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Article

The Impact of the Covid-19 Global Health Pandemic in Early Childhood Education Within Four Countries

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Abstract

The recent Covid-19 global health pandemic has negatively affected the political and economic development of communities around the world. This article shares the lessons from our multi-country project Safe, Inclusive Participative Pedagogy: Improving Early Childhood Education in Fragile Contexts (UKRI GCRF) on how children in communities in Brazil, Eswatini, South Africa, and Scotland have experienced the effects of the pandemic. This article benefits from having co-authors from various countries, bringing their own located knowledge to considerations of children's rights and early childhood education in the wake of the pandemic. The authors discuss different perspectives on children's human rights within historical, social, and cultural contexts and, by doing so, will discuss how the global pandemic has placed a spotlight on the previous inequalities within early years education and how the disparity of those with capital (economic and social) have led to an even greater disproportion of children needing health and educational support.

Keywords

children's rights; Covid-19; early childhood; sustainable development goals

Issue

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1. Introduction

Cameron and Moss (2020, p. xv; see also Bambra et al., 2020) articulate an increasingly common narrative on the Covid-19 pandemic and the policy responses to it:

Covid-19 swept across continents and countries, leaving disruption, suffering and death in its wake, compelling governments to take in unprecedented steps to try to contain and suppress this plaque, placing populations under lockdown and mobilising

resources that would have seemed unimaginable a few weeks earlier. Covid-19 has also mercilessly exposed the flaws of the societies it has ravaged: the inequalities and injustices, as the poor, the precarious and other vulnerable groups have suffered the most; the neglect of public services and the undermining of welfare states that have weakened the capacity to resist; and the erosion of values necessary for effective collective action—equality, democracy, solidarity...countless acts of individual and community kindness and care.

In efforts to address the pandemic, governments instituted policies to protect health and survival. These policy responses have shown the potential to “make the impossible possible,” such as the rapid creation of viable vaccines, but also highlighted pervasive and longstanding problems made worse by a range of concerning inequalities. This narrative applies generally, but also particularly, to children. The health repercussions of Covid-19 were most directly felt by older adults and those with underlying health conditions, whereas younger children were less likely to fall ill due to Covid-19 (Royal College of Paediatrics and Child Health, 2020). Furthermore, if they did, generally (but not always) children tended to have better health outcomes than adults (Irfan et al., 2021). Thus, it was the policy responses, as much as the virus itself, which have dramatically effected children during the Covid-19 pandemic.

Policy responses to the Covid-19 pandemic radically restricted mobility, with almost every country requiring children to remain within their households during lockdowns; education and other services were either stopped or, if available, often only through online learning (OECD, 2020b). Children’s human rights experts have been considerably concerned that various lockdown measures, developed as emergency responses to the Covid-19 pandemic, have had negative impacts on children: While the restrictions importantly sought to protect rights to health, survival, and development, other rights regarding nutrition and education (through online schooling for example) appeared to take a secondary role, leading to profound short- and long-term repercussions (Lundy et al., 2021; Peleg et al., 2021). The United Nations Convention on the Rights of the Child (UNCRC) was justified, in its preamble, because children needed “special safeguards” and care, and because children were living in “exceptionally difficult conditions” who needed “special consideration.” While its vulnerability basis can be critiqued, the UNCRC was framed and justified in having a particular convention for children because they were particularly vulnerable (Tisdall & Morrison, in press).

This article presents a multi-country analysis of how young children and their human rights have fared due to the pandemic and its responses. It draws from the project *Safe, Inclusive Participative Pedagogy: Improving Early Childhood Education in Fragile Contexts* (UKRI GCRF) and the partner countries of Brazil, Eswatini, Scotland (UK), and South Africa were used. These countries provide a diversity of perspectives in terms of their historical and cultural contexts; Brazil and South Africa are identified as upper-middle-income countries, Eswatini is classified as lower-middle-income, and Scotland is a high-income country (OECD, 2021). Furthermore, the UK being the state party for the UNCRC, Scotland has recently gone even further than the UK in legislation for domestic incorporation of the UNCRC. All four countries have certain key similarities in terms of articulated commitments to children’s human rights, all have ratified the UNCRC, and have been actively

and rapidly developing their early childhood policies. Pertinent for this article, they all faced particularly high rates of infection by Covid-19 during the first waves of the pandemic (OECD, 2020a).

The pandemic occurred during the research for the project when country teams were undertaking their policy and systems analysis for early childhood education at national and community case study levels. Drawing on frameworks developed by Kagan et al. (2016) and policy discourse analysis by Bacchi (2012), the teams were undertaking documentary analysis, selective stakeholder interviews, and analysed available statistical data. With this foundation of pre-pandemic analysis, the team were in the position to continue with their stakeholders at national and community levels to explore the implications of the pandemic and its policy responses for young children and their families, as these impact their early childhood education. Each country team has drawn upon available data sets and then applied and interpreted the data through the lens of the UNCRC. This article benefits from having co-authors from various countries, bringing their own located knowledge to considerations of children’s rights and early childhood education in the wake of the pandemic. The authors discuss different perspectives on children’s human rights within historical, social, and cultural contexts, with due consideration of power relations and their ensuing implementation through policies, practices, and service (Collins et al., 2021).

The article first outlines key elements of the children’s human rights framework for early childhood. It then uses this framework to consider each country’s policy responses to the pandemic and concludes by discussing common themes as we face continued uncertainty for both human rights and public health.

2. Children’s Human Rights in Early Childhood

The UNCRC is the most widely ratified human rights treaty in the world. It brings together economic, social, cultural, civil, and political rights, specified for children, and sets out the explicit rights that all children have to help fulfil their potential. These rights apply to all children under the age of 18. This is particularly important for early childhood education, as governments across the world are moving to compulsory pre-school and early education. The sustainable development goals (SDGs), following an internationally agreed agenda up to 2030, specify in target 4.2 that governments need to prioritise access to quality early childhood development, care, and pre-primary education for all children by 2030 (United Nations, 2016). With this international agenda, developing early childhood education in light of children’s human rights has become a necessary yet challenging consideration.

There are four general principles of the UNCRC: article 2 (non-discrimination), article 3 (a child’s best interests must be a primary consideration), article 6 (survival, health and development), and article 12 (a child’s right to

have their views be given due weight in all matters that affect them). Furthermore, several articles are particularly relevant to our work and the right to education on the basis of equal opportunity: Article 28 includes reaching a child's fullest potential; article 29 is the child's right to rest, leisure, and play; article 31 is the child's right to an adequate standard of living; article 27 is the child's right to safety and protection. The UN Committee on the Rights of the Child (2005) issued a General Comment on early childhood that emphasises that young children are rights-holders and that their rights to education begin at birth.

The UN Committee on the Rights of the Child (2020) responded to the risks that the Covid-19 pandemic was posing to children's rights and issued 11 recommendations. The recommendations begin with the need to consider the "health, social, educational, economic and recreational impacts" (p. 1) of the pandemic on children's rights, and that restrictions of human rights should only be imposed when necessary and to the minimum extent possible. Special attention was needed in a number of areas, from ensuring that online learning does not increase existing inequalities, to a child's rights to recreation and outdoor activities, to nutritious food and protection. As evidence is accumulating on the impacts of the pandemic (and even more, the policy responses to the pandemic), it is increasingly evident how the resultant impacts have exacerbated existing inequalities due to such factors as gender, poverty and racism, as well as hastened other trends such as the growing risks of digital exclusion and poor mental health amongst children (Bambra et al., 2020; World Bank, 2021).

Below, each country context is considered in relation to the available evidence and implications for children's human rights.

2.1. Brazil

Brazil has longstanding and strong directives about the rights of children. These directives are contained in the country's 1988 Federal Constitution, the Statute on the Child and the Adolescent of 1990, and the 2015 New Law on Early Childhood, which in turn reflect the UNCRC. These instruments establish the absolute priority of children's needs, conceptualising children as "subjects of rights" who are entitled to rights. However, these directives are part of a country that previously suffered colonial rule followed by a military dictatorship. It was not until the 1988 Constitution that structures of democratic government were brought in. Vestiges of the former regimes have created serious doubts about the commitment to human rights, particularly as the government has recently declared itself against human rights principles. The authoritarian elements in the structure of current Brazilian governments date back to the colonial period of Portuguese rule (Chauí, 2013).

The following material comes from published sources and from the first two years of the four-year project

on which this article is based. The latter is based on extensive interviews with key community people in the low-income community of Rocinha in Rio, community members of a project advisory committee, senior staff in kindergartens (*creches*) in that community, and an initial set of five interviews with parents who have children in *creches*. This section also draws on the team's ongoing involvement with the National Early Childhood Network, the premier early childhood network in Brazil with over 200 organisational members.

Covid-19 struck Brazil hard with almost 21 million confirmed cases and 580,000 deaths in a population of 214 million (Worldometers, 2021). Brazil has a public health system that covers 61% of the population, a wide distribution of public health clinics, and an excellent vaccine delivery system. However, the pandemic overwhelmed the system in many parts of the country and the national administration's refusal to respond to the crisis initially led to a crucial lack of vaccines. Brazilian data from March 2021 showed that 779 children up to the age of 12 died from Covid-19, 11,628 were hospitalised, and 2,907 required intensive care. Of these totals, 24% of the deaths and 22% of the hospitalisations occurred in the three months prior to May 2021 (Worldometers, 2021).

Brazil experienced the closure of a significant number of early childhood education centres (ECECs) with the pattern partly dependent on whether these were public, private, or non-profit. The interruption of in-person schooling robbed children of part of their protection network, their right to be safe and included. Time spent at home can increase family conflicts and long internet use enables child sexual grooming (Kloess et al., 2014). Early childhood educators are trained to notice adverse behaviour and report violence against children. Being cut off from those teachers and other families and friends adds to this separation from sources of help. Given the greater use of the internet by families in 2021, the 2014 finding is likely to hold even more strongly in the current situation where school closures and job loss put families increasingly together in isolation (UNICEF, 2020).

In 2020, Brazil experienced reports of violence against children and youths higher than in any year since 2013. There were 95,247 reports on the Disc 100, a public reporting system. The greater parts of the reports were about children aged five to nine with the main aggressors being fathers or mothers (Worldometers, 2021). By the end of 2020, 59.4% of the Brazilian population, or 124 million people, were encountering some degree of food insecurity. This particular indicator has been worsening since 2013 when just 22.6% of the population was in that situation (Galindo Neto et al., 2021).

Poverty rapidly increased because of unemployment. Many Brazilians became unemployed during the pandemic, with employment figures from 2020 showing record levels of unemployment and of so-called "discouraged workers." In the timespan between 2020 and ending in February 2021, the total number of people

unemployed in Brazil reached 14.4 million—an unemployment rate of 14.4%. The number of discouraged workers reached 5.9 million or 5.6% of the workforce (Alvarenga & Silveira, 2021). The increase in unemployment drove an increase in poverty. The national poverty grew from 24.8% in 2019 to 29.9% in 2021 (Worldometers, 2021). The federal government’s response to the economic impacts of Covid in 2020 included the introduction of an emergency auxiliary aid, or the Corona Voucher of R\$600 per person, payable to informal workers, low-income workers, micro-entrepreneurs, among others. But this program tapered off with reduced payments and, while 68.2 million people received the benefit in 2020, that figure shrank to 45.6 million in 2021 (Pires et al., 2021).

Sixty-one percent of respondents to a UNICEF study of children or youths said their family income had decreased by December 2020. Eight percent of all the respondents who had children under 18 years of age at home said that their children sometimes did not eat because money was lacking to buy food. This number reached 21% for families in economic classes D and E (UNICEF Brazil, 2021). These figures chart the path between adult unemployment, family poverty, and child poverty—and hence child development.

The project from which the article derives its data is being implemented in Rio (Porto, 2021). Given the failure of the Rio municipality to act early, local community groups responded by increasing their efforts to provide learning materials to children’s homes by internet and help with food distribution. Local nonprofit organisations and individuals in slums assisted in these efforts. Our respondents pointed out that the particularly intense pressures on poor families merely exposed long-term pressures from poverty, violence, and inadequate services that pre-dated the pandemic. In this project, inclusion for early childhood is not just a matter of *being included* but ensuring there are sufficient early childhood resources to be *included in*.

Children have suffered from Covid-19 and the economic downturn very much, especially those in lower-income families. As CIESPI research on youth activists shows, they tend not to be heard by administrators and policymakers. The UNCRC’s rights on children being heard are far from being a norm, but CIESPI research also shows that young children can be given a public voice (Rizzini et al., 2021). The Covid-19 crisis brought serious challenges for everyone and revealed longstanding challenges for children. But the disclosure of these long-term challenges may represent new opportunities for action.

This analysis of published and research evidence shows how Covid-19 has affected the wider meso- and exosystems of resources for early childhood education and also how children’s rights have been significantly eroded as a consequence of these ever-limiting resources. Brazil is a country with substantial socio-economic inequalities, and the negative impacts of Covid-19 policy responses (and particularly the “lock-

down” policies) have been particularly felt in more disadvantaged communities, with devastating effects for young children and their families. Considering the UN Committee’s 11 recommendations on Covid-19 (UNICEF, 2020), there are major gaps in terms of children accessing basic services, food, and healthcare (recommendation 1, 4, 5), having alternative and creative solutions to enjoying rest and recreation (recommendation 2), very limited access to online learning at all (recommendation 3), faced particular risks of violence and abuse in their domestic settings (recommendation 6), and had virtually no opportunities for their participation rights to be realized (recommendation 11).

2.2. Eswatini

The emergence of Covid-19 has adversely affected every fibre of society in Eswatini, including children and the realisation of their rights in particular. Eswatini had its first Covid-19 case officially reported on 13 March 2020 (Dlamini, 2020; Pitikoe et al., 2020). Like other governments from around the world, the government of Eswatini implemented various public health measures, including mandatory lockdowns where all people were expected to stay home, closure of businesses and workplaces, the mandatory wearing of masks, and social distancing to prevent the spread of Covid-19. Only those classified as essential workers were allowed to travel under strict control measures such as travel permits. Employers implemented the “no work, no pay” rule and some downscaled their organisations and businesses, laying off employees. According to Eswatini census documentation (Ministry of Labour and Social Security, 2017), 59% of the 1.1. million people of Eswatini live below the national poverty line and 19% are experiencing multidimensional poverty. This proportion increased to 21% during the Covid-19 pandemic (UNICEF, 2020) and children are the most affected: 56.5% are considered multidimensionally poor, with children in rural areas being more affected than those in urban areas (65% and 23%, respectively; see UNDP, 2020). The loss of or reduced income during Covid-19 forced many families to prioritise food over other needs as part of crisis-coping strategies. As families were ordered to stay indoors, “forced” to spent time together during lockdowns, there was a notable increase in anxiety and frustration among parents and children alike, increasing the risk for, and reports of, domestic violence (UNICEF, 2020; Xue et al., 2020).

Among other interventions for reducing human contact through social distancing was the indefinite closure of all learning institutions, including ECECs. It was estimated that school closures in March 2020 would affect about 377,935 learners in Eswatini (Eswatini Ministry of Education and Training, 2019), thus deepening the gap in access and equality that already existed in education in the country (Motsa, 2021). This number, however, does not include children in ECECs because the Annual Education Census did not collect data on this sector of

education at the time, another serious gap in the education system in Eswatini. The hope was that the pandemic would ease soon and everything would go back to normal, which didn't prove to be the case. As time progressed under lockdown, learning institutions turned to media (television, radio, and newspaper) lessons and online teaching and learning (Daries & Valenuelam, 2020; Dlamini, 2020; Pitikoe et al., 2020). However, most students, particularly from public schools, poorer backgrounds, and rural settings, were unable to access any learning material through these media because they do not own a television, radio, or any equipment that could facilitate online teaching and learning, and cannot afford the newspaper every day, which resulted in an obvious breach for equal access to information (Pitikoe et al., 2020).

Besides the obvious challenges with media and/or online teaching and learning, teachers and students in preschools were particularly challenged. ECECs are largely play- and inquiry-based, and focus on social, emotional, and cognitive aspects of learning most of all (Timmons et al., 2021), aspects that are difficult to teach via radio or online. This is also noted by Jalongo (2021), who states that young children in particular need to be actively involved with their environment, and the fact that many of them are not yet reading, writing, or adept at computer keyboards makes them the least well-suited group for online teaching and learning approaches. Worse still, the government of Eswatini did not provide any guidance or support to ECEC teachers and students on the implementation of classes under Covid-19, a point that is also made by UNESCO (2020) in their rapid survey on the impact of Covid-19 on early childhood education in Asia-Pacific and Sub-Saharan Africa: According to their report, while governments made plans not to forgo education and learning during Covid-19, ECECs have not been given as much attention compared to other levels of education, this despite acknowledging that education at all levels was and continues to be significantly affected by the pandemic.

Target 4.2 of the SDGs explicitly states the need by governments to prioritise access to quality early childhood development, care, and pre-primary education for all children by 2030 (United Nations, 2016). Evidence demonstrates that access to quality ECECs has a positive effect on future educational performance, as well as the physical, cognitive, emotional, and psychological development of a child (Rao et al., 2017), with the ripple effect of a better economic outcome for the individual, family, and society. It is well documented that access to ECECs benefits both a child's early skill development and their physical and mental health long-term, their educational attainment and earnings (Barnett & Nores, 2015; Robson et al., 2020). It is therefore of great concern that the long-term effect of the disruption caused by Covid-19 to access and quality of ECECs may be a generation that lacks these early developmental milestones necessary for future achievements.

It must also be noted that, in Eswatini, some ECECs and schools are not only centres for teaching and learning, but also provide feeding schemes for students. With school closures, many children who depend on school meals for their daily nourishment were immediately thrown into hunger, worsening an already volatile situation among families who find it difficult to provide for their children. Whilst the government provided some relief in the form of food packages and emergency relief funds, these were poorly planned and coordinated, and thus did not reach most of the intended recipients. The relief was also a one-off, and thus not much of a help to families who continue to experience food insecurity.

Already through the examples of Brazil and Eswatini, we see how governments' responses to Covid-19 impact children's rights to education, food, and shelter. With alarming speed, the prioritisation of early years education diminished and it never became a core part of these governments' response to problems affecting children in areas of economic hardship. However, perhaps these two countries are not representative of the global influence of Covid-19, thus why we have deliberately identified two other countries to strengthen our case. In the following section, our colleagues in South Africa address if (and how) the government of another upper-middle-income country in Africa has prioritised access to quality early childhood development amidst the pandemic or, to the contrary, has contributed to the erosion of children's rights in the country.

2.3. South Africa

Despite the advent of democracy in South Africa 26 years ago, gross inequality and structural poverty characterised along racial lines persist. The government has prioritised early childhood care and education (ECCE) programmes as an avenue for reducing inequality by improving care, nutrition, and learning outcomes, especially for the most disadvantaged young children. However, most ECCE services are non-state, non-profit, and micro-social enterprises. A poverty-targeted state subsidy is available for non-profit programmes that meet rigorous standards, but it does not cover all costs and most programmes do not receive it. A substantial portion of the subsidy is allocated to food and nourishment, an important consideration as the under-five stunting rate in South Africa is 27% (National Department of Health et al., 2019). User fees are charged to support operational costs and therefore pose a barrier to enrolment and service quality for poor children. In 2019, 58% of under-4-year-olds in the country did not attend any ECCE programme (Statistics South Africa, 2020).

The Covid-19 pandemic, a severe initial lockdown, and subsequent lockdowns intensified existing challenges and had a devastating impact on families and young children, especially for those already disadvantaged (Lake et al., 2021). A struggling economy contracted further, exacerbating poverty and food

insecurity, particularly for the most vulnerable sectors of society (Arndt et al., 2020). There were significant job losses, especially for low-wage workers (Fengler et al., 2021). State measures to alleviate shocks to the labour market did not include informal workers. The need for social relief increased dramatically during the Covid-19 crisis when families were unable to generate income or rely on their networks for support, and endured for longer than anticipated (van der Berg et al., 2021).

Access to preventive and promotive health services for young children reduced due to the re-prioritisation of public health services and fear of attending health facilities because of the risk of contracting Covid-19. Children's right to health was compromised as many children fell behind on routine care, including immunisations and growth monitoring and screening (Burger et al., 2020; Murray et al., 2021; Jensen & McKerrow, 2021). In 2020, a nationally-representative panel survey was undertaken; findings indicate that severe child hunger—a child experiencing hunger every day or almost every day in the week prior to the survey—persisted throughout the year, ranging from 24–30% (van der Berg et al., 2021). During lockdowns, the loss of daily meals for children attending ECCE programmes significantly affected their access to food and, essentially, their right to adequate nutritious food (UN Assembly, 1989, article 24; see also recommendation 4). State-subsidised ECCE programmes provide daily nutrition to about 626,000 poor children regarded as eligible based on their family's income (National Department of Social Development, 2020).

The already fragile early childhood sector was significantly affected by the pandemic. ECCE programmes experienced a mandatory four-month closure despite primary caregivers returning to work as lockdown restrictions eased (Wills et al., 2020). Re-opening was subject to stringent state-imposed safety standards, such as the use of personal protective equipment and reductions in attendance numbers. Many ECCE programmes could not afford to meet safety standards and were unable to continue staff contracts and sustain operational requirements (Wills et al., 2020). While these provisions were aimed at securing children's right to health and safety, they severely limited children's access to early development and education (SDG 4.2) and to adequate care and protection for those whose parents were employed (UN Assembly, 1989, article 18). Lower attendance due to caregivers' inability to pay user fees, fear of children becoming infected, and reduced capacity led to financial difficulty, loss of large numbers of trained and experienced ECCE practitioners, and permanent closure of several services (Wills et al., 2021). The introduction of state relief through an ECD Employment Stimulus Relief Fund package was significantly delayed, with applications starting in early 2021 (Republic of South Africa, 2021): too late for thousands of ECCE service providers unable to recover financially during 2020 and contributing to the curtailing of the attainment of SDG 4.2.

In a community setting in Cape Town, interviews as part of the UKRI GCRF project with selected community respondents (parents of young children and ECCE practitioners) indicated that the impacts of the pandemic manifested through loss of livelihoods, hunger, and loss of shelter as many residents were evicted when they could no longer afford rent. Deteriorating living conditions and increased isolation added to family depression and stress, placing young children at increased risk of harm. While ECCE programmes sent home learning materials for parents and kept in touch via digital platforms, not all parents had access to these and, even some who did, struggled due to low levels of literacy, exacerbating existing inequalities (Wills et al., 2021).

Once ECCE programmes re-opened, there were fewer spaces available for children or limited days of attendance. This left parents with childcare dilemmas if they needed to return to work on a full-time basis. Practitioners expressed concern that children would have been safer in an ECCE programme than unsupervised at home or on the streets. Adjusting to Covid-19 protocols resulted in limited delivery of the early years' curriculum, with certain activities barred due to the required use of sanitised materials and physical distancing, and the restriction of free play—important for the development of agency and social skills. These are likely to have long-term consequences for young children's wellbeing, social development, and educational progress.

The Covid-19 crisis significantly decreased the numbers of children attending ECCE programmes and disrupted the early learning and nutrition support provided through these programmes; ECCE programme attendance rates, at 13% for under-6-year-olds, was at a 20-year low during July–August 2020 (Wills et al., 2020). Consequently, many children's exposure to risks has been exacerbated by escalated poverty, violence, and food insecurity, compromising caregivers' physical and mental health and their capacity to provide responsive care for their young children (Timmons et al., 2021). Parents and caregivers have not received the necessary state support to enable them to adequately care for their young children and provide the basic conditions for children to develop and thrive (UN Assembly, 1989, articles 18 and 27).

Clearly, a common theme is emerging between the three countries reviewed so far, one where ECCE is being dramatically affected by government response, which again has widened the gap between those with resources and those without. But what of Scotland (UK), a country that is classified by the World Bank as being a high-income country? Would the ability to draw upon greater resources in terms of financial health enable a continuation of embedding the UNCRC?

2.4. Scotland

It is the aspiration of the Scottish Government for Scotland to be the best place to grow up in.

The objective of the Children and Young People (Scotland) Bill is to make real this ambition by putting children and young people at the heart of planning and delivery of services and ensuring their rights are respected across the public sector. (Scottish Parliament, 2013, p. 1)

For almost a decade the Scottish government has placed significant emphasis on children's rights in terms of children influencing the construction and administration of policies and services (Scottish Government, 2014). The aspirations of the Scottish government, and children's rights activists, resulted in a politically powerful piece of children's legislation, the Children and Young Peoples (Scotland) Act (Scottish Government, 2014). This landmark legislation commences by setting out the duties of Scottish ministers in relation to the rights of children (Tisdall, 2015): "The Scottish Ministers must keep under consideration whether there are any steps which they could take which would or might secure better of further effect in Scotland of the UNCRC requirements" (Scottish Government, 2014, section 1). However, as said above, children's rights were easily side-lined when the pandemic crisis struck Scotland, and the ambition for Scottish children to be put at the heart of planning was not a consideration by Scottish ministers. What follows is a timeline that illustrates how quickly this "landmark" children's legislation was rendered archaic (Tisdall, 2015).

On the 1st of March 2020, the first Covid-19 case was reported in Scotland. Around the same time, on the 11th of the same month, the first case of community transmission in Scotland, unrelated to contact or travel, was identified. Regrettably, on the 13th, the first death from Covid-19 was confirmed in Scotland. We should bear in mind that this is the first date by which children may have been affected, as many parents would have been forced to self-isolate, resulting in disruption from their previous routine. On 19 March 2020, the Scottish Government announced in parliament the closure of all schools and nurseries. Suddenly, children discovered that they could not return to nursery/school; this meant, for some children, that they would never return to the familiar environment as they transitioned to primary school. Despite the fact that Scotland was in the process of incorporating the UNCRC directly into domestic law, children had everything *done to* them, not *with them* (Adamson, 2021). As a result, there was no recognition of children's abilities to contribute to discussions on the pandemic or make meaningful decisions about their lives.

On 23 March 2020, the first daily briefing by the First Minister (FM) of Scotland and, concurrently, the UK prime minister, announced that people should only go out to buy food, to exercise once a day, or go to work if they could not work from home. This was the beginning of the true lockdown and was mirrored across much of Europe and, later, the world (Andrew et al., 2020). In Scotland, 36.4% of households live in flats

(apartments; Scotland's Census, 2021). Many children had little or no access to green space during the first lockdown apart from their one opportunity for daily exercise (Fegert et al., 2020). Children who were living in poverty and/or disadvantage, classified as vulnerable, were able to access early learning childcare settings/schools (Howes et al., 2020). However, there remained inherent concern for the children's wellbeing. It is well publicised that child poverty is on the increase in Scotland, with 260,000 children living in poverty in 2019–2020 (Davidson, 2021).

Additionally, on 20 March 2020, all bars, restaurants, gyms, and other social venues across the country closed. Some parents found themselves out of work and/or were furloughed; this confinement to their homes meant different things to parents, some expressing concern (Pascal et al., 2020) and others viewing the situation positively.

In a matter of weeks, the experiences of every child had changed dramatically, as they could no longer socialise with peers at nursery, nor go outside for extended periods of time, see friends, visit a wider familial circle, nor enjoy a wide variety of social settings. Lockdown officially began on 24 March 2020 in Scotland. Most strikingly, there was an expectation that parents would become the teachers of their children and early years' practitioners and school teachers would virtually teach children.

On the 25th of the same month, childminders had to cease all provision, except for key worker families and vulnerable children. This, again, largely removed the childcare safety net that Scottish parents could rely on to balance work and family. This trend was codified on the 30th when the Scottish government issued guidance on the closure of daycare services and provided advice for schools and settings that are continuing to provide care for key workers' children and "vulnerable" children. Lastly, the end of the first lockdown period was signalled on 11 May 2020, when the Scottish government announced that citizens could go out more than once a day. Glorifying in the moment, many believed at the time that this would signify a return to normal life, with a promise soon after that early learning childcare settings and schools would re-open in August 2020. Some settings, which had been open all year offering a service for children of key workers and "vulnerable" children, returned to their former ways of working.

Children were invited back to early learning and childcare settings in "bubbles" of 33 children, which meant that nurseries had to split the environment and resources. Again, in some situations, children could see their friends over fences or boundaries, but could not actually play with them (Barba, 2020). However, on 18 August 2020, these barriers were lifted and children were able to return to the new normalcy.

When speaking to the Scottish Parliament, the FM recognised the crisis had a "profound impact on the health, economy and society, indeed our whole way of life" (Sturgeon, 2020).

We are still experiencing the challenges, albeit with more freedoms than 18 months ago, but settling pandemic babies into early years settings has demonstrated the effects of limited social interaction on the youngest community members, many of whom have not had the benefit of the support of the wider family network due to travel restrictions and concerns about elderly family members contracting the virus. No one knows, at this point, the full impact of the Covid-19 restrictions on children in Scotland—only time will tell.

3. Conclusions

It is clear from the four countries discussed in this article that similarities cut across them. The implementation of children's rights appears not to have stood up to the challenges of the Covid-19 epidemic. Decisions were being made about children's lives that affected them but did not involve any attempt to listen to them, respect their views, or invite them into decision-making processes. This seems to be the case no matter if the country is deemed by the World Bank as a high- or low-middle-income country. This article has also highlighted the further impact of the pandemic on those children living in the most deprived areas of the selected countries. The poverty gap appears to have widened between those families that have food and income security to those families that do not. Government responses have not been nearly adequate for young children, particularly those living in poor communities. We would like to suggest that more needs to be done in terms of securing children's rights as a foundation of government policy. Strongly adhering to target 4.2 of the SDGs would be a beginning. We should take this opportunity to reflect on what is happening to children's rights more generally, specifically to early years education, and consider ways in which to embed children's rights more securely into any government policy/guidance.

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Conflict of Interests

The authors declare no conflict of interests.

References

Adamson, B. (2021). Introduction to overview report. In Children & Young People's Commissioner (Eds.), *Independent children's rights assessment on the response to Covid-19 in Scotland* (pp. 18–20). [https://dera.ioe.](https://dera.ioe.ac.uk/36161/1/independent-cria.pdf)

- [ac.uk/36161/1/independent-cria.pdf](https://dera.ioe.ac.uk/36161/1/independent-cria.pdf)
- Andrew, A., Cattan, S., Costa-Dias, M., Farquharson, C., Kraftman, L., Krutikova, S., Phimister, A., & Sevilla, A. (2020). *Learning during the lockdown: Real-time data on children's experiences during home learning*. The Institute for Fiscal Studies.
- Alvarenga, D., & Silveira, D. (2021, April 30). Unemployment was 14.4% in the trimester ending in February and affected a record 14.4 million Brazilians. *Globo*. <https://g1.globo.com/economia/noticia/2021/04/30/desemprego-fica-em-144percent-no-trimestre-terminado-em-fevereiro.ghtml>
- Arndt, C., Davies, R., Gabriel, S., Harris, L., Makrelov, K., Robinson, S., Levy, S., Simbanegavi, W, van Seventer, D., & Anderson, L. (2020). Covid-19 lockdowns, income distribution, and food security: An analysis for South Africa. *Global Food Security*, 26. <https://doi.org/10.1016/j.gfs.2020.100410>
- Bacchi, C. (2012). Introducing the "What's the problem represented to be?" approach. In C. Beasley & A. Bietas (Eds.), *Engaging with Carol Bacchi: Strategic interventions and exchanges* (pp. 21–24). University of Adelaide Press.
- Bambra, C., Riordan, R., Ford, J., & Matthews, F. (2020). The Covid-19 pandemic and health inequalities. *Journal of Epidemiology and Community Health*, 7(11), 964–968.
- Barba, P. C. de S. (2020). Playing in the time of a pandemic. *InformaSus*. <https://www.informasus.ufscar.br/o-brincar-em-tempos-de-pandemia>
- Barnett, W. S., & Nores, M. (2015). Investment and productivity arguments for ECCE. In P. T. M. Marope & Y. Kaga (Eds.), *Investing against evidence: The global state of early childhood care and education* (pp. 73–88). United Nations Educational, Science and Cultural Organization.
- Burger, R., Day, C., Deghaye, N., Nkonki, L., Rensburg, R., Smith, A., & van Schalkwyk, C. (2020). *Examining the unintended consequences of the Covid-19 pandemic on public sector health facility visits: the first 150 days*. NiDS-CRAM.
- Cameron, C., & Moss, P. (2020). *Transforming early childhood education in England: Towards a democratic education*. UCL Press.
- Chauí, M. (2013). *Ideological manifestations of Brazilian authoritarianism*. Autêntica Editora Fundação Perseu Abramo.
- Collins, T. M., Rizzini, I., & Mayhew, A. (2021). Fostering global dialogue: Conceptualisations of children's rights to participation and protection. *Children & Society*, 35(2), 295–310.
- Daries, N., & Valenzuela, C. (2020, July 16). In Eswatini, online learning has become the new normal during coronavirus. *Global Partnership for Education*. <https://www.globalpartnership.org/blog/eswatini-online-learning-has-become-new-normal-during-coronavirus>
- Davidson, J. (2021, March 25). Child poverty in Scotland

- increased even before pandemic. *Holyrood*. <https://www.holyrood.com/news/view,child-poverty-in-scotland-increased-even-before-pandemic>
- Dlamini, R. K. (2020). A reflection on history education in higher education in Eswatini during Covid-19. *Yesterday and Today*, 24, 247–256. http://www.scielo.org.za/scielo.php?script=sci_arttext&pid=S2223-03862020000200017&lng=en&tng=en
- Eswatini Ministry of Education and Training. (2019). *Annual education census report*. UNICEF. <https://www.unicef.org/media/100091/file/Eswatini-2020-COAR.pdf>
- Ministry of Labour and Social Security. (2017). *Eswatini census documents*. <https://www.gov.sz/index.php/scholarship/124-economic-planning-a-development/2455-eswatini-census-documents>
- Fegert, J. M., Vitello, B., Plener, P. L., & Clemens, V. (2020). Challenges and burden of coronavirus 2019 (Covid-19) pandemic for child and adolescent mental health: A narrative review to highlight clinical and research needs in the acute phase and the long return to normality. *Child Adolescence Psychiatry Mental Health*, 14(1). <https://doi.org/10.1186/s13034-020-00329-3>
- Fengler, W., Nelly, M., Gill, I., Baduel, B., & Cuevas, F. (2021, July 13). South Africa after Covid-19: Light at the end of a very long tunnel. *Brookings*. <https://www.brookings.edu/blog/future-development/2021/07/13/south-africa-after-covid-19-light-at-the-end-of-a-very-long-tunnel>
- Galindo Neto, N. M., Sá, G. G. D. M., Pereira, J. D. C. N., Barbosa, L. U., Henriques, A. H. B., & Barros, L. M. (2021). Covid-19: Comments on official social network of the Ministry of Health about action Brazil Count on Me. *Revista Gaúcha de Enfermagem*, 42. <https://www.scielo.br/j/rgenf/a/yf7XgbgFjKF5QqnQ3qLvY3P>
- Howes, S., Monk-Winstanley, R., Sefton, T., & Woudhuyzen, A. (2020). *Poverty in the pandemic: The impact of coronavirus on low-income families and children*. Child Poverty Action Group.
- Irfan, O., Li, J., Tang, K., Wang, Z., & Bhutta, Z. A. (2021). Risk of infection and transmission of SARS-CoV-2 among children and adolescents in households, communities and educational settings: A systematic review and meta-analysis. *Global Health*, 17(11). <https://pubmed.ncbi.nlm.nih.gov/34326997>
- Jalongo, M. R. (2021). The effects of Covid-19 on early childhood education and care: Research and resources for children, families, teachers, and teacher educators. *Early Childhood Education Journal* Advance online publication. <https://doi.org/10.1007/s10643-021-01208-y>
- Jensen, C., & McKerrow, N. H. (2021). Child health services during a Covid-19 outbreak in KwaZulu-Natal Province, South Africa. *South African Medical Journal*, 111(2), 114–119.
- Kagan, J., Giang, D. D., Iademarco, M. F., Phung, V. T. T., Lau, C.-Y., & Quang, N. N. (2016). Assessing clinical trials research capacity in Vietnam: A framework for strengthening capability for clinical trials in developing countries. *Public Health Reports*. <https://doi.org/10.1177%2F003335491613100305>
- Kloess, J. A., Beech, A. R., & Harkins, L. (2014). Online child sexual exploitation: Prevalence, process, and offender characteristics. *Trauma, Violence, & Abuse*, 15(2), 126–139.
- Lake, L., Shung-King, M., Delany, A., & Hendricks, M. (2021). *Children and Covid-19 advocacy brief series: Prioritise children—From response to recovery*. Children's Institute, University of Cape Town. http://www.ci.uct.ac.za/sites/default/files/image_tool/images/367/Projects/Current_Projects/covid-children/pdfs/Advocacy%20Brief_Overarching_02_08.pdf
- Lundy, L., Byrne, B., Lloyd, K., Templeton, M., Brando, N., Corr, M., Heard, E., Holland, L., MacDonald, M., Marshall, G., McAlister, S., McNamee, C., Orr, K., Schubotz, D., Symington, E., Walsh, C., Hope, K., Singh, P., Neill, G., & Wright, L. H. V. (2021). Life under coronavirus: Children's views on their experiences of their human rights. *The International Journal of Children's Rights*, 29(2), 261–285. <https://doi.org/10.1163/15718182-29020015>
- Motsa, N. D. (2021). Covid-19: Understanding and responding to the educational implications for the vulnerable children of Eswatini. *Perspectives in Education*, 39(3), 17–29. <https://doi.org/10.18820/2519593X/pie.v39.i3.3>
- Murray, J., van Stormbroek, B., Wessels, T., Shand, L., Morden, E., Rahim, S., Shung-King, M., & Hendricks, M. (2021). *Children and Covid-19 advocacy brief series: Disruption of routine health services*. Children's Institute, University of Cape Town. http://www.ci.uct.ac.za/sites/default/files/image_tool/images/367/Projects/Current_Projects/covid-children/pdfs/Advocacy_Brief_Health_Services_04_08.pdf
- National Department of Health, Statistics South Africa, South African Medical Research Council, & ICF. (2019). *South Africa demographic and health survey*.
- National Department of Social Development. (2020). *Annual report for the year ended 31 March 2020*. <https://www.dsd.gov.za/index.php/documents/category/28-annual-reports>
- OECD. (2020a). Policy responses to coronavirus (Covid-19)—The territorial impact of Covid-19: Managing the crisis across levels of government. <https://www.oecd.org/coronavirus/policy-responses/the-territorial-impact-of-covid-19-managing-the-crisis-across-levels-of-government-d3e314e1>
- OECD. (2020b). *Combating Covid-19's effect on children*. <https://www.oecd.org/coronavirus/policy-responses/combating-covid-19-s-effect-on-children-2e1f3b2f/vcc>
- OECD. (2021). DAC list of ODA recipients. <https://www>

- oecd.org/dac/financing-sustainable-development/development-finance-standards/DAC-List-of-ODA-Recipients-for-reporting-2022-23-flows.pdf
- Pascal, C., Bertram, T., Cullinane, C., & Holt-White, E. (2020). *Covid-19 and social mobility impact brief 4: Early years*. Sutton Trust.
- Peleg, N., Lundy, L., & Stalford, H. (2021). Covid-19 and children's rights: Space for reflection, tracing the problems and facing the future. *The International Journal of Children's Rights*, 29(2), 255–259. <https://doi.org/10.1163/15718182-29020014>
- Pires, L. N., Cardoso, L., & de Oliveira, A. L. M. (2021). *Gender and race in the spotlight during the Covid-19 pandemic: The impact of the emergency benefit on poverty and extreme poverty in Brazil* (Report No. 21–2). Levy Economics Institute.
- Pitikoe, S., Ferreira-Meyers, K., Bhebhe, T., & Dlamini-Zwane, N. (2020). Who moved my old cheese? Implications of Covid-19 to teaching and learning in Southern Africa. *Journal of Teaching and Learning with Technology*, 10, 64–79. <https://doi.org/10.14434/jotlt.v9i2.31402>
- Porto, C. (2021). *SIPP project bulletin no. 2. Covid-19: What do children think of all this?* CIESPI. <http://www.ciespi.org.br/en/Publications/Research-Bulletins-21>
- Rao, N., Sun, J., Chen, E. E., & Ip, P. (2017). Effectiveness of early childhood interventions in promoting cognitive development in developing countries: A systematic review and meta-analysis. *Hong Kong Journal of Paediatrics*, 22(1), 14–25.
- Republic of South Africa. (2021). Building a society that works. Public investment in a mass employment strategy to build a new economy—February progress report. <http://www.thepresidency.gov.za/documents>
- Rizzini, I., Araujo, C., Couto, R., & Bush, M. (2021). *Children, adolescents and the challenges of Covid 19 in Brazil*. CIESPI.
- Robson, D. A., Allen, M. S., & Howard, S. J. (2020). Self-regulation in childhood as a predictor of future outcomes: A meta-analytic review. *Psychological Bulletin*, 146(4), 324–354. <https://doi.org/10.1037/bul0000227>
- Royal College of Paediatrics and Child Health. (2020). *Research evidence summaries*. <http://www.rcpch.ac.uk/resources/covid-19-research-evidence-summaries>
- Scotland's Census. (2021). *Households*. <https://www.scotlandscensus.gov.uk/census-results/at-a-glance/housing>
- Scottish Government. (2014). *Children and Young People (Scotland) Act*. <https://www.legislation.gov.uk/asp/2014/8/section/2/enacted>
- Scottish Parliament. (2013). *Children and Young People Scotland Bill policy memorandum*. http://www.scottish.parliament.uk/S4_Bills/Children%20and%20Young%20People%20%28Scotland%29%20Bill/b27s4-introd-pm.pdf
- Sturgeon, N. (2020). *Protecting Scotland, renewing Scotland: The government's programme for Scotland 2020:2021*. Scottish Government. <https://www.gov.scot/publications/protecting-scotland-renewing-scotland-governments-programme-scotland-2020-2021>
- Timmons, K., Cooper, A., Bozek, E., & Braund, H. (2021). The impacts of Covid-19 on early childhood education: Capturing the unique challenges associated with remote teaching and learning in K-2. *Early Childhood Education Journal*. Advance online publication. <https://doi.org/10.1007/s10643-021-01207-z>
- Tisdall, E. K. M. (2015). Children's rights and children's wellbeing: Equivalent policy concepts. *Journal of Social Policy*, 44(4), 807–823. <https://www.cambridge.org/core/journals/journal-of-social-policy/article/abs/childrens-rights-and-childrens-wellbeing-equivalent-policy-concepts/OD1FC782106C97A6CAFE68F821D5BA12>
- Tisdall, E. K. M., & Morrison, F. (in press). Children's human rights under Covid-19: Learning from children's rights impact assessments. *International Journal of Human Rights*.
- UN Assembly. (1989). *Convention on the rights of the child*. <https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>
- UN Committee on the Rights of the Child. (2005). *General Comment No. 7: Implementing child rights in early childhood*. <https://digitallibrary.un.org/record/570528?ln=en>
- UN Committee on the Rights of the Child. (2020). *CRC Covid-19 statement*. https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT/CRC/STA/9095&Lang=en
- UNESCO. (2020). *Impact of Covid-19 on early childhood education in Asia-Pacific and Sub-Saharan Africa: Insights from results of rapid regional personnel survey*.
- UNICEF. (2020). *Children at increased risk of harm online during global Covid-19 pandemic. Newly released technical note aims to help governments, ICT companies, educators and parents protect children in lockdown*. <https://www.unicef.org/press-releases/children-increased-risk-harm-online-during-global-covid-19-pandemic>
- UNICEF Brazil. (2021). *UNICEF alert: Situation of children and adolescents has worsened considerably after nine months of the pandemic*. <https://www.unicef.org/brazil/relatorios/impactos-primarios-e-secundarios-da-covid-19-em-criancas-e-adolescentes-segunda-rodada>
- United Nations. (2016). *Sustainable development knowledge platform*. <https://sustainabledevelopment.un.org/sdgs>
- van der Berg, S., Patel, L., & Bridgman, G. (2021). *Food insecurity in South Africa: Evidence from the NIDS-CRAM wave 5*. NIDS; CRAM.
- Wills, G., Kika-Mistry, J., & Kotze, J. (2021). *Early child-*

hood development and lockdown in South Africa: An update using NIDS-CRAM wave 3. NIDS; CRAM.

Wills, G., Kotze, J., & Kika-Mistry, J. (2020). *A sector hanging in the balance: ECD and lockdown in South Africa*. NIDS; CRAM.

World Bank. (2021). *New World Bank country classifications by income level: 2021–2022*. <https://blogs.worldbank.org/opendata/new-world-bank-country-classifications-income-level-2021-2022#>:

~:text=The%20World%20Bank%20assigns%20the,%2C%20and%20high%2Dincome%20countries

Worldometers. (2021). *Corona virus*. <https://www.worldometers.info/coronavirus/country/brazil>

Xue, J., Chen, J., Chen, C., Hu, R., & Zhu, T. (2020). The hidden pandemic of family violence during Covid-19: Unsupervised learning of tweets. *Journal of Medical Internet Research*, 22(11). <https://doi.org/10.2196/24361>

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