Office of the Special Representative of the Secretary-General for
CHILDREN AND ARMED CONFLICT
25 YEARS

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Impact of the COVID-19 pandemic on violations against children in situations of armed conflict

Follow-Up Study


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EXECUTIVE SUMMARY

This follow-up research builds on the findings of a 2021 study to try to determine the broader and more permanent impact of the COVID-19 pandemic on children affected by armed conflict, and on those monitoring and responding to violations against them. It relies on the knowledge and experience of child protection actors in seven selected situations, as well as those of international policy and advocacy actors. The ultimate purpose is to draw lessons learnt on ways to sustain prevention and response through this crisis and future ones.

First examining the impact of the pandemic on monitoring, the study focuses on the capacity of the UN Country Task Forces on Monitoring and Reporting grave violations (CTFMRs). It describes adaptations made in reaction to COVID-19 restrictions including a selective and strategic adoption of virtual working methods which enhanced the capacity of many CTFMRs. These will be better equipped to withstand future crises. In contrast, those that are forced to rely primarily on in-person data collection are likely to continue to face the same challenges with each new wave of infections and restrictions. Additionally, many monitors report that their contact with conflict-affected communities has been weakened by interrupted in-person contacts; most are still actively rebuilding trust and relationships with them. The study also points to other factors that compounded the impact of COVID-19 restrictions on monitoring and concludes that child rights monitoring already required investment and support prior to the pandemic, and it continues to do so.

Second, the study explains how COVID-19 restrictions triggered, or intensified, violations by removing essential socioeconomic safeguards protecting children living in situations of armed conflict. The sudden interruption of economic activity and the closure of schools pushed millions of children into extreme adversity and harmful coping mechanisms. This was aggravated by the scaling down of public services and humanitarian assistance, which also allowed armed groups, in many situations, to expand and exert their influence over new territories and populations – thus exposing children to higher levels of violence. Although there were often other factors at play, countless children were forced into dangerous and/or exploitative work – including in armed groups – which increased their vulnerability to grave violations. Other children ended up on the street, exposed to similar risks. The study isolates three groups of children that are likely to have been more affected than others. It concludes that the pandemic severely eroded the protection of children in the long term and highlights the need to bolster cooperation to document and respond to pandemic-induced violations in the years to come.

The study then examines the impact of the pandemic on responses to violations. It first reviews the evolving capacity of the CTFMRs to engage with parties to conflict, spotlighting adaptations to ensure programme continuity despite restrictions. It is thus revealed that, while dialogue with government representatives was generally strengthened with the use and advantages of digital communication, maintaining contact with non-state actors was significantly more difficult. Programmatic responses were also considerably affected during the first year, with delays and interruptions in protection activities, which had devastating consequences on some child victims of grave violations. However, the study also compiles stories exemplifying once again the ability of child protection actors to circumvent obstacles to in-person activities, and sometimes turning them into advantages benefiting their work in the long run.

Lastly, the study turns to the policy and advocacy work of international actors, focusing on the impact of restrictions on travel. Most organizations managed to transfer a lot of their work online and, again, find advantages in this new way of working – not least its potential to cut costs and include more interlocutors. However, all those interviewed highlighted how two years of virtual work took a toll on work relationships. Field research was also paused, which crippled the work of those engaged in evidence-based advocacy. At the time of publication of this report, international travel was resuming and most of those consulted hoped or expected that these issues would dissipate. However, they remain concerned that the global response to the pandemic aggravated an acute funding crisis for the protection sector, which will significantly slow down recovery.

The study concludes with remarks on the overall impact of the COVID-19 pandemic on the situation of girls and boys affected by armed conflict, and on the work of those mandated to protect them. It highlights the main lessons learnt, including the need to exploit new technologies to make the best use of shrinking access and resources, and adopt more sustainable ways of operating as a sector. This necessitates more localisation, i.e. less international travel and more power-sharing with conflict-affected communities, which would also reduce the impact of international organizations on the environment, particularly now that the link between the climate emergency and conflict dynamics has been firmly established.

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INTRODUCTION

Purpose

In April 2021, the Office of the Special Representative of the Secretary-General for Children and Armed Conflict (OSRSG CAAC) published a preliminary study on the "Impact of the COVID-19 pandemic on violations against children in situations of armed conflict"[1]. The study investigated the immediate effects that the coronavirus disease (COVID-19) pandemic and related restrictions had on these children and on the capacity of those monitoring and responding to violations against them, particularly members of UN Country Task Forces on Monitoring and Reporting grave violations (CTFMRs).

This research found that the most significant impact came from movement restrictions put in place at the start of the pandemic to limit the spread of the virus, which increased children's vulnerability to grave violations while also reducing access of child rights monitors and humanitarian actors to affected communities. Although some level of movement resumed progressively in the latter part of 2020, data on the impact of the pandemic on children was still scarce at the time of drafting in March 2021. When the study was presented to the UN Security Council (UNSC) in May 2021,[2] Member States took stock of its findings but, acknowledging ongoing challenges in data collection, they expressly asked the Special Representative (SRSG CAAC) to conduct follow-up research once CTFMRs had regained their capacity.[3]

Accordingly, the present research builds on the findings of the 2021 study by examining two years' worth of data on the impact of the pandemic on children. It observes the repercussions of the crisis at all levels of the Monitoring and Reporting Mechanism on grave violations (the MRM), from the community to the UNSC level. By documenting the experiences of all MRM actors, it also aims to draw lessons learnt on ways to cope with this and future crises. The ultimate purpose of this follow-up study is to better understand the impact of the pandemic on children living in situations of armed conflict, to this day and possibly beyond, in order to improve response.

Methodology

Two situations, Somalia and Yemen, were added to the group selected for the 2021 study i.e. Afghanistan, the Central African Republic (CAR), Colombia, the Democratic Republic of the Congo (DRC) and the Sudan. This allows a comparison with last year's findings while expanding the scope of the study to reach half of the situations with parties listed for grave violations against children, and a third of the current situations of concern on the CAAC agenda.[4]

This sample is also indicative of the wide range of challenges faced by CTFMRs in their monitoring of grave violations in conflicts worldwide. Further, with four geographical regions, it provides a diversity of political and security contexts to observe the ways in which children affected by armed conflict may have been impacted by the COVID-19 pandemic.

Information for this research was collected via:

- **Interviews with technical-level CTFMR co-chairs** (MRM Focal Points) in each of the 7 situations for discussions on the impact of the pandemic on violations, and on their capacity to monitor and respond to violations in the last two years. Seven interviews with 17 MRM Focal Points were conducted.

- **A CTFMR survey** designed to assess improvements and challenges concerning the impact of COVID-19 prevention measures on their work (see survey questions in annex II). The survey was circulated to all members of the 7 CTFMRs via their Focal Points, and 35 responses were received (see Table 1 below).

1 OSRSG CAAC, Impact of the COVID-19 pandemic on violations against children in situations of armed conflict (May 2021): https://childrenandarmedconflict.un.org/wp-content/uploads/2021/05/Impact-of-the-COVID-19-pandemic-on-violations-against-children-in-situations-of-armed-conflict-1.pdf

2 This was during a high-level Arria-formula meeting organised by the Government of Estonia. See OSRSG CAAC, "Arria Formula Meeting on Children and Armed Conflict": https://childrenandarmedconflict.un.org/2021/05/arria-formula-meeting-on-children-and-armed-conflict

3 See statements by Ireland, Niger, Saint Vincent and the Grenadines, Sweden, Tunisia and the United Kingdom, on the website of the Permanent Mission of Estonia to the UN, "United Nations Security Council Arria-formula meeting on Children and Armed Conflict": https://media.un.org/en/asset/k1h/k1hemuglb0

4 See: https://childrenandarmedconflict.un.org/where-we-work

- **A review of available literature** (reports, briefings, news articles, press releases, and webinars) documenting and analysing the direct and indirect impact that the COVID-19 pandemic had on children in situations of armed conflict in the last two years (see bibliography in annex III).

- **Interviews with other CAAC experts** (such as country-based NGO representatives, diplomats, UN officials and NGOs working with the UN Security Council Working Group on CAAC (SCWG CAAC) in order to gather insights on the impact of COVID restrictions from the community level to the policy level of the MRM.

Part 2 reveals the visible impact of the pandemic on the rights of children living in situations of armed conflict. With abundant information and analyses compared to last year, it reveals the socioeconomic mechanisms triggered by the pandemic which have had a direct and indirect, short-term and long-term **impact on violations**. Part 2 also isolates three groups of children that have been left particularly exposed and vulnerable by these dynamics.

Part 3 focuses on the **impact on response**. It reviews the evolving capacity of all MRM actors, at country and international levels, to engage with parties to conflict for prevention purposes. It also looks at the capacity of in-country CAAC actors to respond programmatically to violations since the start of the pandemic. It describes adaptations made to overcome some of the challenges they faced, which includes many lessons learnt.

Conclusions are then drawn on the overall impact of the COVID-19 pandemic on the Monitoring and Reporting Mechanism, on its actors and contributors, and on the situation of girls and boys affected by armed conflict. These inform a series of lessons learnt and recommendations, including on preparedness and sustainability of the MRM.

Table 1: Number of survey responses by country

Afghanistan	CAR	Colombia	DRC	Somalia	Sudan	Yemen	TOTAL
9	5	5	8	3	2	3	**35**

Structure

This study is divided into three parts. Part 1 looks at the adjustable capacity, over the two years of MRM actors involved in monitoring violations at the country level. These actors include CTFMR members, field-based monitors, and MRM-trained partners at the community level. It describes adaptations made in reaction to COVID-19 restrictions and the lasting impact these had on their **monitoring capacity**, both negative and positive.

1. IMPACT ON MONITORING

The 2021 preliminary study explored the shockwave of the COVID-19 outbreak on country-based MRM actors and the way they handled that shock during the first year of the pandemic. The study roughly distinguished three phases of impact: (1) A 2 to 6-week period following the adoption of sudden and drastic containment measures, during which most non-essential workers were stranded. National lockdowns and border control measures were put in place, UN and NGO staff started to work from home, sometimes outside the duty station, and offices closed – grounding most monitors and bringing reporting to a halt. (2) Once lockdowns ended, an adjustment period of 4-6 months followed, during which most CTFMRs and their partners learnt to operate under new safety protocols and remote working procedures due to continuing movement restrictions. During that period, CTFMRs that already relied on remote monitoring systems were able to resume their work more quickly. (3) The third phase roughly corresponded to the last quarter of 2020, which marked the beginning of a progressive lifting of restrictions on movement and face-to-face meetings, initiating the beginning of a "new normal."

However, at the time the study was being written, in March 2021, intermittent infection prevention and control (IPC) measures continued to affect mobility and staffing levels and to make the work of monitors more laborious than pre-COVID. In some situations, monitoring missions were still low on the list of priority travel. Work conditions remained uncertain and morale was low. Vaccination had not yet started and interviewees felt unsettled about the unpredictability of their work environment and the effects of the virus. A year later, have MRM systems fully recovered?

1.1 Capacity of CTFMRs at capital level

MRM Focal Points in capitals are key to the functioning of the MRM (both at principal and technical levels). When consulted a year ago, their work was still limited by COVID-19 risk-mitigation measures.[5] A year later, they all report significant operational improvements, with a return to a relatively predictable way of working owing to the progressive lifting of the most limiting UN and government-imposed restrictions. Vaccination of UN and other humanitarian staff, which started in early 2021, played a major role in this, and most interviewees reported having already been offered a booster dose as of April 2022. This does not mean, however, that CTFMRs have fully recovered their pre-COVID capacities. On the negative side, they continue to be affected by intermittent restrictions dictated by their host country's infection curve; but on the positive side, these ongoing restrictions have also led to adaptations which have sometimes permanently enhanced their capacity.

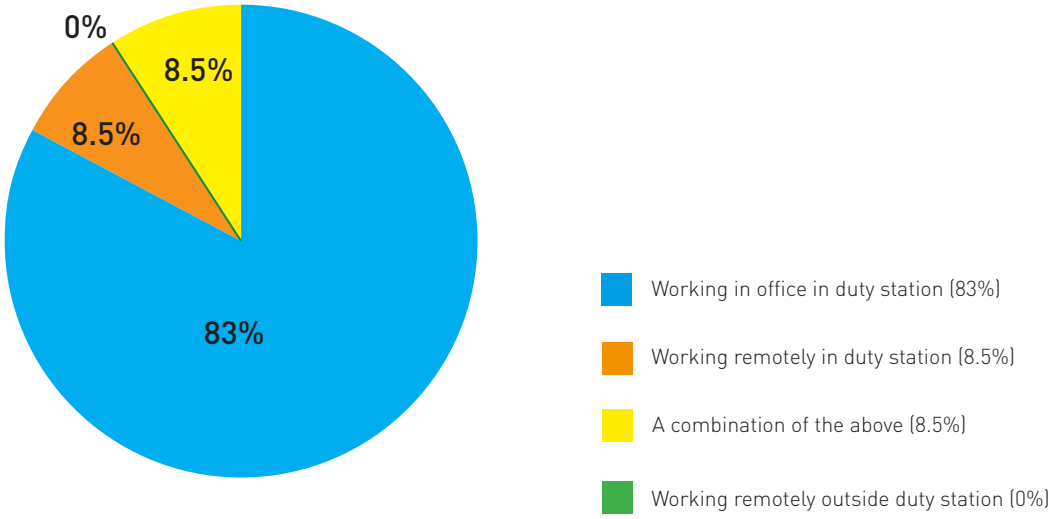
A gradual and safe return to the office

At the time of writing, all CTFMR members interviewed or surveyed were based in their duty stations and most were able to work from their office,[6] at least for part of their working week, and as long as they complied with basic preventive measures i.e. mask wearing and physical distancing (see Figure 1). This was perceived as a major improvement. Some of the grievances attached to working remotely included: struggling with poor internet connections; being unable to develop good working relationships with new colleagues; feeling isolated and invisible; working too much and being overwhelmed by workload. They felt better equipped and supported when working from their office and within their team. Some staff mentioned that they had access to counselling to process the negative impact of these changes on their wellbeing.

5 For example, they were still facing restrictions on internal travel and prioritisation systems for field missions (with child protection not seen as 'essential' or 'critical'); mandatory quarantines upon entry in the host country (in situations requiring 'Rest and Recuperation' leave, the so-called R&R cycles were particularly crippling); remote work including staff rotation policies aiming to increase physical distancing in UN offices; MRM staff contracting COVID-19 and having to self-isolate, along with their close contacts; number limits on meetings and workshops; etc.

6 In addition, all CTFMRs but one mentioned that entry into their host country was no longer conditioned upon a period of quarantine for vaccinated travellers but on negative COVID-19 tests, commonly known as 'PCR tests'. If not vaccinated, travellers must quarantine between 7-14 days. This has made a big difference for teams that have an R&R cycle and would regularly have to spend days working from home, away from their teams.

Figure 1: Answers of 35 survey respondents to the question: "Where are you currently based?"



However, like everywhere else in the world, COVID-19 continued to generate a pattern of periodic work disruptions, usually following seasonal infection peaks and/or the appearance of new variants. Some agencies interviewed still had temporary 'Work from Home' (WFH) policies in place in March 2022, following the latest infection peak. Others had more long-term staff rotation policies in place in order to better implement physical distancing at work. One CTFMR reported that the office would close altogether during periods of high transmission of the virus. These disruptions, however, were generally accepted as part and parcel of life under COVID-19. Overall, CTFMRs were hopeful that the current distribution of COVID-19 vaccine boosters would accelerate the final steps towards normalcy.

A selective and strategic return to in-person communication

Another major improvement has been the return of face-to-face interactions: all agencies interviewed reported being able to meet their interlocutors in person, provided they took the necessary precautions (face masks, hand sanitising and physical distancing – or meeting outdoors). This measure has gone hand-in-hand with the progressive lifting of UN and government restrictions on mobility, which has reopened the door to field missions and in-person meetings where these are needed for monitoring purposes.[7]

Crucially, the combined return of face-to-face interactions and in-country travel enabled CTFMRs to resume in-person MRM trainings after a nearly two-year interruption. By their own account, these are much more effective than the virtual trainings they had been forced to rely on until recently. Limits still apply on the number of participants to indoor meetings, but these capacity restrictions have been progressively improved. The resumption of in-person trainings of NGO partners and community focal points is a crucial step towards rebuilding monitoring networks (see section 1.2 below).

In-person meetings have not automatically resumed everywhere. At least two MRM staff shared that they were still opting for virtual meetings with external partners, especially at capital level where they can generally rely on good internet connectivity. They cited reasons linked to practicality (simpler logistics, time and money savings), inclusivity (virtual meetings can include field staff or those who are travelling), and confidentiality (where government scrutiny is an issue). This explains why, in many situations, CTFMR meetings remained virtual or have permanently switched to hybrid modalities.

- In one context, CTFMR members used to meet from two different locations, which were video-linked. At the start of the pandemic, meetings became fully virtual, with each participant using their own internet connection. Without the need to commute for meetings in two traffic-congested cities, participation increased to such an extent that this system was adopted permanently.

7 Three situations reported that internal travel in the host country was no longer subjected to conditions. Restrictions in the four others included: vaccination; pre-departure COVID-19 tests on UN domestic flights; and daily PCR testing for unvaccinated travellers. None of the remaining conditions were perceived as serious obstacles.

- The pandemic had the same effect on another CTFMR for different reasons. Initially switching to virtual meetings because of COVID-19 restrictions, this Country Task Force eventually decided to permanently adopt remote meeting modalities to avoid government scrutiny of the MRM. Having gotten used to virtual meeting technology during the pandemic, CTFMR members naturally adopted it as a permanent tool affording them increased confidentially.

There are, of course, significant disadvantages to virtual meetings. Some CTFMRs had to contend with poor internet connectivity. Others mentioned the possibility of virtual meetings being hacked into or recorded, which can prevent participants from having open and honest discussions. The decision to resume in-person CTFMR communication was therefore different in each MRM context, with co-chairs weighing costs and benefits. It was dependent on what best served the participants, the objectives of the meeting, and the MRM overall. These decisions were sometimes more complex:

- In one situation, Country Task Force meetings remained virtual at the principal level (throughout the pandemic), but switched to in-person and hybrid at the technical level as soon as it was allowed again (in quarter 2 of 2021). This is because the technical-level co-chairs felt that discussions to review and verify incidents were more appropriately held in person and around a table, whereas it was easier to get higher-level CTFMR representatives together online.

Overall, it is fair to say that the vast majority of MRM Focal Points considered the impact of current restrictions to be minimal compared to 2020 and early 2021. Often these restrictions have even prompted them to adapt and improve the working methods of their CTFMRs. Meanwhile, the return to office work has dissipated some of the feelings of isolation and disconnection resulting from measures taken in Phase 1 of impact described above. Where meetings have remained virtual, it is for strategic reasons that serve the MRM. However, these developments in no way remove the need for continued support of CTFMR members, many of whom continue to be overworked while grappling with the repercussions of the pandemic at various levels. Section 1.2. below focuses on its impact on the work of field-based MRM staff and their networks of sources and monitors.

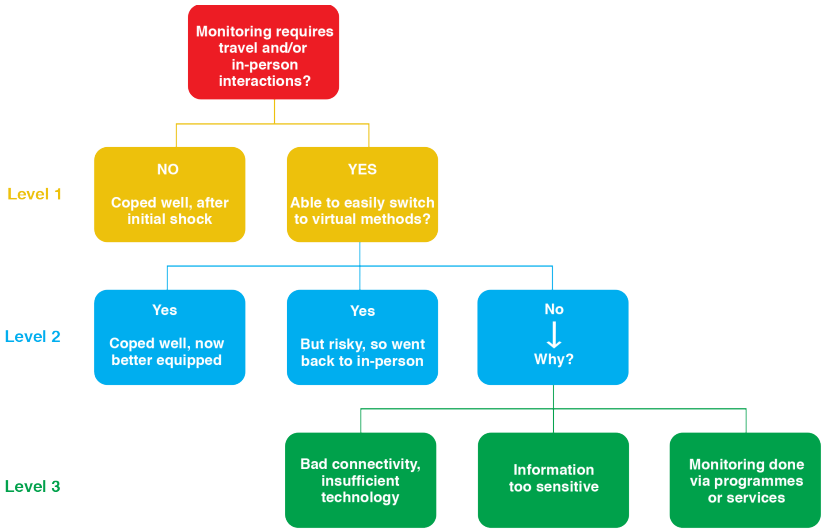
1.2 Field-level monitoring networks

As mentioned in the preliminary study, the vast majority of MRM monitors, considered 'non-essential' staff, were incapacitated for at least a few weeks during Phase 1. Monitors are key to the MRM: they not only document violation incidents, but they also play a critical role in identifying and verifying them. How they navigated their way back to operationality depended on each context.

Impact on the work of child rights monitors and corresponding adaptions

CTFMRs that had already relied on a network of field monitors using digital secure means of

Figure 2: Cascading impact of restrictions on field-based monitors



communication, for security or geostrategic reasons, were able to get back on their feet almost immediately after Phase 1. For these MRM situations (at Level 1 in Figure 2), very few adaptations were needed; the pandemic did not significantly alter the way they monitored grave violations because they did not systematically need in-person meetings.[8] In fact, one agency explained that the pandemic prompted them to set up remote monitoring systems in areas which still lacked them.

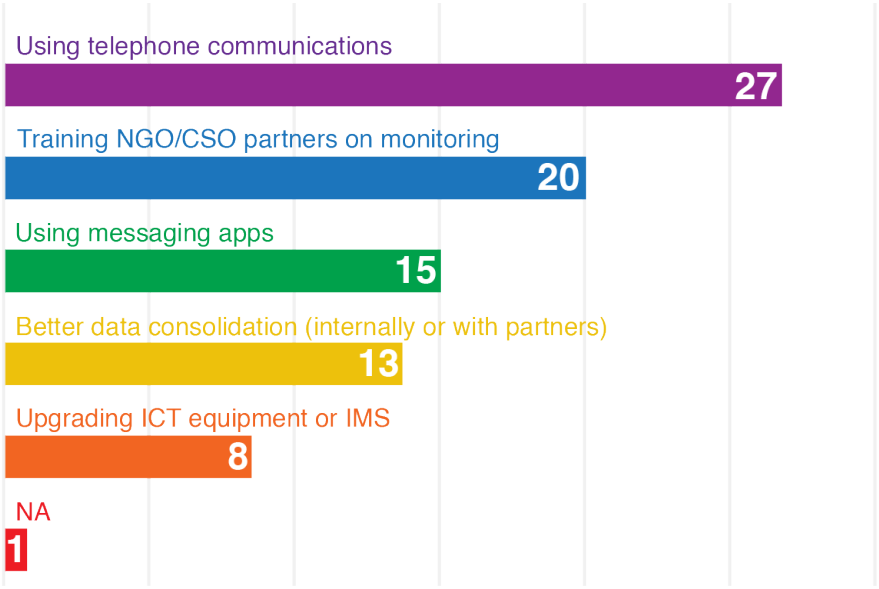
Level 2 in Figure 2 shows situations where monitoring was more significantly impacted, sometimes months beyond Phase 1, because it required travel and in-person interactions, particularly for verification of sensitive violations. In these contexts, many monitors started to use telephone communications to overcome COVID-19 restrictions and continue to liaise with sources (see Figure 3[9]). Based on the sample selected for this follow-up study, these situations can be classed into two broad categories: MRMs that welcomed and permanently adopted remote monitoring methods, and MRMs for whom it could only be a temporary solution, particularly if telecommunication networks were inadequate.

- In one situation, CTFMR members started using telephone communications for verification activities through the worst of the restriction period. Although the method is slow, they have permanently added it to their monitoring toolbox as a useful way to side-step COVID-19 restrictions and other types of access issues.

- In countries where MRM staff feared being monitored, this adaptation was sometimes deemed too hazardous. One CTFMR agency shared that their monitors had switched to telephone communications only as a short-term measure. As soon as restrictions were lifted, they resumed their usual in-person monitoring systems, for fear that telephone lines may not be secure.

Finally, Level 3 in Figure 2 shows CTFMRs whose monitors could not easily switch to virtual monitoring during the period of restrictions. One very tangible obstacle was poor telecommunications networks and internet connectivity; in some situations, community-based monitors first had to be equipped with mobile telephones. Remote monitoring was

Figure 3: Compilation of 35 survey responses to the question: "Which strategies or working systems have you developed to continue monitoring, documenting and verifying violations during the past two years?"



8 Although they did often need in-person meetings with victims/survivors and other sources for the verification of sensitive violations (namely recruitment and use of children, and sexual violence against children), so these incidents were late-verified. See OSRSG CAAC (April 2021), page 11.

9 Figure 3 shows that 27 respondents (77%) reported that they started using mobile telephones to continue their monitoring work, and 15 respondents (43%) started using messaging applications ('apps').

also impractical in situations where the MRM is highly politically sensitive and the confidentiality of telephone conversations cannot be guaranteed. In these situations, the verification aspect of monitoring was delayed until all restrictions were lifted.

So, while impact at Level 2 was significant but relatively short-term, impact for Level 3 MRMs was significant and longer-term because it was dependent on the mobility of their monitors. Indeed, when asked when they recovered adequate monitoring capacity, Level 1 and 2 CTFMRs generally gave dates within the first year of the pandemic (September 2020 to March 2021), whereas Level 3 CTFMRs cited much later dates (August 2021 to end of 2021) – although other factors sometimes compounded the impact of COVID-19 restrictions on data collection.[10]

Impact on relationships with community-based monitors

Another major and lasting barrier to monitoring was the closure of schools and the interruption of child protection programmes – both of which provide child rights monitors with opportunities to identify and document violations.[11] Where affected populations are difficult to access, or where MRM activities are sensitive, integrating monitoring in response programming can be very strategic.

This was particularly acutely felt in at least two of the countries in focus, where the interruption in CAAC programming (in Phase 1 of impact) severed contact with conflict-affected populations and thus with MRM-trained monitors at community-level over a significant period of time. The interruption undermined the MRM structure at its base. To mitigate this impact, one CTFMR conducted virtual capacity-building of monitors in 2021 in an attempt to restart reporting from community-based partners, but their impact has been limited and in-person trainings and activities will resume in 2022.

It is also worth noting that in some cases, although programmes were initially interrupted as a result of COVID-19 prevention policies, other factors came into play and prevented child protection actors from restarting them.

- In another MRM country, this problem was aggravated after CAAC funding was redirected to the COVID-19 response and increasing humanitarian needs in the country. This impacted the viability of CAAC programmes and numbers of violations identified. MRM focal points stressed that funds were needed to restart the process of networking with various partners at the community level (health and education professionals, community leaders, etc.) and rebuilding relationships broken in large part due to COVID-19.

- In other situations, local child protection committees were embedded in schools to monitor and coordinate response to violations, including attacks on education. When schools closed because of the pandemic, these committees were dually impacted: not only were they unable to document and respond to incidents which took place during the lockdown period, but, more worryingly, they were never allowed to re-establish themselves in the schools when they finally reopened, owing to a reshuffle of government priorities following the outbreak of COVID-19. In these countries, MRM monitors saw their capacity to monitor attacks on schools decrease significantly.[12]

A wide range of factors have contributed to reductions in funding for the child protection sector; it would not be fair to solely ascribe the programmatic disruptions at the community level to COVID-19. But the pandemic exacerbated and accelerated these country dynamics, contributing to significant community-level disruptions to the in-country MRM architecture. As indicated in Figure 3, CTFMRs used other methods to compensate for the diminished capacity of their monitors.[13] Furthermore, when they regained physical access to affected populations, many agencies expanded MRM trainings to include more local monitors. This has probably been the greatest and most long-lasting impact of the pandemic on monitoring.

10 Including political, security and climate crises. See Report of the Special Representative of the Secretary-General for Children and Armed Conflict to the Human Rights Council – A/HRC/49/58 (4 January 2022): https://undocs.org/HRC/49/58 paragraph 2

11 Some monitors also report on violations documented in detention centres. These were not closed, but monitoring visits were often suspended, interrupting one more source of MRM data. See section 2.3.

12 Interview with INGO participating in two MRMs in the Middle East region, 13 March 2022.

13 Including improving data sharing and consolidation among UN agencies, or with NGO and CSO partners (13 respondents, or 37%, reported doing that).

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2. IMPACT ON GRAVE VIOLATIONS AGAINST CHILDREN

The preliminary study set out to reveal the impact of the COVID-19 pandemic on trends and patterns of MRM violations. It quickly stumbled upon a number of complex issues. First, 2020 data was still incomplete at the time of publication, owing to the likely large number of missed allegations resulting from Phase 1 restrictions, and the sizeable verification backlog after allegations resumed later in 2021. Second, CTFMRs were concerned that any increase or decrease in data could be wrongly interpreted as violations trends, when it was as likely to reflect fluctuations in their monitoring capacity. Third, explaining that this capacity was dependent on a range of variables, including but not limited to COVID-19-related restrictions, most Country Task Forces interviewed were reluctant to pin violations on the pandemic, when a number of overlapping factors had been at play.[14] Notwithstanding the monitoring challenges mentioned above, is now a better time to understand the impact of COVID-19 on grave violations against children?

2.1. Note on 2020-2021 data

Although monitors are no longer contending with severe COVID-19 restrictions, the pandemic did alter MRMs, sometimes for the better, influencing the quantity and regularity of reports at different levels and in a myriad of manners.[15] Furthermore, significant political and security developments have impacted monitoring in at least four focus countries. These constraints explain why, two years on, there are still so few MRM-documented incidents, trends or patterns that can confidently be attributed to the pandemic and its effects.

However, with a bigger volume of violations documented over the pandemic period, and more in-depth analysis conducted by MRM and non-MRM actors on the impact of COVID-19 at the macro level, it is now possible to do two things: first, to discern some of the socioeconomic and other mechanisms triggered by the pandemic which have impacted violations. Second, to identify some of the groups that have been most exposed to this impact and are likely more affected than others.

2.2. The breakdown of protective structures and its trickle-down effects

Impact on social protection

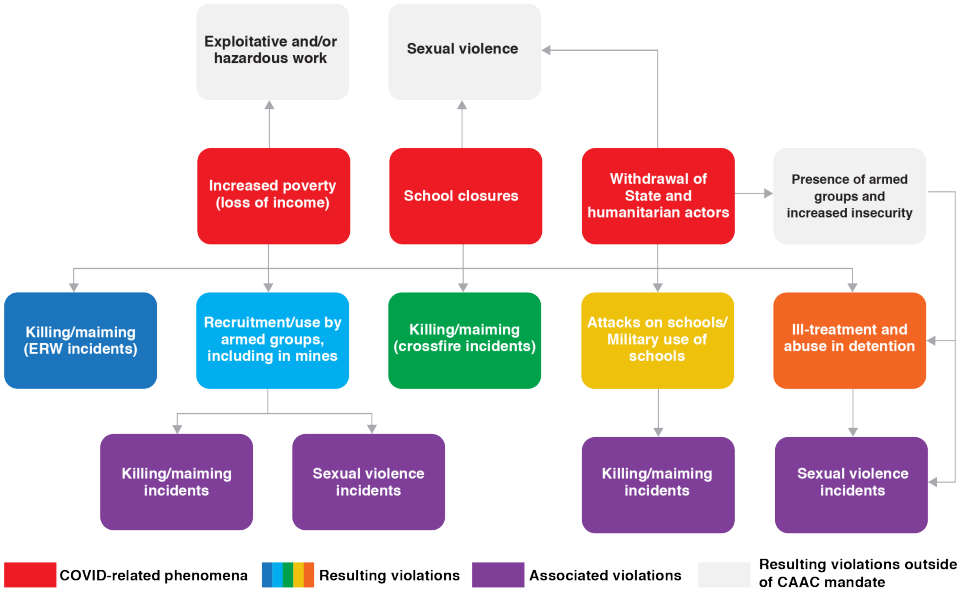
It may be difficult to observe and document the direct impact of the pandemic on the conduct of parties to conflict or the number of violations, but child protection and child rights experts around the world have now repeatedly pointed to the compounding effects that the COVID-19 pandemic had on children in emergencies at the macro protection level, and how these have created new paths through which the rights of children are being gravely violated in COVID-19 times and likely beyond it.

Three major societal changes (in red in Figure 4) resulting from the pandemic have severely damaged some of the most protective structures for children living in situations of armed conflict: (i) The sudden halt of economic activity endangered the precarious livelihoods of conflict-affected communities, resulting in a drastic reduction in household income. (ii) The similarly abrupt closure of schools deprived many children of this protective environment and left them vulnerable to violence, abuse and exploitation. (iii) The interruption of public services and humanitarian assistance cut communities off critical lifelines, sometimes overnight, leaving some communities exposed to the risk of unchecked violence by armed actors. These changes have resulted in an increased exposure to risks and harmful coping mechanisms for children and their families in a context of reduced assistance and monitoring. It is through the lens of these changes that CTFMRs and their partners now document and analyse incidents.

14 See OSRSG CAAC (April 2021), pages 14-15

15 As previously mentioned, monitoring agencies made a number of adaptations, including diversifying their sources of information, increasing the number of monitors, extending the area they monitor, etc.

Figure 4: Trickle-down effects of COVID impact on social protection



Violations resulting from increased exposure to risks

The most reported impact has been on **recruitment and use** of children. The majority of Country Task Forces shared their strong assumptions that the pandemic acted as a push and pull factor for children to be forced into armed groups. The combined and sudden loss of family income and education opportunities (particularly in remote, conflict-affected areas) significantly increased the vulnerability of children to this violation, with boys often bearing the responsibility for compensating for lost revenue and made to find work, including with armed groups.[16] Considering the fact that recruitment is often documented at the point of release, CTFMRs do not yet have evidence of COVID-19 as an indirect driver of recruitment, but they feel it is reasonable to assume, and a large proportion of MRM staff surveyed (20 out of 35 in Figure 5) identified this negative coping mechanism as relevant in their context.

At least four CTFMRs reported an increase in recruitment and use of children, and conceded that this was probably connected to the socioeconomic impact of measures taken to prevent COVID-19 transmission. Often, they noted that more immediate factors played a triggering role against this backdrop of increased vulnerability: namely, the presence or redeployment of armed groups in areas where schools were closed, and/or renewed fighting. This was documented by other CAAC observers in Colombia.[17]

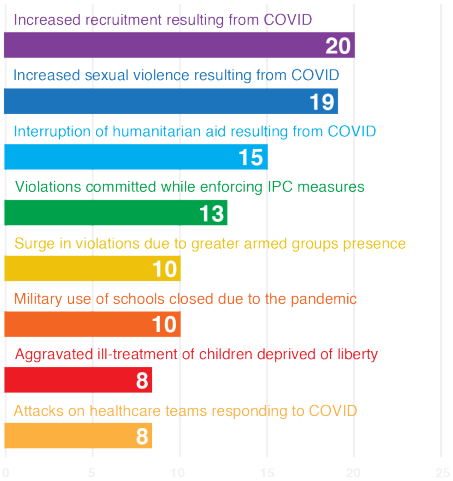
Once recruited, it is highly likely that children fall victims to a host of associated violations perpetrated by members of armed forces or armed groups, such as rape or other forms of sexual violence, or killing and maiming (see third layer of impact in purple in Figure 4), which would be documented at a later stage, if and when some of the children are released; their consequences will be long-lasting.

However, it should not be implied that all recruitment incidents are the direct result of economically-driven decisions made by children and/or their families. In some cases, especially in remote locations or in those with weak or no State presence, children may become victims of recruitment while looking for work. Or they can be pushed towards forms of labour which then greatly expose them to the risk of recruitment

16 Mid-2021, UNICEF and the International Labour Organization (ILO) had warned that nine million children had become at risk of child labour as a consequence of the COVID-19 pandemic – see "Child labour rises to 160 million – first increase in two decades" (10 June 2021): https://www.ilo.org/rome/risorse-informative/comunicati-stampa/WCMS_800090/lang--en/index.htm

17 Exchange with CAAC expert from Save the Children UK, 9 March 2022. See also International Crisis Group, "Lockdowns Produced a New Generation of Child Soldiers" (6 December 2021):https://www.crisisgroup.org/latin-america-caribbean/andes/colombia/lockdowns-produced-new-generation-child-soldiers which reports the routine recruitment of children as young as 11: "A perfect storm of accelerating conflict and new armed outfits, together with closed schools and economic desperation, has led to a surge in the number of youth and minors joining criminal ranks."

Figure 5: Patterns of violations likely to be linked to the COVID-19 pandemic



and use by armed groups. One situation illustrates this dynamic:

- In CAR, two studies have detected an alarming increase in the number of children working in gold and diamond mines since the outbreak of the pandemic – including mines managed by armed groups. Both link school closures to this increase. War Child specifies that boys and girls were recruited by armed groups, and large numbers of girls were sexually exploited in and around the mines.[18]

Children faced deadly risks even when not recruited by armed groups. In two situations, CTFMR members shared their strong suspicion that the pandemic played a significant part in the increase of killing and maiming incidents of girls and boys by explosive remnants of war (ERWs). Their assumption is that, with poverty increasing, many children engaged in scrap metal collection and sale in order to support their families. In one focus country, this was evidenced by a sharp rise in **ERW-related deaths and injuries**. This trend could become generalised as the majority of MRM countries regularly document ERW incidents and, as reported by mine action organizations, COVID-19 seriously delayed clearance and mine risk education activities in many affected countries.[19]

Widespread school closures during the pandemic may also have impacted the safety of children by exposing them to fighting between and among national security forces and armed groups. One CTFMR highlighted incidents of children caught in fighting and made a possible link between children's increased presence on the street following school closures and an upward trend in killing and maiming incidents.

Similar processes can lead to children arrested and detained for alleged national security offences. Some experts strongly suspect that governments are using COVID-19 states of emergency as a way to escalate arrests of children perceived as national security threats for other motives. The pandemic simply gave them an opportunity to arrest more alleged terrorist suspects as security forces are making sweeping arrests in their enforcement of COVID-19 restrictions. In at least three contexts, NGO observers shared that security forces were apprehending large numbers of individuals, including children, seemingly for breaching curfew orders or other restrictions, to then charge and convict many of them for national security-related offences, often after alleged confessions were elicited under duress.[20] In many situations, out-of-school children have ended up on the street, where they can be harassed by security

18 Namely the Anti-Balaka and a group known as the "3R" (Retour, Réclamation et Réhabilitation). See IPIS Insights, The impact of Covid-19 on Gold and Diamond artisanal mines in Western Central African Republic (July 2020): https://ipisresearch.be/wp-content/uploads/2020/07/200723-insights-The-impact-of-Covid-CAR.pdf, page 17; and War Child UK, COVID 19 in Fragile Humanitarian Contexts – Impacts of the Pandemic on Children (July 2020): https://www.warchild.org.uk/sites/default/files/2022-02/War-Child-UK-COVID-19-in-fragile-humanitarian-contexts-Report.pdf, page 11

19 See International Campaign to Ban Landmines, Landmine Monitor 2020: http://www.the-monitor.org/en-gb/reports/2020/landmine-monitor-2020/preface.aspx and Landmine Monitor 2021: http://www.the-monitor.org/en-gb/reports/2021/landmine-monitor-2021/preface.aspx

20 Interview with INGO expert on children's access to justice in the Middle East and North Africa, 7 April 2022.

forces enforcing COVID-19 restrictions[21] while being perceived as potentially vulnerable to recruitmet by radicalised armed groups.

Another serious violation has resulted from the macro-level prevention measures taken by governments: **attacks on schools** vacated during lockdowns and sometimes closed for long periods afterwards. CTFMRs in three situations reported that the closure of schools during the first year of the pandemic resulted in a withdrawal of civil servants and child rights monitors, which emboldened armed actors into attacking and exerting control over the schools and the school community. In one instance, damage was caused to the building.[22]

The same dynamics led to a noticeable increase in the **military use of schools** by both armed forces and armed groups. For example, MRM data on Yemen attributes incidents of military use of schools to COVID-19 school closures.[23] And the Global Coalition to Protect Education from Attack (GCPEA) compiled information on such incidents in 18 other MRM countries, with at least one school damaged as a result. The organization says it is reasonable to assume that many more incidents of military use of schools occurred and have gone unreported. [24]

In addition to the socioeconomic changes mentioned above, many observers believe that the COVID-19 pandemic has negatively impacted the broader security and protection contexts in many of the focus countries – therefore also creating conditions for increased and large-scale community-level insecurity.[25] This was often put forward by CTFMRs interviewed for this follow-up study as a possible explanation for increasing trends in killing and maiming, abduction and sexual violence among other violations (see yellow bar in Figure 5). The OSRSG CAAC has also observed a trend in cross-border spill over of conflicts and increased intercommunal violence across almost half of the 21 situations it monitors, with corresponding patterns of violations against children.[26] Recent research by MercyCorps detailed the "corrosive effect" that the pandemic has had on governance and human rights, thus exacerbating violence in Afghanistan, Colombia and Nigeria.[27]

2.3. Some of the most vulnerable groups

COVID-19 risk mitigation measures had a disproportionate impact on groups of children with existing vulnerabilities, especially those that are more difficult for humanitarian actors and child rights monitors to reach.

Displaced and refugee children

Groups that were already heavily dependent on humanitarian aid have been disproportionately affected; this concerns children of refugees and internally displaced people (IDPs), particularly those that are separated or unaccompanied.[28] A large proportion of CTFMRs reported important delays or reductions in humanitarian aid in the first year of the pandemic. In Iraq, for example, assistance to more than 850,000 IDPs, including about 385,000 children, was delayed during Phases 1 and 2 of impact in 2020.[29]

Refugee and IDP families are particularly reliant upon casual labour and employment opportunities in the informal economy without any form of social protection. When COVID-19 restrictions were put in place, many lost their livelihoods and became entirely

21 "Evidence shows that many children, including children living on the streets, were detained for violating pandemic curfew orders and movement restrictions." UNICEF, "Reimagine justice and end child detentions" (15 November 2021): https://news.un.org/en/story/2021/11/1105812

22 MRM data for 2021 and interview with INGO representative based in the Middle East, 13 March 2022.

23 "The Houthis took advantage of school suspensions due to the COVID-19 pandemic and began to use schools as training and military barracks. Schools were used as sleeping quarters or offices for soldiers and storage for military equipment." Report of the Secretary-General on Children and Armed Conflict in Yemen - S/2021/761 (27 August 2021): https://www.undocs.org/en/S/2021/761 paragraph 38

24 GCPEA, Education under Attack 2022 (June 2022): https://protectingeducation.org/publication/education-under-attack-2022, page 54 and interview with GCPEA representatives on 8 April 2022.

25 In the 2021 study, several Country Task Forces had expressed their concern that the withdrawal of State civilian and military presence in remote areas during the first phase of impact created an institutional and power vacuum that allowed armed groups to seize vast swathes of territory, leading to an upsurge of exactions against populations under their control. See OSRSG CAAC (April 2021), page 15

26 Interview with current SRSG CAAC, Virginia Gamba, 29 March 2022. At the start of the pandemic, the SRSG on Sexual Violence in Conflict had also flagged the potential for COVID-19 to exacerbate existing conflict dynamics and the risk of sexual violence. See ***Implications of COVID-19 for the Prevention of and Respo***nse to Conflict-Related Sexual Violence, Policy Brief (22 May 2020): https://www.nsvrc.org/sites/default/files/2021-02/202005-OSRSG-SVC-Policy-Brief-Implications-of-COVID-19-on-CRSV-Agenda.pdf

27 Mercy Corps, A ***Clash of Contagions: The Impact of COVID-19 on Conflict in Nigeria, Colombia, and Afghanistan*** (June 2021): https://www.mercycorps.org/sites/default/files/2021-06/Clash-of-Contagions-Full-Report-June-2021.pdf

28 War Child UK (July 2020), page 10

29 ***Report of the Secretary-General on Children and Armed Conflict in Ira***q – S/2022/46 (26 January 2022): www.undocs.org/en/S/2022/46 paragraph 41

dependent on assistance for their survival at a time when that assistance was reduced. In the Middle East and North Africa (MENA) region alone, UNHCR reported that 350,000 refugees and IDPs contacted them or their partners in the three months following the COVID-19 outbreak to ask for urgent assistance.[30] More than other groups, refugees and IDPs have faced food insecurity and have been compelled to adopt negative coping mechanisms, with their children being particularly exposed to the risk of recruitment or other forms of exploitative and dangerous labour, in addition to gender-based violence (GBV) including child, early and forced marriage (for girls).[31]

Girls at risk of sexual violence

An increase in GBV incidents, including sexual violence, has been reported virtually all around the globe since the start of the pandemic.[32] Emerging MRM evidence, following late verifications for 2020-2021, confirms that this trend includes children affected by armed conflict (see also dark blue bar in Figure 4). The Global Protection Cluster also reported higher incidents of sexual exploitation of children affected by extreme poverty and food insecurity as a consequence of the pandemic.[33] Numerous child protection actors reported a rise in early marriages and female genital mutilation (FGM) in emergency contexts, again as an indirect consequence of COVID-19, but not always attributable to parties to conflict.

If data remains scarce, it is likely to be because the pandemic drastically reduced victims' and survivors' access to emergency assistance, reporting channels and accountability mechanisms – at least during the first year. A large number of incidents were therefore missed, with victims unlikely to report them by telephone or after the fact, particularly in areas taken over by armed groups.[34] When and if public and NGO services resumed, they often had to contend with reduced funding due to the mobilisation of resources for the COVID-19 response (see section 3.3). According to the UN Special Representative to the Secretary-General on Sexual Violence in Conflict, sexual violence has "gone underground."[35]

Although it disproportionately affects girls, sexual violence is also routinely perpetrated against boys. The most vulnerable children are once again those that are the most marginalised and hidden from view: children in institutions, such as prisons and schools, that lack oversight; children on the move; or children in remote, conflict-affected communities, all the more so if they are trapped inside an armed group. Special efforts should be made to reach the victims of what is often called a 'shadow pandemic' of sexual violence.

Children detained on security grounds

Many Country Task Forces (about a quarter of those surveyed, see to Figure 5) believed that COVID-19 prevention regimes had an adverse impact on children detained for actual or alleged association with armed groups (including those designated by the UN as terrorist groups) or children otherwise perceived as national security threats. Emerging evidence causes great concern about this already extremely vulnerable group of children.

The preliminary study reported on the impact that isolation policies and other IPC measures had on children deprived of liberty. Following the outbreak of COVID-19, many governments enacted measures which effectively reduced visits from family members and support workers, while increasing time detainees spent in cells and solitary confinement – sometimes with tragic consequences.[36] In addition to the adverse impact these isolation measures can have on the fragile mental wellbeing of detainees, the interruption of visits from support workers made them much more vulnerable to abuse and exploitation.

30 UNHCR, "Coronavirus emergency appeal UNHCR's preparedness and response plan" (May 2020): https://reporting.unhcr.org/sites/default/files/COVID-19%20appeal%20-%20REREVISED%20-%2011%20May%202020.pdf page 7

31 See for example Save the Children, ***Protect a Generation: the impact of COVID-19 on children's lives*** (2020): https://resourcecentre.savethechildren.net/document/protect-generation-impact-covid-19-childrens-lives/ page 76; and S/2022/46, paragraph 35

32 See UN Women, ***Measuring the shadow pandemic: Violence against women during COVID-19*** (24 November 2021): https://data.unwomen.org/sites/default/files/documents/Publications/Measuring-shadow-pandemic.pdf Indeed, GBV is known to spike during armed conflicts and other humanitarian emergencies.

33 See Save the Children, Beyond the Shadow Pandemic: Protecting a Generation of Girls from Gender-Based Violence through COVID -19 to Recovery (2020): https://resourcecentre.savethechildren.net/pdf/sc_covid19_gbv_brief_english.pdf/ page 7. Also refer to the example on girls working in mines in CAR, in section 2.2.

34 See OSRSG CAAC (April 2021), page 17

35 Devex, "COVID-19 has driven conflict-related sexual violence 'underground'" (October 2021): https://www.devex.com/news/covid-19-has-driven-conflict-related-sexual-violence-underground-101717

36 An Afghan boy committed suicide after being placed in solitary confinement when prison authorities believed he had contracted the virus. See OSRSG CAAC (April 2021), page 16

In Iraq, where a large majority of child detainees have been convicted of security offences, one NGO reported a shocking increase in abuses committed in detention centres during the pandemic.[37] During periods of restrictions, but also with each new infection peak, staff working in or visiting the centres were reduced to a minimum – keeping social workers, lawyers, psychologists and medical staff out, and leaving security staff mostly alone with detainees, including children. Beatings, verbal harassment and in some instances sexual assault against children, which are sometimes reported weeks after the fact, if at all, when visits resumed, were reported. It is assumed the majority of incidents have gone unreported. Support and monitoring via telephone, where such contact is allowed, is not adequate. Often rejected by their families because of their alleged offences, the fear and isolation felt by these girls and boys can be extreme.

Children detained on national security grounds, including those in military detention, and children detained for their alleged association with armed groups are often invisible and highly vulnerable. They generally do not benefit from special protective measures afforded by child-friendly justice standards, and very few have benefited from COVID-19 exemptions – such as releases (see section 3.2) – made available to other children. More research and attention must be paid to this group.[38]

These are only three groups of children facing heightened risks; many different categories of children experienced or will experience the consequences of the pandemic in different ways and at different times, as its shockwaves spread through societies affected by conflict over time.

37 Interview with INGO expert on children's access to justice in MENA region, 7 April 2022.

38 See for example UNICEF, ***#Reimagine Justice for Children*** (November 2021): https://www.unicef.org/media/110176/file/Reimagine-Justice-for-Children.pdf

3. IMPACT ON RESPONSE TO VIOLATIONS

The capacity of Country Task Forces and their partners to engage with parties to conflict and assist victims of violations was severely limited until the end of 2020. This follow-up research aims to draw lessons from that time by spotlighting positive coping mechanisms and adaptations made by CTFMRs and their partners to ensure programme continuity despite restrictions. This research also widens the scope of the initial study to include observations on the impact of the pandemic on the work of international MRM actors.

3.1. CTFMR engagement with parties to conflict

Dialogue[39]

Dialogue with representatives of **governments and national armed forces** was generally easier to sustain through COVID-19 restrictions, particularly for CTFMRs that were able to rely on video teleconferencing (VTC). Some even managed to draw benefits from the situation:

- One CTFMR was able to strengthen its advocacy on the Safe Schools Declaration by involving international MRM partners, such as the SRSG CAAC, UNICEF Headquarters and UNSC Member States, in webinars and virtual advocacy meetings with the government. This was not regular practice pre-pandemic.

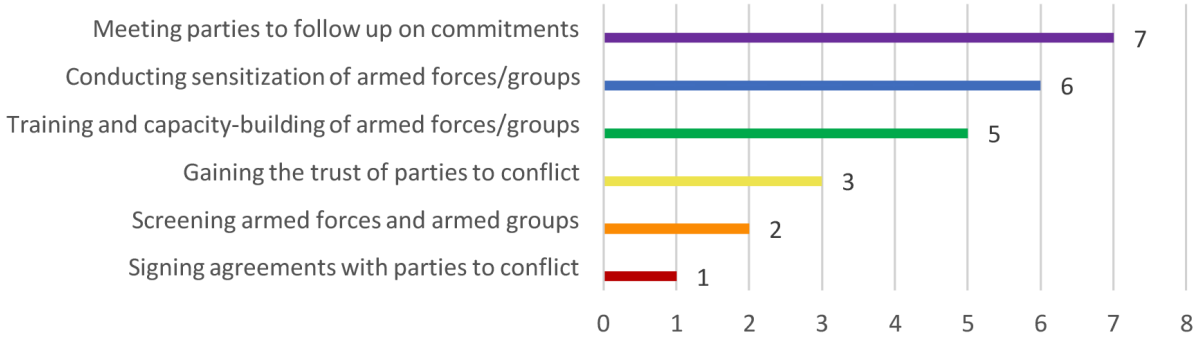
- In another MRM country, moving to virtual meetings inspired the capital-level UN/Inter-ministerial technical working group on CAAC[40] to systematically link up to its regional subsidiaries, which had never been done before. Coordination on CAAC issues among these UN and government actors has since been much more efficient.

39 This research distinguished two types of engagement with parties to conflict: (1) dialogue (which can be virtual) and (2) response-programming (with activities which often have to be in-person).

40 This is the "Joint Technical Working Group on Children and Armed Conflict" and its provincial iterations. (In French, the *Groupe Technique de Travail Conjoint/GTTC*) in the DRC.

Photo credit: © UNICEF/UN052044/

Figure 6: Activities involving engagement with parties to conflict which, according to CTFMRs surveyed, continue to be affected by the pandemic



Maintaining dialogue with government interlocutors was more challenging for CTFMRs in countries with poor ICT capacity. In one situation, contact with two ministries was lost and projects delayed for weeks when their staff contracted COVID-19. However, constructive solutions were also found: one agency explained that, when movement and in-person meetings were only allowed for essential staff, they briefed their senior leadership so they could convey CAAC advocacy messages directly to the Minister of Defence.

In contrast, maintaining contact with **non-state actors** (NSAs), which is a challenge at the best of times, became significantly more difficult with COVID-19 restrictions. In a few cases, existing contact with armed groups was maintained via telephone or VTC, but no outreach could be conducted during Phases 1 and 2 of impact.

Response programming

Engagement requiring in-person interactions with parties to conflict was much more impacted.[41] A third of CTFMR members surveyed report that their capacity to conduct this type of activities is still somewhat affected. Unsurprisingly, activities cited (see Figure 6) are those requiring domestic travel (which only resumed recently and is sometimes still subject to conditions) and large gatherings (which still have number limits).

As previously mentioned, CTFMRs with reliable internet connections, and which had pre-established trust with NSA interlocutors, managed to move some of these activities online,[42] but this was exceptional.

- One major success story is that of the Myanmar CTFMR, which was able to turn COVID-19 restrictions into an opportunity to engage and convince the first armed group in the country to sign an Action Plan. Regular, virtual communications were the perfect tool for the type of negotiations needed with this remote armed group.[43]

Again, the variety of adaptations described above shows the ability of Country Task Forces to circumvent obstacles or turn them into advantages, thus strengthening their advocacy in the process. Even if some challenges remain and they are rarely solely due to the effects of the pandemic, many of these adaptations will benefit their work in the long run.

41 In 2021, 86% of CTFMR members surveyed reported having to postpone or cancel in-person activities (e.g. the dissemination of Action Plans; signature of agreements with armed groups; screening of troops; training and sensitization of armed actors; monitoring missions; etc.) owing to movement restrictions and a resulting absence of staff on the ground to carry out this type of work. See OSRSG CAAC (April 2021), page 20

42 E.g. training and the joint drafting of child protection standards. See OSRSG CAAC (April 2021), pages 20-21.

43 OSRSG CAAC, "On World Children's Day, a new hope for children in Myanmar: The Democratic Karen Benevolent Army signs a Joint Action Plan to End & Prevent the Recruitment and Use of Children" (20 November 2020): https://childrenandarmedconflict.un.org/2020/11/on-world-childrens-day-a-new-hope-for-children-in-myanmar-the-democratic-karen-benevolent-army-signs-a-joint-action-plan-to-end-prevent-the-recruitment-and-use-of-children and UNICEF, "Security Council Arria Formula Meeting: Impact of the COVID-19 pandemic on violations against children in situations of armed conflict – Statement by Manuel Fontaine" (7 May 2021): https://un.mfa.ee/wp-content/uploads/sites/57/2021/05/Arria-formula-impact-of-COVID-on-grave-violations_UNICEF.pdf

3.2. Country-based responses to violations

Country Task Forces were unanimous: any direct impact of the pandemic on programmatic responses to violations was limited to 2020 and early 2021. With more perspective and documentation on the evolution of CAAC programmes in the last two years, this study can shed more light on this impact and on its repercussions on children themselves.

Release and reintegration of children associated with armed forces and armed groups

Owing to restrictions on travel and large gatherings, many activities relating to identifying, releasing and providing reintegration support to children associated with armed forces and armed groups (activities commonly referred to as "DDR") were put on hold for a year, and sometimes longer. DDR activities have now resumed across all MRM situations, but what were the tangible effects of this long interruption on children and on CAAC practitioners?

- Impact on **family tracing and reunification** (FTR) was significant. Following the COVID-19 outbreak, travel across regional or national borders became impossible almost overnight, putting an abrupt stop to FTR activities. Some children saw their planned return home cancelled at the last minute. In the worst cases, they were stranded for weeks or even months, sometimes in a foreign country.[44] In Somalia, UNICEF and its partners successfully advocated with the authorities for child protection and social workers to be recognised as "essential workers" so that they could continue their work, including FTR follow-up visits.[45]

- Owing to delayed reunification, children spent much longer in **interim care centres** (ICCs). Instead of a maximum stay of 8-12 weeks, some ended up staying as long as 5 months.[46] As ICC capacity was lowered to mitigate the risk of contamination, visits were reduced,[47] and some children diverted to traditional care centres (or family-based care).[48] These adaptations had extremely negative consequences on the well-being of already vulnerable children. They also considerably increased ICC running costs for NGOs managing them.

- Finally, although **economic reintegration** projects progressively resumed as restrictions lifted, they are taking place in communities and economies that have been ravaged by the effects of the pandemic. Children who managed to complete their vocational training now face significant challenges in finding employment or starting a business. Those who could not complete their training will lack the government certification needed to find work. And children whose preference was to return to **education** also face prolonged and intermittent school closures. These lasting obstacles narrow children's opportunities and are likely to have a long-term impact on their lives.

Hence, the impact of the pandemic on DDR did not stop when activities resumed. Further, some CAAC practitioners interviewed for this study expressed grave concerns about further reductions in DDR funding as a result of the pandemic (see "Funding" in section 3.3 below).

Prevention

In the first year of the pandemic, mobility restrictions and capacity limits on events and meetings had seriously curtailed the type of large, in-person gatherings needed for prevention. This prompted CTFMRs and their CAAC partners to seek alternative methods to conduct crucial prevention initiatives. These could be cost-saving or, on the contrary, result in significant additional expenses:

- One CTFMR shared that they had been able to maintain a crucial prevention activity through the worst of the restrictions in 2020 by equipping and supporting the Child Protection Unit of the Ministry of Defence to conduct sensitisation of

44 See for example the story of Augustin, whose return home was delayed for months, in International Committee of the Red Cross, "As if the War Was Not Enough" – Stories of Hardship and Resilience in Times of COVID-19 (19 April 2021): https://www.icrc.org/en/document/as-if-war-was-not-enough page 44

45 See also World Vision, ***Child Protection and COVID-19: Somalia Case Study*** (16 February 2022): https://www.wvi.org/sites/default/files/2022-02/SOMALIA_Case%20Study_Final_0.pdf

46 Alliance for Child Protection in Humanitarian Action (the Alliance), "Webinar on Adapting CAAFAG programming in the context of COVID-19: one year on" (September 2021): https://alliancecpha.org/en/child-protection-webinars/webinar-adapting-caafag-programing-context-covid-19-one-year

47 In some countries, smaller teams of social workers were deployed to the centres to live with children during lockdown periods. See the Alliance's webinar on CAAFAG (September 2021)

48 Interview with the Co-lead of Task Force on Children Associated with Armed Forces and Armed Groups (CAAFAGs) of the Alliance, 3 March 2022.

their own troops at a time when some MRM and international UN staff had left the duty station following the suspension of commercial flights.

- Similarly, an NGO in Mali supported communities to carry out their own prevention work by training dozens of focal points on identification and referral of separated and unaccompanied children, and of child recruitment cases. Precise and timely reporting systems were established (via messaging apps) along with a "cascade of awareness", whereby each trainee had to sensitize 5 additional individuals in their community to increase awareness while avoiding large training events.[49]

Where child protection funding for was made available again, CTFMRs resumed in-person prevention activities, including MRM trainings; child protection sensitisations, mine risk education (MRE) and violence prevention workshops in communities; training of social workers or case workers involved in FTR; and gender-awareness and adolescent life-skills programmes.

Children deprived of liberty

The preliminary study highlighted coordinated and global advocacy efforts to pressure governments into releasing children deprived of liberty, as infection prevention measures were aggravating their situations. At the time the study was written, most releases had excluded children detained on charges related to national security and affiliation with armed groups.[50] Since then, children were released in at least four MRM situations.[51] This is a positive and promising development. However, child protection actors warned that, when releases happened en masse, their social workers were not always able to support each child's psychosocial recovery and reintegration.[52]

Children in the justice system were confronted with significant delays as restrictions slowed judicial proceedings and limited the mobility of lawyers, sometimes prompting the suspension of trials or even the closures of courts. Experts fear that such measures are likely to have resulted in extensive periods of pre-trial detention. Other COVID-19-related measures have had similar consequences: in Iraq, the CTFMR reported that the suspension of international flights created a one-year delay in the voluntary repatriation and reintegration of foreign children detained for alleged association with ISIL.[53]

Accountability

The pandemic's impact on children's access to justice was most felt in 2020, when courts shut down and judicial proceedings were severely disrupted during the lockdown period. Efforts to hold perpetrators of grave violations accountable were thus frozen in at least two MRM situations. This includes the DRC, where ongoing trials of armed group commanders alleged to have recruited and used children (among other crimes) were suspended as a result of the COVID-19 restrictions in 2020.[54] They were eventually convicted in November that year, after proceedings resumed.[55]

More worryingly, in Afghanistan the outbreak of COVID-19 further delayed the work of a Special Committee established by the Attorney General's Office to investigate and prosecute alleged perpetrators of sexual violence against boys in Logar province.[56] This delay was extremely concerning in a context where the provincial authorities had already been criticised for their lack of progress on the

49 Alliance webinar on CAAFAG (September 2021)

50 OSRSG CAAC (April 2021), page 16; see also UNICEF, Access to Justice for Children in the era of COVID-19: Notes from the Field (December 2020): https://www.unicef.org/media/92251/file/Access-to-Justice-COVID-19-Field-Notes-2021.pdf page 48

51 There were "10 children accused of association with armed groups" in CAR, according to the Report of the Secretary-General on Children Affected by Armed Conflict in the Central African Republic – S/2021/882 (15 October 2021): https://www.undocs.org/S/2021/882 paragraph 53; "48 boys convicted of security -related charges, including an alleged association with Da'esh" in Iraq according to the Report of the Secretary-General on Children and Armed Conflict in Iraq – S/2022/46 (26 January 2022): http://undocs.org/S/2022/46 paragraph 49; and "70 formerly associated children detained in a military facility" in Yemen, according to UNICEF in "Security Council Arria Formula Meeting: Impact of the COVID-19 pandemic on violations against children in situations of armed conflict – Statement by Manuel Fontaine" (7 May 2021).

52 Alliance and UNICEF, "Webinar on COVID-19 and Children Deprived of their Liberty" (28 April 2020): https://www.youtube.com/watch?v=CJ9sDqqtquc

53 S/2022/46, paragraph 48

54 Report of the Secretary-General on Children and Armed Conflict in the Democratic Republic of the Congo – S/2020/1030 (19 October 2020): http://undocs.org/S/2020/1030 paragraph 60

55 Human Rights Watch (HRW), "DR Congo: Militia Leader Gets Life Term for Atrocities" (24 November 2020): https://www.hrw.org/news/2020/11/24/dr-congo-militia-leader-gets-life-term-atrocities

56 Report of the Secretary-General on Children and Armed Conflict in Afghanistan – S/2021/1662 (16 July 2021): http://undocs.org/S/2021/1662 paragraph 72

investigation, presumably based on their reluctance to take action against local officials. These were alleged to have abused hundreds of boys in a State school.[57]

3.3. The international response

By drastically changing the working methods of the MRM and wider CAAC actors globally, the pandemic also impacted international policy and advocacy efforts to protect children living in situations of armed conflict. This includes the OSRSG CAAC, as well as the work of the UN Security Council (UNSC) which, at UN Headquarter (UNHQ) level, centralises all MRM information and resolves UN action to end and prevent further grave violations. The global donor response to COVID-19 also had notable consequences on the CAAC sector.

OSRSG CAAC engagement

Evidently, the SRSG CAAC and her team have not been able to conduct any official visits or technical missions to MRM countries until 2022. **Desk Officers,** key actors in the process of analysing and presenting MRM data to the UN Security Council, point out that the loss of this regular (albeit infrequent) contact with MRM Focal Points sometimes slowed down communication on CAAC matters, particularly when either party was new in their post. However, they also stressed that meetings with CTFMRs have always been mostly virtual, and that, by systematizing the use of VTC, the pandemic actually made communication with field colleagues easier and more frequent. As they were able to resume travelling in 2022, after a two-year gap, they consider the overall impact on their work to have been minimal.[58]

The interruption of the **SRSG CAAC**'s official visits may have been more problematic as much of the effectiveness of her advocacy rests on direct engagement with governments in high-profile, often publicised meetings.[59] Here again, the Office was able to leverage COVID-19-related constraints to achieve many of its goals. Since in-country advocacy was no longer conditioned upon official missions, the SRSG exploited the flexibility afforded by VTC to multiply engagement opportunities with high-level government and military officials together with CTFMR Co-Chairs. This enabled her to secure several crucial dialogues with government representatives leading to at least two key advocacy successes.[60] Special efforts were also deployed to ensure follow-up action on commitments made in such meetings.[61] To supplement this advocacy, the SRSG also increased the pace of her meetings with NY-based Ambassadors and Member States. In some cases, these measures were not sufficient, as virtual engagement did not suit the sensitivity of the issues at stake – these situations will be prioritised when travel resumes in 2022.[62]

UN Security Council and its Working Group on CAAC

The work of the Security Council Working Group on Children and Armed Conflict (SCWG-CAAC) became entirely virtual overnight, immediately after the COVID-19 outbreak, lasting about a year. Despite the fact that country visits were no longer possible, there were major advantages to be found in these new working modalities. The use of closed videoconferencing facilities, followed by written procedure, allowed the SCWG CAAC Co-Chairs to shed considerable amounts of bureaucracy. As a result, and because they had established good in-person working relationships pre-COVID-19, SCWG-CAAC members were able to accelerate the pace of CAAC meetings and negotiations and surpass their goals.[63] As VTC meetings became normalised, so did high-level CTFMR briefings to the SCWG-CAAC, making it much easier for both parties to work

57 "Activists have told HRW that provincial officials are seeking to terminate the investigation, regardless of whether it has made progress. A number of diplomatic missions in Kabul have raised concerns about political pressure to cut short the investigation." Human Rights Watch, "Afghanistan: Sexual Assaults Go Unpunished" (12 February 2020): https://www.hrw.org/news/2020/02/12/afghanistan-sexual-assaults-go-unpunished

58 Interviews with six OSRSG CAAC Desk Officers, December 2021- February 2022.

59 The SRSG's mode of communication with listed armed groups did not significantly change during the pandemic because their often remote, unsafe and/or secret locations means that she generally reaches them by satellite telephone or Zoom.

60 In two situations: (1) India and (2) Israel and the State of Palestine

61 For example, the Office provided note-takers in order to systematically create and share formal records of virtual meetings; it also regularly communicated with relevant parties on decisions made at these meetings.

62 Interview with SRSG Gamba, 29 March 2022

63 Under the Belgian chairmanship in 2019-2020, the WG-CAAC became the Security Council's "most active subsidiary organ": it examined 14 country-specific reports out of the 14 situations with listed parties and it adopted 13 Conclusions. See Verstichel. Annelies, Belgium's Chairmanship of the Security Council Working Group on Children and Armed Conflict, 2019-2020 (March 2022): https://ojs.library.dal.ca/allons-y/article/view/11176/10092 see also Letter dated 23 December 2020 from the Permanent Representative of Belgium to the United Nations addressed to the President of the Security Council (24 December 2020): https://digitallibrary.un.org/record/3896503?ln=fr page 2

together to follow up on Council Conclusions at UNHQ and country levels combined.[64]

Virtual Security Council Open Debates on CAAC offered an unprecedented opportunity to include more participation from non-New York-based briefers. Another positive leveraging of COVID-19 restrictions at the UN Security Council (UNSC) level has been the participation of child representatives in Open Debates.[65] There had been very little precedent, due in large part to the logistical and safeguarding challenges linked to organising a child's travel to New York. The June 2020 meeting marked the first time a girl addressed the UNSC in an Open Debate. Two additional girls participated in CAAC Open Debates in September that year. This is an encouraging development and one which should be embedded in future practices.

CAAC NGOs conducting evidence-based advocacy

On a less positive note, COVID-19 restrictions and resulting changes in the UNSC working methods limited NGOs' physical access to the UN building from the start of the pandemic to June 2022, preventing the effective participation of civil society, including accredited organizations, in UNSC processes for more than two years.[66] This long interruption in face-to-face interactions with UNSC members in the margins of meetings have fractured some of the relationships that NGOs had built over time, which allowed them to advocate on specific CAAC issues in an informed and timely manner.

Generally, international NGOs saw undeniable benefits to virtual working methods. Now that they are the norm, it is easier, for example, to secure meetings with UN or government officials in different countries. Headquarters-based specialists can also support field-based colleagues in their advocacy with government and military authorities where this is done via VTC. But there are significant setbacks: virtual advocacy is not as effective. In addition, some smaller organizations have not been able to conduct in-country research for more than two years, which evidently stunts their ability to understand emerging issues and advocate on behalf of children affected by armed conflict. They also deplore the fact that some donors continue to favour remote working methods, for financial reasons, and stress the importance of maintaining a minimum level of in-person research, policy and advocacy activities.[67]

Funding

CTFMRs and their partners reported that international donors had generally been flexible regarding additional costs incurred for COVID-19-related reasons in ongoing projects,[68] at least in the first phase of impact. After most restrictions were lifted, CAAC actors expressed concerns that some donors ended a de facto grace period and started expecting the same deliverables from implementing partners who were already financially stretched by a global protection funding crisis.[69]

64 Interview with former member of the SCWG-CAAC, 2 April 2022. In at least one MRM country, UN Member States in a local "Group of Friends" of CAAC conducted virtual visits to conflict-affected communities, where they were able to have direct exchanges with families in order to better understand the situation of children.

65 See Watchlist on Children and Armed Conflict (Watchlist), "At Virtual Open Debate, Youth Ambassador Reminds Security Council of the Need to Consider Children's Perspectives" (23 June 2020): https://watchlist.org/at-virtual-open-debate-youth-ambassador-reminds-security-council-of-the-need-to-consider-childrens-perspectives; and Watchlist, "Youth Speakers Call On Security Council To Take Action To Protect Schools In Armed Conflict" (10 September 2020): https://watchlist.org/youth-speakers-call-on-security-council-to-take-action-to-protect-schools-in-armed-conflict

66 Watchlist, "Joint CSO Letter to the UN Security Council on Participation and Transparency" (17 April 2020): https://watchlist.org/wp-content/uploads/joint-cso-letter-to-unsc-on-participation-transparency.pdf; Foreign Policy, "NGOs Frozen Out of U.N. Building" (23 September 2021): https://foreignpolicy.com/2021/09/23/unga-civil-society-ngo-blocked-headquarters-covid

67 Interviews with two New-York based INGOs working on CAAC issues, February and March 2022.

68 For example, when children had to be kept in ICCs for longer periods of time; if trainings had to be split due to limits on gatherings; or because of the expense relating to the purchase and distribution of hygiene kits.

69 Interviews with NGO practitioners with programmes in DRC, South Sudan and Yemen, March and April 2022.

Additionally, as explained in Part 2, COVID-19-related restrictions have dealt a serious blow to livelihoods and protection structures in conflict-affected countries, systematically undermining the safety and wellbeing of girls and boys in the mid to long term. It is a time when protection (one of the most underfunded sectors) must be strengthened. Yet at country and agency levels, resources were often mobilised to support health and WASH-based COVID-19 responses focused on minimising the spread of the virus, to the detriment of protection work. Many CAAC practitioners are ringing an alarm bell about this situation, which could aggravate harmful and long-term repercussions for children, and calling on donors to fund COVID-19 response plans that support existing protection programmes to address COVID-19-related risks.[70]

70 See for example World Vision, COVID-19 Aftershocks: Secondary impacts threaten more children's lives than disease itself (April 2020): https://www.wvi.org/sites/default/files/2020-04/COVID-19%20AFTERSHOCKS-%20SECONDARY%20IMPACTS%20THREATEN%20MORE%20CHILDREN%E2%80%99S%20LIVES%20THAN%20DISEASE%20ITSELF_0.pdf
War Child UK (July 2020); Save the Children, COVID-19 Impacts on African Children – How to Protect a Generation at Risk (June 2020): https://resourcecentre.savethechildren.net/pdf/pan_african_policy_paper_8th_june_-_final.pdf/

CONCLUSION

Impact on monitoring

Country Task Forces and their partners demonstrated remarkable adaptability in the ways they tackled monitoring challenges over the last two years. With varying degrees of speed and success, they collectively upgraded their remote working skills and equipment, improved data sharing with partners, diversified sources of information and shed superfluous administrative tasks in the process. To a certain extent, some of them are now better equipped and connected than pre-COVID. However, the path to recovery was significantly slower for CTFMRs that are forced to rely on in-person monitoring – so not all CTFMRs were able to build up resilience against future crises. In addition, recovery can be undermined at any moment by the emergence of new variants able to evade current prevention measures. Finally, in a few cases, major security developments undermined CTFMRs' recovery processes and continue to severely reduce their ability to monitor grave violations.

Therefore, as the disruptive impact of restrictions continues to loom over the work and wellbeing of MRM staff and their partners, it is useful to bear in mind that the vast majority of CTFMRs were already challenged and under-resourced before the pandemic, with insufficient MRM-mandated staff for an enormous amount of work to train and support monitors and community-based focal points over vast territories, receive and verify hundreds and sometimes thousands of violation incidents, and compile and analyse data to articulate actionable recommendations. Monitoring is resource-intensive, but it is the most fundamental activity underpinning policy, advocacy and programmatic responses needed to affect durable change. MRMs required continuous support and capacity-building before the pandemic, and they continue to do so.

Impact on children

By tipping millions of girls and boys into poverty, life on the street and hazardous work,[71] the pandemic massively increased the number of girls

71 UNICEF estimates that 100 million children were pushed into poverty as a result of the pandemic, and that the number of child labourers rose by 8.4 million in the last four years. See "COVID-19 is biggest threat to child progress in UNICEF's 75-year history" (8 December 2021): https://news.un.org/en/story/2021/12/1107422

and boys exposed to the risk of grave violations in already complex humanitarian emergencies. These vulnerabilities pre-existed COVID-19, but they now potentially bear upon millions more children, as protection and monitoring systems are also weakened by the pandemic. It is not a time to stop the essential work of child rights monitors and social workers. It is not a time to interrupt critical protection activities representing a lifeline for children who have suddenly been deprived of the most stable aspects of their lives. Some children may have suffered as much from COVID-19 mitigation measures as from the virus itself. Against a background of protracted school closures, interruption of 'non-essential' services and increasing poverty, the generalised surge in armed violence in the last two years could have a catastrophic impact on this generation of children. Refugee and IDP children, girls, children deprived of liberty, children from minority groups, children with disabilities and children living in remote areas are among the most vulnerable groups exposed to these combined threats. In addition, by multiplying the stressors to which children affected by armed conflict are subjected to, the pandemic contributed to a significant deterioration of their mental health and wellbeing.[72]

This overall impact of the pandemic on children will likely be large scale and long-lasting. Its scope is not (yet) evidenced by MRM data due to monitoring challenges, including underreporting, during the worst phase of restrictions, and because the MRM does not necessarily capture the causes of violations. However, its repercussions could be felt for years, as children experience the vicious cycle of economic hardship and violence. Interviews with children coming out of armed groups in the next few years may provide an indication of this impact. Response programmes could also reveal more information about how the pandemic intersected with grave violations. Hence, the importance of strengthening the monitoring capacity of CTFMRs and their partners cannot be overestimated. Identifying and addressing the multiple impacts of the COVID-19 pandemic on children will require exceptional, coordinated efforts on the part of the international CAAC community in the years to come.

Impact on response

Yet, this follow-up study exposed profound changes in the way the CAAC sector has been operating. First, the pandemic accelerated a funding crisis for protection and human rights, which makes it all the more challenging to plan the type of response needed and mentioned above. MRM and CAAC actors will need to continue advocating for this type of funding, while also increasingly relying on integrated programming and envisaging low-cost interventions at local, community-based level. Conflict-affected communities are the raison d'être of the MRM: the victims/survivors of violations, the sources of data, the monitors (in some situations) and the beneficiaries. Their active participation in monitoring, reporting and responding to violations is not only a strategic option, it is an ethical one.

Second, while local and domestic travel resumed within the first year of the pandemic, international travel has been much slower, in part because it is more expensive and unpredictable. The vast majority of international organizations managed to transfer most of their work online, but this new way of working took its toll on personal connections with their interlocutors. Although policy and advocacy work can lend itself – and sometimes benefit from – virtual working methods, all those interviewed reported concerns that, in the long-run, virtual engagement with colleagues, partners, parties to conflict or other advocacy targets needed to be complemented by regular in-person meetings. In addition, those without a presence in MRM countries have not been able to conduct any CAAC research in the last two years. Losing that opportunity necessarily results in obscuring experts' knowledge about violations and how to respond to them. Here again, one solution is increased cooperation and power-sharing with local actors, who have the necessary access and knowledge.

72 See findings by War Child Holland and World Vision in The Silent Pandemic: The Impact of the COVID-19 Pandemic on the Mental Health and Psychosocial Wellbeing of Children in Conflict Affected Countries (27 April 2021): https://wvi.org/sites/default/files/2021-04/The%20Silent%20Pandemic_final.pdf

Photo credit: © UNICEF/UNI236224/Noorani

If MRM and CAAC actors have learnt one lesson from the pandemic, it is certainly to rationalize their work methods and re-assess their role in order to maximize shrinking resources and access. Such processes can and did already bring significant advances by improving networking, information-sharing and coordination among CAAC actors; by empowering conflict-affected communities, including children; and by adopting new behaviours limiting the impact of the humanitarian sector on the environment. All those interviewed for this study were unanimous: while working entirely virtually is neither effective nor sustainable, the sector as a whole must reduce its carbon footprint, particularly as the climate emergency exacerbates conflict dynamics and the vulnerabilities of conflict-affected children.[73] When so many prevention measures have so far had a disproportionate impact on them, children and children's rights should, from now on, be firmly placed at the centre of all decisions and actions to contain the COVID-19 pandemic.

Photo credit: © UNICEF/UN0644298/Fazel

73 OSRSG-CAAC, "COP26: Impact of Climate Emergency on Peace and Security Exacerbates the Vulnerabilities of Those Most Affected by Conflict: Children" (1 November 2021): https://childrenandarmedconflict.un.org/2021/11/cop26-impact-of-climate-emergency-on-peace-and-security-exacerbates-the-vulnerabilities-of-those-most-affected-by-conflict-children

RECOMMENDATIONS

Below is a list of measures inspired by the lessons learnt by all MRM actors in the last two years and aiming to strengthen their capacity to document, report and respond to grave violations of children's rights in the current crisis as well as future ones. Many of these recommendations already concluded the 2021 preliminary study and are still valid; they were articulated after consultations with CTFMRs and their partners, as well as other UN and NGO experts working on CAAC matters. This is not an exhaustive list:

All MRM actors must be able to operate safely and securely:

- All MRM staff, starting with in-country staff, and their partners should be offered COVID-19 vaccine boosters as prescribed by the World Health Organization (WHO). Field-based monitors should be prioritized.
- Measures to mitigate the risk of COVID-19 transmission should be developed in consultation with MRM staff, to assess and limit the impact they could have on their workload, morale and wellbeing.
- All MRM staff and partners should be provided with suitable equipment to work from home if and when necessary and offered regular opportunities for wellbeing support.

In-country MRM staffing capacity should be sufficiently robust to cope with crises:

- There should be a minimum number of MRM-mandated staff in each co-chairing agency to ensure business continuity through periods of restrictions and sickness. Other agencies should systematically increase their contributions to the MRM to buttress the capacity of CTFMRs to withstand the shock of restrictions.
- Consideration should be given to the importance of having permanent child protection expertise in all UN field offices in order to support monitoring activities and adequately carry out the MRM mandate, particularly in contexts with vast and inaccessible conflict-affected areas, and including in contexts that are consolidated.

- Child rights monitors should always be considered 'essential workers' and permitted to travel to meet victims, survivors, witnesses and other sources of information (including in ICCs, refugee and IDP camps and detention centres) with special precautions and after thorough risk assessments.

- Measures should be put in place to ensure that there is no gap in CTFMR capacity in contexts affected by mission downsizing.

Monitoring and reporting channels should be diverse and rooted in communities:

- Where relevant and feasible, existing practitioners' networks (e.g. UN clusters and sub-clusters) should be mobilised and MRM-trained to document and report child rights violations to CTFMRs through the extensive field presence of their members, and reduce the need for UN monitors to travel.

- Similarly, strategic partnerships should be established with community-based organizations (e.g. religious or women's organizations) and these should be MRM-trained to report information on allegations to CTFMRs. Any potential risk these activities could expose them to should be regularly reviewed and mitigated.

- In contexts with non-integrated UN missions, UN country leadership should explore ways in which mission monitors could nevertheless contribute to the MRM, particularly in emergency and other exceptional situations when CTFMRs' monitoring capacities are severely disrupted.

IT tools should be upgraded to better serve the needs of MRM actors:

- All MRM staff and their partners should be adequately equipped to work remotely and stay connected. Depending on their capacity and office location, this could involve training and distribution of mobile telephones / portable modems.

- CTFMRs should be able to use online information management systems which enable remote, safe, confidential and timely incident-monitoring.[74] In the meantime, they would benefit from MRM-specific guidance and support on remote monitoring from UNHQ, most aptly provided by the MRM Technical Reference Group.[75]

- Efforts should be made to improve access to internet and digital communication services in conflict-affected communities in order to facilitate the work of community-based organizations and improve access to victims and survivors. Where this is not possible, the use of satellite telephones could be considered.

Monitoring and responding to violations must be considered and supported as critical:

MRM activities should rank high among humanitarian priorities during crises. Data on grave violations in situations of armed conflict feeds into decision-making at the highest UN levels and directly informs dialogues with parties to the conflict. It informs critical humanitarian responses, while being vital to accountability efforts.

- Screening missions to separate children from armed groups should always be considered life-saving and critical in all contexts. Other programmatic responses should also be considered essential to the survival and mental wellbeing of children, on the basis of consultations with UN clusters and concerned communities (MRE, detention visits, FTR and repatriation of separated children, among others).

Child protection funding should be maintained and adapted to crisis-related needs:

- Funds should not be diverted from essential child protection and MRM activities to support health and WASH-based COVID-19 responses focused on minimising the spread of the virus; on the

74 See OSRSG CAAC (April 2021), page 27: "Databases such as Primero offer crucial advantages for monitors whose access and movements are restricted. For example, they remove the need to compile or circulate data internally because they use an internet Cloud for data storage – speeding up the triangulation process. They also allow use in low internet connectivity areas, because they can be used offline (for example in remote villages) on hand-held devices, and data later synched to the Cloud through a secure internet connection."

75 The Technical Reference Group of the MRM (MRM TRG) is co-chaired by UNICEF and the OSRSG CAAC and includes UN agencies and INGOs. It "serves as a forum for consultation on the development and dissemination of working tools and guidance materials for the implementation of the MRM." https://www.mrmtools.org/mrmtk_1112.htm

contrary, donors should consider strengthening existing protection programmes so they can encompass and address COVID-19-related risks.

- The mobilisation and allocation of emergency funds should also include child protection agencies, based on mandates and capacities. To that effect, donors should recognize that local organizations are best placed to manage emergency responses to grave violations, particularly during a pandemic, and thus move away from top-down funding models to consider localisation.

- Funding should be made available for MRM and CAAC activities that have become necessary or more costly as a result of IPC measures, and donors should remain attentive to the indirect and long-term impact of the pandemic on programmatic needs.

International MRM actors should rationalize their work processes based on lessons learnt:

International CAAC actors should comprehensively and continually review their work plans and methods in order to maximize resources and reduce reliance on travel; where possible and appropriate, they could develop or strengthen links with in-country partners (CTFMRs and others) and permanently adopt remote/hybrid procedures, in a way that increases preparedness while reducing their impact on the environment.

- International organizations should increase their trust in and reliance on field and community-based partners, those with access and knowledge about issues on the ground, by funding, training and supporting them to participate in the MRM (at country and UNHQ levels) and to respond to violations.

- UN and NGO HQs are encouraged to continue to explore virtual and hybrid meeting modalities to increase the safe and meaningful participation of children living in situations of armed conflict in discussions and decisions affecting them.

COVID-19 prevention measures should never result in unnecessary harm or setbacks:

- The impact of COVID-19 risk-mitigation measures on children affected by armed conflict should be regularly assessed and questioned; where they appear to have an excessive or disproportionate impact on children, special and corrective measures must urgently be adopted.

- All MRM actors should also be vigilant about parties to conflict using the pandemic as an excuse to restrict children's rights, delay action on protection and prevention, or generally divert attention from CAAC issues to serve their own agendas.

- All MRM actors must be alert to the pernicious effect that COVID-19 restrictions and long-term interruptions of in-person interactions can have on the strength of advocacy with parties to conflict; on the cohesiveness of teams, organizations and coalitions working on CAAC issues; and on trust between victims/survivors and humanitarians. They should seek their own balance of virtual and in-person activities to remain effective.

Lessons learnt and good practices should be shared among CTFMRs:

- Beyond the present study, information should be regularly documented and shared about the challenges faced by all MRM actors during the COVID-19 pandemic, and the adaptations they have made.

- Information on the intersection between the pandemic and confirmed trends or patterns of violations should also be widely shared for preparedness and response purposes.

- A long-term, collaborative approach is needed to both identify and respond to grave child rights violations resulting from this unprecedented health crisis, as the full impact of this pandemic on children's rights is likely to last for years to come.

Photo credit: © UNICEF/UN0352250/Fazel

ANNEX I: List of Acronyms

CAAC	Children affected by armed conflict
CAAFAG	Children associated with armed forces and armed groups
CAR	Central African Republic
COVID-19	Coronavirus Disease 2019
CTFMR	Country Task Forces on monitoring and reporting grave violations
DDR	Disarmament, Demobilisation and Reintegration
DRC	Democratic Republic of the Congo
ERW	Explosive remnants of war
FTR	Family Tracing and Reunification
GCPEA	Global Coalition to Protect Education from Attacks
HRW	Human Rights Watch
ICC	Interim Care Centres
ICRC	International Committee of the Red Cross
ICT	Information and communication technologies
ILO	International Labour Organization
INGO	International Non-Governmental Organization
ISIL	Islamic State of Iraq and the Levant
IPC	Infection Prevention and Control
MENA	Middle East and North Africa
MRE	Mine Risk Education
MRM	Monitoring and Reporting Mechanism on grave violations against children in situation of armed conflict
NGO	Non-Governmental Organization
NSAs	Non-State Actors
OSRSG CAAC	Office of the Special Representative of the Secretary-General for Children and Armed Conflict
PCR	Polymerase Chain Reaction
R&R	Rest and Recuperation
SRSG CAAC	Special Representative of the Secretary-General for Children and Armed Conflict
TRG	Technical Reference Group (of the MRM)
UNHCR	United Nations High Commissioner for Refugees
UNHQ	United Nations Headquarters
UNSC	UN Security Council
VTC	Video Teleconferencing
WASH	Water, Sanitation and Hygiene
WFH	Work from Home
WHO	World Health Organization
SCWG-CAAC	UN Security Council Working Group on Children and Armed Conflict

ANNEX II: Survey Questionnaire

Consultation for CTFMRs on the impact of COVID-19 on grave violations against children in situations of armed conflict

ABOUT YOU

1. Which situation do you work in?*

- Afghanistan
- Central African Republic (CAR)
- Colombia
- Democratic Republic of the Congo (DRC)
- Somalia
- Sudan
- Yemen

2. Are you directly involved in data collection for the CTFMR?*

- Yes
- No

If you answered "Yes" which specific violations (or other issues of concern) do you focus on?

- Killing and maiming
- Recruitment and use
- Sexual violence
- Abduction
- Attacks on schools or hospitals
- Denial of humanitarian access
- Deprivation of liberty for actual or alleged association with parties to conflict
- Military use of schools and hospitals
- Other...

GENERAL IMPACT OF COVID ON YOUR WORK

3. Where are you currently based? (Please select the "working remotely" options only if you are working remotely for COVID-related reasons.)*

- In duty station
- Working remotely in duty station
- Working remotely outside of duty station
- A combination of the above
- Other...

4. Which infection prevention and control (IPC) measures, if any, were in place during the second half of 2021 in your context?*

- Lockdowns
- Repatriation
- Staff rotation
- Self-isolation

Quarantine

- Other types of remote working
- Limited field travel (within your situation)
- Limited regional travel
- Number limits and other rules applying to gatherings
- Other...

Would you like to elaborate on the impact that these have on your MRM work, making the distinction between UN restrictions and host country restrictions if you can? (optional)

5. **In your entity, has overall MRM capacity (to monitor, report, prevent or respond to violations) increased or decreased as a result of the COVID-19 pandemic? (Think of human or financial resources for example.)***

- Increased
- Decreased
- Stayed the same
- I don't know

Would you like to elaborate on your response? (optional)

6. **Was vaccination offered to MRM staff at the duty station?***

- Yes
- No
- Other...

7. **What is the vaccination status of the population in your situation?***

8. **Has lack of access, or unequal access to vaccines (for MRM staff or for the population in your situation) impacted your work, such as your ability to monitor, report, prevent or respond to violations in any way?***

- Yes
- No

Would you like to elaborate? (optional)

9. **Has communication among CTFMR members changed since to pre-COVID times?***

- Yes
- No

Would you like to elaborate? (optional)

10. **Have remote working arrangements changed means of coordination and communication among CTFMR members?***

- Improved
- Deteriorated
- A combination of both
- Neither
- Not applicable

Would you like to elaborate? (optional)

ABOUT THE STUDY

11. **Are you aware of the report produced by the OSRSG CAAC entitled Impact of the COVID-19 pandemic on violations against children in situations of armed conflict?***

- Yes
- No

12. **If you have read the study, do you have any feedback which could inform this follow up study? And if you have not read it, do you have any suggestions on what you would like to see in this follow-up study? (optional)**

IMPACT ON VIOLATIONS

13. **It has been 2 years since the start of the pandemic: would you say that it has had an impact on child rights violations in your situation?***

- Yes, on the nature of some violations
- Yes, on numbers and trends for some violations
- No, I don't think it has had a significant impact in my situation
- It is still too soon to tell
- I don't know
- Other...

Would you like to elaborate? (optional)

14. Have any of the following potential COVID-related trends and patterns (listed in the study: Impact of the COVID-19 pandemic on violations against children in situations of armed conflict) been corroborated by your CTFMR?*

- Surge in recruitment due to increased violence and COVID-related vulnerability of children? (This violation was difficult to monitor and document in 2020 and some of you were expecting late verifications)
- Surge in sexual violence (Same as above)
- Surge in killing/maiming (and/or other violations) due to the increased presence of armed groups in areas where state authority was withdrawn or weakened?
- Violations committed by parties specifically while enforcing infection-prevention and control measures?
- Ill-treatment of children deprived of liberty aggravated by infection-prevention and control measures and a high risk of contracting the virus while in detention?
- Military use of schools closed due to the pandemic?
- Attacks against healthcare personnel/facilities fighting the spread of the virus?
- Interruption of the delivery of humanitarian aid due to COVID-related movement restrictions?
- Other…

Would you like to elaborate? (optional)

15. Have you observed a change in the behaviour of parties to conflict, that is a direct or indirect consequence of the pandemic?*

- Yes
- No

If you answered "Yes", please could you elaborate?

16. In your context, can you already foresee any specific secondary / longer-term impact of COVID-19 on the rights of children affected by armed conflict? And if so, could you please explain?*

IMPACT ON MONITORING VIOLATIONS

17. Is the proportion of allegations you receive comparable to pre-COVID times?*

- Yes, the proportion of allegations is comparable to pre-COVID times
- No, the proportion of allegations has decreased; there is still some under-reporting
- The proportion of allegations has increased
- I am not able to tell
- Other…

Would you like to elaborate? (optional)

18. Have you verified all 2020 allegations?*

- Yes
- No

If you have answered "No", is it specifically because of the pandemic and its effects?

- Yes
- No
- I don't know

If you have answered "No" to Q18 above, what are the remaining obstacles?

- We cannot find enough sources
- We cannot meet sources / we don't have access to affected areas
- We don't have enough time / capacity
- The backlog is too big
- Other…

19. Which of the following (COVID-related) challenges were you facing during the second half of 2021?*

- Fewer monitors
- Restricted physical access (to geographical locations and to survivors/witnesses)
- Verification missions deprioritised within agency
- Lack of trust from survivors and other sources
- Communication challenges

- Presence of armed groups
- None of the above
- Other…

Would you like to elaborate? (optional)

20. Which strategies or working systems have you developed to continue monitoring, documenting and verifying violations during the past 2 years?*

- Using telephone communications
- Using messaging apps
- Training NGO/CSO partners on monitoring
- Better data consolidation within entity or with UN partners
- Upgrading information and communications technology (ICT) equipment or IMS
- Other…

Would you like to elaborate? (optional)

IMPACT ON PROGRAMMES

21. Is the COVID-19 pandemic and/or related restrictions continuing to impact your ability to engage with parties to conflict to PREVENT violations against children?*

- Yes
- No
- Not applicable

If you have answered "Yes", which specific activities are still hindered?

- Gaining the trust of parties to conflict?
- Meeting with parties to follow up on violations? (for example to monitor the implementation of Action Plans and other forms of commitment)
- Signing agreements with parties to conflict?
- Conducting awareness-raising among armed forces and armed groups?
- Training / building the capacity of armed forces and armed groups?
- Screening armed forces and armed groups?

22. Have you had to come up with new methods in order to continue to engage with parties to conflict despite continuing restrictions?

- Yes
- No
- Not applicable

Would you like to elaborate? (optional)

23. Is the pandemic continuing to impact your ability to work with parties to conflict to IDENTIFY AND RELEASE CHILDREN from their ranks?*

- Yes
- No
- Not applicable

If you have answered "Yes", which specific activities are still hindered?

- Screenings
- Age verification
- Separation of children
- Interim Care Centres (ICCs)
- Drop-in centres
- Child Friendly Spaces
- Family tracing and reunification
- Economic reintegration support / vocational support
- DDR planning, training and advocacy

24. Have you had to come up with new methods/alternative ways of operation in order to continue this type of work despite continuing restrictions?*

- Yes
- No
- Not applicable because I started working on the MRM during the pandemic

Would you like to elaborate? (optional)

25. Have other prevention activities been affected by the pandemic and related restrictions? (e.g. community sensitisation, advocacy with governments, training of security forces, planning and strategizing at the national level, etc.)*

- Yes
- No
- Not applicable because I started working on the MRM during the pandemic

If you have answered "Yes", please could you specify?

CONCLUSION

26. Would you say your capacity to do your MRM work today is:*

- Higher than it was pre-COVID
- Exactly how it was pre-COVID
- Between 80-100% of what it was pre-COVID
- Between 60-80% of what it was pre-COVID
- 50% or less
- Not applicable because I started working on the MRM during the pandemic

Would you like to elaborate? (optional)

27. What support would you need to be able to continue your MRM work efficiently? (Be as specific as possible; you may want to read recommendations in the study)

28. Is there anything else you'd like to share?

Thank you very much!

* Response needed

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