Update on the context and situation of children

India is the world’s fifth-largest economy[1] covering 17.7 per cent of the world’s population.[2] It is the home of 253 million adolescent girls and boys[3] who account for 20.9 per cent of the country's population.

In 2020, the spread of the COVID-19 virus had profound impacts on the economy and the lives of children. As of December 2020, the government had reported 9.4 million confirmed cases of COVID-19,[4] the world’s second highest number of confirmed cases after the United States. The reported case fatality rate is amongst the lowest in the world at 1.4 per cent. Access to essential services such as healthcare, routine immunization, social protection entitlements and access to police, justice and other child protection services have been disrupted. School closures have affected 247 million children in elementary and secondary education, and 28 million children in pre-school education.[5] Despite some positive signs of rebound in economic growth, social sector spending will be significantly affected due to the high fiscal deficit (120 per cent target for FY2020-21)[6] and high debt (89.3 per cent of GDP). The deficit and debt has already led to a 19 per cent reduction in the transfers from central to state government during April-October 2020 compared to the corresponding period of the 2019-20 financial year.[7] India faced several natural calamities, including cyclones in West Bengal and Tamil Nadu, and flooding in Assam, Bihar and Telangana. Data from the first phase of the National Family Health Survey-5 (NFHS-5) 2019-20[8] has been released by the Ministry of Health and Family Welfare, revealing that several states have seen improvements in access to sanitation and clean cooking fuels. However, stagnancy or increase in child malnutrition has been observed in several states.

Millions of Indians were already at risk from infectious diseases and the COVID-19 crisis exacerbated the situation. Practising physical and social distancing, washing hands and even self-isolation are not easy for families living in cramped spaces or in urban slums; the lockdowns have also reduced access to hygiene and sanitary materials for managing menstruation safely.[9]

The National Education Policy[10] launched in 2020 has a target of universal education from pre-school to secondary level: it aims for 100 per cent gross enrolment ratio by 2030. It also aims to bring 20 million out-of-school girls and boys back into the mainstream through open schooling. To address the challenge of access to remote learning, the Ministry of Human Resource Development launched the PM eVidya initiative on 17 May 2020[11] to unify all efforts related to digital/online/on-air education.

The secondary impacts of the pandemic – rising levels of poverty and inequality, barriers to education, increased distress and issues associated with mental health – have exacerbated child protection risks. During the first weeks of the lockdown, CHILDLINE[12] reported a 50 per cent increase in calls. It is estimated that 50 per cent of the children in childcare institutions are there because of socio-economic conditions and the percentage is likely to go up due to increased family economic distress.[13] Early findings from the community-based monitoring initiated by UNICEF to assess the impact of the COVID-19 pandemic on vulnerable families revealed that economic distress among these families has increased since July 2020. Access to food has improved but some marginalized families still report lack of food for next ‘week’ and cash assistance has not reached every vulnerable family; many reported debt burdens due to the pandemic.

India has slipped in the global rankings for gender equality, including the Global Gender Gap Index 2020[14] and the Gender Social Norms Index.[15] With nationwide lockdowns, civil society
organizations have reported increased domestic violence. The loss of jobs and livelihoods caused by the pandemic are having profound ripple effects in India, with income inequalities expected to widen. This has affected women disproportionately, as they are more likely than men to work in the informal sector without any labour protection; there was also an exponential increase in their unpaid care work in the home. It is estimated that one out of five migrants are children.[16] Even before the pandemic, there were approximately 20 million child migrants under the age of 14 engaged in child labour.[17] Around 400 million workers in the informal economy are at risk of falling deeper into poverty during the crisis.[18] Taking all these issues into account, the COVID-19 outbreak presents a serious challenge to achieve results for children in India.

[8] NFHS is a large-scale, multi-round survey conducted in a representative sample of households throughout India. [http://rchiips.org/nfhs/factsheet_NFHS-5.shtml](http://rchiips.org/nfhs/factsheet_NFHS-5.shtml)
[10] [https://www.mhrd.gov.in/sites/upload_files/mhrd/files/NEP_Final_English_0.pdf](https://www.mhrd.gov.in/sites/upload_files/mhrd/files/NEP_Final_English_0.pdf)
[12] [https://www.childlineindia.org/a/issues/child-labour-issue?gclid=Cj0KCQiAifz-BRDjARIzlAEElvGL9hy6H1QqVrkI-oxe2fx5dpkqhdwH0tqlr3lohlzBmr7WBdonjrokaAnagEALw_wcB](https://www.childlineindia.org/a/issues/child-labour-issue?gclid=Cj0KCQiAifz-BRDjARIzlAEElvGL9hy6H1QqVrkI-oxe2fx5dpkqhdwH0tqlr3lohlzBmr7WBdonjrokaAnagEALw_wcB)
[13] MWCD 2017 report. [https://wcd.nic.in/sites/default/files/CIF%20Report%201_0_0.pdf](https://wcd.nic.in/sites/default/files/CIF%20Report%201_0_0.pdf)

**Major contributions and drivers of results**

In line with government priorities, UNICEF’s Strategic Plan and the United Nations Sustainable Development Framework, the Programme of Cooperation (2018-2022) between the national government and UNICEF contributes to national efforts to enable all children, especially the most disadvantaged, to have their rights fulfilled and to develop their full potential in an inclusive, protective
Achieving results for every child is at the heart of UNICEF’s work. Its strong field presence and decentralized state-level support enables UNICEF to promote the equity agenda and ensure that services reach those most in need. UNICEF highlighted the impacts of COVID-19 on children and the government’s response through creating and sharing evidence, and documenting responses.

UNICEF India was mentioned in the media 4,947 times in 2020, an increase of 23 per cent over 2019. Its followers on social media doubled to more than 4.5 million and it had 6 billion impressions compared to 982 million in 2019. Most significant was the growth in engagement with relevant stakeholders, which rose 60 per cent to 46.8 million. Video views increased to more than 316 million (94 million in 2019).

Several results, particularly menstrual hygiene management, nutrition and education, were constrained by the pandemic. Addressing equity remains a challenge, and UNICEF continues to work with partners to reach the most marginalized, adapting its programming to cater for children’s needs during the pandemic.

**Every child survives and thrives**

In line with government priorities and the UN Framework for Socio-Economic Response to COVID-19, UNICEF’s efforts in health were unique in scale and scope. UNICEF joined WHO and other partners to sustain the government’s immediate response to COVID-19. UNICEF helped design and introduce guidelines and protocols for reproductive, maternal, newborn, child and adolescent health services. It also supported the adaptation of services in 24 states. UNICEF scaled up mechanisms for e-mentoring, e-monitoring and supervision of essential services. The government reaffirmed its commitment to ending preventable maternal and newborn mortality following a review of progress towards India's Every Newborn Action Plan target, and an examination by the Ministry of Health and Family Welfare and other partners of critical bottlenecks and priorities. UNICEF catalyzed these joint reflections through various forums, supported advocacy events during the national newborn health week (Nov 2020), and supported the production of material illustrating progress towards the India Newborn Action Plan targets.

The number of UNICEF-supported facilities that achieved LaQshya certification, and had full water, sanitation and hygiene functionality increased by 38 per cent and 15 per cent, respectively, since 2019 despite COVID-19. HIV testing reached 89 per cent of mothers registered for antenatal care, up from 78 per cent. Community and facility follow-up of infants discharged from special newborn care units increased from 44 per cent to 79 per cent.

UNICEF contributed to COVID-19 infection prevention and control – e.g. through emergency procurement of essential equipment, systematic health-system support to prevent and manage COVID-19 – and made significant investment in preparing for vaccine introduction. Some 35,000 healthcare workers were provided with personal protective equipment and 500,000 were trained in infection prevention and control. Over 879 million children and their families received accurate information on how to stay COVID-safe through new and traditional mechanisms – mass media (TV, radio, digital print), community radio, community engagement and web/mobile applications. Over 4 million people have shared concerns on COVID-19 through feedback mechanisms such as state call centres for COVID (1075 and 104), online quizzes etc.

The national flagship nutrition programme POSHAN Abhiyaan defined ambitious targets for reducing malnutrition. UNICEF supported the government to increase services promoting complementary feeding, providing iron/folate (IFA) supplements, and screening for and managing acute malnutrition. Recognizing the threats posed by COVID-19 to child nutrition, UNICEF in collaboration with
agencies and development partners developed guidance for continuity of services, most of which were adopted by government. As the community-based Anganwadi Centres and schools remained closed, service delivery remained below targets. UNICEF worked with the Ministry of Health and Family Welfare to develop and implement a COVID-sensitive approach to restore nutrition services for adolescent girls and pregnant women disrupted by the pandemic (IFA coverage for adolescent girls had fallen from 22 per cent in September 2019 to 8 per cent a year later). An online repository of government circulars, national and international guidelines and technical documents on programming as well as data analyses (POSHAN COVID-19 Monitoring) informed the nutrition programming response to the pandemic.

UNICEF’s work with development partners responding to threats to essential nutrition services resulted in the launch of a Commitment to Action on Nutrition in the COVID context signed by about 100 organizations and individuals. UNICEF supported six states (four in 2019) with large-scale responses for the early identification and management of children with severe acute malnutrition. Best practices were widely shared. Centres of excellence on severe acute malnutrition[1] at state and national level were established or strengthened. Through the IMPAct4Nutrition platform, 110 companies pledged to promote nutrition awareness. Service delivery in UNICEF priority areas recovered somewhat during late 2020 – with continued UNICEF advocacy and technical support, these are expected to get back to pre-COVID levels in 2021.

Every child learns

When all education institutions closed in March 2020 due to the pandemic, UNICEF provided technical and financial support to strengthen government capacity to provide continuity of learning and plan for schools’ reopening. The UNICEF-initiated UNiLearn Learning Management System, developed with the United Nations Office of Information and Communications Technology, has so far hosted 200 courses to government agencies; there are now over 1 million registered users.

In 2020, with UNICEF’s technical assistance, 57 million children (49 per cent girls) of the targeted 60 million across 17 states were reached with remote learning opportunities. Some 7.5 million (50 per cent girls) aged 3-6 years benefited from early learning at home, their parents oriented by 400,000 trained female early childhood development workers across 10 states. Some 601,550 teachers and other education functionaries were reached on planning for continuity of learning, reopening guidelines, risk reduction/ safety measures, online safety for children and psychosocial support. About 21.3 million parents and school management committee members received risk reduction messages, psychosocial support and online safety guidelines; 17 focus states developed reopening plans (though only 45 per cent of states had reopened classes by the end of 2020). As part of UNICEF’s contribution to YuWaah, 19.6 million children (49.5 per cent girls) in 10 states can now access a career portal.[2] YuWaah have leveraged more than USD 3 million through foundations such as CIFF and private-sector partnerships such as PricewaterhouseCoopers, Accenture India and SAP. With the release of the National Education Policy, the Ministry of Education established the strategic National Mission on Foundational Literacy and Numeracy to guide implementation. UNICEF provided technical guidance to establish the Mission and on the importance of continuity of learning from ages 3-8, focusing on inclusion.

Every child is protected from violence and exploitation

The child protection programme supported the continuity of critical services by strengthening the capacities of first-line responders to the pandemic. UNICEF supported the scaling up of community-based mental health and psychosocial support from 10 to 17 states, leveraging strategic partnerships with the National Institute of Mental Health and Neurosciences, CHILDLINE and other child protection structures, reaching 446,032 children and caregivers (42 per cent female).
UNICEF launched the Ending Violence Against Children strategy, laying a strong foundation for multi-sectoral action. Through UNICEF support, child protection systems have been strengthened in 17 states, benefiting 285,953 children (40 per cent girls) who have access to enhanced preventive and responsive services. Ending Violence Against Children has been strongly integrated into the School Health Programme and School Safety Programme at national and state levels, with multi-sectoral strategies to address violence against children being rolled out in four states.

The importance of alternative care was given impetus through Supreme Court Orders for the protection of children in the context of COVID-19 developed with UNICEF’s technical guidance. Around 64 per cent of children in institutions (145,788 children) were restored to families and 9,316 were provided with family-based alternative care. UNICEF also provided guidance on alternative mechanisms to address child labour and trafficking, especially among migrant populations. With UNICEF technical support, 5,440 (88 per cent boys) child labourers were rehabilitated and 716,221 migrant families gained access to social protection and services. Even before the pandemic, a fifth of the migration population were children. The situation was exacerbated by COVID-19 – a rapid assessment of migrant workers in Bihar revealed that approximately 600,000 were child migrants returning to the state during the pandemic. UNICEF strengthened inter-sectoral coordination to support children and families on the move to ensure they have access to social protection, services and information. Building on the experience, Child Protection with inclusive social policy experts will further strengthen Panchayats and urban local bodies to track migrant children, ensure portability of services and protect children from labour, marriage and trafficking.

UNICEF scaled up the programme to end early marriage in 144 districts across 12 states (80 districts in 2019) through direct support for gender-responsive, costed and resourced State Action Plans in 12 states (5 states in 2019.) The plans set out convergent action for ending child marriage and supporting adolescent development and leverage more than USD 40 million of government resources. Some 1.5 million adolescent girls and 2.2 million boys were equipped with information, services and life skills during the pandemic; 16.6 million parents and community members have enhanced knowledge on COVID prevention, the harms of child marriage and violence against children, and on gender-responsive parenting skills.

Every child lives in a safe and clean environment

UNICEF continues to be a core technical partner of two national flagships – the Swachh Bharat Mission Phase 2[3] and the Jal Jeevan Mission on rural drinking water supply and water source sustainability.[4] In 2020, an additional 100 million people gained access to safely managed drinking water and over 13.1 million got access to a toilet; 8,532 communities were certified Open Defecation Free through UNICEF-supported government efforts. UNICEF, with the government and implementing partners, provided water, sanitation and hygiene (WASH) services for vulnerable communities, notably 4.3 million slum dwellers in urban hotspots. People on the move were supported through infection prevention and control initiatives.

In the context of COVID-19, UNICEF’s promotion of hand washing with soap to prevent and control infection brought innovations such as touch-free hand washing stations (widely disseminated, including in other countries). UNICEF also led capacity development for behaviour-change communication on hand washing – some 84 million people gained awareness of the importance of hand washing with soap. UNICEF ensured continuity and expansion of WASH services and the distribution of essential supplies throughout the pandemic.

UNICEF’s strategic partnership with counterparts, civil society, academia and corporates such as Unilever and Johnson & Johnson resulted in an estimated USD 776 million leveraged/ influenced for community and institutional WASH facilities benefiting children. With UNICEF’s technical guidance, 196,000 schools achieved 3-star status, providing a safer learning environment to 20 million boys and
18.8 million girls. UNICEF is lead technical partner for government’s ‘100 days campaign’ providing safe drinking water in all schools and pre-schools.

Every child has an equitable chance in life

In partnership with the National Institution for Transforming India, the inter-ministerial advisory group on integrated social protection was established. With UNICEF support, a micro-simulation of universal child benefit examined its potential. Advocacy based on assessments of the socio-economic impacts of public investment in children contributed to annual average growth of government expenditure on nutrition (42 per cent), health (9 per cent), education (11 per cent) and family welfare (22 per cent). Guidelines for Gram Panchayat Development Plans have been developed, together with training modules for shock-responsive, child-friendly Gram Panchayats to build the capacity of functionaries and elected representatives to address the needs of children, women and migrants in planning and delivering services. A community-based monitoring mechanism has been set up in 300 households in seven states to understand the socio-economic impact of COVID-19 on marginalized populations.

In partnership with the National Statistics Office, an estimation method was developed for selected Sustainable Development Goal (SDG) indicators at sub-district level to bridge a data gap. The Civil Registrar and Vital Statistics system was affected by the lockdown and fear of COVID; birth registration fell by up to 40 per cent.[5] To rebuild registrars’ capacity, an e-tool was developed to enhance digital learning by registrars.

Change strategies and enablers

UNICEF’s Communication for Development efforts focused on COVID-19 risk communication and community engagement. The government and partners, including UN agencies, influential leaders, faith-based leaders, civil society organizations, youth networks and universities promoted COVID awareness and appropriate behaviours in 15 states. Over 219 million people were reached with COVID-19 messages on prevention and access to COVID-19 services, while over 183 million people were engaged through digital and other platforms. Feedback mechanisms have enabled some 4 million people to share their concerns and seek clarification. Moving forward, UNICEF will accelerate cross-cutting social and behaviour change initiatives, focusing on a defined set of priorities and communication platforms (service-delivery, community and local media) and embedding COVID-sensitive behaviours.

Gender-sensitive programming. Recognizing gender strengthening as a journey, personal gender training for all UNICEF staff was followed by sector-specific training on bringing gender considerations to programme workplans. This has increased focus on addressing harmful gender norms throughout UNICEF’s programmes, and a joint Gender-Social Behaviour Change Communication strategy is being implemented.

UNICEF’s internal capacity and systems for monitoring and reporting, particularly on the progress from the COVID-19 response and its impact to children, have been strengthened. A strategy to reinforce the culture of results-based management across the office was developed.

Through efforts towards convergent programming, the Operations team is becoming a strategic partner of the Programmes team rather than simply providing services. Programmes now demand fewer routine services through improved efficiency, deploying e-tools and shifting relevant processes to the Global Shared Service Centre. As a result, capacity has been freed up for Operations to provide strategic support on partnerships management, financial assurance and quality assurance of the Harmonized Approach to Cash Transfers.
In 2019 the Resource Mobilization & Partnerships team in ICO presented new plans and targets, with a revised staffing structure to enable a rapid increase in our activities to fundraise and leverage results. During 2020 these changes were proven as the value of partnerships grew from USD 2.4 million to USD 7 million (including in-kind contributions of over USD 3 million, negotiated for the first time in India). Income from individual donors grew by 90 per cent to USD 7.6 million, supported by a doubling of pledge donor recruitment to over 56,000 new donors in 2020. During the midterm strategic review process, the new public-private sector engagement strategy was developed from two-dimensions into a multi-faceted plan with six objective areas working with partnerships across various sectors and aggregators. For instance, the Impact4Nutrition platform that was initiated through this engagement won a global UNICEF award and reached over 125 active partners.

[4] https://jaljeevanmission.gov.in/content/about-jjm
https://www.censusindia.gov.in/vital_statistics/crs/crs_division.html
2020 marked a period of deeper collaboration amongst the United Nation agencies in India. Guided by the United Nations Sustainable Development Framework 2018-2022, UNICEF leads two of the priority results groups in India and has played a critical role in facilitating collaboration. And under the new COVID-19 Socioeconomic Response and Recovery Framework, UNICEF leads the pillar on social protection. UNICEF coordinated the development of the UN Joint Programme on Gender Based Violence, which has received USD 1.7 million funding from the UN COVID-19 Response and Recovery Multi-Partner Trust Fund. The Sujal and Swachh Gaon initiative has been a joint effort by UNICEF and the World Bank to support the central and state governments to build the capacity of about 780,000 Gram Panchayat (GP) level functionaries from India’s 255,000 GPs on drinking water and sanitation. Fifty-five training-of-trainers’ sessions were organized in 23 states: UNICEF trained 2,847 master trainers who, in turn, trained 34,000 individuals at GP level. UNICEF also fostered strategic partnership with counterparts, civil society organizations and networks such as SPHERE, academia and corporate entities.

Central to UNICEF’s comparative advantage is its capacity to leverage resources and convene partners to achieve results for children. In 2020, UNICEF deepened its engagement with the private sector, and this is becoming an area of strong expertise. Significant changes in the operating environment are also improving UNICEF’s resource mobilization efforts. For instance, the 2019 Companies Amendment Bill now makes corporate social responsibility spending mandatory for larger entities. And the COVID-19 pandemic and UNICEF’s response have opened opportunities for partnerships with the public sector. These have translated into tangible new funding, including bilateral government overseas development assistance focusing largely on health and risk communication and community engagement. UNICEF’s core position in the UN response plans, the active nature of technical working groups, its field presence, and its strong technical partnerships with government line ministries are some of the factors that ensured UNICEF’s success in securing over 557 million Indian rupees from individual donors (a 90 per cent increase compared to 2019); and over 406 million Indian rupees from national corporates and foundations (twice the amount raised in 2019).

UNICEF India is committed to Business for Results, a UNICEF-wide initiative which aims to reposition engagement with business at the core of its strategy and operations, including the capacity building of staff to engage with the private sector.

Lessons Learned and Innovations

Key innovations

UNICEF was able to move to remote functioning. The experience of lockdown and related homeworking has demonstrated the potential for further efficiencies, such as increasing the provision of offsite support to staff and decreasing transactions in travel, event management and logistics. The Country Office already has in-house capacity in areas such as result-based budgeting and measuring results with value-for-money – this can be boosted at little cost and without bringing in external consultants. UNICEF now has the ability and buy-in to undertake a greater degree of virtual capacity building, reaching a greater audience while reducing costs and the environmental impact of travel. There is wide support for flexible work arrangements, including working-from-home, which has increased accountability, trust, focus on the work rather than time-in-chair and work/life balance.

Utilizing an automated platform to facilitate data storage and aggregation. UNICEF has successfully designed and institutionalized a results assessment module – RAM-India – for monitoring and reporting. This system has systematically and effectively facilitated the reporting of disaggregated
Leveraging innovative data gathering. Over 30 studies were initiated across almost all states to understand and gather evidence on the impact of the COVID-19 crisis on children and their households, covering continuation of services, receipt of social protection, and economic and psychosocial impact. New approaches to data collection included virtual surveys and the use of mobile phones. The rapid assessment using Rapid pro in Maharashtra provided concurrent monitoring of the status of WASH services and the engagement of over 55,000 sanitation workers in the state. Also, as a part of the UN’s joint response to COVID-19 in India, a joint community-based monitoring exercise was undertaken using a mobile application for data gathering to assess the direct impact of the pandemic on the general population.

Streamlining operations to facilitate programme implementation. This has involved reducing the demand from Programmes for routine services by improving the efficiency of processes, deploying e-tools and shifting relevant processes to the Global Shared Service Centre. Capacity has been freed up for Operations to provide more strategic support on partnerships management, financial assurance and compliance with the Harmonized Approach to Cash Transfers standards.

Key lessons learned and way forward

The midterm strategic reflection examined programmes in the light of the external environment and the pandemic. Given the significant and rapidly evolving changes in the operating environment, including those due to COVID-19, and the increasing pressures on limited resources in 2020, UNICEF has reviewed children’s vulnerabilities and critical barriers to optimise the focus and effectiveness of its programmes. Each UNICEF programme outcome area has identified key shifts and adjustments in its strategies and approaches to achieving results for children in the remaining years of the country programme, considering the COVID-19 pandemic and government priorities. Key building blocks for the next country programme cycle have also been mapped out.

Creating a results-driven culture within UNICEF, based on a strong evidence agenda, is a priority. Strengthening the culture of results-based management is an ongoing process of building clear guidelines for the differentiated approach of programming in India. It is supported by continuous capacity building such as orientation, quality assurance, backstop support and feedback loops. Leadership and buy-in from top management are important contributing factors driving the change-management process. One example of evidence is the first-of-its-kind COVID-19 response digest, which published 134 case studies highlighting the range of interventions and initiatives supported in 2020.[1] Moving forward, a community of practice will be established, identifying results-based management champions to facilitate organizational learning and support for staff across the national and field offices. There will also be more focused knowledge management, leveraging existing evidence and synthesizing it into advocacy briefs.

UNICEF’s convergent approach to multi-sectoral programming, both within UNICEF and in its work with government and other partners, is a key strength. This approach enables programmes and sectors to work together systematically across the whole of childhood to address overlapping deprivations. Using shared platforms and partnerships leads to a complementary continuum of services that are integrated at the point of delivery. In parallel, it enables a holistic, comprehensive approach to social and behaviour change. In future, these convergence initiatives will support programmes to take a holistic approach to consider the impacts of COVID-19, including in relation to responsive parenting, distance learning and adolescent mental health.

UNICEF India’s differentiated programming approach reiterated the value of paying attention to the context and providing flexibility and visibility to flagship programmes and some individual interventions. Differentiated programming enabled nuanced policy engagement and national discourse to promote coherent policy at state level. It facilitated learning about different approaches to programming, such as working in areas of civil strife and hard-to-reach areas and communities, and in determining the balance of upstream and downstream engagement with different states. Differentiated programming will receive higher priority in future, and will include a stronger equity-lens and increased learning within and across states.
To achieve shifts in gender dynamics, UNICEF’s programmes need localized approaches to systematically tackle both immediate and underlying causes of gender inequities. The complex links between gender and other forms of inequity require strong convergence across sectors in programme design, implementation and monitoring. More gender-sensitive indicators and clearer staff accountability for gender results can help maintain focus on the issue, and more time will be needed for multi-sectoral collaboration and the development of localized interventions. Over the coming two years a stronger evidence base and understanding of gender dynamics will be needed, particularly in emerging areas of work such as urban programming, children on the move and digitization of services and education. Gender vulnerabilities will also need to be re-examined through the lens of COVID-19.