

Protecting children and families

DEVELOPMENT OF A VIRTUAL PSYCHOSOCIAL SUPPORT SYSTEM IN SRI LANKA

COUNTRY/COUNTRIES:

Sri Lanka

PARTNERS:

The National Child Protection Authority (NCPA), the Department of Probation and Childcare Services (DPCCS), the NGO, Association for Health and Counselling - Shanthiham and UNICEF

THEMATIC AREAS:

Mental Health and Psychosocial Support (MHPSS)

COVERAGE OF SYSTEMS CHANGE:

Nationwide

KEY RESULTS:

Over 5,000 children and families have received virtual and/or telephone based psychosocial support since the onset of the pandemic in Sri Lanka. The virtual psychosocial system has also been embedded in government child protection structures and at community level.

COVID-19 CONTEXT

The first COVID-19 patient in Sri Lanka was detected on 10 March 2020. Within 20 days the Government of Sri Lanka (GoSL) had shut

down the country, with significant implications for the economic and social sectors. All schools in Sri Lanka were closed on 13 March and the President of Sri Lanka declared public holidays from 14-19 March. Employees of the public and private sectors were mandated to work from home from 19 March and a nation-wide curfew to prevent mass gatherings was imposed. This was lifted intermittently (except in high risk areas) to enable access to essential food and medicine. Sri Lanka also closed all international airports from 19 March.

The COVID-19 pandemic continues to make children and families in Sri Lanka vulnerable. The National Child Protection Authority (NCPA) hotline reported that between 16 March and 7 April 2020, from a total of 292 child protection complaints received, 121 were child cruelty complaints. As a

proportion of total child protection complaints, child cruelty cases rose from 10 to 40 percent during this same time period (UNICEF 2020).

This case study focuses on a programme of virtual and telephone based psychosocial support provided to children, families, and communities supported by UNICEF during the COVID-19 pandemic. UNICEF supported the NCPA to build long-term capacity to provide virtual psychosocial support to children.

DETAILS OF PROMISING PRACTICE/ CRITICAL POINT OF CHANGE

In the Sri Lankan context, psychosocial support has typically been provided face to face. However pandemic control interventions such as the lockdown and social distancing meant there was a need for a virtual psychosocial system to be established rapidly during the COVID-19 pandemic.

UNICEF Sri Lanka adopted a variety of innovative strategies, in response to the lockdown conditions, to establish a virtual psychosocial and telephone-based support system. This system was designed at national level by the NCPA to be sustainable and to serve the needs of children during the pandemic and beyond. The virtual psychosocial support system was linked with village level social workers for further follow up. Counsellors maintained regular communication with children and ensured relevant psychosocial support continued.

At the same time, a digital case management system facilitated by Zoom calls, was established to cater to the needs of children. Frontline social workers at community level, trained in psychosocial support, used Zoom conferencing to report cases of children who need protection to child protection officers at divisional level. The child protection officers then provided digital case management to these children. In partnership with the Department of Probation and Childcare Services (DPCCS), UNICEF developed and rolled out Standard Operating Procedures for children in institutions and guidelines on digital case management. Since

the start of the pandemic, 600 children have been reached through digital case management.

Mental health and psychosocial support (MHPSS) guidelines were also developed and 268 NCPA Officers, which included 25 district Psychosocial Officers and 243 Divisional Child Protection Officers, were trained on providing remote psychological first aid, psychosocial support and referrals. In addition, UNICEF Sri Lanka provided technical support to the DPCCS to develop long-term resilience building programmes and to roll out this programme via *Children club networks*. Ninety-one childcare institution staff were trained on psychological first aid and self-care.

Despite its achievements, government and UNICEF staff identified several questions that raised concerns around this system:

- How could children be identified and connected to the new virtual psychosocial system?
- How could psychosocial support be provided using telephone or virtual modalities?
- How could communities be made aware of the new virtual psychosocial support system?
- How could children's participation and engagement be ensured in this (virtual) process?
- How could follow-up procedures be implemented to assess ongoing needs of children and families with severe restrictions on movement?

In response to these concerns, firstly social media was harnessed to connect service providers with children and families in need of support. Information disseminated included descriptions of the services and systems available, guidance on how to approach such systems and get basic services.

Secondly, a strategy was formulated at the national level to drive a new virtual psychosocial support system. This strategy was called 'Look, Listen, Link', and it emphasises procedures of observation, assessment, and action to drive quick and effective responses to meet the needs of children. This clear strategy was important in expanding existing services in a six-month time period, such as setting up the telephone-based platform, addressing any problems, rolling out the system, and monitoring uptake remotely. The virtual psychosocial support system was implemented in two versions:

- 1. A version implemented in government structures.** The first version was implemented by the NCPA, led by trained NCPA counsellors and fully integrated within the government structure. This version made use of trained officers, and used a curriculum developed in collaboration with Save the Children, World Vision Lanka and a community development organisation, Leads.
- 2. A version focusing on voluntary action at the community level.** The second version focused on the community level and was led by the NGO Association for Health and Counselling -Shanthiham, making use of local informal networks. The voluntary action at the community level was used to connect with children and create systems whereby both children and families could access support.

In order to undertake the monitoring of the virtual psychosocial support system, the social service workforce was integrated with the existing government response, for smooth and coordinated action. More than 2,500 cases, including 1,600 cases in the North, were managed using the virtual psychosocial support system since the pandemic started. Around 5,110 children have received psychosocial support through both virtual and direct visits of counsellors. Finally, reporting procedures were streamlined and a six-month follow-up system was implemented in September 2020 across different provinces in order to monitor implementation of the virtual psychosocial support system. These efforts led to the building of critical infrastructure needed for the protection of children and families in Sri Lanka.

LESSONS LEARNED FOR CHILD PROTECTION SYSTEMS

- **In order to ensure substantial involvement of children and families, two ingredients are critical: developing trust, and building relationships.** Systemic responses are much more likely to succeed when relationships exist with communities and communities in turn trust

service providers. In this instance, the existence of trust helped harness the potential of social media in helping children access services, which in turn was critical to the robust functioning of the virtual psychosocial support system.

- **Strong advocacy by UNICEF and the NCPA, as well as the declaration of child protection officers as essential workers during the COVID-19 pandemic made it possible to prioritise the virtual system.** Recognising the vulnerability of children and families in the aftermath of lockdown was a critical turning point that provided the impetus for developing this system. It also allowed service providers to follow up with children and monitor the receipt of services.

LESSONS LEARNED FOR PARTNERSHIPS: COOPERATION, COORDINATION AND COLLABORATION

- **Selecting a suitable implementing partner and ensuring adequate coordination between the GoSL and NGOs was a key element of the success of the programme.**
- **It is critical for the government to have ownership of system responses.** In this example, the GoSL was involved from the initial stages in designing and implementing the virtual psychosocial support system that enabled increased efficiency and reach. This involvement also ensured that the virtual psychosocial support system could be fully integrated into national social services at the government level.
- **Social media played a significant role in bridging the gap between the supply and demand of services.** In addition, the investments made by UNICEF and other agencies in community-based psychosocial interventions, contributed significantly in reaching out to families and children during the COVID-19 pandemic.

KEY CONSIDERATIONS AND QUESTIONS FOR IMPLEMENTATION AND FUTURE ADAPTATION

- **A valuable priority is developing procedures for future planning.** This will include, but is not limited to, thinking carefully about the continuation of the emergency responses developed during the COVID-19 pandemic, and budgeting for subsequent system reforms, in an effort to plan for the future.
- **Vital COVID-19 responses can be capitalised on to inform rapid systems development that may otherwise take a much longer period to implement.** Critical system reforms undertaken during the pandemic may thus be studied and enhanced, in order to ensure the protection and welfare of children.
- **Continuation of effective child protection support to children in the aftermath of COVID-19 will be a key challenge.** UNICEF is supporting the DPCCS and NCPA to build their long-term capacity, including developing a Child Protection Communication Plan to build the long-term resilience of children and capacity building for professionals in contact with children.

KEY CONTACTS AND FURTHER RESOURCES:

For more information visit:

UNICEF Sri Lanka Country Office website at <https://www.unicef.org/srilanka/>

REFERENCES:

UNICEF (2020). UNICEF and NCPA gravely concerned by increase in proportion of child cruelty cases report to NCPA Hotline since the start of the COVID-19 curfew. [Press release, 9 April 2020]

SUGGESTED CITATION:

Fry, D. & L. Neelakantan (2021). 'Appendix B12. Protecting Children and Families: Development of a Virtual Psychosocial Support System in Sri Lanka'. In Fry, D., Padilla, K., Neelakantan, L., & Ivatury, S., *A gendered analysis of child protection (CP) systems responses in COVID-19 programming in South Asia*, UNICEF, Kathmandu, 2021.

