The COVID-19 pandemic has had devastating impacts worldwide. Besides its immediate consequences on health systems, related effects such as socioeconomic shocks, school closures and disruptions in social networks have created conditions where violence and children’s rights violations are more likely to happen. As a result of the increasing risks, protection systems in many countries encountered challenges in reporting cases of violence. There were also documented difficulties for survivors of violence in accessing essential services during the pandemic. This situation was the result of a combination of various lockdown measures to prevent the spread of the virus. In addition some survivors were reluctant to access services for fear of infection.

Bangladesh and India have experienced devastating impacts due to the COVID-19 crisis. Since mid-July 2020, India has been one of the top three countries with the highest number of COVID-19 cases and deaths (Johns Hopkins COVID-19 tracker). In this context...
challenging context, state-level child helplines in Bangladesh and India have played a crucial role in identifying cases of violence, as well as in providing support for children and their families.

This case study details the response and lessons learned by the Child Helpline 1098 in Bangladesh and CHILDLINE 1098 India. In both cases, UNICEF has been supporting their operations, providing training and strengthening their workforce.

Both helplines registered a considerable number of calls during the pandemic. In Bangladesh there was a four-fold increase of calls to the helpline, resulting in more than 98,000 calls between April and June 2020, more than usually received in an entire year. These calls led to interventions to rescue 459 children from extreme violence, separation, homelessness, child marriage and exploitation (UNICEF, 2020a). The number of calls reporting cases of child marriages have also risen during the pandemic period. In April 2020, the helpline received 450 calls related to cases of child marriages whereas the month before the number was 322 (UNICEF, 2020b). Similarly, the CHILDLINE 1098 in India, for example, received over 3.9 million calls from March to June 2020, of which over 250,000 calls led to interventions to rescue children from situations of violence, abuse or exploitation (UNICEF, 2020c). This line had a 50 per cent increase from their regular call volumes, in just 21 days, from March 20 to April 10, receiving 460,000 calls. Almost 10,000 required CHILDLINE 1098 staff intervention, with 30 per cent of these calls related to child protection issues. Interventions by social workers stopped nearly 898 child marriages during this pandemic.

As part of a comprehensive child protection system, the governments of Bangladesh and India set up child helplines, to strengthen programmes and support children and their families, through a 24-hour toll-free telephone service. In Bangladesh, the programmes served to build the capacity and increase the number of call centre agents. The child helpline database system was updated and community level outreach activities were conducted. The capacity of decentralised level response providers such as social workers, social service officers, police and NGO workers was strengthened. In India these programmes enhanced the capacities of CHILDLINE functions in their outreach services to respond to calls for immediate relief and support for children. They also shone a spotlight on mental health counselling for children, as this was a growing demand during lockdown. Helplines in both Bangladesh and India are also part of the global network Child Helpline International.

Before COVID-19, these child helplines received thousands of calls from children and their families, fulfilling an important role not only in providing information but also in the safe reporting and referring of cases to the relevant services. Since the COVID-19 pandemic started both the 1098 helpline in Bangladesh and the CHILDLINE 1098 in India have provided frontline responder services. The broad scope of the child helplines meant they received numerous calls about mental health, as well as detection and prevention of cases of violence. The child helplines have also been providing information around migration, and other issues raised by the pandemic. As an example, in the first two weeks of lockdown in India, children and their families called the helpline to express their concerns regarding the loss of family income and their inability to provide children’s basics needs (data from in-depth interview).

LESSONS LEARNED FOR CHILD PROTECTION SYSTEMS

- Having experience of previous crises contributed to being better prepared to build the capacity of the child helplines for responding to the COVID-19 pandemic. In the case of India, months before the pandemic outbreak, extreme riots took place in Delhi. In this scenario, the CHILDLINE 1098 offered psychosocial support and mental health counselling including psychological first aid to
children and strengthened staff skills that would enable them to respond to the crisis. It also set up the CHILDLINE with additional resources and training prior to the start of COVID-19.

- **Having a strong coordination and communication system with other parts of the protection system facilitated a comprehensive strategy to address violence against children.** For example, in Bangladesh the Child Helpline 1098 works jointly with the Women’s Helpline. The CHILDLINE 1098 in India has established a collaborative work relationship with the Railway Childline, a significant hotspot for trafficking movement and child labour. In both cases, the alliances serve to coordinate and refer cases, or to establish contact with other specialised services, where necessary.

- **A crucial aspect of ensuring the good functioning of child help lines is to enhance staff skills on communication, monitoring, coordination mechanisms and counselling aspects.** Previously and since the start of the pandemic, both helpline systems had received regular training and saw an increase in the number of trained child helpline staff. In Bangladesh, for instance, the Department of Social Services, with UNICEF support, recruited 8 new Child Helpline workers and 127 new social workers for the COVID-19 emergency response; nearly double the amount of only 73 social workers pre-COVID-19.

---

**LESSONS LEARNED FOR PARTNERSHIPS: COOPERATION, COORDINATION AND COLLABORATION**

- Establishing robust networks and alliances among governmental and non-governmental institutions and other stakeholders, to strengthen capacities and skills of HELPLINE staff, has enhanced the response and functioning of the child helplines. This was the result of efforts by UNICEF in partnership with other organisations. In India, for example UNICEF in partnership with the National Institute of Mental Health and Neuroscience, has supported the training of 882 CHILDLINE functionaries and 350 child protection functionaries in Odisha on the basics of mental health and psychosocial support and first aid. In Bangladesh UNICEF helped to conduct online-workshops around case management training, including translation and circulation of a Social Work Case Management Guide to more than 3,000 government social workers.

---

**KEY CONSIDERATIONS AND QUESTIONS FOR IMPLEMENTATION AND FUTURE ADAPTATION**

- **Assessing the training needs of staff in charge of the child helplines would contribute to identifying the gaps and planning future trainings.** One already identified training need is increasing learning around risk and protective factors for violence against children. Modules on knowledge about the risks and protective factors of violence against children are highly recommended.

- **Future planning should ensure a refocus on prevention of violence as well as response and support to migrants.** This planning should also contain the lessons learnt from operating the child helplines during the crisis.
KEY CONTACTS AND FURTHER RESOURCES:
For more information visit:
UNICEF India Country Office website at https://www.unicef.org/india/

REFERENCES:

SUGGESTED CITATION: