsibilities, as well as mandating required academic qualifications of social work and accountability frameworks for registered social workers.²³

During the COVID-19 crisis, the ability of social workers, counsellors, probation officers, psychologists, health workers, law enforcement officers and a range of other service providers to meet the needs of children and families were impacted. Specific challenges identified by service providers during the MCO include:²⁴

- Government social workers were reassigned to food relief services and unable to provide dedicated child protection assistance
- Face-to-face casework, including home visits and follow-up meetings, was suspended
- Due to court closure, child protectors faced challenges in obtaining court orders to place vulnerable children or child victims in alternative care
- New admissions into care centres were postponed and face-to-face therapy groups for children with disabilities suspended

Children affected by migration who already face significant barriers in accessing child protection, health and welfare services have been left especially vulnerable by the closure of such services, including those provided by CSOs. Pre-existing challenges in coordination between government and NGO service providers manifested themselves during the crisis. Due to understaffing and insufficient professional training, the workforce was not adequately equipped to face the additional demands placed on them during the COVID-19 crisis.

Indonesia: Responding to COVID-19

In Indonesia, the Directorate of Child Welfare, Ministry of Social Affairs (MOSA) conducted a national survey of social workers (Sakti Peksos), in collaboration with UNICEF, to assess the impact of COVID-19 on their working conditions and ability to provide services.

Leading challenges identified included lack of personal protective/safety equipment (75%); challenges providing services to clients due to restrictions on community level movement (65%); difficulties in access to basic services and referrals due to Covid-19 restrictions (52%).

Based on the outcomes of the survey, MOSA designed activities to support social workers, including capacity building and a more robust supervision and support framework.

Source: *Impact of COVID-19 on the Social Service Workforce in Indonesia, PowerPoint presentation by MOSA and UNICEF Indonesia.*



Social workers from the Department of Social Welfare review their cases.

The Ministry of Women, Family and Community Development's Talian Kasih 24-hour helpline - providing counselling services to individuals experiencing emotional distress - recorded a 57% increase in the volume of calls during the first week of the MCO in March and received a record 3,308 calls in a single day on 16 April 2020, compared to the daily average of 145 calls.^{25,26} The Malaysian Board of Counsellors and the Department of Social Welfare (Jabatan Kebajikan Masyarakat) assigned 528 registered counsellors across the country to support a special COVID-19 counselling line set up under the existing Talian Kasih 15999 hotline to provide psychological support and counselling services.²⁷ The Ministry confirmed that a high percentage of these calls were enquiries on COVID-19, requests for counselling, and access to welfare assistance (including the government foodbank) which raised serious concerns about whether the helpline had sufficient staff to adequately respond to domestic violence and child protection issues, as well as whether survivors and children are able to reach call operators during the MCO and subsequent periods.

Opportunities to capitalise on learning from COVID-19

The COVID-19 pandemic presents an important opportunity to think about child protection in new and creative ways. This experience has highlighted and exacerbated existing challenges and gaps in the delivery of social services and placed a significant strain on Malaysia's already struggling social service workforce. The most vulnerable groups in the population, including children affected by migration and their families, have suffered and continue to experience the harshest consequences of the crisis.²⁸

The knowledge gained during this period should be used to address these issues proactively and to strengthen the workforce in preparation for future emergencies. Top-line global findings and recommendations relevant for Malaysia are presented below, which include resolutions from the 2020 Joint Statement of the ASEAN Ministerial Meeting on Social Welfare and Development on mitigating impact of COVID-19 on vulnerable groups in ASEAN.²⁹

1) Strengthen the capacity of the Social Service Workforce.

COVID-19 underscores the need to expand the capacity of the social service workforce in a more creative, planned and sustainable way. The pandemic shows the importance of:

- Building capacity and strengthening emergency preparedness to operate within the context of COVID-19 and future crises, ensuring that the social service workforce has the skills, knowledge and equipment to effectively and safely reach those most in need. This includes training on COVID-19 related child protection risks and how to safely report concerns, including case management and strategies for collaboration across allied sectors including health, education and justice.
- Developing guidance and information for social welfare professionals and para-professionals to integrate COVID-19 prevention and response into social welfare service delivery frameworks and strengthen caseload management, including support for virtual case management.³⁰

DSW Social Welfare Workforce support strategies.

Service Delivery

- Encouraging remote models of service delivery
- Online group discussions involving clients and social workers
- Online self-administered reporting
- Regular remote meetings and debriefings

Training & Social Support

- Providing ongoing training for service providers
- Flexible working hours
- Ongoing technical support to handle workload and challenging cases
- Psychosocial support sessions

Source: *Social Service Workforce Safety & Wellbeing During the Covid-19 Response. Presentation by Sayed Mawismi Sayed Mohamad Mustar, Department of Social Welfare, Government of Malaysia.*

- Developing strategies to prioritise child protection as an essential service and minimise service delivery disruption in future crises;
- Providing assistance and psychological support to service providers working in stressful environments, guaranteeing the health and safety of those workers at the forefront of the crisis response.
- Improving capacity for service provision by upgrading the current Children's Division under the Department of Social Welfare to a department with increased numbers of trained child protectors.³¹
- Professionalising the social service workforce as envisioned by the pending Social Work Profession Bill.³²
- Continuing efforts underway by the Department of Social Welfare in the Ministry of Women, Family and Community Development to support frontline staff. Specific measures enacted are presented in the box above. Social service workers should be supported to practice self-care and to protect others through social distancing, use of PPEs and following zoning guidance. DSW has adapted its service approach for child protection cases during MCO to shift towards online interventions where possible, in addition to establishing protocols for in-person interventions when required.
- Dissemination of guidelines for prevention and response measures to COVID-19 for all alternative care centres and other institutions where children are placed, that are operated by government and civil society.

Philippines: Good practices

In the Philippines, local government officials are instructed to work with members of Local Councils for the Protection of Children to adhere to principles of non-discrimination, equal treatment, do no harm and avoid subjecting children to physical or psychological harm under COVID-19 movement restrictions. The Department of the Interior and Local Government (DILG) issued guidelines ordering local leaders and law enforcement officers to treat children who violated curfew regulations under the community quarantine humanely and with dignity, including those living in street situations. Children are not to be penalized or punished in any way, but rather brought to community (barangay) level authorities to be released into the care of their family members. These councils are mandated by law and are comprised of responsible members of the community including representatives from government, NGO, private agencies, as well as young people who are concerned with the welfare of children and youth.

2) Ensure a multi-sectoral response and services to address children and caregivers' needs holistically.

COVID-19 has revealed the multi-faceted nature of children's lives and the inter-connectedness of risk. Children will be best protected when allied sectors, including social welfare, health, education, justice and public finance recognise their contribution and ensure that policies and procedures align – both conceptually and in practice. The pandemic has shown the importance of forging effective working partnerships between social service providers and other professionals in anticipation of future crises. This includes:

- Establishing and strengthening existing child-specific helplines and social media applications that are linked to and can refer children and families in crisis to the types of services they need, including assistance and counselling by trained social workers.
- Conducting a needs assessment of helplines for children in Malaysia for emergency preparedness and to strengthen helplines in general. Measures to be considered include raising awareness of child helpline services and training caseworkers and helpline staff on alternative follow-up methods with an explicit focus on the use of digital technology for provision of distance support and services if home visits are not possible, among others.
- Ensuring helplines are functioning in line with global standards and protocols, including:
 - o Ensuring those who provide support are professionally trained and qualified to offer guidance and support to children;
 - o Establishing a helpline designed to exclusively support children;
 - o Ensuring the helpline is available consistently and continuously on a 24/7 basis.³³

- Supporting care centres / residential homes and families, including child- and women-headed households and foster families, to emotionally support children during pandemic and lockdown situations, as well as ensure appropriate self-care.³⁴
- Allocating financial and material resources for social welfare services as an essential part of emergency responses.
- Identifying and supporting the needs of children affected by migration in national social welfare service provision (including social work, child protection, gender-based violence prevention) as well as response and referral to health and other essential services.

3) Promote strategic planning and coordination between Government and civil society for effective service delivery to protect children from the negative impacts of COVID-19 and future emergencies.

CSOs play an essential role in frontline service delivery in many countries in Southeast Asia, including Malaysia, particularly for vulnerable groups. Effective synergy between governments, development partners, private sector and civil society is critical, especially in times of crisis, with suggestions as follows:

- Strengthening collaboration with Assistant Child Protectors to support social welfare service provision. Assistant Child Protectors have already been appointed from the NGO sector but are not yet fully functioning in this capacity.
- Explore the establishment of a coordination child protection network between CSOs and the Government co-led by DSW or MWFCD and facilitated by the Children's Commissioner, for example, to promote effective communication and collaboration among government and CSO service providers, especially during emergencies such as pandemics.
- As CSOs provide the majority of services to children affected by migration, the Government should continue to explore strategies to work in closer collaboration with them to increase preparedness and capacity to address the needs of vulnerable children and families in times of crisis. Some existing examples are current and prospective partnerships between government and CSOs in family-based care and alternatives to detention pilots.
- Support to initiatives such as the collaboration between UNICEF, the Ministry of Women, Family and Community Development and the Malaysian Association of Social Workers (MASW) to strengthen the capacity of the social service workforce and promote synergy between government and CSO service providers.

4) Design and implement learning strategies to collect frontline information across the country on the evolving impact of COVID-19 on children, families and service providers and establish monitoring and evaluation frameworks on service delivery during COVID-19 to assess effectiveness.

Consolidating learning throughout the pandemic, including investment in real-time research, will inform the post-crisis recovery and help to find solutions as issues arise.

- Document and share good practices and evidence-based strategies that highlight the vulnerabilities of at-risk groups in times of crisis, including the poor, children, persons with disabilities, women/girls and refugee and migrant populations, among others.
- Establish monitoring and evaluation frameworks for new working modalities utilized during COVID-19 context, such as the DSW support strategies for social workers outlined above, in order to assess their effectiveness and identify improvements in preparation for future crises.
- UNICEF is partnering with Child Frontiers, an international consulting firm, and the Malaysian Association of Social Workers to document experiences and lessons learned from frontline social service providers during the COVID-19 pandemic. This information will help the Government and national child welfare stakeholders to better ensure the protection of children.

5) Strengthen and link social protection responses to child protection priorities.

Child abuse and exploitation can often be directly attributed to financial insecurity, deprivation and inequality. The current pandemic highlights the critical importance of strengthening Malaysia's social protection system through the expansion of child and family benefits and increasing access to unemployment insurance to a broader population.

- Strengthened targeted social protection for low-income families to reduce the risk of children being forced to drop out of school, work or become exposed to other exploitative situations.
- Strategies for identifying vulnerable and at-risk families and children should be built into social protection programmes based on 'cash plus' models that combine transfers with other types of complementary support.³⁵

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- Children affected by migration include:
 - Those who migrate to Malaysia through formalised immigration visa processes, including those who are seeking economic or educational opportunities;
 - Those who are seeking protection and refuge from violence, persecution and other rights violations;
 - Those who are 'undocumented', having entered Malaysia outside of a regularised process, including those who may have been trafficked or smuggled into Malaysia, and including those who are born in Malaysia to parents who are not documented; and
 - Those who originate from within Malaysia: inter-state migration accounted for 28.5 per cent of all migration in Malaysia in 2018. (Source: UNICEF, Global Programme Framework on Children on the Move. New York: UNICEF, 2017. IOM, Malaysia, available at: <https://www.iom.int/countries/malaysia>, accessed 4 December 2019 and DOSM Migration Survey Report 2018, <https://www.dosm.gov.my/v1/index.php?r=column/pdfPrev&id=OWFsV1NpZ2EzbHVjdjVRS09KMl9lQT09>, accessed 24 November 2020).
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