

The Psychological and Socio-economic Impact of COVID-19 **on Children in Kenya and Zambia**



ACKNOWLEDGEMENTS

This research was co-conducted by Hankuk University of Foreign Studies and Good Neighbors Global Partnership Center to analyze the psychological and economic impact of COVID-19 on children and adults living in impoverished regions of Kenya and Zambia. Good Neighbors is an international humanitarian development NGO dedicated to serving more than three million children and community members in impoverished regions around the world over the last three decades. With ownership and integrated community development being the core value of its approach, Good Neighbors has been working with 48 partnership countries to ensure the protection of the rights for the vulnerable and bring substantial changes in their lives.

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Ethical Research and Child Safeguarding Considerations

This research was conducted in compliance with research ethics and was approved by the International Review Board (IRB). All field research was conducted in accordance with Good Neighbors' Child Protection Policy. Prior consent was obtained for all field investigations and photography, and the child in the cover photo used pseudonyms.

Cover photo: ©Good Neighbors. Veronica is a student at one of the Hope Schools supported by Good Neighbors. "I didn't know much about COVID-19 before getting educated on COVID-19 Prevention. However, my friends and I have learned how to protect ourselves from COVID-19, and have been able to practice basic infection prevention measures such as wearing masks and washing hands through Good Neighbors' support," she says.

The Psychological and Socio-economic Impact of COVID-19 on Children in Kenya and Zambia

Summary of Final Report

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Abstract



The COVID-19 pandemic has dramatically changed daily life in the world. The overall economic activities have been significantly dampened due to the movement restrictions, business closures, and job losses. Besides, as the deteriorated economic condition increases parental burdens of home-schooling and feeding, it leads to parental stress and domestic violence, thereby negatively affecting the mental health of the family members.

Based on the original survey data from Good Neighbors in Kenya and Zambia along with the results of focus group and key informant interviews, this research seeks to answer the question of how the COVID-19 has affected children in Kenya and Zambia. Good Neighbors has carried out Child Sponsorship programs and Community Development Project to protect vulnerable children in poverty. Since the outbreak of the pandemic, it established 'Good Neighbors Global Response to COVID-19' and has implemented emergency measures in the developing countries. This research first finds that people in Kenya and Zambia experienced substantial decrease in real income, overseas remittance income, meal consumption, and savings, and the pandemic also negatively affected the mental health of the adult respondents.

Regarding the mental health of the children, the research shows that the participation of the Good Neighbors programs has a positive impact on the sense of safety of children by providing institutional and emotional support to them. In addition, it also confirms that children participating in the Good Neighbors' programs are associated with higher scores on the Hope Scale. As children with a higher Hope Scale are more likely to overcome disasters with resilience and be better at achieving higher socio-economic status as adults. These results further provide evidence that Good Neighbors' programs are conducive to strengthening the mental health of the children.

This research concludes that to enhance the effectiveness of the programs and warrant the provision of sustainable assistance, Good Neighbors should provide information and emotional support at the community level. Besides, it needs to strengthen the partnership network with partner countries and international organizations, along with the expansion of its advocacy activities. Finally, by designing proper communication means, it should seek the new project models which can increase the effectiveness of the program during a pandemic.

I. Research Background and Purpose

1. Research Background

The global outbreak of COVID-19 has affected all segments of the world's population, but its impact has been especially detrimental to the most vulnerable groups. Although numerous international organizations and major development cooperation organizations have analyzed the impact of COVID-19 and published reports documenting its impact, they have mainly focused on the macro aspect of the problem. There is a growing need to provide evidence to lay the foundation for establishing the future direction of Good Neighbors' development projects.

Good Neighbors is an international humanitarian development NGO founded in 1991 to make the world a place without hunger, where people live together in harmony. Good Neighbors respects the human rights of our neighbors suffering from poverty, disasters and oppression and helps them to achieve self-reliance and rebuild hope. In response to a situation where the COVID-19 outbreak has further exacerbated global poverty, Good Neighbors has established and systematically supported the 'Global COVID-19 Response Framework' to protect the lives and rights of the most vulnerable people and strengthen local communities' resilience and capacity to respond to the crisis.

However, in order to effectively provide systematic support, it is first necessary to objectively and accurately analyze the serious psychological and economic impact of COVID-19 on children in developing countries. The present study attempts to identify the changes the COVID-19 pandemic has brought to children's lives and analyze main bodies responsible for child protection in the community and child protection operating system to derive cooperation strategies with various partners and provide new insights for future projects. Moreover, through exploring the lives of sponsored children, the study will seek to understand how the implementation of child sponsorship program affects families and children in times of crisis.

2. Research Purpose

The study has two main purposes. The first is to understand the socio-economic and psychological impact of the unprecedented outbreak of COVID-19 on children. In terms of country selection, Kenya and Zambia were selected based on their large number of sponsored child and the ratio of confirmed cases to the population. The second purpose of the study is to find the direction of the existing Good Neighbors Community Development Project (CDP) and child sponsorship programs in the post-COVID-19 era based on the analysis of the socio-economic and psychological impact of COVID-19 on children. To achieve these purposes, the study sought to address the following research questions: "What is the socio-economic impact of COVID-19?", "What is the psychological impact of COVID-19?", "What role has Good Neighbors' CDP project and child sponsorship program played in the psychological impact of COVID-19 on families and children?", "How can the development cooperation projects be implemented post-COVID-19?".

II. COVID-19 and Socio-economic Impact

1. Socio-economic Impact of the Pandemic

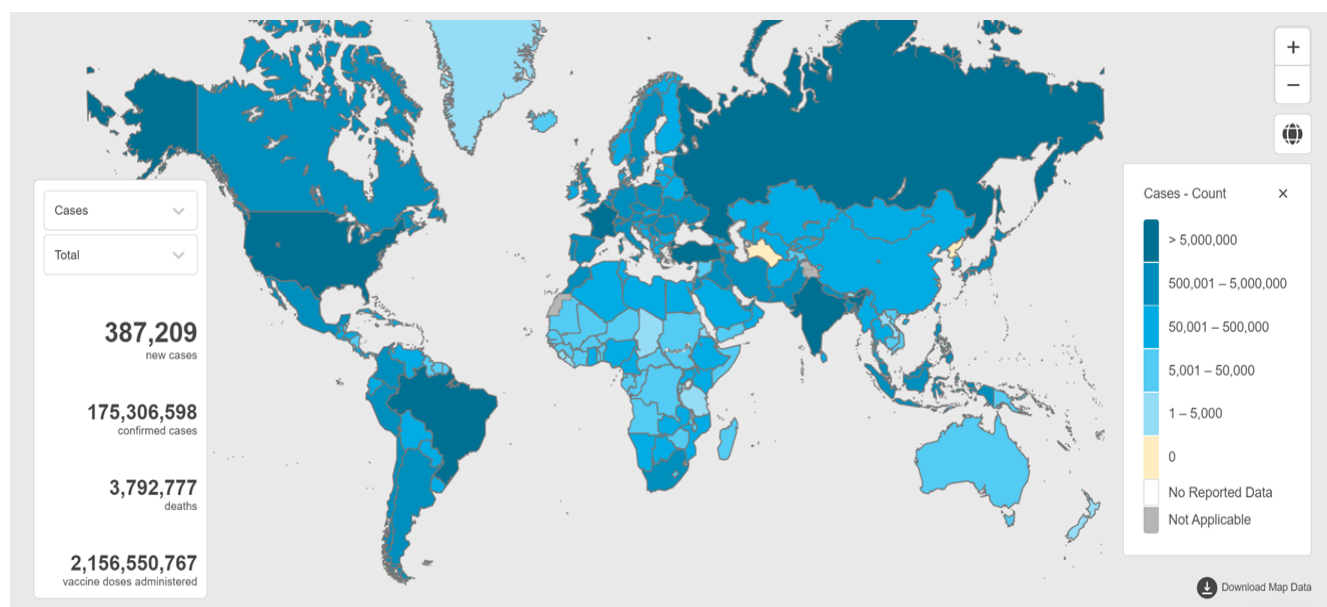
The COVID-19 outbreak not only affects public health, but also generates huge socio-economic impacts on all populations (Kim and Choi, 2020). Many countries have imposed restrictions on the movement of individuals across borders to prevent the spread of infectious diseases, creating adverse impacts on production and consumption (OECD, 2020a). Measures to prevent the spread of COVID have resulted in reduced consumer spending, which in turn negatively affected businesses and employment. The education sector has also been heavily affected by the pandemic as educational institutions worldwide have been closed with problems associated with online education such as digital divide and the widening of achievement gaps emerging.

2. Situation of COVID-19

1) COVID-19 in the World

As of June 14, 2021, the number of confirmed COVID-19 cases worldwide exceeded 175 million, with nearly 3.8 million deaths.¹ There have been more than 69 million confirmed cases in the Americas, 54.9 million confirmed cases in Europe, 33.4 million in Southeast Asia, 10.4 million in Eastern Mediterranean and 3.6 million in Africa. Moreover, there have been nearly 600,000 deaths in the United States, 1.1 million in Europe, 451,591 in Southeast Asia, 208,463 in Eastern Mediterranean, and almost 90,000 in Africa.

<Figure 1> COVID-19 Cases Worldwide



Source : World Health Organization Dashboard (<https://covid19.who.int/>). 06/14/2021

¹ World Health Organization (WHO) Coronavirus(COVID-19) Dashboard. <https://covid19.who.int/> (Accessed June 14, 2021)

2) COVID-19 in Africa

As of June 14, 2021, the cumulative number of confirmed cases in Africa was 3,658,976.² The country with the highest confirmed cases is South Africa, with more than 1.5 million reported cases, followed by Morocco, Tunisia, Egypt and Ethiopia. The number of death was also the highest in South Africa, with more than 56,000 deaths, followed by Egypt with approximately 15,000 and Morocco with 10,000.

Since March 2020, most African countries have closed their borders, restricted movement between regions, and imposed cross-regional curfews within countries. As a result, the movement of the majority of citizens has been restricted except for the purchase of necessary goods and services such as groceries and medicine. As the socio-economic shutdown continued, the African Development Bank projected a 3.9% growth rate for Gross Domestic Product (GDP) in January 2020, but in April, it estimated that the continent's GDP growth rate would be -3.4% as COVID-19 continued to spread (AfDB, 2020). Moreover, border closure in Africa has reduced domestic consumption across the African continent, resulting in a GDP loss of 140 to 180 billion dollars (OECD, 2020b).

3. Socio-economic Impact of COVID-19

1) Socio-economic impact of COVID-19

According to the OECD's analysis of the socio-economic impact of COVID-19 on the aspects of production activity and consumer expenditure, the industries affected by the pandemic have significantly reduced their labour availability and investment. Consumer expenditure on clothing, footwear, household goods, transportation services and package holidays has also declined by 100% (OECD, 2020a). According to a further study that examined the correlation between the number of COVID-19 deaths and the economic activity of consumers, consumption in all industries declined by 60% as the number of deaths increased (Goolsbee et al., 2020).

In addition, there has been a sharp decline in sales in the service sector where face-to-face contact is essential. A large proportion of workers involved in this sector are migrant workers, and their job loss can be translated into a disruption of remittances to their home countries (ILO, 2020), which gives adverse impacts on the economy of developing countries.

2) Socio-economic impact of COVID-19 on children

Although the COVID-19 pandemic has affected the health of all populations, threats posed to children are the greatest, with an increasing number of children facing neglect, abuse, maltreatment and sexual violence. More than a third of the world's population has been under lockdown since the outbreak of COVID-19, and the closure of educational institutions has isolated more than 1.5 billion children. UNESCO estimates that 138 countries have closed schools as part of their physical distancing policies, and Lancker and Parolin (2020) explain that school closures generate a greater impact on vulnerable children living in poverty and exacerbate existing structural inequalities in two ways.

² Ibid.

First, school closures can worsen food insecurity. For many vulnerable children, school is not only a place for learning but also a place where they can get a healthy meal. School closure will increase the number of children who not only would miss learning opportunities, but also have an unhealthy diet, which can be considered a food crisis for children. Second, school closures can widen inequality in educational outcomes. Online learning during COVID-19 can potentially widen the learning gap between children from low-income and high-income families. Many children from low-income households have no reliable access to the Internet, live in precarious housing environments, and do not have access to books and learning materials, which make it challenging for them to continue online learning at home. Those issues can deteriorate the levels of child poverty and give enduring consequences for children's well-being and educational outcomes.

COVID-19 pandemic has also limited children's access to healthcare services, thereby hindering the provision of vaccination and other child health programs. These problems are more acute in developing countries in which the implementation of public health measures, such as the use of masks, hand hygiene, identification and isolation of probable cases of COVID-19, remain a significant challenge. As a result, children can face difficulties in finding a safe place to live and continuing their education (Zar et al., 2020). Moreover, in a situation where economic burden has increased, most schools and childcare facilities have been closed and replaced with non-face-to-face classes, which have resulted in high levels of parenting-related stress.

Although the pandemic can have devastating consequences on children's lives, its impact on children is being underestimated as children tend to be asymptomatic or have mild infections (Jiao et al., 2020). Given that COVID-19 can pose multiple threats to children, more research needs to focus on children and explore their lives and experiences in times of crisis.

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III. Theoretical Understanding of Psychological Impact of COVID-19

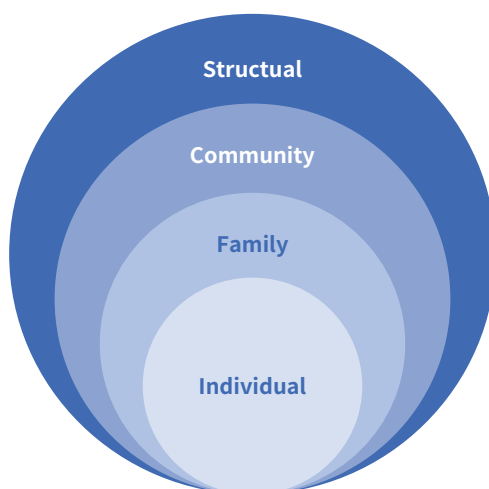
1. Psychological Impact of Disaster and Crisis

Disasters refer to sudden events that cause widespread destruction, loss, and damage to individuals and society (Alexander, 2005; Al-Dahash et al., 2016). Disasters are commonly categorized into natural disasters, man-made disasters, and social disasters. In this regard, post-traumatic stress disorder (hereinafter referred to as PTSD) is the most common term used to describe the psychological disorder that occurs after traumatic events (Lee, 2004). Various risk factors for PTSD have been identified, including intensity and severity of exposure to a disaster, gender, preexisting psychiatric comorbidity, and a lack of social support (Arata et al., 2000). However, there is a paucity of research elucidating why particular groups are more susceptible to PTSD and analyzing the influence of macro-level risk factors for PTSD (Galea et al., 2005).

2. Psychological Impact on Children

Disasters have a profound psychological impact on all affected populations, but children have been identified as especially vulnerable to psychological harm. Common psychiatric manifestations include anxiety, depression, PTSD symptoms, inattention, obsession and nightmares. Further, scholars have highlighted that exposure to adverse events is a significant risk factor for PTSD development in children. In particular, children who have lost their family members or friends have been found to have more severe and enduring PTSD symptoms. In addition to this factor, multiple factors operating at the individual, family, community, and social structural levels can contribute to the psychological distress experienced by children (Fothergill, 2017; Lock et al., 2012; Masten et al., 2015). Such observations can be understood through a socio-ecological perspective (Bronfenbrenner, 1979), which focuses on the dynamic exchange between individuals and the ecosystem and how the interaction of various factors in social systems affects individual lives and society. Through this socio-ecological lens, this section will identify the ways in which disasters and complex interactions of factors operating at different levels impact children's mental health.

<Figure 2> Socio-ecological model



Source: Adapted from Bronfenbrenner (1979)

1) Individual factors

Several studies demonstrate that psychological impacts are more severe for younger children (Norris et al., 2002; Shannon et al., 1994). Gender differences in how children experience and express psychological distress caused by disasters have also been reported. For instance, Norris et al. (2002) revealed that women and girls are at least twice as likely to experience PTSD as men and boys, and Garfin et al. (2014) found that girls are more likely to exhibit submissive feelings such as sadness and anxiety, whereas boys demonstrate overt aggression and anger. Disasters can also increase the risk of child abuse and violence against children, serving to exacerbate children's psychological distress (Peek, 2008). Studies have also shown that girls are more vulnerable to emotional and sexual violence, while boys are more exposed to physical violence (Fisher, 2009; Seddighi et al., 2021).

2) Family factors

In addition to individual factors, family factors play an important role in developing psychological problems in children (Krishna et al., 2018; Peek, 2008; Tso et al., 2020). Commonly identified risk factors include high parenting-related stress, low socioeconomic status, single-parent families, and parental mental disorders (Lowe et al., 2013; Tees et al., 2010). Parental stress can be considered the most crucial factor in predicting children's psychological symptoms (Norris et al., 2002), and scholars suggest that parental stress engendered by financial constraints resulting from disasters can lead to serious child abuse and domestic violence (Masten et al., 2015; Seddighi et al., 2019; Tso et al., 2020). Research has also shown that children with lower socioeconomic status are more likely to exhibit severe psychological problems, and when parents' low socioeconomic status intersects with ethnicity, race, age, and gender, children are faced with greater devastating impact (Lowe et al., 2013).

3) Community factors

The psychological impact of disasters on children not only interacts with individual and family factors, but also with community factors. Communities play an important role in providing social, economic, and human capital to children (Masten et al., 2015), and the destruction of communities gives adverse impacts on children's lives (Jeon, 2021). A lack of financial and physical resources (e.g. emergency aid, necessities, medical services, shelters) and low levels of social support can amplify psychological distress in children (Masten and Narayan, 2012).

4) Structural factors

Recent disaster studies call for an imperative to apply macro perspectives to better understand how disasters affect children's lives and their psychological well-being (Masten et al., 2015, 2020; Fothergill, 2017). Social structural factors such as poverty, violence, legislation and policies, and cultural values and norms affect children, families and community (Hoffman and Kruczek, 2011). In particular, poverty has been identified as an important risk factor for aggravating the vulnerability of children affected by disasters and for adding to their psychological distress (Freeman et al., 2015). Violent social structures, such as patriarchy and gender-based violence, can also have a serious impact on children (Masten, 2021).

As such, the psychological effects of disasters on children can be aggravated by the complex interplay of individual, family, community and structural factors. Scholars have emphasized that in order to understand children's psychological distress, it is necessary to consider various factors that constitute a multidimensional

system, not just on the individual level (Fotherghill, 2017; Masten et al., 2015; Son, 2020).

3. Psychological Impact of COVID-19 on Children

COVID-19 pandemic has caused worldwide disruption and has given far-reaching public health damage as well as political, social and economic implications. Children have been greatly impacted by the pandemic, especially from social distancing measures such as school closures. Moreover, children have become more vulnerable to maltreatment, abuse and violence, which can eventually lead to psychological problems such as depression, anxiety and suicide (Petito et al., 2020). Researchers argue that it is necessary to understand why particular groups of children are at greater risk during crises such as COVID-19, and what factors contribute to these vulnerabilities.

1) COVID-19 and family

Children's psychological problems during COVID-19 can be engendered and exacerbated by family factors such as parenting-related stress and economic uncertainty. A surge in home-schooling requirements and growing childcare burden from prolonged social distancing measures has resulted in high levels of parental stress (Jiao et al., 2020), especially among mothers (Power, 2020). UN (2020) confirms that unpaid childcare responsibilities have been fallen more heavily on women than men, and Power (2020) suggests that these consequences can be partly explained by the pervasiveness of traditional gender roles that exist in many societies. Family stress can be further compounded by economic adversities during the pandemic. Griffith (2020) reports that parents experiencing 'parental burnout' due to a mismatch from parenting-related demands and the resources available are more likely to engage in child abuse and maltreatment, which can lead to not only physical damage but also psychological harm to children, such anxiety, depression and PTSD symptoms.

2) COVID-19 and school closures

Existing studies documenting the impact of COVID-19 on children have focused on how school closures influence children's mental health, and data suggest that closure of schools can rather amplify children's psychological harm. For children, schools are not only places of learning, but also places where their social life extends from home to school and where they can form and strengthen social networks (Zhang, 2011). However, school closures are offsetting these functions, and a loss of daily activities and social interactions can lead to an increasing likelihood of children experiencing depression, anxiety, phobia, loneliness (Courtney et al., 2020). Further, as Van Bavel et al. (2020) indicate, closures of educational institutions can contribute to greater child abuse, maltreatment and violence at home, which gives devastating consequences on children's mental health.

4. Resilience

Scholars have emphasized the role of resilience, which is the ability to adapt and overcome threatening and stressful situations, in helping children overcome psychological damage caused by disasters (Masten et al., 2015; Masten, 2020). The concept of 'social support' has been noted as a crucial factor in promoting resilience in children (Lai et al., 2018). Social support can be conceptually divided into three types: instrumental (the

provision of money, time and material support), emotional (the provision of empathy, affection, love, trust, and encouragement), and informational (advice, guidance, or useful information provided to help resolve a problem during stressful situations) (House, 1981; Rodriguez and Cohen, 1998).

As psychological impacts of disasters on children can be understood through a multi-system perspective, social support can also be understood as a comprehensive concept that encompasses support provided beyond the interpersonal level. Existing studies suggest that social support formed through such diverse social networks functions as a protective factor that alleviates PTSD symptoms (La Greca et al., 2010; Son, 2020). In particular, positive parent-child interaction and good communications among family members can provide strong social support to children, reducing children's psychosocial disorders and parental stress during stressful times like COVID-19 (Jiao et al., 2020; Tso et al., 2020). Scholars also indicate that faith, hope, spiritual beliefs, or religious practices can play a positive role in enhancing children's resilience (Masten and Narayan, 2012). Walsh (2020) claims that the concept of hope is indispensable during crises such as COVID-19 and that hope gained from family members' mutual encouragement can strengthen efforts to cope and rebuild lives.

5. Limitations of Existing Studies

Several limitations of current scholarship on disaster and children can be raised. First, scant attention has been paid to delineating the dynamic interaction of factors operating at multiple levels (Peek et al., 2018). Recent studies on COVID-19 also tend to focus on individual risk factors (e.g. ethnicity and race, social class, underlying medical conditions), and there is a danger of overlooking unequal social structures in which these factors are constituted (Jiao et al., 2020). Second, much attention has been paid to understanding the mental health of men and older adults, who are known to be more susceptible to COVID-19, whereas its impact on children and women are less explored (ibid.). Lastly, there is a lack of research that directly includes children in research, and that much psychological effects of disasters on children have been reported by adults. Scholars point out the issues of under-reporting and caregivers' insufficient understanding of children's mental health and call for the need to directly involve children into research to better understand their psychological experiences (Fothergill, 2017; Peek, 2008).

IV. Research Methods

1. Selection of Field Studies

1) Selection of target countries

Kenya and Zambia were chosen as target countries for this research. First, the research team decided to focus on the sub-Saharan African region in which public healthcare is poor with the number of people infected with COVID-19 remaining uncertain, and where the effects of COVID-19 may be long-standing. Second, the research team decided to carry out representative case studies in sub-Saharan African countries that have been hit the hardest by COVID-19, with poor socio-economic conditions with Kenya and Zambia being qualified. Third, Ethiopia, Kenya, and Zambia were considered based on the COVID-19 infection statistics as they have more than 0.05% of the number of confirmed cases per population among sub-Saharan African countries. In case of Ethiopia, the number of confirmed cases compared to the population was 0.09%, and despite the absolute number being high, it was excluded from the study as it was not feasible to carry out research in Ethiopia. Fourth, the research team selected Kenya and Zambia based on their large number of sponsored children related to the Good Neighbors project. Since one of the main purposes of this study was to understand how regional development projects and child sponsorship programs respond to the negative impact of COVID-19, the researchers focused on the countries where community development projects and child sponsorship programs are actively taking place. Kenya and Zambia respectively have 6,315 and 5,038 sponsored children and it was found that community development projects are also being actively carried out in these two countries.

2) Selection of CDPs and non-CDPs

After choosing Kenya and Zambia as the study's target countries, the research team selected CDPs and non-CDPs located in these regions. CDPs were chosen among places that have been selected for the project destinations and areas most affected by COVID-19. In Kenya, the CDPs were divided into urban and rural areas, and in the case of Zambia, only rural CDPs were chosen, as most CDPs were located in rural regions.

As for the selection of non-CDPs, communities that satisfy the following three criteria were chosen. First, communities having similar socio-economic conditions to those of CDPs were selected for comparison. Second, communities located close to the CDP were targeted. Third, areas most affected by COVID-19 were chosen as it was the case for CDPs

2. Research Methods

1) Fieldwork schedule

Because it was impossible for researchers to visit Kenya and Zambia to carry out fieldwork during the pandemic, the study utilized field staff members from Good Neighbors Kenya and Zambia. Good Neighbors Offices in Kenya and Zambia conducted survey, focus group interviews, and key informant interviews with from March to April.

2) Key informant interviews and focus group interviews

All interviews with key informants were conducted online due to COVID-19. Researchers first conducted interviews with the Country Director of Good Neighbors Kenya, Namun Heo, and the Country Director of Good Neighbors Zambia, Jaewoong Lee. Following this, interviews with staff members of Good Neighbors Offices in Kenya and Zambia were conducted, and the questions involved the roles and activities of Good Neighbors on the ground.

In order to understand the government's response and the ongoing situation in Kenya, an hour-long interview was conducted with Kenya's District Children's Officer, Annisia Gatwiri. In addition, school-related issues in Zambia were discussed during an interview with Fales Zulu Paipi, a principal of Zambia's public middle school. Local staff members of Good Neighbors Kenya and Zambia were provided with online training to conduct surveys.

Focus group interviews constituted of four focus groups in total, and they were all led by Good Neighbors Offices in Kenya and Zambia. The focus groups were divided into two groups of children and two groups consisting of adults who are heads of households. Regarding those groups involving children, one group consisted of sponsored children and another group consisted of non-sponsored children only. As for the groups consisting of heads of households, one of the two groups involved family heads from communities belonging to CDP, and another group included household heads from communities belonging to non-CDP. Through these focus groups, the research team attempted to qualitatively understand the psychological impact of COVID-19 on children.

In addition, the research team tried to identify the cases of families and children affected by COVID-19. To be more specific, the researchers explored families that were most severely affected by COVID-19 and investigated the cases in which COVID-19 affected boys and girls as well as the cases that have overcome the COVID-19 crisis.

3) Survey

(1) Sampling

In survey analysis, it is necessary to vary the sampling method according to the nature of the population. In this study, CDP and non-CDP samples were extracted using the stratified sampling method. Considering the populations of both countries, the minimum number of samples required in each country is 384 if the number of samples required is estimated considering the 95% confidence level and 5% margin of error. Taking into account the missing and error values, the research team tried to secure a sample of 400 respondents from each country and had 443 survey respondents in Kenya and 400 in Zambia. In the case of sponsored children, the research team attempted to secure the same number of boys and girls. After the survey, missing values and errors were adjusted for data analysis.

(2) Survey questionnaire

The questionnaire is consisted of 11 sections, including questions for respondents' basic information. For effective survey process and execution, the number of survey questions was minimized by focusing on the research topic and questions. Sections A through F focused on the generation of respondents and sections G through K covered questions about children.

Section A consisted of questions asking about the basic background of the respondent's head of household, and Section B involved questions directly related to food security. Section C asked questions about respondents' total income, remittance, consumption, and savings before and after COVID-19. Section D addressed the impact of COVID-19 on daily life and satisfaction with life. Sections E and F included questions specific to the CDP. Section E asked about the Good Neighbors' CDP project related to COVID-19 and Section F included questions about child marriage.

Sections G through K involved questions directed at children, and children were encouraged to answer the questions without parents' intervention. Section G asked about children's background information and Section H measured children's perceptions toward hope. Sections I and J included questions to identify children's activities at home and domestic violence that children may experience due to COVID-19. Lastly, Section K covered questions assessing the overall impact of COVID-19.

(3) Survey implementation

Primary survey was conducted by the Good Neighbors Office in Kenya from March 20 to March 31. Secondary (additional) survey was conducted from April 15 to 22, carried out by 13 staff members, with a total of 22 researchers participating from each region. In Zambia, the survey was conducted over three weeks from March 8 to 28. A total of 15 people were involved in conducting the survey, with 2 staff members from the Office, 3 drivers and 10 researchers. They received online training prior to carrying out the survey and were informed about what the survey questions entail as well as the precautions. In particular, the research team ensured that they fully understood the precautions pertaining to the survey.

V. Good Neighbors responses to COVID-19

1. Good Neighbors Child Sponsorship Program and Community Development Project

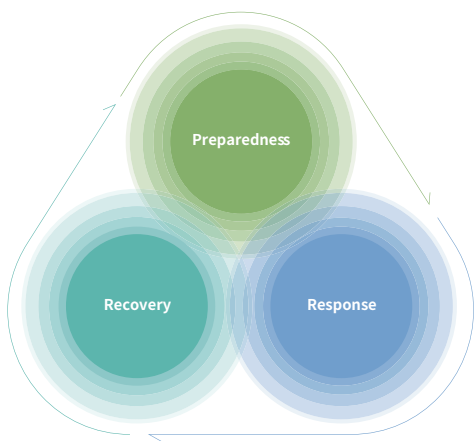
Good Neighbors’ child sponsorship programs seek to create ‘the world in which children are happy, and all members coexist in harmony’. Overseas child sponsorship connects children and sponsors in impoverished areas on a 1:1 basis. Since 2008, Good Neighbors has promoted an integrated community development project based on child sponsorship, supporting over 212,000 children in 39 partner countries (as of 2020). Sponsored children receive quarterly home visit counseling and regular services such as health checkups, vaccinations, nutritional support, and academic support.

2. Good Neighbors Responses to COVID-19

1) Good Neighbors COVID-19 response framework

Against the backdrop of the COVID-19 pandemic, Good Neighbors has established the ‘Good Neighbors COVID-19 Response Framework’ and its response is divided into three stages - preparedness (stage 1), response (stage 2), and recovery (stage 3) – to ‘protect the lives of the most vulnerable’ and ‘promote community-based resilience’.

<Figure 3> Good Neighbors COVID-19 response framework



Preparedness	Response	Recovery
<ul style="list-style-type: none">Developing methods for effective intra- community communication and early- warningEnhancing people and the community’s awareness on COVID-19 and its prevention	<ul style="list-style-type: none">Monitoring COVID-19 situations in affected communitiesResponding to urgent needs of health, food and livelihoodStrengthening community resilience through participative COVID-19 responses	<ul style="list-style-type: none">Supporting rapid recovery of livelihoods for people affected by COVID-19Seeking for innovative opportunities for growth and development in a post-pandemic situation

Source: Relief Web Website – Good Neighbors COVID-19 Global Response ³

2) Activities to protect vulnerable groups and strengthen resilience in the community

To protect the lives of the most vulnerable and respond to their urgent needs, Good Neighbors has launched emergency response activities in 39 countries during the first half of 2020. It has promoted campaigns and education using media to help local people access accurate information about COVID-19 and distributed hygiene kits, masks, food supply kits, and COVID-19 testing kits to minimize community infections.

Good Neighbors has also implemented long-term responses to strengthen the resilience of local communities, especially through community development projects. Those responses include protecting livelihood (in the forms of cash transfer, agricultural resources support and women empowerment), supporting education (curriculum development for delayed learners through distance learning), and protecting children through child rights education and campaigns. In addition, Good Neighbors seeks to promote community resilience through establishing a community response system on pandemics, providing water treatment and storage training, and promoting advocacy for the government to alleviate the economic burden fallen to those who have lost their jobs.

3. Good Neighbors Kenya and Zambia's Responses to COVID-19

1) Response for sponsored children and vulnerable groups in Kenya

Since its establishment in 1995, Good Neighbors Kenya has implemented community development projects in 6 CDPs, supporting about 7,120 sponsored children in 2020. A total of 17 million children were affected by the school closure which lasted from March 2020 to January 2021, and they not only suffered from a sudden disruption in education but also faced greater risks of child abuse, adolescent pregnancy, and child labor. In responding to these challenges, Good Neighbors Kenya monitored the situation of children by visiting their homes and provided counseling to 7,109 individuals. Urban CDPs located near Nairobi, where the number of COVID-19 confirmed cases were high, conducted regular telephone consultations. Rural CDPs visited each household to check the health and living conditions of children and parents and provided COVID-19 prevention guidelines. Good Neighbors Kenya also provided children and families with hygiene kits, supported children's basic livelihoods, and provided workbooks to contribute to closing the educational gap aggravated by COVID-19. In addition to helping children, Good Neighbors distributed emergency hygiene kits to 32,334 people across Kenya and provided education for COVID-19 awareness and prevention to 10,190 individuals.

2) Response for sponsored children and vulnerable groups in Zambia

Good Neighbors Zambia was established in 2012 and as of 2020, it supported 5,015 sponsored children in 4 CDPs. School closures in Zambia have left more than 440 million children experiencing educational disruption, and girls especially at increased risk of pregnancy, sexual violence and early marriage.⁴ Good Neighbors Zambia helped 5,001 individuals through household visits and counseling, provided 32,220 people with emergency hygiene kits, distributed food supply kits to 17,720 people and provided COVID-19 prevention education to 6,935 local people. Further, in order to address the problems of educational disruption, Good Neighbors Zambia

³ Relief Web Homepage

(<https://reliefweb.int/sites/reliefweb.int/files/resources/%5BGood%20Neighbors%20International%5D%20COVID-19%20global%20response.pdf>)

⁴ UN (2020). United Nations COVID-19 Emergency Appeal/Zambia.

provided SD (Secure Digital) cards containing core subject textbooks and radio education through local radio stations to senior students (7th to 9th graders).

Since 2020, Good Neighbors Kenya and Zambia have been working on restoring local communities in accordance with the third phase of Good Neighbors COVID-19 response framework. They have also established Country Strategic Plans (CSP) and Mid-Long Term Strategic Plans to seek measures and innovation for community development projects in adapting to the COVID-19 crisis. In this regard, Good Neighbors protects vulnerable social groups and enhances community resilience, simultaneously implementing projects to establish communities where everyone coexists in harmony during these unprecedented times through innovation and cooperation.

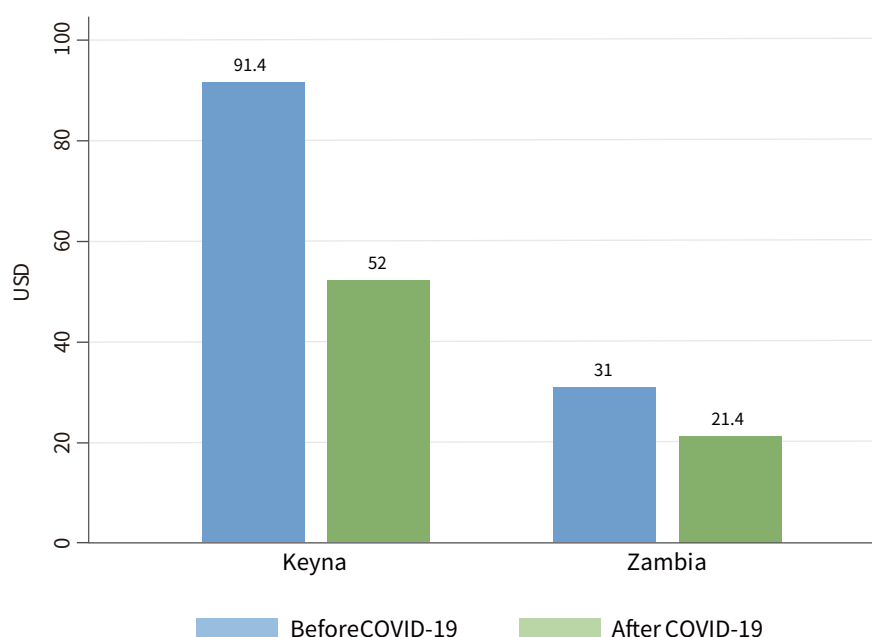
VI. Empirical Findings

1. Impact of COVID-19 on Households and Parents

1) Impact on household economic situation

An exogenous shock such as COVID-19 hits lower income households that lack emergency savings or liquid assets particularly hard. The research team looked into the impact of COVID-19 on households' economic situation in Kenya and Zambia. The analysis of the household survey covering over 800 families indicates that the economic conditions pertaining to the average monthly earnings, overseas remittance income, consumption, and savings have drastically deteriorated during the pandemic. As shown in Figure 4, the average household income declined by 43% in Kenya and 31% in Zambia.

<Figure 4> Average Monthly Household Income Before and After COVID-19



The findings from the focus group interviews are also in line with the results. Respondents from both counties said they were experiencing a substantial decrease in real income. The movement restriction, along with the shortage of goods, seems to exacerbate hardships. As a consequence, many households across the rural and urban areas are financially struggling.

2) Psychological impact on parents

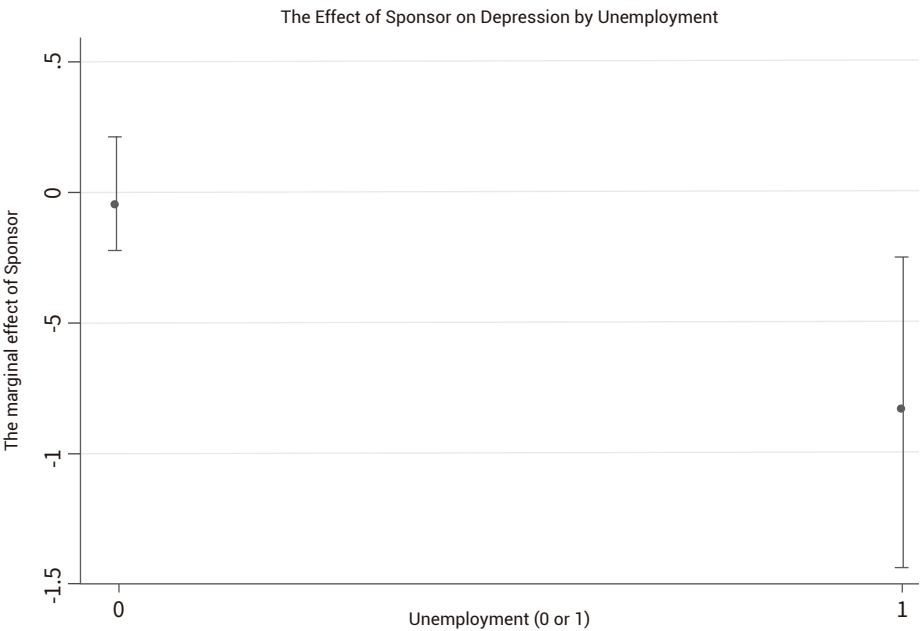
The negative economic impact of COVID-19 is expected to have psychological ramifications for the affected households. Thus, the research team investigated how COVID-19 influenced parenting stress and depression among household heads. The team also evaluated whether Good Neighbors programs contributed to relieving their psychological distress.

Interestingly, the finding indicates that neither income loss nor unemployment affects the level of parenting stress. As for the effect of the Good Neighbors Program, the respondents whose child is participating in the sponsorship program exhibit a distinctively lower stress level than the non-participants. The stress level among the parents of a non-sponsored child in a CDP village was as high as those in a non-CDP village. Such findings implicate that the direct child-related assistance provided through the sponsorship help reduce parenting stress during school closure, rather than the indirect services provided via CDP.

3) The conditional effect of Good Neighbors programs

The research team also employed an interaction model and evaluated how the economic factors such as income level and unemployment interacted with participation in Good Neighbors programs to shape parent depression. The result, visualized in Figure 5 below, indicates that the effect of the sponsorship program in reducing parent depression is more pronounced among the unemployed. The finding suggests that Good Neighbors programs can provide psychological comfort to parents in a particularly economically vulnerable situation.

<Figure 5> Effect of Sponsorship Program on Parent Depression by Employment Status



2. Impact of COVID-19 on Children

1) Children’s perception of COVID-19

The research team designed and conducted a child survey to examine the perception of COVID-19 among children and evaluate whether the programs offered by Good Neighbors had any impact on their perception. Firstly, and expectably, the majority of the children across Kenya and Zambia indicated that COVID-19 had a negative impact on their lives. As for the determinants of children’s perception were examined, the only common factor across the two countries was how the head of the household perceived the pandemic situation. When parents had negative perceptions about the impact of COVID-19, the children are also likely to perceive the situation negatively.

Meanwhile, participation in the Good Neighbors sponsorship program is associated with a more sanguine perception of the COVID-19 situation in Zambia. No such association is observed in Kenya. Yet, it is worth noting that those children who indicated high awareness of COVID-19 in Kenya had a positive perception of the virus. Considering the fact that the children's awareness of COVID-19 was significantly higher in the CDP villages, speculations were made that education and activities against COVID-19 offered in CDP have increased the preparedness as well as the awareness of the participants and have offset the negative perception about the pandemic in Kenya.

2) Domestic violence exposure and feelings of safety

The deterioration of the household economic situation and parents' psychological distress might expose children to an increased risk of domestic violence. The research team thus examined to what extent the children in Kenya and Zambia are exposed to domestic violence and evaluated the role of the Good Neighbors programs. Firstly, there was no substantial difference in the median value of the domestic violence exposure index across the two countries. Multivariate analysis finds that parents' negative perception of COVID-19 has a statistically significant association with the children's exposure to domestic violence. Such relationship is held in both Kenya and Zambia (See Models 1-(3) in Table 1 below). Moving on to the effect of the Good Neighbors programs, both sponsored and non-sponsored children in a CDP village were less exposed to domestic violence than children in non-CDP villages in Kenya. In Zambia, no significant association between the Good Neighbors program participation and the domestic violence exposure index is observed.

We also zoom in on children's feelings of safety at home (Models (4)-(6) in Table 1) and within their village (Models (7)-(9) in Table 1). In Kenya, children in a CDP village tend to show stronger feelings of safety than those in a non-CDP village. In Zambia, children participating in the sponsorship program show a higher sense of safety. It is interesting to note that the sponsorship program in Zambia has no discernable effect on the children's domestic violence exposure index, but has a positive impact on their feelings of safety. The research team speculates that the sponsorship program plays a crucial role in providing informational and emotional support to the children rather than changing the behavior of the adult family members.

<Table 1> Children's Exposure to Domestic Violence and Feelings of Safety

	Domestic Violence Exposure			Feel Safe w/ Family			Feel Safe in Village		
	Both (1)	Zambia (2)	Kenya (3)	Both (1)	Zambia (2)	Kenya (3)	Both (1)	Zambia (2)	Kenya (3)
CDP-NonSpon	-0.079* (0.037)	-0.018 (0.049)	-0.145** (0.054)	0.271+ (0.152)	-0.080 (0.223)	0.498* (0.215)	0.247 (0.153)	-0.275 (0.222)	0.675** (0.221)
CDP-Spon	-0.024 (0.039)	0.064 (0.049)	-0.122* (0.059)	0.601** (0.161)	0.948** (0.231)	0.305 (0.235)	0.529** (0.162)	0.879** (0.227)	0.367 (0.244)
Boy	-0.014 (0.030)	0.017 (0.040)	-0.047 (0.045)	0.059 (0.125)	0.125 (0.184)	0.047 (0.176)	0.087 (0.125)	0.089 (0.182)	0.083 (0.179)
Child Age	0.003 (0.008)	0.004 (0.011)	0.00001 (0.012)	0.004 (0.034)	-0.030 (0.052)	0.034 (0.047)	-0.004 (0.033)	-0.048 (0.051)	0.028 (0.046)
School Attendance	-0.033 (0.020)	-0.051+ (0.027)	-0.007 (0.031)	-0.037 (0.085)	0.116 (0.124)	-0.119 (0.125)	-0.056 (0.086)	0.106 (0.122)	-0.134 (0.129)
COVID-19 Awareness				0.051 (0.057)	0.149+ (0.089)	0.026 (0.078)	-0.052 (0.057)	0.140 (0.087)	-0.161* (0.080)
Household Income (Quartile)	0.035* (0.014)			0.061 (0.059)			0.052 (0.060)		
Household Income (Logged)		0.035** (0.013)	0.002 (0.012)		0.033 (0.058)	0.014 (0.050)		0.006 (0.057)	0.055 (0.048)
Income Change (100 kwacha)		-0.007* (0.003)			-0.020 (0.015)			-0.007 (0.014)	
Income Change (1000 shillings)			0.002 (0.002)			-0.001 (0.011)			-0.010 (0.011)
Parent Education	-0.012 (0.011)	-0.015 (0.015)	-0.005 (0.016)	-0.019 (0.046)	-0.050 (0.071)	0.018 (0.063)	0.017 (0.046)	0.086 (0.069)	-0.038 (0.064)
Household Negative COVID-19 Impact	0.077** (0.014)	0.066** (0.020)	0.091** (0.020)	0.110+ (0.058)	0.359** (0.089)	-0.092 (0.083)	0.074 (0.058)	0.292** (0.088)	-0.104 (0.084)
Rural	-0.043 (0.043)		-0.059 (0.047)	-1.550** (0.183)		-1.621** (0.199)	-1.357** (0.183)		-1.426** (0.197)
Zambia	-0.101** (0.039)			-0.416* (0.164)			-0.314+ (0.165)		
CONSTANT	-0.301* (0.137)	-0.505** (0.181)	-0.225 (0.208)						
OBSERVATIONS	842	400	442	842	400	442	842	400	442

Notes: + p<0.1; * p<0.05; ** p<0.01; Linear Regression (Models 1-3); Ordered Logistic Regression (Models 4-9)

3) Children’s hopefulness

Children who are more hopeful can better cope with the difficulties they face in life and succeed in the future. Hence, the research team looked into how the Good Neighbors programs might influence the level of children’s hope. In both Kenya and Zambia, the findings indicate that the children who live in a CDP village show a substantially higher level of hope than those in a non-CDP village. Figure 6 below plots the predicted values of children’s hope score by country and Good Neighbors program participation while setting all other variables (such as child age, gender, household income level at their respective mean values). Meanwhile, in Zambia, the difference between sponsored and non-sponsored children within a CDP village was marginal, in Kenya, sponsored children exhibited a higher level of hope than the non-sponsored within a CDP village.

<Figure 6> Predicted Hope Score by Country and Good Neighbors Program Participation



How, through which mechanism, do Good Neighbors programs foster hope among children? Additional analysis hints that the alleviation of material deprivation is unlikely to be the dominant mechanism. There was no statistically significant association between the perception of material deprivation and the children’s hope score. The finding suggests that children’s hope is cultivated not simply through material support but through more comprehensive social support. This implication is also in line with the findings from focus group interviews where several children mentioned ‘Safe Club’ activities as their favorite program supported by Good Neighbors.

All in all, we do not find strong evidence that Good Neighbors programs alleviate children’s economic hardship or reduce their exposure to domestic violence. However, the programs seem to provide a sense of safety and hope among children through informational and emotional support.

VII. Suggestions

Development cooperation needs innovative approaches to cope with the new types of crisis, such as COVID-19. To this end, the research team proposes the following directions.

1) Expand and develop programs that actively engage children

The findings from the survey and focus group interviews of children point to the vital role of Good Neighbors in providing children with informational and emotional support, which, in turn, can foster greater feelings of safety and hope among children. Thus, it would be important to design and operate more of such programs, including the expanded support for the existing 'Safe Club.'

2) Provide comprehensive support to relieve household economic distress

Parents' negative perception of the COVID-19 impact is a strong determinant of children's negative perception of their situation and exposure to domestic violence. To protect children during the pandemic, it is thus much needed to relieve household economic distress. Doing so requires more comprehensive support ranging from income support to vocational training (such as education in e-commerce) for parents.

3) Strengthen the partnership with the government and international organizations

In designing and implementing the COVID-19 recovery plan, relevant stakeholders (governments, IOs, and NGOs) should all strive to avoid unnecessary overlaps in resource distribution. This requires more systematic coordination and collaboration among the stakeholders. To this end, Good Neighbors can carry out its advocacy activities focusing on the bottom-up feedback and liaise between the community in need of support and the government and IOs equipped with resources to disburse.

4) Utilize online platforms to overcome the physical divide

The opportunity to meet the program participants face to face has drastically decreased due to the pandemic. To identify and gather information about the program participants and their needs, it has become essential to utilize various online channels of communication. Big data analysis might also be adopted for project evaluation.

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